#### **Virginia Brain Injury Council**

April 26, 2024, 1:00 – 4:00 p.m.

#### **AGENDA**

In-person at Department for Aging and Rehabilitative Services, Central Office 8004 Franklin Farms Drive Henrico, VA 23229

Welcome and Roll Call Introductions of Members Present Mike Puglia

Review Proposed Agenda Mike Puglia

Preparation: Review the Agenda prior to the meeting.

Proposed Action: Approve Proposed Agenda

Review of Previous Meeting Minutes Mike Puglia

Preparation: Review the Minutes prior to the meeting. Proposed Action: Approve January, 2024 Minutes

Public Comment Period Donna Cantrell

Goal: To hear from the Public about topics that are important to them.

Preparation: None Proposed Action: None

#### **COMMITTEE REPORTS:**

Housing Workgroup Report Kelly Lang

Goal: To update Council on the work of the Housing Workgroup and its findings and

recommendations.

Preparation: Review written summary of recommendations.

Funds Dissemination Committee Recommendations Mike Puglia

Goal: To review new General Assembly Appropriations for new funding for stateprovided services and the Council's proposed recommendations for how these funds should be distributed to existing state-funded providers throughout the State.

Preparation: Review written recommendations submitted by the Committee.

Proposed Action: Vote to approve funding recommendations.

Priorities Committee Recommendations Jason Young

Goal: To share the Priorities Committee's recommendations for Council Priorities for the coming year.

Preparation: Review written proposal prior to the Quarterly Meeting.

Proposed Action: Vote to approve the priorities.

Council Membership Proposal

Chris Miller

Goal: To share DARS' revised recommendation for Council membership structure.

Preparation: Review proposed Council structure.

Proposed Action: Vote to endorse new Council structure.

**Bylaws Committee Appointments** 

Mike Puglia

Goal: Review bylaws and make revisions as needed for Council approval. Preparation: Consider if you would be willing to serve on this committee.

Proposed Action: Chair appoints bylaws committee.

Orientation Planning Committee Report

Steven Nape

Goal: To update Council on the work of this Committee.

Preparation: Review written summary provided in advance of the meeting.

Proposed Action: Council members can offer feedback in the post meeting survey or by sending email to Donna at <a href="mailto:donna.cantrell@dars.virginia.gov">donna.cantrell@dars.virginia.gov</a> following the

meeting.

Director's Report

Chris Miller

Goal: To hear information on Brain Injury Services in Virginia.

Preparation: Review written summary from the Director of Brain Injury Services.

Proposed Action: None

Adjourn

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**NEXT MEETING: Friday, July 26, 2024** 

**REMINDER:** The October Quarterly meeting moves to Wednesdays at 12:30 p.m. through 3:30 p.m.

The October meeting date is: Wednesday, October 23, 2024.

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For meeting materials, please visit: <a href="https://www.vadars.org/vbic.htm#currentmeeting">https://www.vadars.org/vbic.htm#currentmeeting</a>

**PUBLIC ACCESS:** To watch the meeting live, please visit:

Join from a PC, Mac, iPad, iPhone or Android device:

Please click this URL to join. https://dsa-virginia.zoomgov.com/j/1602153897

Passcode: 958560

**PUBLIC COMMENT:** All Public Comment is limited to 3 minutes per person.

Individuals wishing to make public comment during the meeting may contact Donna Cantrell using the contact information below or will be given the opportunity to indicate they wish to provide comment during the meeting.

Individuals who wish to provide public comment but are not able to attend the meeting may send their comments to Donna Cantrell using the contact information below. Comments must be received by close of business on *Wednesday, April 24, 2024* to be read at the meeting.

Donna Cantrell contact information: email (<u>donna.cantrell@dars.virginia.gov</u>) or phone (804-662-7069).

January 26, 2024 Meeting Minutes can be found in a separate attachment.

And

Housing Workgroup Report is a separate attachment

#### Virginia Brain Injury Council Funds Dissemination Committee Recommendations For State Fiscal Year 2025

A 2006 General Assembly budget amendment requires the Department of Rehabilitative Services to consider the recommendations of the Virginia Brain Injury Council when allocating new funds for brain injury services. Recommendations must meet any requirements established by the General Assembly in appropriating the funds.

