

## NOTICE OF PUBLIC MEETING

Notice is hereby given that a public meeting of the Brain Injury Oversight Committee will be held on September 23, 2022, from 1:00 to 3:00 PM and the meeting will be held in person only. The meeting will be held at the Nebraska Health Care Association 1200 Libra Drive, Suite 100, Lincoln. The agenda and meeting materials to be discussed by the committee can be found at <https://www.unmc.edu/aboutus/community-engagement/bioc/index.html>. If members of the public and media have further questions about the meeting, contact Jamie Stahl at (402) 559-6300 or [Jamie.stahl@unmc.edu](mailto:Jamie.stahl@unmc.edu).

The Nebraska Open Meetings Act may be accessed at <https://nebraskalegislature.gov/laws/statutes.php?statute=84-1407>.

### BRAIN INJURY OVERSIGHT COMMITTEE MEETING AGENDA

September 23rd, 2022  
1:00 PM to 3:00 PM

- I. Call to order
- II. Open Meetings Act Statement
- III. Introductions and roll call
- IV. Approval of the agenda
- V. Public Comment
- VI. Approval of Minutes of the previous meeting, July 15, 2022
- VII. Discussion and Vote on revised By-laws
- VIII. Vote on Notice of Funding Opportunity for use in Fiscal Year 2022-2023
- IX. Annual report for funds awarded to BIA-NE in May 2021, Reporting Period of July 2021 to June 2022
- X. UNMC Annual Expense Report for Brain Injury Oversight Committee Expenses July 2020 to June 2022
- XI. Next meeting February 17, 1:00-3:00 PM in person meeting

#### Upcoming Meetings:

- April 21, 2023 meeting agenda will include
  - Vote on fund recipient(s)
  - Vote on Vice-Chair and Secretary positions
- July 21, 2023 meeting agenda will include
  - Establishing timeline goals for FY 2023-24

- Manage any other housekeeping needs
- September 2023 meeting will include
  - Annual report from funding recipient

XII. Adjourn

**Brain Injury Oversight Committee Meeting**  
**July 15, 2022, 1:00 pm to 3:00 pm**  
**Nebraska Health Care Assoc., 1200 Libra Dr., Suite 100,**  
**Lincoln, NE**

**Draft MEETING MINUTES**

*Public notice of upcoming meetings will be available on the University of Nebraska Medical Center (UNMC) website <https://www.unmc.edu/aboutus/community-engagement/bioc/index.html> at least 10 days before each meeting.*

**MEMBERS PRESENT:** Tiffany Armstrong, Anna Cole, Peggy Reisher, Shir Smith, Shauna Dahlgren, Dr. Kody Moffatt, Jeff Baker, Lindy Foley, Sheri Dawson, Caryn Vincent, and Dale Johannes

**MEMBERS ABSENT:** all present

**UNMC STAFF PRESENT:** Mike Hrcirik

**CALL TO ORDER**

The meeting of the Brain Injury Oversight Committee commenced at 1:02 p.m.

**ANNOUNCEMENT OF THE AVAILABILITY OF THE OPEN MEETINGS ACT**

Public notification of this meeting was made on the UNMC website and Mike Hrcirik had copies of the open meetings act.

**INTRODUCTIONS AND ROLL CALL**

Shauna Dahlgren called on each committee member to introduce themselves.

**AGENDA APPROVAL**

The agenda was reviewed. Dr. Kody Moffatt moved to approve the agenda. Shir Smith seconded the motion, and the motion was carried out by unanimous consent.

**PUBLIC COMMENT**

No public members were present.

**APPROVAL OF PREVIOUS MEETING MINUTES**

The minutes from May 20, 2022, meeting were reviewed. A motion was made by Dr. Kody Moffatt and seconded by Shir Smith to approve the May 20, 2022, meeting minutes. There were no objections to the motion, and it was carried out by unanimous consent.

**EXECUTIVE COMMITTEE APPOINTMENTS**

The by-laws state the election of officers shall be by vote of the committee annually at its last scheduled meeting of the state fiscal year for the positions of Vice-Chair and Secretary. As an oversight, this was not done at the May meeting. Shauna led the discussion in asking for nominees for the role of Vice-Chair and Secretary. Kody and Peggy both volunteered to maintain their current role of Kody being

Vice-Chair and Peggy being Secretary. There were no other nominees. Shir made a motion for Kody to continue the role of Vice-Chair and Peggy to continue the role of Secretary. Sheri seconded the motion and it was carried out by unanimous consent.

### **DISCUSSION OF PROPOSED UPDATES TO THE BY-LAWS**

Members of the executive committee met on July 1, 2022, to review the by-laws and make proposed changes to the by-laws since the legislation change the name of the act from the Brain Injury Trust Fund Act to the Brain Injury Assistance Act. The executive committee shared with the whole committee the proposed changes and sought feedback. No concerns were voiced regarding the proposed changes. The committee members have until August 1, 2022, to suggest any other changes for the committee's consideration. If no other changes are offered by August 1, 2022, the committee will vote on the revised by-laws at the September 23, 2022, meeting.

### **DISCUSSION OF THE NOTICE OF FUNDING OPPORTUNITY (NOFO)**

Upon completion of the NOFO response period and the scoring process, the committee identified inconsistencies between the Project Narrative and the Evaluation and Performance Measurement. Committee members decided it would be easier for a workgroup to look at the NOFO in more detail and bring recommendations for changes back to the committee for approval at the Sept. 23, 2022 meeting. Those volunteering to be a part of the workgroup are Tiffany, Kody, Dale, Peggy, and Mike.

### **ESTABLISH TIMELINE GOALS FOR FY2022-23**

The committee discussed the following schedule for the FY2022-23. All meetings will be held in-person.

- September 23, 2022 meeting agenda items would include
  - Vote on revised by-laws
  - Approve changes to the NOFO
  - Annual report from funding recipient
  - UNMC annual report
- February 1, 2023 release notice of NOFO with a deadline of March 15, 2023
- February 17, 2023 meeting agenda will include
  - Bi-annual report from funding recipient
- April 21, 2023 meeting agenda will include
  - Vote on fund recipient(s)
  - Vote on Vice-Chair and Secretary positions
- July 21, 2023 meeting agenda will include
  - Establishing timeline goals for FY 2023-24
  - Manage any other housekeeping needs
- September 2023 meeting will include
  - Annual report from funding recipient

**NEXT COMMITTEE MEETINGS**

September 23, 2022 at 1:00 to 3:00 in person in Lincoln. Location yet to be determined.

**ADJOURN**

A motion was made by Peggy Reisher and seconded by Dr. Kody Moffatt with unanimous consent to adjourn the meeting at 2:15 pm.

Meeting minutes submitted by Peggy Reisher, Brain Injury Oversight Committee Secretary

## **BRAIN INJURY OVERSIGHT COMMITTEE BYLAWS**

### **ARTICLE ONE – NAME OF COMMITTEE**

The name of the committee is the Brain Injury Oversight Committee, hereinafter referred to as the committee.

### **ARTICLE TWO – AUTHORITY AND PURPOSE**

The purpose of the committee, as stated in Nebraska Revised Statute 71-3704, is to:

- Provide financial oversight and direction to the University of Nebraska Medical Center in the management of the Brain Injury Assistance Program.
- Develop criteria for expenditures from the Brain Injury Assistance Program.
- Represent the interest of individuals with a brain injury and their families through advocacy, education, training, rehabilitation, research, and prevention.

