

Commonwealth Neurotrauma Initiative Trust Fund

Meeting Minutes September 26, 2008

Members Present

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

Staff

Patti Goodall,	Department of Rehabilitative Services, CNI Program Staff
Christine Grauer	Department of Rehabilitative Services, CNI Program Staff

Guests

Mary-Margaret Cash	Assistant Commissioner, Department of Rehabilitative Services
Barry Green	Department of Juvenile Justice
Tim Joost	Department of Juvenile Justice
Anne McDonnell	Brain Injury Association of Virginia
Cynthia O'Donoghue	James Madison University, Harrisonburg
Stephen Peed, Ph.D.	Department of Juvenile Justice
Jasneen Sahni	CJS & Associates, Vienna
Michelle Witt	Crossroads to Brain Injury Recovery, Harrisonburg

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 10:07 a.m. with introductions of meeting guests and board members.

Public Comment Period

A public comment period was held. No public comments were made.

Approval of June 13, 2008 Minutes

Commissioner Jim Rothrock made a motion to approve the minutes as written; Terry Glenn seconded the motion. The motion passed unanimously.

Approval of September 26, 2008 Agenda

The agenda as distributed was approved unanimously by the Board.

Presentation from Cynthia O'Donoghue, Ph.D., James Madison University, and Michelle Witt, Crossroads to Brain Injury Recovery

Cynthia O'Donoghue, Ph.D., Associate Professor at James Madison University, and Michelle Witt, Executive Director of Crossroads to Brain Injury Recovery, Inc., presented a proposal entitled "Measuring Success: Outcomes for Community-Based Brain Injury Services." Dr. O'Donoghue and Ms. Witt proposed a project that would identify a functional outcome protocol that objectively demonstrates improvements in quality of life for survivors of brain injury, as well as caregivers, as a result of services provided through community-based brain injury case management programs. Such a tool would assist organizations to 1) conduct program evaluations, 2) modify services based on qualitative and standardized outcome practices to better meet the needs of survivors and families, 3) secure accreditation, and 4) improve the consistency of outcomes reporting among brain injury programs across the Commonwealth. The proposed pilot study project would consist of three major activities: 1) identify the level of interest and ability to participate among potential project collaborators through surveys, interviews, and focus groups, 2) investigate the potential to dovetail with the state-wide Brain Injury Case Management Database System, and 3) conduct an assessment of existing outcome measurement tools in order to identify one that may be adaptable for use by community-based brain injury programs across the Commonwealth.

Presentation from Kate Baxter, Woodrow Wilson Rehabilitation Center

Kate Baxter with Woodrow Wilson Rehabilitation Center provided an update via a "Go To Meeting" in which Board members viewed a PowerPoint presentation while Kate spoke via PolyCom phone. The grant update was for CNI Grant #07-063 "Providing Improved Availability of a Health Exercise Option for Persons with Spinal Cord Injury." The period of this grant award was July 1, 2006 through June 30, 2007 with a no-cost extension through December 31, 2007. The goal of this grant was to establish five locations across the Commonwealth of Virginia where individuals with spinal cord injury can have access to computerized electrical muscle stimulation with the ERGYS2 Rehabilitation System. Equipment was placed at sites in Alexandria, Richmond, Roanoke, Virginia Beach, and Woodrow Wilson Rehabilitation Center (WWRC). Since the beginning of the grant period, 43 individuals with spinal cord injury have been evaluated using the system; two individuals have reached the independent maintenance phase of the program. During the no-cost extension period of the grant, WWRC received approval to reallocate remaining grant funds for the purchase of a RT300-S bike that is used with custom made shorts; this equipment is used at WWRC only. An additional goal of the project to market the program via media contacts at each site to individuals with SCI, health care providers, and caregivers was met. Since the grant has ended, there has been no follow-up with sites, according to Kate. **Commissioner Rothrock made a motion that the CNI Advisory Board directs WWRC to work with the recipients of the equipment to provide quarterly reports on usage of the equipment. Terry Glenn seconded the motion. The motion passed unanimously.**

Comments from the Commissioner of DRS

Commissioner Rothrock provided brief comments:

- The Commonwealth of Virginia is experiencing a budget crisis due to a \$3 billion budget deficit. He has submitted budget reductions for the agency to the Governor at the 5%, 10%, and 15% levels. He noted that, at the 5% level, services to consumers will still be maintained but, at the 10% to 15% levels, programs will be affected.
- Commissioner Rothrock encouraged the CNI Advisory Board to maintain an awareness of its relevance to the Commonwealth. In particular, there is increased interest within the General Assembly regarding the connection between brain injury, domestic violence, and incarceration.

