

**North Dakota Brain Injury Advisory Council
HIT, Inc., 2640 Sunset Drive NW, Mandan (on-site)
Videoconference (online)**

**May 20, 2022
Meeting Minutes**

BIAC Voting Members Present: Nan Kennelly, Chair; Sarah Ring, Vice Chair; Sen. Howard Anderson; Shannon Cook; Bobbiann Froemke; Darcy Severson

BIAC Non-voting Members Present: Denise Harvey, ND Protection & Advocacy, Secretary; Barbara Burghart, NDDHS; Tami Conrad, NDDHS–Behavioral Health; Christine Greff, NDDOH

Absent: JoNell Bakke; Skipp Miller–ND Indian Affairs Commission; Jessica Siefken; Haley Lang, ND Dept. Public Instruction; Elizabeth Oestreich, NDDOH–Injury Prevention; Dawn Pearson, NDDHS–Medicaid

Presenters/Guests: Rebecca Quinn and Carly Endres, ND Brain Injury Network (NDBIN); Jill Ferrington, National Association of State Head Injury Administrators (NASHIA); Daniel Gulya, Olmstead Commission Coordinator, ND Protection & Advocacy

Facilitator: Ann Crews Melton, Consensus Council

Call to Order and Welcome: Chair Nan Kennelly called the meeting to order at 1:02 PM CT. She welcomed BIAC members, presenters, and guests.

Introductions. Members introduced themselves and responded to the question:

What do you wish everyone knew about brain injury?

- It is so prevalent in our population and society, much more so than many people realize.
- I want people, especially rodeo/bronc riders, to know it is cool to wear a helmet. Also when skiing, other risky activities.
- You can have a brain injury from a concussion or a bang in the head. Most people think of more traumatic brain injury.
- It's okay to say "I have a brain injury," and any of us could have a brain injury at any time. Accidents, life events happen.
- Wish everyone knew that a concussion isn't just a concussion. It's a significant injury to your brain.
- You don't see a brain injury, not always obvious in everyone. No scratches, bruises, but the person feels a lot different.
- Our brain controls everything we do, so having a brain injury can impact all areas of your life. The experience is unique and different for each individual with a brain injury.
- People don't realize the prevalence of brain injury.
- Not a scrape you can put a bandaid on; can be life threatening.

- There are strategies and tools available for people with brain injury to help them be successful.
- People may talk fine and look fine but still may be struggling with daily tasks. Support and strategies can make a difference even years later.

Brain Injury Survivor Story. Council member Bobbiann Froemke shared her personal story of brain injury. She experienced a brain injury the day she graduated from high school. A fellow student who had been drinking picked her up and dropped her. She had five skull fractures, a broken jaw, whiplash, sternum knocked out of place, and became deaf in her left ear. She was unconscious for 5 minutes and had a 3-minute seizure. She was initially told she could never work full time and shouldn't go to college. She did continue on to North Dakota State University, and found really great doctors and an amazing counselor. She had people who believed in her who told her she was going to continue to thrive.

With her injury, the first 72 hours were critical. Her care team reassessed in a year, then in two years, to determine what would be lasting injury. Ten years later she began to fall and spent a year in balance therapy. Brain injuries don't go away. But she has gained new perspective, and learned to work with people differently depending on their strengths.

Lasting impact: Bobbiann remains concerned about personal safety and doesn't like to be surprised or approached from behind. She has headaches, gets tired easily, has ringing in ear. Can't attend loud gatherings or concerts. Symptoms haven't really improved, but she has learned to manage them better, and now has a great life.

Advice: Find the doctors who believe in you, and who you are comfortable with. Don't get stuck in anger; find the resources that work for you and leverage the tools that you have. You don't necessarily see a brain injury, so don't judge a book by its cover; everybody has a story, and there are so many things you don't see that are going on in people's lives. Also, it's okay to not feel okay. Schedule extra appointments when needed, and use the resources you have available. She's passionate about volunteering—she brings golden retrievers to visit hospitals and nursing homes. It's important to give back, find that balance, and bring light to other people.

Members asked questions and expressed heartfelt thanks for Bobbiann sharing her story and perspective.

Quorum. A quorum was not yet established with only five voting members present. Nan tabled approval of the minutes.

Review of Agenda. Nan presented the agenda. No additions. [APPENDIX A]

Member Provider Updates. Nan opened the floor for updates from members who are service providers.

Nan works at Onword Therapy in Fargo, a small private practice of speech-language pathologists. They work with many individuals trying to return to work or school, and work on executive functioning. Services are available in person or by telehealth, and all therapists are certified brain injury specialists.

Tami Conrad reported that the Behavioral Health Division has established a new opportunity for mental health services through a partnership with DeCoteau Trauma-Informed Care and

Practice in Bismarck, which is expanding into Dickinson and western part of the state. More information available [here](#).

Sarah Ring reported from Sanford Health in Fargo. They've found disturbing patterns of people coming in for previous, non-sports-related concussions. Sanford has put together a concussion rehabilitation program for individuals age 13 and up who sustain non-sports-related concussions. As speech-language pathologists, we are the initial point of contact for these referrals. Had a lot of success with this program thus far and have sent out education materials related to concussion, and information regarding ordering our program for patients both locally in Fargo as well as to rural Sanford clinics and some providers outside of the Sanford Health system. Referrals go directly to Sanford Speech Pathology Clinic on South University. Referrals need to come through a primary care physician.