**CONTRACT PRIORITIES:** As stated in Nebraska Revised Statute 71-3705, the program shall be administered through a contract with the University of Nebraska Medical Center for administration, accounting, and budgeting purposes, and used to pay for contracts for assistance for individuals with a brain injury with outside sources that specialize in the area of brain injury. Such outside sources shall operate, at a minimum, statewide, and also in targeted areas as defined and determined in the contract, with individuals with brain injury; work to secure and develop community-based services for individuals with a brain injury; provide support groups and access to pertinent information, medical resources, and service referrals for individuals with a brain injury; and educate professionals who work with individuals with a brain injury.

**EXPENDITURE PRIORITIES:** As stated in Nebraska Revised Statute 71-3705, expenditures from the program will include, but not be limited to:

- Resource facilitation. Resource facilitation shall be given priority and made available to provide ongoing support for individuals with a brain injury and their families for coping with brain injuries. Resource facilitation may provide a linkage to existing services and increase the capacity of the state's providers of services to individuals with a brain injury by providing brain-injury-specific information, support, and resources and enhancing the usage of support commonly available in a community. Agencies providing resource facilitation shall specialize in providing services to individuals with a brain injury and their families;
- Voluntary training for service providers in the appropriate provision of services to individuals with a brain injury;
- Follow-up contact to provide information on brain injuries for individuals on the brain injury registry established in the Brain Injury Registry Act;
- Activities to promote public awareness of brain injury and prevention methods;

- Supporting research in the field of brain injury;
- Providing and monitoring quality improvement processes with standards of care among brain injury service providers; and
- Collecting data and evaluating how the needs of individuals with a brain injury and their families are being met in this state.

### ARTICLE THREE - APPOINTMENT AND MEMBERSHIP

The committee shall be appointed by the Governor of Nebraska and comprised of nine public members and the following directors, or their designees: The Commissioner of Education, the Director of the Division of Behavioral Health of the Dept. of Health and Human Services, and the Director of Public Health of the Dept. of Health and Human Services. The Governor shall appoint the nine public members which shall include individuals with a brain injury or family members of individuals with brain injury, a representative of a public or private health-related organization, a representative of a developmental disability advisory or planning group within Nebraska, a representative of service providers for individuals with a brain injury, and a representative of a nonprofit brain injury advocacy organization. At least one member of the committee shall be appointed from each congressional district.

CONFLICTS OF INTEREST: The Chairperson shall cause members to report any known potential conflicts of interest in written statements kept and monitored by the Secretary. Additionally, when a vote arises before the committee that presents a real or perceived conflict of interest, this conflict will be identified, and the Chairperson shall decide whether the member may participate in the vote and/or need to report it to the Secretary of State to complete the necessary documentation. In the case that the Chairperson has a conflict of interest, he/she will report that to the Vice-Chairperson, and the Vice-Chairperson shall decide whether the member may participate in the vote. In all cases, the public good is the highest concern for the Committee.

RESIGNATION: A member may resign by providing a written statement to the Chairperson and the Governor's office.

### ARTICLE FOUR – LENGTH OF TERM

The Governor shall designate the initial terms so that three members serve one-year terms, three members serve two-year terms, and three members serve three-year terms. Their successors shall be appointed for four-year terms. Any vacancy shall be filled from the same category for the remainder of the unexpired term. Through 2024, any member of the committee shall be eligible for reappointment. After 2024, members will serve four-year terms, not to exceed three consecutive terms. UNMC will track committee member terms, communicate with the committee member when their term is up, and confirm whether the member wants to seek reappointment if they are eligible for reappointment. The member needs to reapply through the Governor's office.

## ARTICLE FIVE – VOTING

**QUORUM:** Quorum for in person or virtual meetings will follow the practices set forth by the Nebraska Open Meetings Act as outlined in Neb. Rev. Stat. §84-1407 to §84-1414.

In the absence of a quorum, the Executive Committee may take only necessary actions.

**VOTING:** Issues coming before the committee to be voted upon shall be determined by a simple majority of the members present. Voting by proxy is not allowed.

## ARTICLE SIX – MEETINGS

**OPEN MEETINGS ACT:** The Brain Injury Oversight Committee is subject to the Nebraska Open Meetings Act as outlined in Neb. Rev. Stat. §84-1407 to §84-1414.

**FREQUENCY:** The committee shall meet at least four times each calendar year and at any other time as the business of the committee requires. The committee meeting shall take place as determined by the chairperson.

**NOTICE:** Notice shall be provided to the committee and the general public at least 10 days prior to the scheduled meeting. Public notice of meetings shall be posted publicly. Notices of meetings shall include the proposed agenda. The contents of the agenda shall comply with the Open Meetings Act. Supporting materials to the meeting will be sent electronically to members and available to the general public upon request to UNMC.

**CONDUCT:** Meetings shall be conducted in compliance with the Nebraska Open Meetings Act. At least one copy of all reproducible material to be discussed at a meeting shall be available to the public at the meeting. The most recent edition of Roberts Rules of Order shall govern the meeting process.

**ATTENDANCE:** Any committee member who is absent from either three consecutive meetings or five regular meetings of the committee during any twelve-month period may be asked by the executive committee to submit the reason for such absences in writing. Such reasons shall be reviewed by the committee at its next regular meeting to determine, at its sole discretion, whether this member shall remain on the committee.

**MINUTES:** Minutes of meetings shall conform to the requirements of the Open Meetings Act and shall be published on the UNMC website. Minutes will be taken by the Committee Secretary or his/her appointee if he/she is not available.

**EXPENSES:** Members may be reimbursed for their actual and necessary expenses incurred in order to attend or participate in committee meetings, activities, or events as allowed by Nebraska statute in sections 81-1174 to 81-1177.

## ARTICLE SEVEN – WORKGROUPS



The Chairperson may appoint or otherwise establish ad-hoc and permanent workgroups from the committee to accomplish specific tasks or purposes. Non-members may be added to committees other than the Executive Committee when specialized expertise is needed.

#### ARTICLE EIGHT – OFFICERS

**SELECTION:** The Committee shall select a Chairperson, a Vice-Chairperson, and a Secretary, which will serve as the Executive Committee. The Chairperson shall hold office for a three-year term, with the option of holding that office for two terms. The Vice-Chairperson and Secretary positions will not have term limits. Officers shall be nominated from the non-Departmental members roster.

**DUTIES:** The duties of the officers shall be:

- The Chairperson shall preside at all committee and officer meetings, and perform other duties designated by the committee. The Chairperson shall represent the Committee in working with the University of Nebraska Medical Center.
- The Vice-Chairperson shall act for the Chairperson in his/her absence and perform other duties designated by the committee.
- The Secretary shall act for the Chairperson in absence of the Vice-Chairperson; record and report the minutes of the meeting, attest to the accuracy and completeness of the official records of the committee, and perform other duties designated by the committee.

**TERM:** Election of officers shall be by vote of the committee annually at its last scheduled meeting of the state fiscal year for the positions of Vice-Chair and Secretary and every three years for the Chairperson position. In case of a vacancy in an office, voting for that position shall be held by the second meeting of the position's vacancy.

