

TBI ADVISORY BOARD MEETING

Mt. Philo State Park

September 18, 2008

Present: Erin Weaver, Al Urpsis, Margaret Higgins, Anna King, Catherine LaRock, Adele Edelman, Ted Stachulski, Brain Ashley, Bryan Dague, Marsha Bancroft, Clayton Clark, Emma Burke, Nancy Breiden, Maureen Mayo, Trevor Squirrell, James Vyhnak, Caorle McCay, Glen McClintock, David O'Vitt, Terri O'Shea
Note Taker: Jane Culver

Purpose: To come together to acknowledge the past accomplishments, align our purpose, and move with excitement towards our future goals.

Desired Outcomes: To agree upon our mission, vision, and values, and to create a plan to meet future goals.

Meeting convened at 10:30 a.m.

Welcome, Announcements and Introductions

- Jim Vyhnak filled in as Chair for Diane Bogdan who couldn't attend.
- Trevor Squirrell gave an update on the upcoming TBI conference. The brochures have been mailed. Please contact Trevor if you have questions about the conference.

Where have we been? - Past Accomplishments:

- 1981 – head injury task force conference -10 people attend.
- 1988 - 1st TBI conference – 25 people attend.
- 1991 - pilot program for individuals with TBI is starts with state general funds.
 - 22 individuals return from out of state placements.
- 1994 - TBI waiver program begins.
- 1996 – TBI services now include supervised housing, supported employment, TBI set-aside fund.
- 2000 – 47 people served on TBI waiver.
- 2001 – Health Resources & Services Administration (HRSA) planning grant begins.
- 2002 – Statewide needs assessment conducted.
- 2003 – Vermont statewide action plan completed
- 2004 - HRSA implementation grant begins.
 - First meeting of the TBI Advisory board, February 4
- 2005 – Over 1200 are trained during the course of funding
 - Over 25,000 TBI resource cards are distributed (awarded “Most popular state agency grant product”)
 - Over 30,000 “Never Shake a Baby” pamphlets distributed; 10,000 magnets & 500 “Rock, Don't Shake” posters
- 2006 – Contract for IR&A services initiated with BIA-VT
 - Outreach to diverse cultures, ethnicities
 - Articles in local publications
 - Bus signs in Burlington
 - EMS card/sticker with Glasgow Coma Scale
 - Public Service announcements
 - VPR interview

- 2007 – HRSA Partnership Grant begins
 - P&A wins most popular product
 - State TBI program wins NASHIA award for “Collaborating & Coalition building”.
- 2008 – Over 1000 Veteran TBI Survival Guides distributed to date.
 - Important linkages formed with veteran service organizations
 - Plan developed for implementation of Neuro-Resource Facilitation
 - BIA-VT taking over State TBI conference
 - BIA-VT outreach worker hired(NRF)
 - NRF/VABIR TBI job developer to be hired by November 2008
- 2009 - 2 Neuro-Resource Facilitators to be hired
 - Develop a new state wide Action Plan
 - Hold the gains previously made
 - TBI fund created
 - Planned expansion of NRF services with Leahy earmark

Where are we going? - Overview of the Planning Process - Terry O’Shea:

- We need to be clear on the direction we’re going. Toward a future that we want.
- Vision, mission, plan.
- This work will serve as a foundation for redoing the state plan next year.
- It will be the vision and image of what success will look like.
- The mission is the what, how and why of the organization.
- The values are the guiding principles shared by everyone and which guide what we do everyday.

VALUES – guiding principles shared and practiced:

Respect	Honesty	Quality
Cooperative	Individualized services	Self-directed
Person centered	Optimal independence	Caring & responsive
Optimizing resources	Efficiency	Accountability
Continuum of services	Culturally competent	Innovative
Community based	Quality of life and services	Self determination
Effective services	Uniformity of services	Effective leadership
Life long services	Advocacy	Responsiveness

Timely/flexible/easily accessed;

- Benign larceny being aware of other ideas - i.e. borrowing ideas;
- Consistency and continuity in Vermont i.e. quality of services not an accident of geography;
- Services available in Vermont – consumers don’t have to go out of state;
- Sense of purpose and common commitment.