ND Brain Injury Network Update. Rebecca Quinn offered updates from NDBIN. They held a virtual Mind Matters conference March 24-25, with 14 speakers and 68 attendees, 19 of whom were brain injury survivors or family members. Next year the event will be March 23-24, 2023 in Bismarck/virtual. Brain Injury Awareness Day will be March 22, 2023.

NDBIN continues to offer trainings, Webinar Wednesdays, and online courses. There is now a fee for courses, but a coupon is available for people within North Dakota. North Dakota is one of the only states that requires online courses in brain injury for all of our direct care staff, which is a partnership with Aging Services and Medicaid. They also offer resource facilitation statewide.

Additional updates:

- A concussion symposium will be held September 16, 2022.
- NDBIN recently conducted a training for Community Violence Intervention Center in Grand Forks.
- The next CBIS (certified brain injury specialist) training is Oct. 3-4, possibly in person in Fargo as well as virtual.
- They offer a support group, Living Life Fully After Brain Injury, and are seeking peers to serve as co-leaders for this course.
- NASHIA Conference: September 7-9, 2022, virtual, and there is funding available for BIAC members to attend. Please let Rebecca know if interested, rebecca.quinn@und.edu.
- Survivor Engagement Group. If you would like to assist with development and planning a kickoff event, please contact Rebecca.
- The Olmstead Commission would like more brain injury data. They want to form a group to examine what existing brain injury data is available in North Dakota, and what possible data sources could be explored in the future.

Shannon Cook joined the meeting.

Approval of Minutes. Nan announced the presence of a quorum and presented the February 11 minutes. Sarah Ring moved to approve, and Howard Anderson seconded. Members unanimously approved the minutes.

Nan presented the April 11 special meeting minutes. Sarah Ring moved to approve and Shannon Cook seconded. Unanimously approved.

State Agency Updates

ND Department of Health. No update.

ND Department of Public Instruction. No update.

ND Protection & Advocacy. Denise Harvey provided an update for Protection & Advocacy. Staff are traveling across the state doing supported decision-making training: individuals pick a trusted person for when a need should arise. This is not as formal as a guardianship and can be revoked or changed at any time. This might be useful for people with a brain injury if they need initial support but improve over time.

P&A is establishing an internal brain injury team—two staff designated from our office will serve persons with BI from across the state, virtually or by traveling. P&A has ten different offices across North Dakota.

ND Department of Human Services. No additional updates from Behavioral Health Division beyond the mental health service partnership with DeCoteau Trauma mentioned above.

Strategic Planning Subcommittee Report. Denise Harvey reported the committee has worked with leadership to make Council meetings more engaging, including icebreakers and relationship-building activities, and more time for discussion. Members appreciate adding a NDBIN update to each meeting.

The committee also recognized the desire for the Council to meet more frequently during the state strategic planning process. The regular quarterly meetings that were prescheduled could not be changed, but we added three additional special meetings this year so the group can meet more frequently.

Jill Ferrington from NASHIA is providing information on the development of other state plans from across the nation. At the April meeting Jill shared a glossary of brain injury terms, and provided an overview and update on the 18-month project plan to complete a North Dakota state plan by June 2023. The committee has talked about mentoring opportunities and guidance for members, and the potential to add more Council members with lived experience of brain injury.

Jill is building a toolkit for Council members, and the committee has discussed a Google drive folder as a way to share resources. The committee discussed Council membership and potential legislation to add NDBIN and Aging Services nonvoting members. The committee will continue to look at resources developed by other ACL grantees. [Subcommittee notes attached as APPENDIX B]

Administration for Community Living (ACL) Grant/State Plan Development. Jill Ferrington from NASHIA provided a project plan update, a mentorship update, an overview of the Council member profile, and a preview of the July 11 special meeting [APPENDIX C].

2023 ND Legislative Assembly. Nan opened discussion on looking ahead to the next Legislative Assembly. Members discussed revising BIAC membership to add non-voting members representing NDBIN and Aging Services. It will require legislative action to modify language. JoNell Bakke, a state senator and Council member, has offered to assist.

Open Discussion. No further items for discussion.

Public Comments. Nan invited members of the public to provide any comments to the BIAC. No individuals offered comments.

Post-Meeting Survey. Ann will send members a post-meeting survey via email to gather feedback on topics presented today.

Next Meeting. The next BIAC special meeting is July 11 at noon CT via Zoom. The next quarterly meeting is August 26 at 1pm CT, both onsite at HIT Inc. in Mandan and on Zoom.

Adjournment. Shannon Cook moved to adjourn. Nan declared the meeting adjourned at 2:47 PM CT.