#### ARTICLE NINE – EXECUTIVE COMMITTEE MEETINGS

**EXECUTIVE COMMITTEE MEETING:** The officers shall be comprised of the Chairperson, Vice-Chairperson, and Secretary.

**DUTIES:** The officers shall approve proposed agendas for meetings of the committee; may act on matters of immediate necessity or urgency when convening the committee is not feasible; and perform other actions designated by the committee.

#### ARTICLE TEN – REPORTS

**RECORDS:** UNMC shall maintain program records as required by the Records Management Act.

**ANNUAL REPORT:** An annual report will be generated within four months of the end of the UNMC business year and posted to the UNMC website.

DATA COLLECTION BURDEN: Data collection and evaluation shall not be a burden or unnecessary hardship to individuals with a brain injury or service providers.

PERSONNEL: The committee anticipates having no staff other than contracted services from UNMC.

ARTICLE ELEVEN – ADOPTION

AMENDMENTS: The committee shall review these bylaws at least every three years. Proposed amendments shall be distributed to committee members not less than thirty days prior to the meeting at which a vote on any proposal is scheduled. An affirmative vote of two-thirds of appointed committee members shall be required to approve or amend these bylaws.

ADOPTION: These bylaws were originally adopted at the meeting of the Brain Injury Oversight Committee held on the day of February 25, 2021.

The amended bylaws were reviewed and voted on during the Sept. 23, 2022, meeting.

\_\_\_\_\_  
Chairperson

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Vice-Chairperson

**Brain Injury Oversight Committee (BIOC)  
Notice of Funding Opportunity (NOFO)**

**Deadline: March 15, 2023**

The Brain Injury Oversight Committee is pleased to announce an opportunity of support funding provided by the state of Nebraska and the Nebraska Department of Health and Human Services. The committee has \$450,000 available to meet the statutory objective of assisting the community of individuals living with a brain injury. Award funding will be for project(s) starting on or after July 1, 2023, and up to one year long. Only projects that achieve the funding objectives of the committee and Nebraska statute will be considered.

To learn more about the Brain Injury Oversight Committee, please visit our [website](#). If you have any questions email [BIOC.applications@nebraska.gov](mailto:BIOC.applications@nebraska.gov).

## **Purpose and Intent**

The Brain Injury Oversight Committee (BIOC) consists of nine public members, including individuals with brain injury or family members and other representatives, each of whom are appointed by the governor, and the following directors, or their designees: The Commissioner of Education; the Director of Behavioral Health of the Department of Health and Human Services; and the Director of Public Health of the Department of Health and Human Services. The Brain Injury Oversight Committee was created by LB481 in 2019. Sections 71-3701 to 71-3706 of the Nebraska Revised Statutes are the Brain Injury Assistance Act.

The purpose of the committee, as stated in Nebraska Revised Statute 71-3704, is to:

- Provide financial oversight and direction to the University of Nebraska Medical Center in the management of the Brain Injury Assistance Act.
- Develop criteria for expenditures from the Brain Injury Assistance Act.
- Represent the interest of individuals with a brain injury and their families through advocacy, education, training, rehabilitation, research, and prevention.

## **Funding and Expenditure Priorities**

As stated in Nebraska Revised Statute 71-3705 (2)(a)

The program shall provide assistance for individuals with a brain injury by paying for contracts with outside sources that specialize in the area of brain injury. Such outside sources shall work to secure and develop community-based services for individuals with a brain injury; provide support groups and access to pertinent information, medical resources, and service referrals for individuals with a brain injury; and educate professionals who work with individuals with a brain injury.

As stated in Nebraska Revised Statute 71-3705, (2)(b) Expenditures from the program will include, but not be limited to:

- Resource facilitation. Resource facilitation shall be given priority and made available to provide ongoing support for individuals with a brain injury and their families for coping with brain injuries. Resource facilitation may provide a linkage to existing services and increase the capacity of the state's providers of services to individuals with a brain injury by providing brain-injury-specific information, support, and resources and enhancing the usage of support commonly available in a community. Agencies providing resource facilitation shall specialize in providing services to individuals with a brain injury and their families.
- Voluntary training for service providers in the appropriate provision of services to individuals with a brain injury.
- Follow-up contact to provide information on brain injuries for individuals on the brain injury registry established in the Brain Injury Registry Act.
- Activities to promote public awareness of brain injury and prevention methods.
- Supporting research in the field of brain injury.
- Providing and monitoring quality improvement processes with standards of care among brain injury service providers; and
- Collecting data and evaluating how the needs of individuals with a brain injury and their families are being met in this state.

## **Award Information:**

**Funding Instrument Type:** Grant

**BIOC Allocation Period:** July 1<sup>st</sup> 2022 – June 30<sup>th</sup> 2023, Fiscal Year 2023

**Total Funding:** \$450,000

**Funding Source:** State of Nebraska, Not Federally Funded

**Estimated Number of Awards:** 1 or more, with a maximum award amount of \$450,000 depending on the number of awards made.

**Estimated Award Date:** April 21<sup>st</sup>, 2023

**Award Period of Performance:** July 1<sup>st</sup> 2023 – June 30<sup>th</sup> 2024, Fiscal Year 2024

## **Application Guidelines/Process:**

### **Eligibility**

As stated in Nebraska Revised Statute 71-3705, (2)(a)

Outside sources shall operate, at a minimum, statewide, and in targeted areas as defined and determined in the contract, with individuals with brain injury; work to secure and develop community-based services for individuals with a brain injury; provide support groups and access to pertinent information, medical resources, and service referrals to individuals with a brain injury; and educate professionals who work with individuals with a brain injury.

# Submission Requirements for Applicants

## Application Deadline

Applications will be accepted through 11:59 pm Central Time on March 15<sup>th</sup>, 2023. If the application is not submitted before the deadline, it will not be reviewed.

## Submission Method

Applications will be sent to: [BIOC.Applications@nebraska.gov](mailto:BIOC.Applications@nebraska.gov) Paper applications will not be accepted. Applications must be submitted in an electronic format. Acceptable file types are spreadsheets (for budget forms), word processing files for narratives, and PDF files may be substituted for spreadsheets or word processing files. It is preferred that the application be submitted as a single document.

## Submission Requirement

The proposal must be signed by an authorized official for the proposing entity.

- **Application Font and Spacing**
  - Arial size 11, single spaced, .5-inch margins
- **Project Contacts**
  - Project Coordinator/Director: Provide names and contact information of responsible parties of the project.
- **Additional Attachments Required**
  - Letters of Support: 2-4 letters as it relates to the ability to handle the project description or work plan
  - A copy of the Tax form 990 from the most recently completed year (if applicable)
  - A copy of the company's financial statements from the most recently completed year (if applicable)
  - Board approved organizational budget for current year

## Budget Summary Template

<i>Budget Summary Template – BIOC Application</i>		
<i>PERSONNEL SUMMARY</i>		
POSITION TITLE	ROLE ON PROJECT	SALARIES & WAGES + FRINGE BENEFITS
		\$
		\$
		\$
<b>TOTAL SALARIES &amp; WAGES + FRINGE BENEFITS</b>		<b>\$</b>
<i>OPERATING AND SUPPLIES COSTS</i>		
CONTRACTED SERVICES		\$
SUPPLIES		\$
TRAVEL		\$
OTHER EXPENSES (itemize by category)		\$
<b>TOTAL OPERATING AND SUPPLIES COSTS</b>		<b>\$</b>
<b>TOTAL COSTS</b>		<b>\$</b>

## Evaluation Process

Applications will be reviewed in three phases.