The General Assembly appropriated two new sets of funding for brain injury in its budget during the 2024 session. In the Governor's amended budget returned to the General Assembly, these amounts were cut. Currently, the General Assembly is reviewing the budget.

The Funds Dissemination Committee reviewed the General Assembly appropriation language and the Alliance and BIAV recommendations for the use of the funding at the full level. With this information they developed recommendations that can be used regardless of the final appropriations.

#### 1. Budget Item 314 #2c

This proposed appropriation adds \$775,000 of new money each year from the general fund for workforce retention to ensure quality accessible services for people living with brain injury. This funding will support currently existing state contracted brain injury service providers.

NOTE: The amended budget, still under consideration, reduces this funding to \$300,000.

The Virginia Alliance of State Brain Injury Providers (Alliance) and the Brain Injury Association of Virginia (BIAV) recommend a three-tiered system in which organizations with smaller state contracts would receive a larger percentage increase in funding as indicated in the table below.

Current State Funding	Percentage increase in current contract amounts	Providers	
Providers receiving more than \$2M	9%	Brain Injury Services	
Providers receiving \$1 - \$2M	10%	Brain Injury Solutions Community Brain Injury Services	
Providers receiving less than \$1M	12.65%	Eggleston BridgeLine No Limits Eastern Shore Virginia Supportive Housing Brain Injury Association of Virginia Brain Injury Connections of the Shenandoah Valley	

**Recommendation:** The Funds Dissemination Committee endorses the three-tiered allocation system developed by the Alliance and BIAV. The final percentages should be determined and approved by all Alliance members and BIAV.

#### 2: Budget Item 314 #1c

The proposed appropriation adds \$1.875 million in new funds each year from the general fund to strengthen and expand the existing state contracted safety net brain injury services system by increasing the numbers of case managers, clubhouse staff, clinical professional staff and/or program support staff.

A portion of the allocation may be used to support development of new safety net services in unserved areas of the state.

NOTE: The amended budget, still under consideration, reduces this funding to \$1,300,000.

The Alliance and BIAV recommended that this funding be split into two general categories:

• \$220,100 should be used to provide case management in the eight unserved counties to assure that the entire Commonwealth has access to brain injury services. The distribution is included in the table below.

BridgeLine	\$ 95,000	add 3 counties – Nottoway, Prince Edward, Cumberland
Community Brain Injury Services	\$ 30,000	add 1 county – Essex
Eggleston	\$ 95,000	add 4 counties – Sussex, Isle of Wight, Southampton, Greensville
SUBTOTAL	\$220,100	8 new counties

• The remaining \$1,655,000 should be distributed among the nine state-funded brain injury providers as outlined in the table below.

Brain Injury Connections of Shenandoah Valley	\$150,000
Brain Injury Services	\$330,000
Brain Injury Solutions	\$285,000
BridgeLine	\$157,500
Eggleston	\$95,000
Community Brain Injury Services	\$257,500
No Limits Eastern Shore	\$140,000
Virginia Supportive Housing	\$90,000
Brain Injury Association of Virginia	\$150,000
TOTAL	\$1,655,000

**Recommendation:** The Funds Dissemination Committee recommends that what is required to provide Case Management in the eight unserved counties be distributed first. Any remaining funds then should be distributed among the nine state-funded brain injury providers using a plan developed and approved by all Alliance members and BIAV.

#### Virginia Brain Injury Council Recommended Priorities – Fiscal Year 2025

#### **Purpose of Priorities**

The Council's priorities serve several purposes.

- They ae a list of what is important to Council as a whole.
- They drive the Council's work and focus over the next fiscal year.
- They are shared with DARS to make DARS aware of Council's interest in these issues.
- They may help inform the Brain Injury State Plan and/or recommendations for the dissemination of new funds.

While the Council's priorities are not a list of recommendations for DARS or a "to-do" list for DARS, the Council may include suggestions for DARS to consider.