Respectfully submitted,
Ann Crews Melton
Consensus Council

APPENDIX ATTACHMENTS NOTED IN TEXT

Brain Injury Advisory Council Meeting
Onsite: HIT Inc., 2640 Sunset Dr., Mandan, ND
Online Videoconference Connection*

Friday, May 20, 2022
1:00 PM – 4:00 PM CT

AGENDA

- 1:00 PM **Call Meeting to Order & Welcome:** Nan Kennelly, Chair
- Introductions & Roll Call**
Check-in question: What do you wish everyone knew about brain injury?
- 1:20 PM **Brain Injury Survivor Panel**
- 2:00 PM **Quorum**
Approve Agenda
Approve Minutes
BIAC Quarterly Meeting, February 11, 2022
BIAC Special Meeting, April 11, 2022
- 2:10 PM **BIAC Member Provider Updates**
- 2:25 PM **ND Brain Injury Network Update:** Rebecca Quinn
- 2:35 PM **Agency Updates**
ND Department of Health
ND Department of Human Services
ND Department of Public Instruction
ND Protection & Advocacy Project
- 2:50 PM **Strategic Planning Subcommittee Report**
- 3:00 PM **Administration for Community Living (ACL) Grant/State Plan Development**
Jill Ferrington, Nat'l Association of State Head Injury Administrators (NASHIA)
Project Plan Update
Mentorship Update
Council Member Profile
July 11 Special Meeting

- 3:30 PM **Looking Ahead: 2023 ND Legislative Assembly**
- Open Discussion**
- 3:45 PM **Public Comments**
Member Survey—Distributed Electronically
- 4:00 PM **Adjournment**

Meeting Contact Information:

The Brain Injury Advisory Council follows established state guidance regarding the scheduling and management of state advisory councils. The Brain Injury Advisory Council currently holds scheduled meetings via onsite and videoconference options. Masking is requested for all onsite participants. Members of the public can access the meeting and participate in the public comment period by attending in person or using the following videoconference contact information:

***Videoconference:**

Join Zoom Meeting

<https://us02web.zoom.us/j/81669808940>

Meeting ID: 816 6980 8940

Phone Connection Option: 1-346-248-7799

Brain Injury Advisory Council Mission.

The Mission of the North Dakota Brain Injury Advisory Council is to improve the quality of life for all individuals with brain injury and their families through brain injury identification, awareness, prevention, research, education, collaboration, support services and advocacy.

**ND Brain Injury Advisory Council
Strategic Planning Subcommittee**

**February 25, 2022, 12:00 – 1:00 PM CT
via Zoom
Meeting Notes**

Members Present: Nan Kennelly, Rebecca Quinn, Denise Harvey, Tami Conrad, Haley Lang, and Jill Ferrington, National Association of State Head Injury Administrators (NASHIA)

Facilitator: Ann Crews Melton and Shirley Dykshoorn, Consensus Council

Welcome. Attendees introduced themselves.

Review of Agenda. Ann Crews Melton presented the agenda.

Review of Meeting Notes. Ann presented January 28 subcommittee meeting notes. No additions or corrections.

BIAC February 11, 2022 Meeting Debrief. Members debriefed on the quarterly BIAC meeting and post-meeting survey responses (attached). Reflections included:

- Meeting was more engaging than usual
- Icebreakers were helpful—got everyone speaking, good way to start
- Good to hear everyone’s role and connection to brain injury
- People want to continue sharing, noted on survey responses
- Members appreciated adding the ND Brain Injury Network update
- Education is important for members, to understand current services and gaps
- Keep information digestible, don’t pack too much into agenda
- Loved energy of Zoom chat conversation/encouragement

Members discussed desired outcomes/action steps:

- Continue icebreakers/sharing at beginning of each meeting
- Clarify voting/nonvoting members at beginning of each meeting
- Continue having NDBIN update as standing agenda item
- Add agenda item for survivor/family member sharing
- Have survivors speak first before agency updates. Might not need every agency to update at each meeting—rotate instead

Members discussed inviting survivors/family members serving on BIAC to share, as well as inviting in guests to share their stories. It may take time to establish enough trust to share stories. This can serve as one platform to better train survivors on how to share their story and begin engaging in advocacy.

Mentorship Opportunities. Meeting survey responses signal interest in the concept. Jill can draft a suggested framework for the committee to respond to. Jill will look at member structure based on other state’s experiences and bring a draft to the March SP meeting.

BIAC Meeting Schedule Discussion. BIAC members indicated willingness to shift to meeting every other month instead of quarterly on the post-meeting survey, by a large majority. Tami spoke with LuWanna, who manages the State meeting calendar, and learned that the quarterly meeting dates cannot be revised. BIAC could add additional meetings as “special meetings” in between.

The group discussed adding special meetings in April, July, and October. These special meetings can focus on Strategic Planning and board development work and be shorter than the quarterly (3-hour) meetings. Special meetings will be virtual (no in-person/hybrid option). This SP subcommittee will continue to meet monthly.

Tami noted that in November the group can look at the 2023 calendar and determine whether meeting every other month instead of quarterly/special meetings might be possible next year.

Members discussed the best times to schedule the special meetings: Fridays are typically better for providers, or noon hour meetings earlier in the week. Some agencies close early on Fridays in the summer.

Preliminary Project Plan for NASHIA Work. Jill Ferrington provided an overview of the 18-month project to address board development and state strategic plan development. Each item has a target completion date, and Jill will monitor completion as the project advances.

Board development: The plan includes technical assistance, an orientation toolkit, mentorship, and train-the-trainer person-centered planning for all BIAC members. The latter will occur over three two-hour sessions in late 2022/early 2023.