- Phase I: All applications will be initially reviewed for eligibility and completeness by the executive committee members (the Chairperson, Vice Chairperson and Secretary). Applicants will be notified if their applications did not meet eligibility and/or published submission requirements.
- Phase II: A workgroup (of 3 to 6 committee members) will score applications based on the criteria/scoring system described within this notice.
- Phase III: Committee Discussion/Vote on Awarding Funds at a Committee meeting.

## Application Evaluation and Performance Measurements

**Evaluation and Performance Measurement**

**Maximum Points for Application: 100**

Committee members will evaluate the applications based on the following criteria:

**Project, Summary, Description and Work Plan** (limited to 6 pages)

Maximum Points: 60

- Provide brief statement (3-4 sentences) that clearly states the project goal (2 points)
- Describe the needs being met and how these relate to the Brain Injury Assistance Act priorities (13 Points)
- Define how the project will focus on resource facilitation as described in the Brain Injury Assistance Act (15 points)
- Describe how the project will meet broad, long-term objectives and specific aims (10 Points)
- Describe the potential long-term community impact (10 Points)
- Explain what data will be collected – include description of reports/outputs (10 Points)

**Budget Summary**

Maximum Points: 5

- Budget Justification Narrative - explain the need and uses of the requested funding (*The funding from BIOC will not be used to purchase capital equipment or other capital purchases.*)
- Provide a project budget for requested funds (a sample template is available as part of this notice.)

**Qualifications**

Maximum Points: 20

- Organization’s history and capacity to take on the project (10 Points)
- What sets you apart from other organizations (5 Points)
- Attach job descriptions for key positions. If individuals are already hired for the key positions, attached their resumes or CV (5 Points)

**Coordination and Collaboration**

Maximum Points: 15

- Description of community involvement - document the strength of relationships with other agencies to achieve common goals and priorities of the BIOC (limited to one page) (15 Points)

**Expectations of Awardees**

- Awardees will agree to the terms and conditions of the Award Agreement including:
  - Applicants are responsible for reporting if this application will result in programmatic, budgetary, or commitment overlap with another application or award submitted to another funding source. Overlap occurs when substantially the same project is proposed in more than one application or is submitted to two or more funding sources for review and funding consideration or a specific objective and the project design for accomplishing the objective are the same or closely related in two or more applications or awards, regardless of the funding source. Any overlap will be resolved by the BIOC with the applicant prior to award.
  - Semi-annual reports made in writing and in person to the BIOC stating progress, challenges and future plans.
  - Any substantial deviations from the proposed project will be communicated to the committee and must be approved prior to implementation.
  - The Award Agreement will incorporate the Notice of Funding Opportunity and the proposal as submitted for reference.

- Funds should be expended within one year of the award date. Unspent funds exceeding 15% of the original award will need to be reported to the committee. The committee may approve no cost extensions of expenditures upon request.



## Brain Injury Oversight Committee (BIOC) Application Review Form

Project Title: \_\_\_\_\_

Applicant Organization: \_\_\_\_\_

Reviewer (Committee Member Name): \_\_\_\_\_

Date: \_\_\_\_\_

Committee members will provide a score (based on the below criteria) to reflect their assessment of the application for funding.

**Application Total Score:** \_\_\_\_\_ (Maximum Points for Application: 100)

**Reviewer Score**

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### **Project Description and Work Plan** (Maximum Points: 60)

- Provide brief statement (3-4 sentences) that clearly states the project goal (2 points)
- Describe the needs being met and how these relate to the Brain Injury Assistance Act priorities (13 Points)
- Define how the project will focus on resource facilitation as described in the Brain Injury Assistance Act (15 points)
- Describe how the project will meet broad, long-term objectives and specific aims (10 Points)
- Describe the potential long-term community impact (10 Points)
- Explain what data will be collected – include description of reports/outputs (10 Points)

**Total Project Description and Work Plan Points**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Budget Summary** (Maximum Points: 5)

- Budget Justification Narrative – explain the need of the requested funding and attach project budget (5 Points)

**Total Budget Summary Points**

\_\_\_\_\_

\_\_\_\_\_

### **Qualifications** (Maximum Points: 20)

- Organization's history and capacity to take on the project (10 Points)
- What sets them apart from other organizations (5 Points)
- Key job descriptions and attached resumes/CV (5 Points)

**Total Qualifications Points**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Coordination and Collaboration** (Maximum Points: 15)

- Description of community involvement relationships with other agencies to achieve common goals and priorities of the BIOC (15 Points)

**Total Coordination and Collaboration Points**

\_\_\_\_\_

\_\_\_\_\_

# Brain Injury Trust Fund Report

July 2021 – June 2022



# BACKGROUND

Legislative Bill 481 adopted the Brain Injury Trust Fund Act, which created a fund with seven expenditure priorities. The Brain Injury Alliance (BIA-NE) of Nebraska was awarded the funding during the first year. This report summarizes progress within each of the seven priority expenditures, which are outlined below.

## PRIORITY 1

Resource facilitation shall be given priority and made available to provide ongoing support for individuals with a brain injury and their families for coping with brain injuries. Resource facilitation may provide a linkage to existing services and increase the capacity of the state's providers of services to individuals with a brain injury by providing brain-injury-specific information, support, and resources and enhancing the usage of support commonly available in a community. Agencies providing resource facilitation shall specialize in providing services to individuals with a brain injury and their families.

## PRIORITY 2

Voluntary training for service providers in the appropriate provision of services to individuals with a brain injury

## PRIORITY 3

Follow-up contact to provide information on brain injuries for individuals on the brain injury registry established in the Brain Injury Registry Act

## PRIORITY 4

Activities to promote public awareness of brain injury and prevention methods

## PRIORITY 5

Supporting research in the field of brain injury

## PRIORITY 6

Providing and monitoring quality improvement processes with standards of care among brain injury service providers

## PRIORITY 7

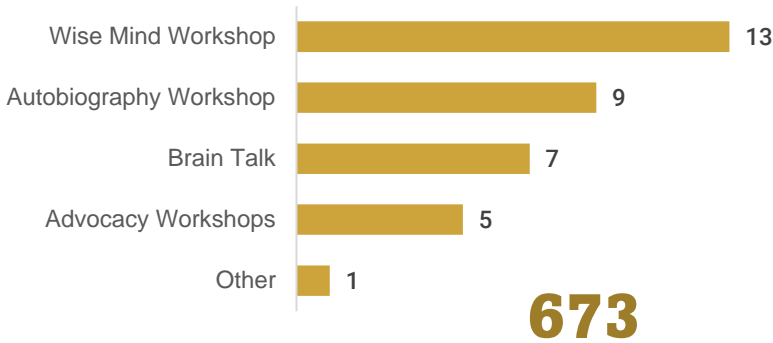
Collecting data and evaluating how the needs of individuals with a brain injury and their families are being met in this state

NOTE: See the Resource Facilitation Data report for more comprehensive summary of clients served by the BIA-NE through Resource Facilitation

# PRIORITY 1

## Resource Facilitation

BIA-NE helped facilitate at least 35 workshop sessions for people with brain injury



**673**

People attended the 35 workshop sessions

Through the Trust Fund dollars, BIA-NE increased its Resource Facilitation staffing from

**1.5 FTE to 5 FTE**



Roughly 500 existing clients were identified to receive a check-in call from a Resource Facilitator. This allowed 1) new staff to introduce themselves to BIA-NE clients in their areas and 2) identify whether the client had any needs or questions that the Resource Facilitator could address.