Another valuable purpose of Council's priorities is that they inform the individuals, advocates, and state agency representatives on Council. Council members can then take the priorities back to their networks and agencies to inform them and help build partners in building support for what's important for people living with brain injury, their families, and the service network.

#### 2025 Recommended Priorities

These recommendations include the four top areas identified through the survey of Council members and an ongoing priority carried over from previous years.

# 1. Increase Council understanding of the availability of behavioral health services for people living with brain injury.

In addressing this priority, the following actions are recommended:

- Ask DARS staff to provide an overview of the screening initiative for brain injury in Community Services Boards funded through the federal grant and to share updates on the progress and outcomes.
- o Invite a representative from the Department of Behavioral Health and Developmental Services (DBHDS) to share with Council members the mandates of the Community Services Boards and eligibility for services and to learn more about the number of people with brain injury in state hospitals.
- Ask the state-funded brain injury providers to share information about how they connect the people they support with behavioral health services.
- Identify the availability of trauma informed and brain injury informed behavioral health services among private practitioners (those outside the Community Services Board system).

## 2. Bring awareness to the benefits of and barriers to Cognitive Rehabilitation for people living with brain injury.

In addressing this priority, the following actions are recommended:

Council members need to have a shared understanding of cognitive rehabilitation including how it is provided, the outcomes of the service, and where it is available in Virginia.  Council should ask brain injury advocates to research the benefits of an advocacy campaign to increase access to cognitive rehabilitation in Virginia, including a mandate that it be covered by private insurance.

## 3. Learn more about the needs and current services for youth living with brain injuries.

As a starting point, Council requests that current Council members who work with youth and a pediatric Case Manager identified by the DARS brain injury services staff work together to increase Council members knowledge and understanding of this issue in 2025.

## 4. Increased Neurobehavioral Services and/or Medicaid Waiver funding for services for people living with brain injury.

Council members as individual advocates, the advocacy network through Brain Injury Association of Virginia (BIAV) and the Alliance, and DARS should support and continue to request a brain injury waiver.

The Council's Housing Workgroup has been meeting for two years and will be sharing the results of their work and recommendations. The Committee feels strongly that these recommendations should be supported by Council and that housing remain an ongoing priority.

#### **Virginia Brain Injury Council Membership Structure: Rationale**

In 2022 the Brain Injury Council approved a membership structure proposed by a committee of Council members with lived experience of brain injury. The Committee was charged with developing a membership structure that would address the Administration for Community Living requirement that all states receiving federal funding through the TBI Act have a Council membership of at least 50% individuals with brain injury.

At that time, DARS BI Unit Director Chris Miller placed emphasis on the membership requirement for people living with brain injury and did not present the other Council representation required by the Administration for Community Living.

Since the Council Retreat in September, 2023, DARS has been reviewing these requirements to assure the agency is meeting its obligations while respecting the considerable work done by the original Committee in developing a Council membership that brings together a variety of perspectives that speak to the needs of people living with brain injury in Virginia and their families.

Revisions to the original membership structure are minimal and respect the decisions made previously including:

- Fifty percent of Council is made up of people living with brain injury
- Family members/Caregivers are important members of a strong Council.
- State agency representatives have a lot to offer to Council through their experiences working with people with brain injury in other systems and as liaisons back to their agencies with information to inform improved services.

A membership structure that DARS believes meets the requirements of the Administration for Community Living, reflects the decisions driving the current structure, and maintains an engaged and effective Council is outlined below.

The membership structure includes the following changes:

- State agency representatives become Ex Officio Members, fully participating in all Council meetings but are non-voting members without term limits. This includes the DARS BI Services Unit Director. The representative of the Virginia Department of Health and DARS' Long Term Care Ombudsman Program remain voting members, as required by the Administration for Community Living.
- Because the Council has a role in advising DARS, the membership structure removes other DARS staff to minimize the effect of having DARS' staff advising DARS. The two Council positions that are impacted by this are the DARS' CIL Director and the DARS' Dementia Coordinator. In response, and in keeping with the Administration for Community Living requirements:

- Centers for Independent Living (CIL's) will be represented by an appointee from the Virginia Association of Centers for Independent Living.
- Aging & Disability Resource Centers will be represented by an appointee from Virginia Association of Area Agencies on Aging.
- Representatives of licensed healthcare providers and hospital systems have been consolidated into the Administration for Community Living requirement for public and nonprofit private health related organizations.