State strategic plan: Review existing documentation and past needs assessments. Survey BIAC and stakeholders. Draft state plan goals with this committee to take to full council for feedback. The goal is by early 2023 to conduct more formal public input before finalizing. The plan should be completed by July 1, 2023.

Jill will distribute this draft to the committee for feedback prior to the March SP meeting.

April BIAC Meeting Topics & Icebreakers. The committee tabled this discussion until the March SP meeting.

The subcommittee adjourned at 1:00 PM CT.

Respectfully submitted,
Ann Crews Melton
Consensus Council

Would you like to offer comments about any topic from the February 11 meeting?

Good energy, tone and sharing! Well facilitated meeting. Great job.

I thought it was organization and run very efficiently.

I liked what Rebecca Quinn said about how much the NDBIN has accomplished. I also enjoyed sharing personal things about each other. I think it helps to better understand where each of us is coming from, in working cohesively to improve the quality of life for all individuals with brain injury and their families.

I have no preference on BIAC meeting frequency, I'm open to either, whichever the majority of the group decides on works for me.

Also, I wouldn't be interested in mentoring a new council member, as I am new to the council.

I'm so happy to be on the BIAC and I look forward to our meetings.

I enjoyed the "icebreaker" activity, not only to get to know individuals on the council but to also hear what they are passionate about in regards to brain injury. Jill's presentation sparked energy--giving the council something active to work on with a deadline.

Suggestions to improve future council meetings:

Keep the stories and sharing as part of the agenda. Great engagement and impact. Measure goals and impact of the council, quarterly.

Nothing at this time.

Reviewing voting members / nonvoting members and their roles. Or what it means to be a voting/nonvoting member of the Council. I've noticed nonvoting members, participating in votes, so I think it would be beneficial to review with the entire group.

This is my second meeting, it's too early to have suggestions at this point, as I'm still learning.

Schedule time blocks for input including topics to be covered to allow for input from persons with brain injury and family members.

Scheduled time for role of committee in advising department

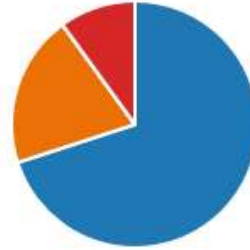
Consider having subcommittee groups within meeting to include persons with brain injury and family members.

BIAC Post-Meeting Survey Results (Excerpt)
February 11, 2022

2. I felt engaged at the BIAC meeting.

[More Details](#)

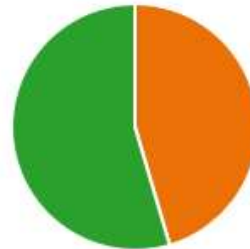
● Yes	7
● Somewhat	2
● No	0
● Other	1



3. I would be interested in receiving mentoring from a council member with experience.

[More Details](#)

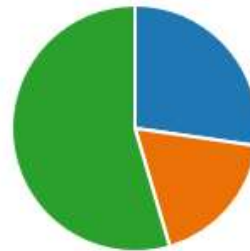
● Yes	0
● Maybe	5
● No, Thanks	6



4. I would be interested in mentoring a new council member.

[More Details](#)

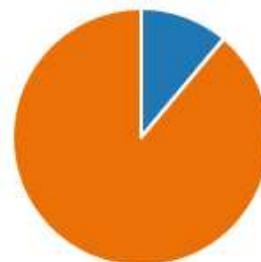
● Yes	3
● Maybe	2
● No, Thanks	6



7. My preference on BIAC meeting frequency:

[More Details](#)

● Continue with quarterly meeti...	1
● Meet every other month (2 ho...	8



**ND Brain Injury Advisory Council
Strategic Planning Subcommittee**

**March 21, 2022, 12:00 – 1:00 PM CT
via Zoom
Meeting Notes**

Members Present: JoNell Bakke, Tami Conrad, Denise Harvey, Nan Kennelly, Haley Lang, Rebecca Quinn, Sarah Ring, and Jill Ferrington, National Association of State Head Injury Administrators (NASHIA)

Facilitator: Ann Crews Melton, Consensus Council

Welcome. Attendees introduced themselves.

Review of Agenda. Ann Crews Melton presented the agenda. Jill Ferrington requested adding discussion of additional members of this committee, specifically those with lived experience. Approved as amended.

Review of Meeting Notes. Ann presented February 22 subcommittee meeting notes. No additions or corrections; minutes approved.

BIAC Special Meeting Schedule. Ann recapped that a large majority of BIAC members responded they would prefer meeting more often on the post-meeting survey. Tami Conrad learned from LuWanna Lawrence at Dept of Human Services that the previously scheduled quarterly meetings cannot be adjusted; however, the Council can call additional special meetings in between.

After consultation with BIAC officers, Tami, Jill, and Rebecca, Ann presented the proposed 2022 special meeting schedule—three virtual meetings that will focus on the development of the state strategic plan. These are in addition to the previously scheduled quarterly meetings. Ann noted the October date overlaps with the previously scheduled Strategic Planning subcommittee meeting; a subcommittee meeting will not be held in October.

Monday, April 11 2022, noon-1PM CT via Zoom

Monday, July 11 2022, noon-1PM CT via Zoom

Monday, October 17 2022, noon-1PM CT via Zoom

Members approved the proposed special meeting schedule. Ann will communicate the schedule with BIAC members and send a public notice to LuWanna.

