

*Commonwealth Neurotrauma Initiative (CNI) Trust Fund*

**Meeting Minutes**  
*December 5, 2008*

**Members Present**

Terry Glenn	VA Department of Corrections, Richmond
Gregory Helm, M.D., Ph.D.	University of Virginia Medical Center, Charlottesville
Page Melton	Caregiver, Richmond
Teresa Poole	Lakeview Blue Ridge, Blacksburg
David Reid, Psy.D., Chair	Augusta Psychological Associates, Waynesboro
Jim Rothrock ( <i>Ex-officio</i> )	VA Department of Rehabilitative Services, Richmond ( <i>Commissioner Rothrock participated via speaker phone</i> )

**Members Absent**

Doug Harris, J.D.	VA Department of Health (Commissioner's Designee), Richmond
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**Staff**

Kristie Chamberlain	VA Department of Rehabilitative Services, CNI Program Staff
Patti Goodall	VA Department of Rehabilitative Services, CNI Program Staff

**Guests**

Christine Baggini, MSW	Brain Injury Association of Virginia
Helen Butler, RN	Brain Injury Services of Southwest Virginia
Molly Dellinger-Way	Virginia Commonwealth University—The Partnership
Tera Yoder, Ph.D.	Virginia Commonwealth University-The Partnership

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The Commonwealth Neurotrauma Initiative (CNI) Trust Fund Advisory Board met for a regular quarterly business meeting in Conference Room 101 at the DRS Central Office, 8004 Franklin Farms Drive in Richmond. David Reid, Psy.D., Chair, convened the meeting at 10:08 a.m..

**Public Comment Period**

A public comment period was held at 10:09 a.m. No public comments were made. A second public comment period was offered later in the meeting due to a late guest arrival. Ms. Helen Butler, RN from Brain Injury Services of Southwest Virginia commented that she had no formal public comment.

**Approval of September 26, 2008 Minutes**

**Minutes were approved unanimously with no changes.**

**Approval of December 5, 2008 Agenda**

**The meeting agenda was approved by the Board with following changes:**

- Dr. Reid requested the addition of Wintergreen Adaptive Skiing to the agenda

### **Presentation from VCU, CNI Grant #07-059 “Enhancing the Lives of Individuals with Brain Injury through Positive Behavior Supports”**

Tera Yoder, Ph.D. and Molly Dellinger-Wray of Virginia Commonwealth University presented an update on their CNI Grant of Positive Behavior Supports (PBS). They reported that twenty-one (21) individuals have completed the foundational one-year training and mentoring required to become endorsed as a “PBS Facilitator.” Of the twenty-one individuals, seven have achieved endorsement in Positive Behavior Support. Tera and Molly indicated they would like to apply for a no-cost extension at the end of their three-year grant period, due to delays in getting the remaining fourteen individuals to sit before the PBS Endorsement Board to complete the process. They acknowledged that one thing they have learned is that their expectation for 100% achievement of endorsement is not realistic. They will also need the additional time to complete the research component of the grant which is based on consumer participation.

### **Presentation from Brain Injury Association of Virginia #04-059 “Research on the Effectiveness of Outreach & Information/Referral Approaches for Individuals with Brain Injury”**

Christine Baggini of the Brain Injury Association of Virginia updated the Board on its grant to research effective methods of outreach to individuals who have sustained a brain injury and who were reported by Virginia hospitals to a central registry. Christine told the Board that hospitals were pleased that there would be continued outreach to newly injured individuals, particularly those with most severe disabilities, following the elimination of DRS’ registry (the Virginia Department of Health’s Virginia Statewide Trauma Registry is required by law to share with DRS information on patients treated for brain injury and spinal cord injury for research and outreach purposes). Christine reported that the “return rate” – that is, the response to outreach letters sent out on either BIAV letterhead or on DRS letterhead – appeared to be similar. The best return rate was based on a follow-up contact (in addition to initial outreach letter). Follow-up contact included another outreach letter or a follow-up personal contact via telephone. Adequate data has not yet been collected to draw substantive conclusions on the best method of reaching out to injured individuals. BIAV had also surveyed how other states conducted outreach, prior to designing their study.