DARS is asking the current Council membership to endorse the membership structure outlined below and to revise its Bylaws to reflect these changes.

## **Virginia Brain Injury Council Membership (27 Members)**

Representative	Number	Required by ACL	Status
Individuals who have sustained a brain injury/survivor of a brain injury	14	Yes – Minimum 50% of members	Term Limits Commissioner Appointed
Family Members/Caregivers	3	Yes	Term Limits Commissioner Appointed
Public and nonprofit private health related organizations	2	Yes	Term Limits Commissioner Appointed
Injury control programs at the State or local level/State Health Dept	1	Yes	Agency Appointed No Term Limits
Center for Independent Living/State Independent Living Council	1	Yes	Agency Appointed No Term Limits
Aging & Disability Resource Center	1	Yes	Agency Appointed No Term Limits
Protection & Advocacy Agency	1	Yes	Agency Appointed No Term Limits
Long Term Care Ombudsman	1	Yes	Agency Appointed No Term Limits
TBI Model Systems	1	Yes	Agency Appointed No Term Limits
Brain Injury Association of Virginia (BIAV)	1	Yes	Agency Appointed No Term Limits
Virginia Alliance of Brain Injury Services Providers (VABISP)	1	Yes	Agency Appointed No Term Limits

## **Ex Officio Members (Agency Appointed, Non-Voting, No Term Limits)**

Dept. of Education

Dept. of Behavioral Health and Developmental Services

Dept. of Corrections Veteran's Services

Virginia Board for People with Disabilities Dept. of Medical Assistance Services (DMAS)

DARS Brain Injury Services Coordination Unit Director

### **Orientation Committee Report**

April 26, 2024

We are very excited that our sub-committee meetings have been going so well. We've all contributed, and we have had good discussions around all the aspects of New Member Orientation. We have debated many topics and have arrived at what we anticipate will be strong recommendations for an enhanced program.

We have several exciting changes to preview today. Among many other things, we plan to increase involvement and engagement of current members in the new program through things like:

- Member stories.
- Enhanced web resources for members.
- A revised orientation schedule.
- A mentorship program.
- Self-paced learning opportunities.
- Other opportunities for existing members to participate in the orientation process in ways that are comfortable to them and that meet their time constraints.

We have a meeting scheduled with the communication and web team to help us put thoughts/ideas into the formats we would like to propose for the new program. These formats will be compelling and digestible. Our first meeting is scheduled for May 1.

In July, we will have tangible materials to show, and our hope is that everyone will be enthusiastic about our progress and will begin to find meaningful ways to contribute. In addition, we hope the new program and all its features will educate and engage new and existing members. To receive input from the full VBIC membership, we will send out a survey soliciting ideas very soon. Members may also submit their own ideas directly to Donna (<a href="mailto:Donna.Cantrell@dars.virginia.gov">Donna.Cantrell@dars.virginia.gov</a>). Thus, everyone will have the opportunity to share their thoughts and contribute as we continue to develop the new program.

Although we are not ready to reveal many details, we have received positive feedback from the Executive Committee, and look forward to receiving feedback from the full VBIC membership.

We encourage you to complete the upcoming survey and share your ideas and thoughts with Donna.

#### **Virginia Brain Injury Council**

#### **Brain Injury Services Unit Director's Report – April 2024**

### **State Funding for Brain Injury**

You will be hearing more about state funding for brain injury in the recommendations from the Council Funds Dissemination Committee. As of April 19<sup>th</sup> the General Assembly has decided to work on the state budget and plans to reconvene May 13<sup>th</sup> for a special session to review the proposed budget with a goal of voting on it May 15<sup>th</sup>.

Included in the budget approved by the General Assembly and sent to the Governor in March were two appropriations related to brain injury.