April 11 BIAC Special Meeting Topics, Icebreaker/Opening Exercises. At the February BIAC meeting, Jill and Rebecca covered an overview of the ACL grant and the grant focus areas. Now looking ahead, members discussed what topics should be covered at the special meeting in April. The committee agreed that the bulk of the meeting should be spent on an overview from Jill on the purpose of advisory councils. From her work with NASHIA, Jill can contextualize this process with development of other state plans nationally, citing examples that may be useful for North Dakota. These include examples across programs (brain injury, Alzheimer's, suicide, etc.).

At the April meeting Jill also will share a glossary of brain injury terms to make sure everyone on the Council is using the same language and understands evolving, inclusive definitions and a comprehensive

glossary list will be included in the eventual advisory council toolkit. A member suggested adding a definition of “provider” to the glossary list.

To prepare for the April 11 meeting, Jill will connect with Rebecca the first week of April to share/review meeting materials. Ann will assist with development and distribution of the agenda etc.

Members discussed an icebreaker question for the April 11 meeting, as the introductory questions were well received in February. After discussion, members agreed on a “penny icebreaker,” which uses a visual of three different pennies from three different years. People can pick one penny—one year—and share something that was true for them during that period of their life. Jill will send Ann an image of three pennies spanning a number of years for the agenda.

Preliminary Project Plan for NASHIA Work. Jill reviewed the previously distributed 18-month project plan to address board development and state strategic plan development. Each item has a target completion date, and Jill will monitor completion as the project advances. Members agreed with the plan and timeline as outlined and recommended no edits. Ann will circulate the plan to members again.

Mentorship Opportunities/Associated Guidance Discussion. Jill presented a document outlining best practice recommendations for advisory council mentors. These include:

- Participate in the orientation
- Meet with new council member BEFORE the first (or an upcoming) council meeting
- If meeting in person, meet a few minutes ahead of the meeting so the mentor can greet the mentee, introduce to other council members and sit next to mentee
- Provide a formal, but informative, introduction
- Serve as a coach during (in-person) meetings—having the mentor sit next to the mentee for the mentor to quietly provide additional background information, translate terms
- Meet prior to each of the next three meetings
- Follow up between meetings
- If the mentee misses a meeting, mentor initiates a follow-up call
- The mentor should check in regarding committee assignments
- Mentor should communicate progress with the council chair

Members discussed these recommendations and the informal mentoring that has previously taken place, and the benefit of formalizing this process. Members also discussed adding flexibility to the process—not everyone may want the same level of mentorship or be able to commit to an equal time investment. Members suggested the Council could create a template for mentors, with initial questions to ask at the mentor/mentee’s first meeting to shape the relationship and expectations going forward.

Jill noted that it will be unique among state councils to create a mandatory but flexible mentor/mentee relationship, which can be tailored by each pair as needed. She will work on building a template for mentorship into the advisory council toolkit between June and August this year.

Discussion: Additional/New Subcommittee Members. Members revisited the potential to add additional council members with lived experience of brain injury to this subcommittee. Ann contacted all council members who indicated interest in the post-meeting survey, but not everyone responded or replied to the calendar invites. Members noted this subcommittee might benefit from adding

males/gender diversity and by adding Native American members. However members also noted that new BIAC representatives may be feeling overwhelmed with a learning curve and unsure whether they want to commit to committee work. Members agreed to keep the invitation to join the subcommittee open, and make sure people know they are welcome, but also allow them to engage how they want to on their own timeline, and not pressure anyone to join. Members noted the subcommittee will share out in each BIAC meeting, and all council members will be able to contribute input to the state plan process at the special BIAC meetings.

Next meeting. The next Strategic Planning subcommittee meeting will be Monday, April 18 from noon-1 PM CT.

The subcommittee adjourned at 1:00 PM CT.

Respectfully submitted,
Ann Crews Melton
Consensus Council

**ND Brain Injury Advisory Council
Strategic Planning Subcommittee**

**April 18, 2022, 12:00 – 1:00 PM CT
via Zoom
Meeting Notes**

Members Present: JoNell Bakke, Tami Conrad, Denise Harvey, Haley Lang, Nan Kennelly, Rebecca Quinn, Sarah Ring, Jessica Siefkin, and Jill Ferrington, National Association of State Head Injury Administrators (NASHIA)

Facilitator: Ann Crews Melton, Consensus Council

Welcome and Introductions.

Review of Agenda. Ann Crews Melton presented the agenda (attached). Approved with no additions.

Review of Meeting Notes. Ann presented March 21 subcommittee meeting notes. No additions or corrections.

BIAC April 11 Special Meeting Debrief. The committee discussed debrief questions: *Does it work well to reserve focused state plan development time for the special meetings?*

Many agreed it worked well. Moving forward, the extra designated time will help lend credence to the state plan. This way it won't get lost as part of larger business meeting agendas. Special meetings heighten the importance of the plan. Helpful for new members and stakeholders.

How did you respond to the terminology overview? And the project plan/timeline outlining what we've accomplished and what is coming up?

Members appreciate the clarification on terminology, providing a basic education to get everybody on the same page. This lays the foundation for the work moving forward. It's important to use the same terms.