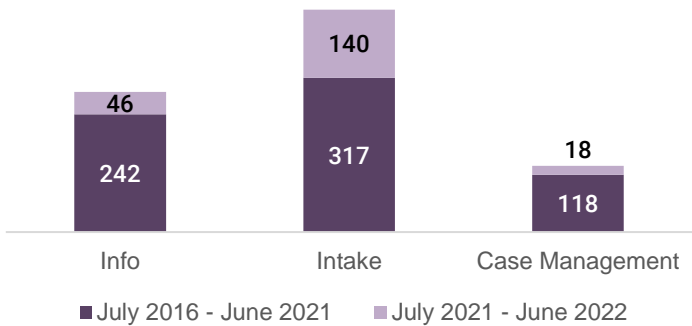


Some clients did need support, which highlights the importance of client follow-up calls (rather than waiting for clients to reach out)

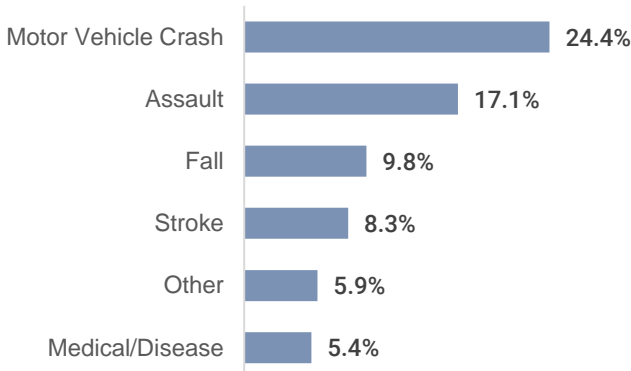


Contacting more clients can be more time-consuming and harder to prioritize; often increase the case load for each Resource Facilitator

Intake is the most common level of Resource Facilitation provided, accounting for 47% of the clients prior to July 2021 and 69% of the new clients seen after June 2021



Six types of injury make up 70% of the causes of injury for new clients served between July 2021 and June 2022 (n=205)



# PRIORITY 2

## Training for Service Providers

**68**

Events offered to professionals

**1,753**

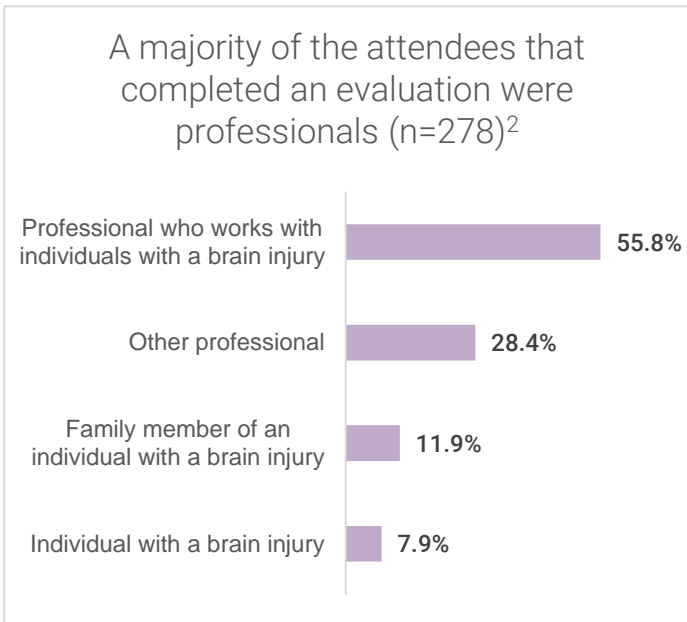
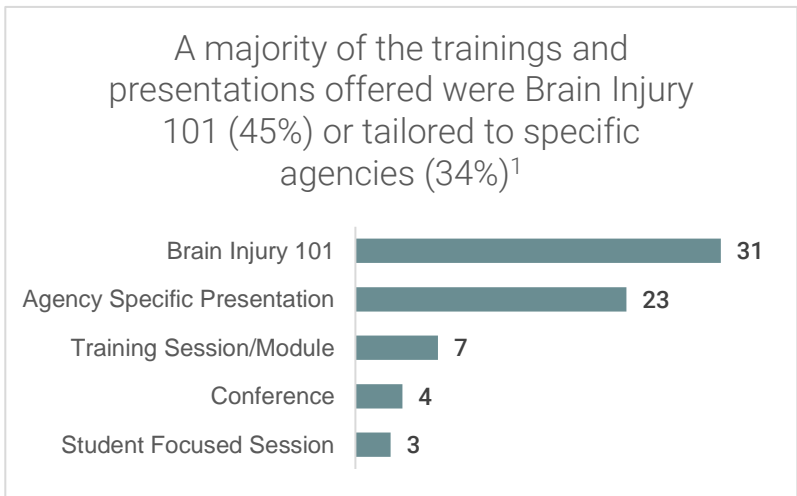
Attendees reached (average of 26 per event)

**60**

Minutes was the average length of events

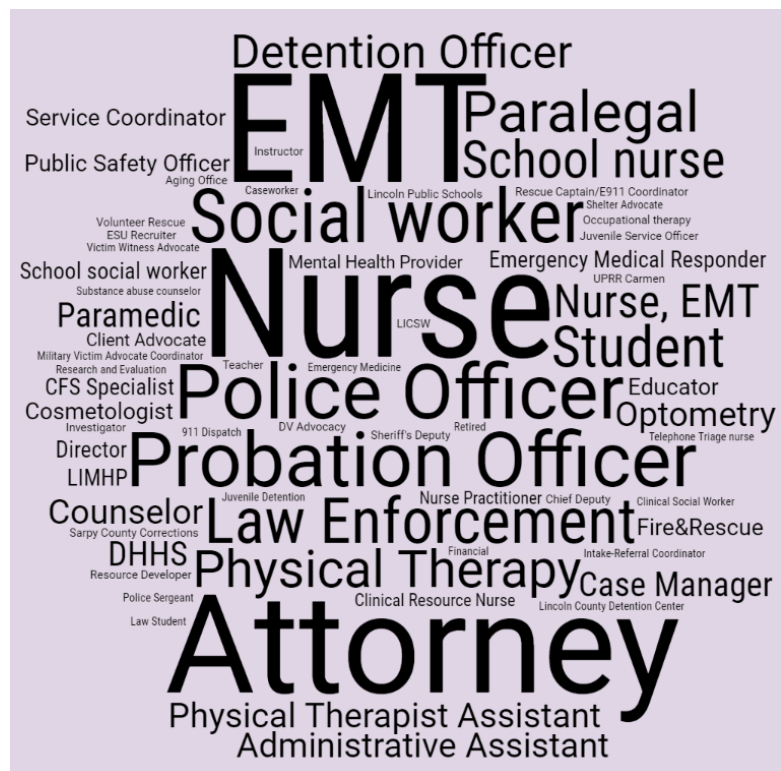
**254**

Surveys were completed from 37 events



### Attendees who completed evaluations reflected 35 NE Counties

Nurses, police officers, EMT and probation officers were the most noted professions on the evaluation forms (n=251)