Presentation from Barry Green, Stephen Peed, and Tim Joost, Department of Juvenile Justice

Barry Green, Stephen Peed, Ph.D., and Tim Joost with the Department of Juvenile Justice presented on the need for improved screening, assessment, and treatment protocols for youth in the Juvenile Justice system who may have a history of brain injury. Although the literature is inconsistent regarding the prevalence of brain injury in this population, it is thought that 30% or more have a history strongly supporting the presence of a brain injury (e.g., domestic or street violence, involvement in accidents, drug abuse). At present, a lack of screening or best practices models for juveniles with brain injuries is a serious impediment to the Juvenile Justice system's ability to effectively treat this population or to prevent recidivism. The Department of Juvenile Justice does not have the resources to conduct research in this area, and requests that the CNI Advisory Board considers prioritizing projects which investigate the relationship between brain injury and incarceration during its next funding cycle. Discussion ensued regarding the possibility that CNI grant funds may be made available for the state match portion of the HRSA Traumatic Brain Injury (TBI) Act Implementation Grants, due on December 1, which targets incarcerated juveniles as an area of focus. Dr. Reid requested that this discussion be tabled until the December meeting to allow for further consideration by the Board.

Financial Report

In the absence of Kristie Chamberlain, Patti Goodall provided a brief update on the financial status of the Trust Fund. Patti reviewed Kristie's financial report from the June 2008 meeting, pointing out that three months ago, the Fund had an obligated balance of \$1,970,902.53 (revenue minus grant awards), with an available balance of \$1,324,515.72 (revenue minus expenditures). The monthly average in fees and interest into the Trust Fund in Fiscal Year (FY) 2008 (began July 1, 2007) was about \$103,121 per month. Patti indicated that the most recent financial revenue reports for July and August 2008 showed a slightly lower income level into the fund, but that was only two months into the new fiscal year.

Patti reported that the annual administrative budget for State Fiscal Year (SFY) '08 (July 1, 2007-June 30, 2008) was \$83,892 of which \$75,036 was actually expended. The annual administrative budget for SFY'09 (July 1, 2008-June 30, 2009) is budgeted at \$93,892. The increase in the administrative budget will cover the costs of the Community Grants Colloquium in early 2009 as well as administrative costs relevant to issuing and reviewing a Request for Proposals. Patti indicated that currently there are a total of fourteen (14) active grantees. Nine (9) of these grants will finish their final year of funding in 2009. Since the Board had not issued a Request For Proposals (RFP) since January of 2007, this has allowed the Fund to begin to replenish itself. With nine (9) grants ending in 2009, and a continued monthly income of close to \$100,000, the Board should be able to fund new grants effective July 1, 2009. The next cycle of grants is for Community Rehabilitation Programs/Services. Based on this information – the current number of active grants ending in July 2009, as well as the reported income for July / August – Patti felt that the Board could proceed with issuing an RFP in January 2009. Then, pending a more detailed financial report from Kristie at the December meeting (as requested by Commissioner Rothrock), the Board can decide on the total amount of funding it can safely award for that grant cycle.

Release of Request For Proposals (RFPs) in 2009

The Board discussed the release of the Request for Proposals (RFPs) in 2009. At its December 5 meeting, the Board will determine priorities for the Community-Based RFP to be released in January 2009, as well as the total amount of funding that the Trust Fund can award, based on financial status. Awards to grantees will be effective on July 1, 2009. Commissioner Rothrock directed staff to report the level of funding available for the next funding cycle at the December 5 meeting.

Community Based Grants Colloquium

Staff reported to the Board that a Community-Based Grants Colloquium is due to be held in 2009. The purpose of the Colloquium is to give community-based grantees an opportunity to make presentations highlighting their CNI-funded programs and services for Virginians with brain injury and spinal cord injury. Consensus was reached by the Board regarding staff efforts to begin planning this Colloquium.

Ownership of Intellectual Property

Staff informed the Board that an issue regarding ownership of intellectual property has arisen from a CNI grantee's intention to distribute materials developed using CNI grant funds through a private company. This issue is currently being reviewed by the Attorney General's Office. Staff will invite DRS' liaison in the Office of the Attorney General, Squig Moore, to join us at the next CNI Board meeting.

Election of Chair

Staff informed the Board that it had to elect a Chair at this meeting, since the current term ends in December. Per bylaws: "*the chairperson shall be elected from the membership of the Advisory Board for a term of one year and shall be eligible for reelection.*" Commissioner Rothrock motioned that Dr. Reid be nominated and appointed Chair by acclamation for another year (Dr. Reid was originally elected Chair in 2005). The motion passed unanimously. David B. Reid, Psy.D. will serve as Chair for a term of one year from December 2008-December 2009.

Future Meeting Date

The next meeting date for the Commonwealth Neurotrauma Initiative Trust Fund is Friday, December 5, 2008 from 10:00 a.m. to 1:00 p.m. in Richmond at the DRS Central Office.

David Reid, Pys.D., Chair, adjourned the meeting at 1:05 p.m.