Ideally TBI values should be aligned with DDAS values. The Steering Committee will review DDAS values, and if appropriate, recommend to the Advisory Board that the DDAS values be adopted by the TBI Board with or without any minor changes

VISION – an image of what success will look like:

Five years from now what will have happened if we have been successful?

- All Vermonters with all forms of TBI will receive all forms and types of services.
- People from other states come to VT for quality, innovative, and complete services.

- Opportunity and choice are integral. Vermont has the best TBI services in the country and the world.
- Services are delivered in a timely manner, and incidents of TBI will be reduced.
- TBI incidents will be identified, diagnosed and assessed early.
- Systems will exist in which all TBI survivors will receive services which support their return to the community of their choice with full inclusion autonomy and respect.
- Survivors will be supported throughout all stages of recovery.
- TBI survivors get all the services they need to be as self-sufficient as they desire.
- All Vermonters with a brain injury, regardless of severity, will receive timely, comprehensive, quality based services and supports in the communities of their choice.
- Individuals with TBI are an integral part of the fabric of Vermont communities.
- Individuals with TBI can have the lives they dream of.
- Vermont will have the highest quality service system.
- Education from kindergarten on about how to prevent brain injury.
- All Vermonters will have access to the highest quality TBI services and the incidence of TBI will be significantly reduced.
- All Vermonters will be aware of TBI and have access to services.

People with TBI regardless of the severity of injury, will have a wide range of services and supportive opportunities to create a full and good quality of life that they chose to participate in.

All Vermonters with a brain injury, regardless of severity, will receive timely, comprehensive, quality based services and supports in communities of their choice.

A system will exist in which all TBI survivors will receive services which support their return to community with full inclusion, autonomy and respect. Survivors and their families will be supported throughout all stages of recovery.

The Vermont State TBI Advisory Board Vision:

All Vermonters will actively take precautions to prevent brain injury, and Vermonters and their families will receive the highest quality brain injury related services.

MISSION Statement – summarizes the what, how and why of an organization’s work:

What is our purpose – why are we here?

- To guide and advise
- To provide leadership/to lead
- To ensure a system exists to guide, advise, and lead.
- To create and educate
- To organize efforts – systems planning
- To advocate
- To represent and give support to the community
- To develop rather than create
- To take a systems focus on education and awareness.

Group mission statements:

To guide, advise, support and educate TBI stakeholders in order to provide high quality and “best practice” care to individuals and families in Vermont.

The TBI advisory board advises and guides Vermont survivors in what are the best practices related to brain injury prevention and services. Our work is to improve the quality of brain injury services to reduce the incidence of brain injury and increase the survivor's potential.

The mission of the advisory board is to provide unified and comprehensive support to the State TBI program.

The Advisory Board guides, educates and advises Vermont citizens and State services to develop a comprehensive system of care that addresses prevention, assessment, and treatment of brain injury

The Vermont Advisory Board guides the development of Brain injury education and awareness of prevention, assessment and treatment.

The Vermont State TBI Advisory Board Mission

The Vermont TBI Advisory Board guides the development of brain injury identification, education, prevention, advocacy and treatment.

The Mission, Vision, and Values will provide focus for the work that we're doing. As a dynamic document we will revisit it frequently and make any changes necessary to continue to be effective.

As part of our Mission we are creating a Vermont Neuro-Resource Facilitation system that will be focused on returning veterans and all people with TBI across the state. The model is based on the New Hampshire model of Neuro Resource Facilitation with an emphasis on employment.

In order to achieve this goal and hold the gains we've already made we will be establishing four Sub-committees focused on individual service delivery systems. These committees will focus on public awareness, training the workforce, and supporting employment. Each subcommittee will seek to develop collaborative relationships within each delivery service system and evaluate future needs. This may include creating memorandums of understanding other agencies and organizations which would outline what they can expect from TBI and what TBI can expect from them. The subcommittees will also help us form our goals for the new state plan to be developed next year. A commitment to a subcommittee would mean an additional 8 hours a year.

The four suggested Advisory Board sub committees are:

Primary care – existing initiatives i.e. shaken baby – assessment issues.

Mental health with a focus on integrating TBI into systems as part of diagnosis procedures. Include in corrections and veteran service organization as part of identification piece.

Employment system supports are sustainable.

Education – sports concussion, service learning project collaborate.

It is suggested that there is a need for a subcommittee to address provider capacity and a new Provider subcommittee will be added.