*I especially appreciated the tips about working with people who have brain injuries, and how we might make that easier for clients and our staff.*

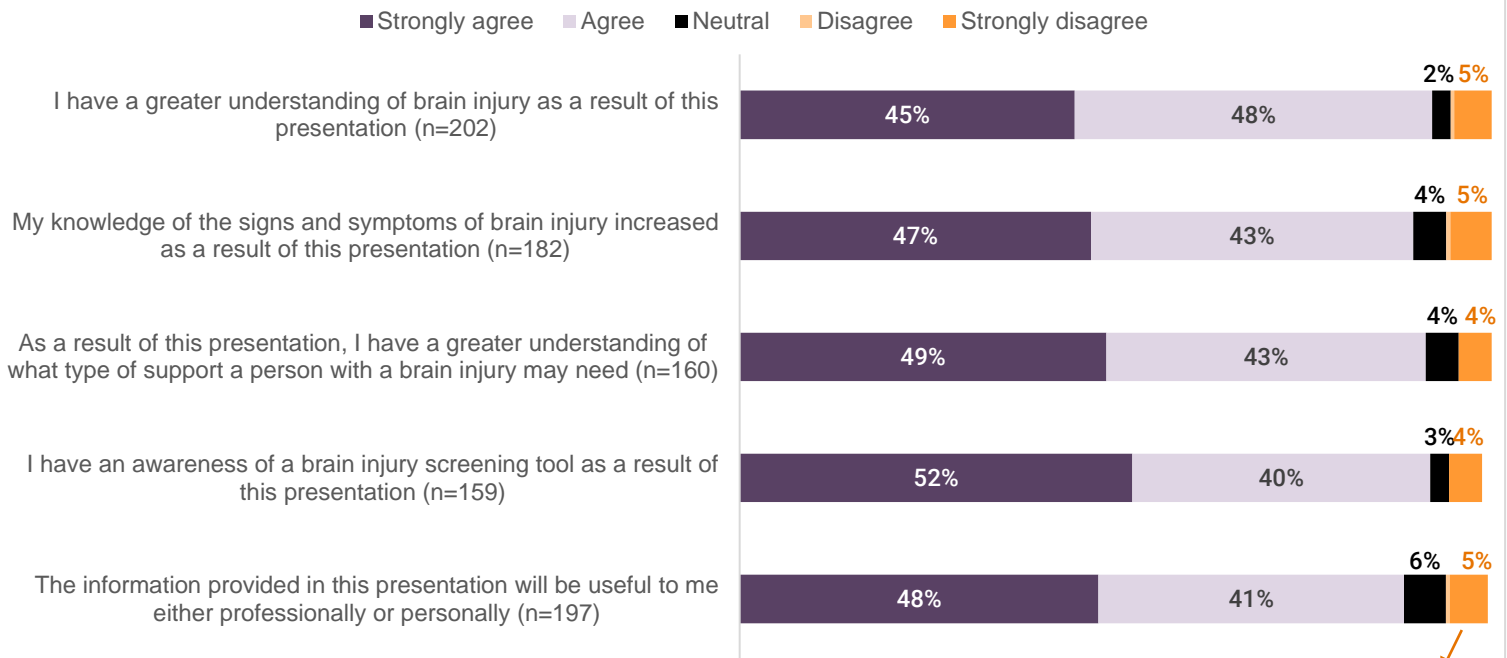
*I find it was very interesting with how much this could pertain to mental health and success.*



<sup>1</sup> Agency specific presentations are sessions that are developed and/or presented to one organizations, such as an Area Agency on Aging or police department.

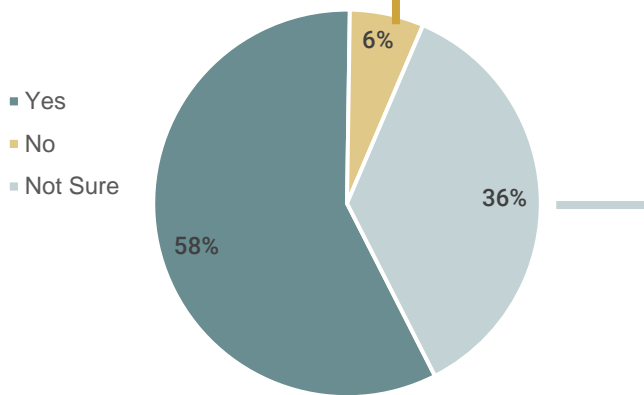
<sup>2</sup> A respondent could select more than one response option. That was the case for 40 individuals.

Nearly 90% of evaluation respondents agreed or strongly agreed with all the statements related to knowledge and awareness



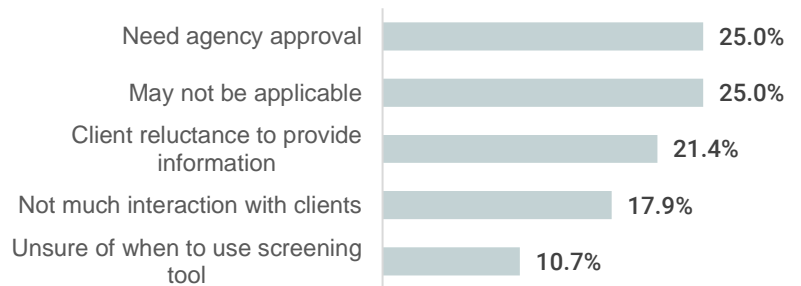
Nearly all the "strongly disagree" responses were from individuals who had positive open-ended feedback, indicating these may be incorrectly marked

Will you have the opportunity to use a brain injury screening tool with individuals with whom you work/serve?



A majority of those who responded "no" stated that it was because they do not work directly with clients

There were five common reasons people noted for why they were not sure if they would use the screening tool (n=28)



*I really enjoyed the story of George and seeing the difference in his life both in the decline from his injury, and with the appropriate therapy to see the progression. Really brought it all to light with the info in the first half. I didn't realize that most mild TBIs couldn't be seen on a scan. As an EMT we don't always get to hear how our patients turn out after we are gone so it definitely helps me be more aware*



# PRIORITY 3

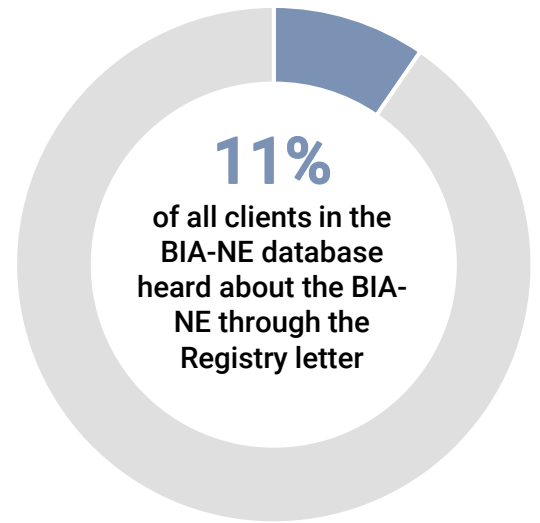
## Brain Injury Registry Letter Follow-up