### **Comments from the Commissioner of DRS**

Commissioner Rothrock, who joined the meeting via speaker phone, stated that Virginia is experiencing a range of \$2.5 - \$3.5 billion dollar budget deficit and that state agencies will be asked to submit additional budget reductions State Fiscal Year 2010 in the coming month. He noted that staff should inform grantees not to delay in submitting invoices, so that there will be a steady cash flow out of the Fund. Though technically all funds are obligated with current grant awards, there is the illusion of a cash balance when grantees do not submit for reimbursement in a timely manner.

At the September 26 Board meeting, Dr. Reid had asked that discussion regarding a request from the Department of Juvenile Justice’s for CNI funds be tabled until December meeting. The Office of Public Safety was directed in a FY ’09 budget amendment to respond to a request to study the incidence of brain injury among juvenile and adult offenders, and to submit a report outlining a plan of action by November 1. The report submitted by Department of Public Safety admitted that this was an area of importance to be studied; however, they did not currently have the resources or expertise to carry out such a study. DRS, as the lead agency for brain injury,

had been in discussion with Department of Juvenile Justice and offered to provide assistance, as feasible. One option offered was to use CNI Trust Fund grant money to subsidize a study looking at the incidence of brain injury among juvenile offenders and to offer training on effective strategies and treatment approaches. The next grant funding cycle for “community based” grants would not be until January 2009, when a Request For Proposal would be issued by DRS. However, in light of DRS’ application for a four-year federal grant through the Traumatic Brain Injury (TBI) Act, it was proposed that CNI funds for the study could be used as “state cash match” which is required for the federal grant application. The TBI Act grant application was due December 1<sup>st</sup>, prior to the Board meeting on December 4<sup>th</sup>. Therefore, Commissioner Rothrock used his authority (via budget amendment in the Code of Virginia, to “reallocate...funds for research.”) to include a three-year CNI-funded study as part of the DRS federal grant application (juvenile offenders with brain injury was listed as one of the targeted groups for the federal grant). A primary purpose of the study is to identify juveniles with brain injury and provide training to juvenile justice staff, with the goal of reducing recidivism. It is hoped that this type of intervention will prevent juveniles from progressing into the adult correctional system. Since the grant application was due prior to CNI Trust Fund Advisory Board meeting, Commissioner Rothrock was seeking endorsement of this action by the Board, which was provided by all members present. It was also stated that the study should go forward, whether or not federal grant funding is awarded to DRS, as this is a critical area of study for the brain injury community in Virginia.

Patti Goodall provided an updated on the current federal TI Act Grant which is in its third and final year, ending March 31, 2009. She informed the board that the next grant cycle award application was due December 1 and the amounts are increasing from \$118,600/year for three years to \$250,000/year for four years. If awarded, the grant will start April 1, 2009. Virginia’s grant application will include – in addition to the juvenile justice study – targeted activities for groups with low socioeconomic resources and will also provide support for the current statewide infrastructure for the delivery of information, outreach, and provision of services to Virginians with brain injury particularly in unserved and underserved areas of the state. DRS will again partner with the Brain Injury Association of Virginia in carrying out the activities of the grant. In addition, grant funds will be used to establish a full-time classified (though “grant restricted) position at DRS. This meets the federal grant administration’s desire to see a greater presence in the lead agency with the grant initiatives vs. contracting federal dollars out to other agencies, organizations. The fourth year of the grant will collect data and conduct a statewide needs assessment and will partner with the VCU Survey Evaluation and Research Laboratory for this activity.

Patti also brought up the budget problems preventing DRS from moving forward with development of a statewide Brain Injury Case Management Software System. This is a web-based reporting system to be used by all state-funded Brain Injury Services Programs. The system will enhance brain injury service delivery, as well as improve program evaluation by DRS which could include “desk audits” as well as data analysis (DRS would maintain the system and would have access to all data). A Request For Proposals (RFP) had been developed, but due to state’s budget situation, this was put “on hold” indefinitely. Patti asked whether a “targeted RFP” for this particular project could be included in the RFP to be issued in January 2008. The grant award would range from \$50-\$60,000/year, totaling up to \$120,000 over a two-year period (covering two state fiscal years. Patti asked Helen Butler, Executive Director of a state-funded

program, who was at the meeting as a guest, to comment. Ms. Butler was very supportive of the development of a new system and stressed that the architecture for the new system will save staff time and state funds by allowing for manipulation and access to a centralized database of information that will assist DRS in determining brain injury service needs and gaps across the state. The system would be used by nine current state-funded organizations operating 13 programs in the Commonwealth. They are currently using a 10+ year old antiquated case management software system which is lacking in functionality and is not a good source of data for statewide analysis. The CNI Trust Fund staff would work with Information Systems at DRS to review and score the proposals. **Jim Rothrock offered a motion that CNI empower the Department of Rehabilitative Services (DRS) Information Services (IS) Department to solicit a targeted Request For Proposals (RFP) to create a web-based software data system that will benefit state-funded brain injury programs, as well as DRS' ability to provide program oversight and management. Terry Glenn seconded. Discussion ensued. The motion passed unanimously.**