On timeline: From a funding standpoint—we're purchasing a service, so we want to see the progress of what is being accomplished. When you're in a meeting and you see ABCD has been accomplished, that motivates people. Encourages you to be a part of that process. Helps clarify why it's needed, why you're there.

Members agreed the amount of material presented was manageable and not overwhelming.

State and Federal Policies/Council Practices. Jill Ferrington shared Nebraska's Brain Injury website as an example electronic toolkit: [Braininjury.nebraska.gov/toolkit/website-table-contents](https://braininjury.nebraska.gov/toolkit/website-table-contents)

Members discussed using a Google Drive folder for similar materials created for North Dakota. Is there a way to link or share on the BIAC website, ND Department of Human Services, or the ND Brain Injury Network website?

Members discussed whether the documents would all be public information. In Nebraska, all is publicly accessible. Should be the same here.

A member requested the creation of general guidelines for all North Dakota advisory councils. Is this something the Attorney General or Governor's Office could create and post? Then each council could have links to its own topical documents and resources.

Between now and the next meeting, members agreed to explore these options. Tami can check with the Governor's office. Which website will be simplest to make changes and update quickly? What would be a good temporary space, while we determine where to permanently house these documents? No need for password protection—all can be publicly accessible.

Discussion of Council Member Requirements/Profile. Jill shared a Federal-State Advisory Council Requirements table, and members reviewed whether current BIAC membership meets each requirement (attached). North Dakota has requirements that go beyond the federal requirements. Jill will send the updated document to Ann for distribution.

Members questioned why the director of the ND Brain Injury Network, currently Rebecca Quinn, is not an official non-voting member of BIAC. Rebecca currently serves in an advisory role at the discretion of the council, but is not an official member like other state agency representatives. Members feel there is a way to establish this even though the Department of Human Services also has a representative on the council. Rebecca and Tami will meet to discuss potential legislation to address this. JoNell volunteered, in her role as state senator, to assist with a bill.

Tami reminded everyone to make sure potential candidates complete the ND advisory board application online. Applicants have to identify BIAC or they will not be pulled from the hundreds of applications as potential members. Reach out to Tami or Rebecca for guidance as needed.

Next Steps. At the next meeting, SP subcommittee will create board member profiles, to ensure all members and the roles/affiliations they represent are recorded. Members need to look at religious, charitable, fraternal, veteran, welfare or professional group categories. Members want to prioritize veteran representation. Ann can help with outreach to the ND Long Term Care Association if needed, which represents nursing homes and in-home care providers statewide.

Next meeting. The next Strategic Planning subcommittee meeting will be Monday, May 16 from noon-1 PM CT.

BIAC Business Meeting

Friday, May 20, 1-4PM CT at HIT, Inc. in Mandan and via Zoom

BIAC Special Meetings

Monday, July 11 2022, noon-1PM CT via Zoom

Monday, October 17 2022, noon-1PM CT via Zoom

The subcommittee adjourned at 1:00 PM CT.

Federal/State Crosswalk – Advisory Council Member Requirements

Federal	State	Status
the corresponding State, Territory or American Indian consortium agencies involved	Department of human services, one individual representing behavioral health, one individual representing Medicaid, and one individual representing vocational rehabilitation <i>(Tami, Jessica, *** clarify; Medicaid representative)</i>	✓ ✓
public and nonprofit private health related organizations	Service Provider for People with brain injury <i>(multiple members)</i>	✓
other disability advisory or planning groups within the State, Territory or American Indian consortium <i>Tami is on BHPC, IDEA Advisory Committee, Rebecca sits on Disability Advocacy Consortium ***Tami and Rebecca to pursue reassessment of membership status (non-voting member)</i>		✓
members of an organization or foundation representing individuals with traumatic brain injury in that State, Territory or region <i>NDBIC, Rebecca directs Tami and Rebecca to pursue reassessment of membership status (non-voting member)</i>		
injury control programs at the State or local level if such programs exist	State department of health, one individual representing injury prevention and one representative representing emergency medical services and trauma <i>(Nikki and Christine)</i>	✓ ✓
Includes at least 50% of people with TBI (including those from diverse and underserved populations) <i>Among voting members (40%), inclusive of non-voting (50%)</i>		✓
Includes family member(s) of individuals with TBI <i>(multiple members)</i>		✓
Includes representation from Centers for Independent Living and/or the State Independent Living Council <i>(Shannon on SILC)</i>		✓
Includes representation from an Aging and Disability Resource Link (ADRL)		