# 1,716

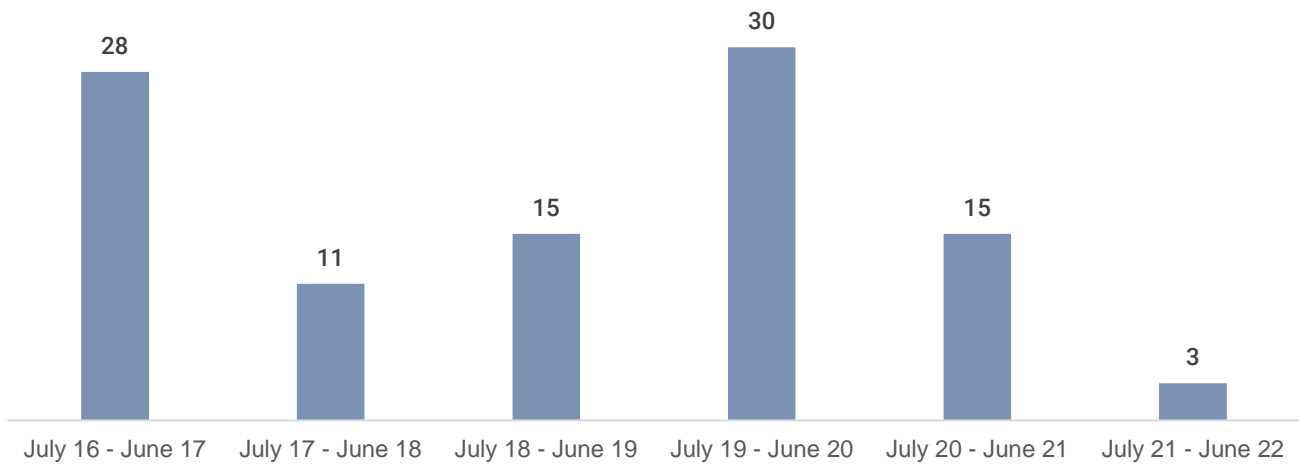
letters were sent to individuals on the Brain Injury Registry in the spring of 2022



Fewer letters were sent out during the Trust Fund year than normal due to delays with the Department of Health and Human Services obtaining data for the TBI Registry. The 2020 TBI Registry report noted that the average number of TBI cases per year between 2015 and 2019 was 13,850.



BIA-NE was mostly likely to have new clients report they contacted them due to the Registry Letter from July 2016 - June 2017 and July 2019 - June 2020 (n=102)<sup>3</sup>



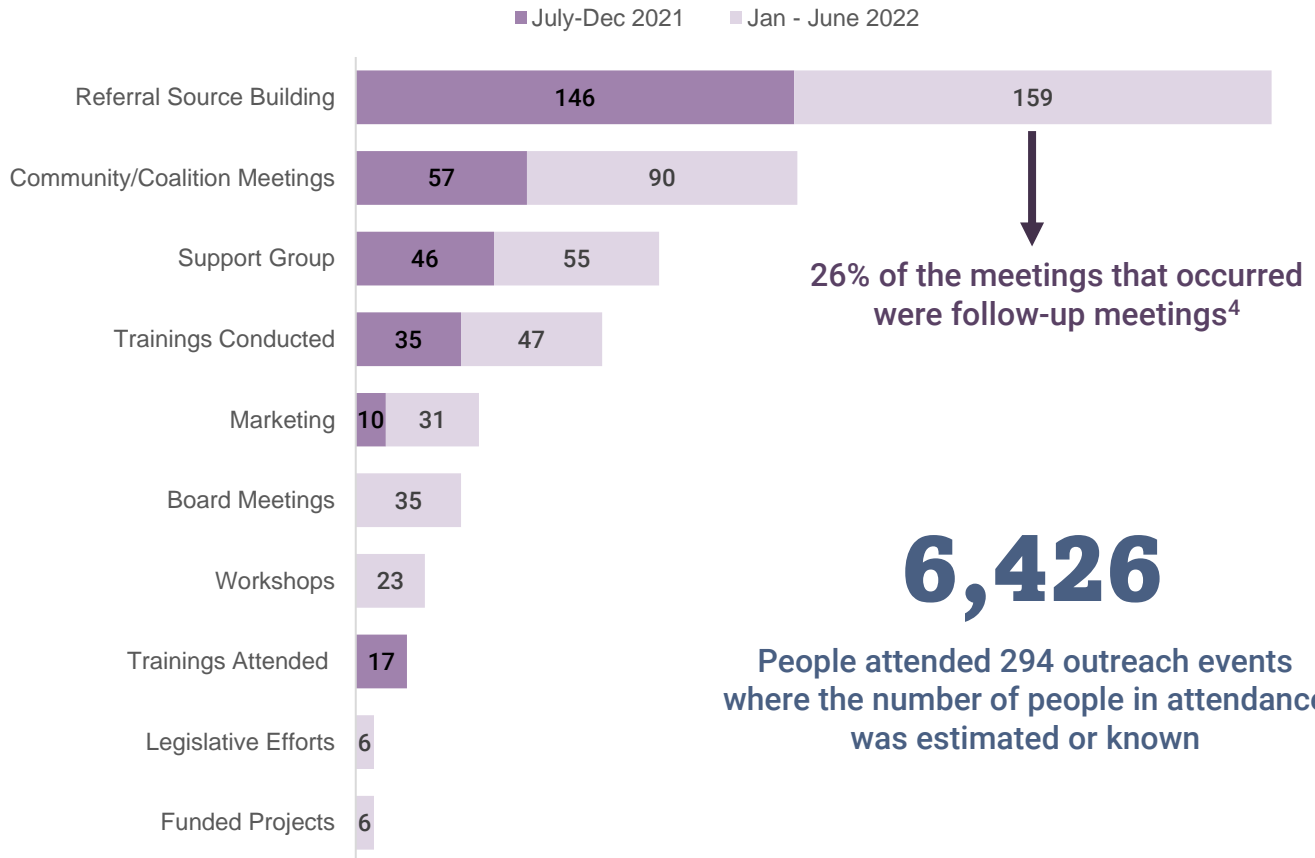
Reflects 1.5% of the new clients served during the Trust Fund year

<sup>3</sup> There are 30 response options for Resource Facilitators to denote regarding how the client heard about BIA-NE. Only one response option can be selected, so it is possible more individuals heard about the BIA-NE through the Registry letter.

# PRIORITY 4

## Public Awareness

Nearly 40% of the outreach done by BIA-NE staff were with organizations that could refer individuals to Resource Facilitation services (n=763)

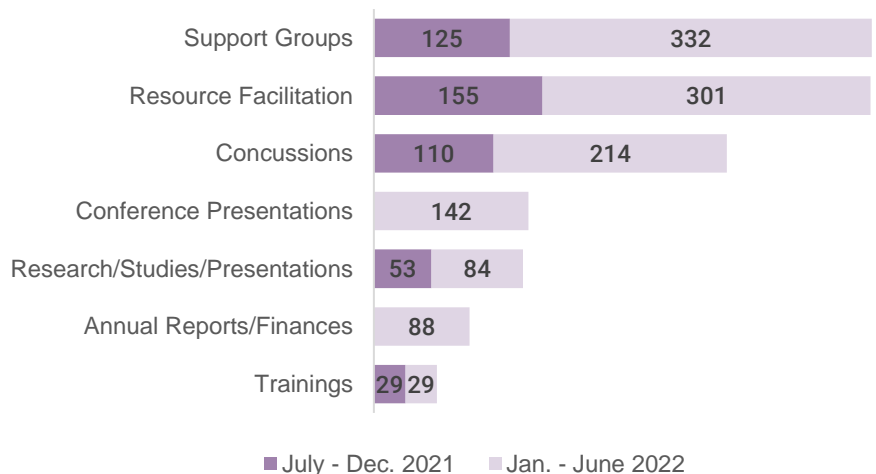


# 6,426

People attended 294 outreach events where the number of people in attendance was estimated or known