- **Item 314 #2c** provides \$775,000 each year for workforce retention for existing state contracted brain injury service providers. The amended budget returned by the Governor reduced this funding to \$300,000.
- **Item 2: Item 314 #1c p**rovides \$1.875 million each year to increase the numbers of case managers, clubhouse staff, clinical professional staff and/or program support staff among existing state contracted brain injury providers and allows a portion of the allocation to be used for Case Management in the 8 unserved counties in Virginia. The amended budget returned by the Governor reduces this funding to \$1,300,000.

### **TBI Program Reauthorization Act of 2024**

For those of you keeping track, the Reauthorization continues moving forward bill still needs to move through Appropriations. Follow NASHIA or the Brain Injury Association of America to learn about advocacy if you are interested.

#### Included in the Reauthorization:

- Increase in the TBI State Partnership Program funding (what we refer to as the federal TBI grant) so that all states can receive funding.
- Reduce the match (funds that state must contribute when receiving this grant) required for the federal TBI grant from 50% to 25%.
- Federally designate brain injury as a chronic condition which will open doors to increased resources.
- Expand the definition of brain injury covered by the Act from Traumatic to Acquired brain injuries. This means those who incurred their brain injury through an internal cause would be eligible as well.
- Fund the National Concussion Surveillance System (NCSS) which would help to better track injury to student athletes among others.
- Funding for Protection & Advocacy program (like the disAbility Law Center of Virginia where Council member Elizabeth Horn works).

• Expand the number of TBI Model systems (like the one here at Virginia Commonwealth University where Council member Amol Karmarkar works) and the data and statistical centers for all TBI Model Systems.

### **State Fiscal Year 2023 Brain Injury Annual Report**

The 2023 Brain Injury Annual Report was approved and published several months ago. You can read the report here: <a href="https://rga.lis.virginia.gov/Published/2024/RD117/PDF">https://rga.lis.virginia.gov/Published/2024/RD117/PDF</a>. We will start work collecting information for the 2024 report in August of this year. This report on the number of individuals served is required annually.

# DARS Podcast: Olivia from the Fredericksburg Day Support Program of Brain Injury Services

DARS Vocational Rehabilitation Division has a podcast related to people's journeys towards employment. In March, they featured Olivia Zerbinati, who shares her experiences and the services she's receiving to enhance her capacity to work through Brain Injury Services in Fredericksburg. On the podcast with Olivia is the Program Manager, Zachary Daniel. Zach has done a phenomenal job creating connection and engagement with people participating virtually and developing interesting and skill-based programming.

You will hear me talk about brain injury services but I need to correct one thing I misspoke about on the podcast. I said that the CDC already designates brain injury as a chronic condition but that is something we are still working toward.

I must give big thanks to the fantastic Communications team at DARS. You'll hear both Betsy Civilette and Rick Sizemore doing the interviews. Rick also shared his own experiences with brain injury.

Listen here: <a href="https://vrworkforcestudio.com/brain-injury-awareness-month-and-the-road-to-employment/">https://vrworkforcestudio.com/brain-injury-awareness-month-and-the-road-to-employment/</a>

## **Brain Injury Solutions, Virginia Tech, and Carilion Clinic Video**

Brain Injury Solutions (in southwest Virginia) and the Carilion Clinic partner with Virginia Tech to provide experiences for students in the Department of Biomedical Engineering and Mechanics into the lives of individuals with a brain injury by pairing the students with people with lived experience.

Not only is this a wonderful program, but when you watch, keep an eye out for Council member Steven Nape. (It's only 5 minutes long)

https://news.vt.edu/videos/k/2024/03/1\_e380ufit.html?utm\_source=cmpgn\_news&utm\_medium\_=email&utm\_campaign=vtUnirelNewsDailyPublicCMP\_march2724-public&fbclid=IwAR1-NlNzPbeNGcr\_0gY1Kq0\_1EQfe1F4DtQeCfJT21QpJhalcvHr0Rd2La8\_aem\_AWE2hndLRG5fk\_GCJriGX6porjxQtJ6O6hibGgD5bsXadmaHLoUQeo7tcx5etQD9rLHlIAVYSc4AqWM8OkOLr43Wt