<p>Important as majority of services are through Aging and Disability waiver. <i>Consider LTC Association.</i> *** Tami and Rebecca to connect with Erica Reiner</p>		
<p>Includes representation from the Protection & Advocacy agency in your state (<i>Denise</i>)</p>		✓
<p>Includes representation from the long-term care ombudsman in your state <i>Examine membership from state level LTC Ombudsman. Important to consider geropsych and dual diagnosis units.</i> ***Examine membership from state-level LTC Ombudsman. https://www.nd.gov/dhs/services/adultsaging/ombudsman.htm</p>		
<p>Includes representation from a TBI Model System Center (funded by the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)) if one exists within your state. <i>Rebecca sits on for council Mayo TBIMS.</i> ***Tami and Rebecca to pursue reassessment of membership status (non-voting member)</p>		✓
<p>Is representative of the state and includes individuals from culturally and linguistically diverse populations from both rural and urban areas. <i>Board has Native American Representative Opportunity to expand further.</i> ***Consider disseminating a Board Profile</p>		
<p>Department of Public Instruction (<i>Haley</i>)</p>	<p>Department of Public Instruction (<i>Haley</i>)</p>	✓
	<p>An individual representing the Indian affairs commission, nominated by the Indian affairs commission, who may be a brain injury survivor or a family member of a brain injury survivor;</p>	✓
	<p>At least one individual representing a religious, charitable, fraternal, civic, educational, legal, veteran, welfare, or professional group or organization, who may be a brain injury survivor or a family member of a brain injury survivor. <i>May discover through completion of a board profile</i> *** Seek a Veteran representative</p>	
	<p>The speaker of the house of representatives shall appoint one member of the house of representatives (<i>Representatives Anderson</i>)</p>	✓

	<p><i>and Fegley</i>) and the president pro tempore of the senate shall appoint one member of the senate (<i>Senator Anderson</i>) to serve as members of the council.</p>	
	<p>The governor may appoint an individual representing stroke health to serve as a nonvoting member of the council who serves at the pleasure of the governor. (<i>Christine from NDDoH</i>)</p>	<p>✓</p>

**ND Brain Injury Advisory Council
Strategic Planning Subcommittee**

**May 16, 2022, 12:00 – 1:00 PM CT
via Zoom
Meeting Notes**

Members Present: Denise Harvey, Nan Kennelly, Rebecca Quinn, Sarah Ring, Jessica Siefkin, and Jill Ferrington, National Association of State Head Injury Administrators (NASHA)

Facilitator: Ann Crews Melton, Consensus Council

Welcome and Introductions. Ann Crews Melton called the meeting to order at 12:02 pm. Members introduced themselves.

Review of Agenda. Ann presented the agenda. Jill requested adding consideration of a post-meeting survey for the Friday May 20 BIAAC meeting. Approved as amended.

Review of Meeting Notes. Ann presented April 18, 2022, subcommittee meeting notes. No additions or corrections.

BIAAC Quarterly Meeting Planning. The committee discussed items for Friday's meeting. Check in question: What do you wish everyone understood about brain injury?

Members discussed inviting brain injury survivors to share their stories, including format and guiding questions. Ann will reach out to Bobbiann Froemke and Shannon Cook to invite them to speak, and reserve space in the agenda at the end of intros/check in. Survivors will be invited to share how their injury occurred, one positive thing that helped them, and one need/challenge they encountered. The committee agreed to invite family members (JoNell Bakke, Jessica Siefkin) to share stories in August.

Members who are providers also will be encouraged to share a brief overview of their services offered during the meeting. The committee discussed looking toward the next legislative session, and agreed to reserve time for discussion/strategy at the end of Friday's meeting. One item may be a bill adding new non-voting BIAAC members, such as representatives of the ND Brain Injury Network and DHS's Aging Services.

Member Requirements/Board Member Profiles. Jill Ferrington shared an example board member profile, which can be tailored for North Dakota. In addition to representatives from NDBIN and DHS's Aging Services, noted above, BIAAC can consider representation from various charitable organizations, civic groups, religious institutions, veteran status, etc.

Jill can reformat the matrix into an electronic survey to gather information from current BIAAC members about the groups/demographics they represent. This could be circulated in June, to review results at the July 11 special meeting. Members agreed an electronic survey would be fine.

Members suggested adding categories for lived experience with brain injury, and also noting each Council member's term expiration on the resulting matrix, so we can anticipate when each category may have a gap. Jill will edit this and circulate a draft for feedback. Jill will provide an overview of this process at Friday's BIAAC meeting.

Advisory Councils/Boards in Other States. Jill provided an overview of other states' councils from her work at NASHIA. What stands out: Most states are utilizing their council or board for much broader input and advice on brain injury services, moving beyond the specific scope of the Administration for Community Living (ACL) grant. Most groups meet quarterly, but there is discrepancy in size: range from 15 to 45 members. NASHIA will continue to make recommendations about strategies happening in other states that might be useful in ND, especially as relates to consumer groups or councils. Please email Jill with any questions/inquiries about what other state boards/councils are doing: jferrington@nashia.org.

Central Location for State Plan Documents. As discussed via email, and in the interest of moving forward, Jill will send out a link to a Google drive to store/share strategic planning development documents. This can be linked to from the NDBIN website and other official state websites as needed for public access, and eventually migrate to a state site if that is determined to be the best route for perpetuity. Members liked this approach, to avoid myriad email attachments and to gain editing/viewing access on shared documents.

Advisory Council Products Developed by ACL Grantees. Jill noted that the NASHIA website (nashia.org) has toolkits for advisory boards, including board member roles and responsibilities and information about bylaws and recruitment. She will add more resources to the ND Google drive.

Post-Meeting Survey. Members discussed distributing a post-meeting survey after this quarterly meeting on Friday, after gathering useful feedback in February. Questions will remain similar around engagement and suggestions for improvement; will add questions on participating in NDBIN's Survivor Engagement Group and attending the virtual conference in September. Jill will work with Ann to help draft, and Ann will distribute to all BIAC members via email after the May 20 meeting.