### **Release of Request For Proposals (RFPs) in 2009**

The Board discussed the priorities for the Option-B Community Grant Services Request for Proposal (RFP) to be released in January 2009. The Board discussed if it should issue RFPs that are targeted for specific purposes, to issue a general RFP, or a combination. The Board decided that it would like to identify areas of interest/priority, but also welcome applications outside of those targeted areas. The specific areas of interest discussed at the meeting included:

1. Spinal cord injury
2. Services within the statewide footprint of "core services" in brain injury: case management services for adults and/or children with brain injury; clubhouse / day program for people with brain injury; and regional brain injury resource coordination (i.e., education, awareness, resource dissemination and development, and local / regional coalition building for systems change).
3. Neurobehavioral treatment services (including residential and community-based)
4. Interface between the brain injury community and the Community Services Boards serving people with mental health issues
5. Veterans services
6. Alternatives or improvements to nursing home placement of individuals with brain injury

Staff will email the purpose and focus of the RFP to the Board to review prior to release of the RFP and encouraged members to e-mail additional areas of interest/priority to be included.

**Teresa Poole made a motion to release the Option-B Community Services RFP for sixty (60) days as required by the CNI Regulations no later than January 31, 2009 with a start date of July 1, 2009 for funded applications; Page Melton seconded. The motion passed unanimously.**

### **Financial Report**

Kristie Chamberlain, staff to the Advisory Board, provided an overview of the CNI Trust Fund finances. Since its inception in 1998 through November 30, 2008, total revenue into the Fund is \$13,256,482.78. The Trust Fund has actually awarded \$14,731,756.30 in grant awards (including \$542,006.74 in administrative services since July, 2003). The Fund currently has an obligated balance of \$1,123,697.94 (revenue minus grant awards), with an available balance of \$1,475,273.52 (revenue minus expenditures). Staff reminded the Board that the "cash" balance is

an illusion because the grants are awarded their funds on a reimbursement basis and technically all revenue in the fund is obligated through 2010.

### **Community Based Grants Colloquium**

At the September 2008 meeting, the Board requested that staff begin to plan a Community-Based Grants Colloquium in 2009. Staff informed the Board that they had identified two possible locations and several dates for the “Community Colloquium.” **Jim Rothrock made a motion to postpone the Community Colloquium until at least Fall 2009, depending upon the outcome of the Commonwealth’s budget shortfall; Teresa Poole seconded the motion. The motion passed unanimously.**

### **Future Meeting Dates**

The Board set the meeting dates for 2009:

Friday, March 6-Woodrow Wilson Rehabilitation Center

- *The Board will tour the “Smart House” located in one of the cottages on the Woodrow Wilson Rehabilitation Center campus as well as listen to an update from Dr. Richard Luck and Dr. Fred Capps on WWRC’s substance abuse grant.*

Friday, June 12-DRS Central Office

- *The Board will review and award grant proposals during this meeting.*

Friday, September 18-DRS Central Office

Friday, December 4-The NewWell Fund Conference Room (Forest Office Park)

### **Wounded Warrior Weekend with Wintergreen Adaptive Skiing**

Dr. Reid informed the Board that he was invited to attend the Wounded Warrior Weekend at Wintergreen Adaptive Skiing in Charlottesville January 23-25. Originally they invited Commissioner Rothrock to represent DRS but as is unable to attend, Dr. Reid will represent CNI during a banquet ceremony on January 24<sup>th</sup>. Dr. Reid informed the Board that members were also invited to attend the weekend activities as well (as he had spoken with Mr. Michael Zuckerman at Wintergreen prior to Board meeting).

**David Reid, Pys.D., Chair, adjourned the meeting at 12:49 PM.**