

The purpose of the Traumatic Brain Injury Advisory Committee is to provide recommendations to the commissioner of the Department of Human Services on program development and concerns regarding the health and human service needs of people with traumatic brain injuries.

Gov. Carlson designated the DHS TBI Advisory Committee in 1997 as the statewide TBI Advisory Council and DHS as the lead state agency for purposes of the state TBI grants funded by the federal Health Resources and Services Administration through the TBI ACT of 1996. A state TBI advisory council and lead agency are among the core components of state TBI infrastructure.

DHS Traumatic Brain Injury Advisory Committee
meeting minutes
Thursday, Dec. 13, 2018
1:30 - 3:30 p.m.
Elmer Andersen Building
540 Cedar St., St. Paul, MN

- 1) Introductions were completed.
- 2) DHS Response to TBI AC Annual Report from Claire Wilson, assistant commissioner for the Community Supports and Continuing Care for Older Adults administrations.
 - Wilson thanked the committee for our work.
 - Fulfilling recommendations is dependent upon many factors: Legislature, federal guidelines, etc.
 - Service needs recommendations:
 1. Education targeted to the DHS staff. Videos are in use internally and with stakeholders as well. DHS will continue to expand use of videos.
 2. Interagency collaboration: Wilson feels this recommendation has been met. Continue to foster and support collaboration.
 3. Meet the needs of families when parents have a BI. Ongoing recommendation we've been looking at for a while. Wilson supports participation from Child Safety and Permanency Division. Will have a member from this division join the group and continue to work with ILC. New position added within DSD to address family and children's needs. DHS is working to create a family-centered continuum of care. Possibility of module to address family interactions/effect of BI on the family. Resources remain a question. The group discussed possible ideas regarding ways to help support families. Service needs will continue to address this recommendation.
 4. Standard application process through SMRT process. Process is currently complex, inconsistent and difficult for people to navigate. This has led to barriers to access. The process is cumbersome. Continue to provide training to counties and tribal nations. Some improvements have been made; however, this may take a full modernization of the system. The state is looking at the Integrated Services Business Model to help address this issue. Federal guidelines around these processes need to be considered as well. We hope SMRT process will become more streamlined and consistent across counties.
 - Policy/legislative recommendations:
 1. Addressing the needs of people with behavioral challenges that are more severe. The Behavioral Health continuum of care is not adequately serving those with more severe needs. Working to put services in place 24/7, such as mobile crisis teams in 87 counties. FACT (Forensic Assertive Community Treatment) teams expanding. This has been a challenge in other states related to mental health vs. brain injury treatment. Colorado has been a model for this. Minnesota is in contact with Colorado to learn how they make this work/different service models. Colorado model is being followed, training with screening tools also underway with State Operated Services staff. Timeline may need to be extended. Colorado program took 10 years to get up and running. TBI screening generates whether the consequences of the injury may prohibit involvement in the ACT model. DHS data is looking at who is leaving the state and entering the state for treatment – may be up to six months to get this information. Children's psychiatric residential care facilities might be an option for children. \$28 million allocated for substance abuse and behavioral health services. DHS is working to create more crisis or crisis stabilization services to help address mental health, BI diagnoses. Working to make services available 24

hours a day. Challenges in greater Minnesota with accessibility. Relying on first responders in some areas currently. Discussed lower level intervention to prevent higher levels of behavior that need to be treated out of the state. Discussed tracking number of in-state placements.

2. Increasing assessment/screening for recognition for brain injury. MnCHOICES 1.0 has link to HELPS tool. MnCHOICES 2.0 will also incorporate the HELPS tool. Speaker from MnCHOICES to attend full committee in April 2019.
 3. Education for caregiver network: Caregivers are supported through many programs and services. Waiver Reimagine/redesign will be involved with this process. Want to expand access to supports for caregivers, if on a waiver or not. Expanding the Disability Hub to support caregivers, manage the workforce shortage. Question re: data request availability. Jill Tilbury will follow up on a speaker with policy committee in the near future.
- Last thoughts: Think about creating a way to present recommendations that track progress and think about how to continue to move forward. Progress section discussed as an addition to the annual report.
- 3) Minutes from October 2018 meeting reviewed and accepted
 - 4) Subcommittee Reports:
 - Service Needs: SMRT speaker/update today. Will follow up with Hennepin County Economic Access.
 - DHS Policy: Discussed brain injury screening as part of the substance abuse assessment
 - Steering: No significant updates
 - 5) Reports from ex-officio members
 - Partners Panel update: No report
 - Brain Injury Alliance -- Mollie Clark: Minnesota Brain Injury Alliance public policy agenda in place. Copies were available for those interested. Everyone is welcome to volunteer as an advocate at the capitol.
 - DHS liaison Jill Tillbury: No report
 - Intra Agency Leadership Council: No report
 - Department of Health: No report
 - Department of Human Services: No report
 - Department of Corrections: No report
 - Department of Education: No report
 - Department of Employment and Economic Development: Jennifer Schneider introduced Kristina Rauenhurst as the new DEED representative to the committee.
 - U.S. Department of Veterans Affairs: No report
 - 6) Announcements from membership:
 - Jodi Greenstein updated the committee on the recent death of former member Harry Nevling.

Notice of upcoming meetings:

- Steering Committee: 11 a.m. – noon Jan. 10, 2019
- Service Needs Subcommittee: 12:30 – 1:30 p.m. Jan. 10, 2019
- Legislative/Policy Subcommittee: 12:30 – 1:30 p.m. Jan. 10, 2019
- Full TBI Advisory Committee: 1:30-3 p.m., Feb. 14, 2019.

Meeting minutes respectfully submitted by Jodi Greenstein