Jill also will provide an update on mentorship opportunities/process to the BIAC on Friday.

Next meeting. The next Strategic Planning subcommittee meeting will be Monday, June 20 from noon-1 PM CT.

BIAC Special Meetings

Monday, July 11 2022, noon-1PM CT via Zoom

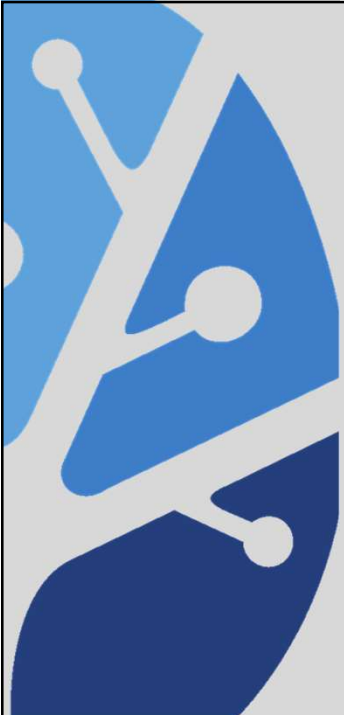
Monday, October 17 2022, noon-1PM CT via Zoom

BIAC Business Meetings

Friday, August 26, 1-4PM CT at HIT, Inc. in Mandan and via Zoom

Friday, November 18, 1-4PM CT at HIT, Inc. in Mandan and via Zoom

The subcommittee adjourned at 1:01 PM CT.



ND Board and State Plan Development Update

Jill Ferrington, MS, CRC, CBIS
jferrington@nashia.org

1

Refresher – Board Development and State Planning Process

Board Development – over the next 12 months:

- Examine Advisory Council best practices
- Recommend and guide Advisory Council on implementing best practices (e.g. mentorship, council member roles, etc.)
- Develop Advisory Council Orientation Toolkit
- Train on Person-Centered Practices



2

Refresher – Board Development and State Planning Process

State Plan Development – over the next 18 months:

- Review of past needs assessments
- Examine priorities of current Advisory Council members
- Assist Strategic Planning Sub-Committee (SP) in the development of a DRAFT five-year State Plan with specific goals and objectives
- Guide process of gathering public input on DRAFT State Plan
- Finalize State Plan with Advisory Council no later than July 2023



3

What we've accomplished...

- Assessed board preferences - scheduling
- Implemented post-meeting survey process
- Trained on terminology, Administration for Community Living, advisory councils, and state plans
- Reviewed State and Federal requirements for the board to identify gaps w/ crosswalk
- Reviewed other state's council/board approaches
- Getting to know one another!



4

Federal/State Crosswalk – Advisory Council Member Requirements		
Federal	State	Status
the corresponding State, Territory or American Indian consortium agencies involved	Department of human services, one individual representing behavioral health, one individual representing Medicaid, and one individual representing vocational rehabilitation (Tami, Jessica, *** clarify Medicaid representative)	✓ ✓
public and nonprofit private health related organizations	Service Provider for People with brain injury (multiple members)	✓
other disability advisory or planning groups within the State, Territory or American Indian consortium Tami is on BHPC, IDEA Advisory Committee, Rebecca sits on Disability Advocacy Consortium ***Tami and Rebecca to pursue reassessment of membership status (non-voting member)		✓
members of an organization or foundation representing individuals with traumatic brain injury in that State, Territory or region NDBIC, Rebecca directs Tami and Rebecca to pursue reassessment of membership status (non-voting member)		
injury control programs at the State or local level if such programs exist	State department of health, one individual representing injury prevention and one representative representing emergency medical services and trauma (Nikki and Christine)	✓ ✓

A Look at Board Membership



NASHIA

5

What's coming up...

- Board profile (June)
- An opportunity to review needs and priority themes (July)
- Toolkit (August)
- Mentoring

Next Special Meeting
July 11, 2022
Noon

NASHIA

6

Board Profile

Sample Board Demographic/Attribute Profile Matrix

# of Voting Board Members: # of Non-Voting Board Members:	Last Name	Last Name	Last Name																		TOTALS
Current Term and Year Current Term Started																					
DEMOGRAPHIC CHARACTERISTICS																					
Age: 30-50																					
Age: 51-65																					
Age: Over 65																					
Male																					
Female																					
African American																					
Asian																					
Caucasian																					
Hispanic/Latinx																					
LGBTQ																					
Other (e.g., veteran, special needs, immigrant)																					
SKILLS/EXPERIENCE (customize to each board)																					
Quality and Clinical Expertise																					
Governance & Non-profit Board Experience																					
Health Care Industry and/or Insurance Expertise																					
Strategic Planning																					
Finance and Accounting																					
Philanthropy																					
Public Health																					
Workforce Expertise																					
Information Technology/ Digital Consumer Experience																					
Level																					

A chance to learn about all board member skills, areas of knowledge, expertise, and background



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7

Mentorship

- Confirmed interest - mentors and mentees
- Reviewed mentoring best practices
- Incorporating into board toolkit and formal mentoring anticipated later this year



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8



Questions?

NASHIA Contact Information:

Jill Ferrington, MS, CRC, CBIS

Technical Assistance Advisor

National Association of State Head Injury Administrators (NASHIA)

jferrington@nashia.org