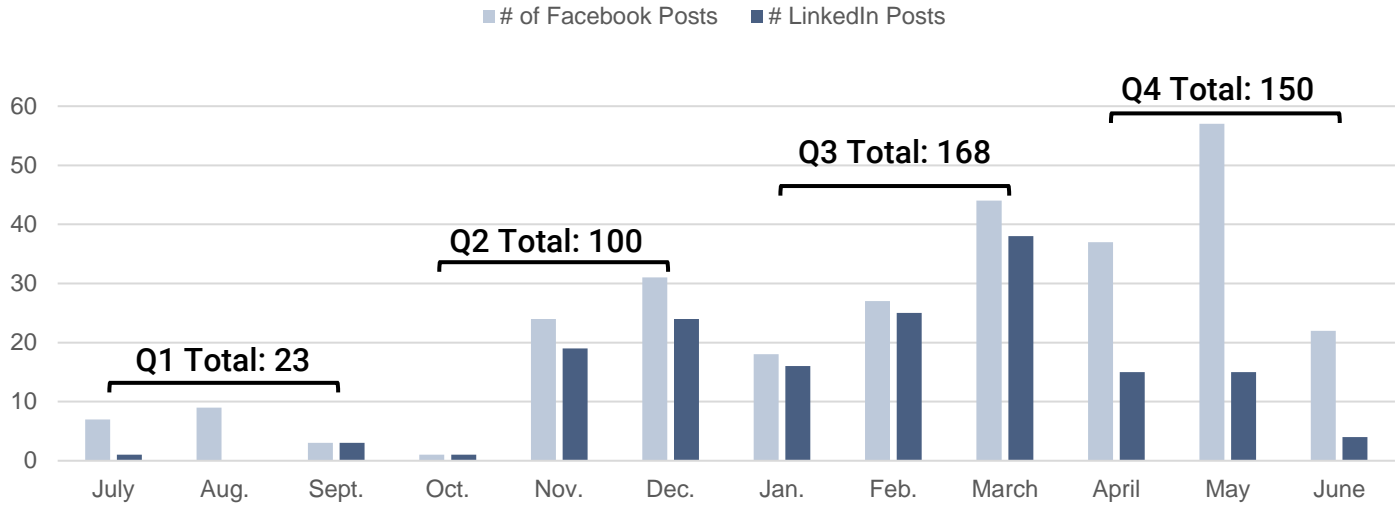
There was an increase in downloads from the BIA-NE website in the second half of the Trust Fund year, particularly for Support Groups



<sup>4</sup> A question was added to the community outreach tool in January 2022 for staff to denote whether the meeting was an initial or follow-up meeting with a potential referring entity



BIA-NE's social media presence grew throughout the Trust Fund year, with a total of 280 Facebook posts and 161 LinkedIn posts



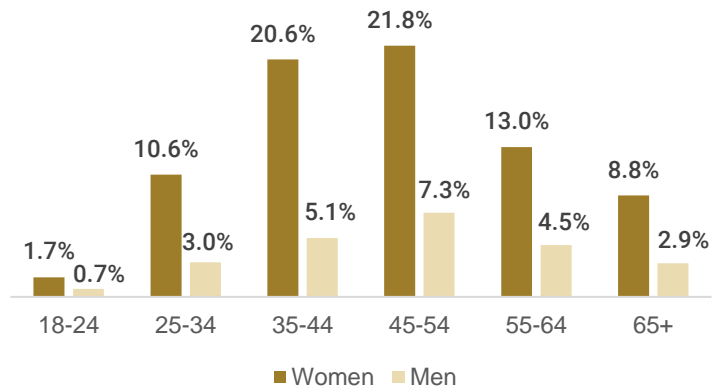
On average, the most common topics posted about on social media were for the annual conference and Blazing Trails



LinkedIn (161 posts)	Total	Avg. Per Post
Impressions	24,961	155
Likes	82	0.5
Shares	55	0.3

Facebook	Total	Avg. Per Post
Impressions (280 posts)	194,100	693
Likes (192 posts)	1170	6
Shares (178 posts)	178	1

Those who follow the BIA-NE's Facebook page are more likely to be women and between the ages of 35 and 54 (n=2,078)



\* The "other" responses capture topics that only have one or two post related to that topic, such as a public meeting notice or sponsorship thank you.

# PRIORITY 5

## Supporting Research



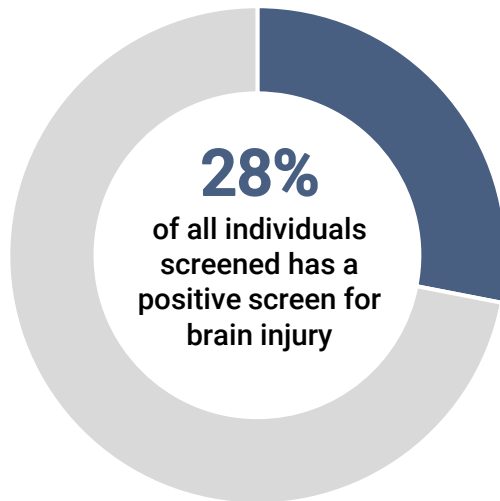
BIA-NA is collaborating with Dr. Kathy Chiou at the University of Nebraska – Lincoln. Dr. Chiou received IRB-approval to collect screening data, with the goal of studying the outcomes and prevalence rates to publish the findings.

### AGENCIES SCREENING

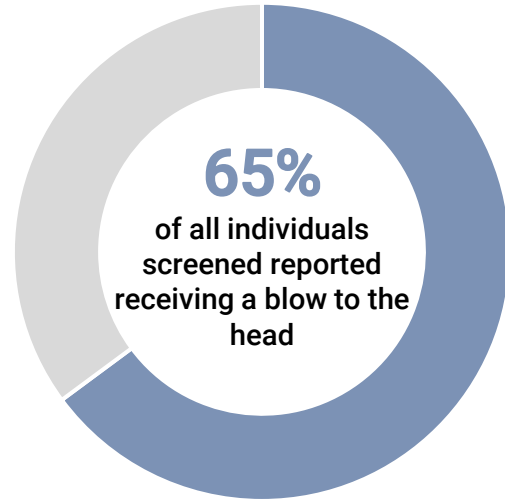
1. CEDARS
2. Family Services in North Platte
3. Friendship Home
4. Kearney YRTC
5. Lincoln/Lancaster County Youth Diversion Program
6. Lincoln Public Schools Pathways Program at Lancaster Youth Detention Center
7. Nebraska Mental Health Association
8. Sarpy County Jail
9. Sarpy County Juvenile
10. Scottsbluff Aging & Disability Resource Center (ADRC)
11. Scottsbluff Youth Diversion Program
12. South Central NE Area Agency on Aging

# 777

Individuals were screened for brain injury at 11 agencies between July 2021 and June 2022

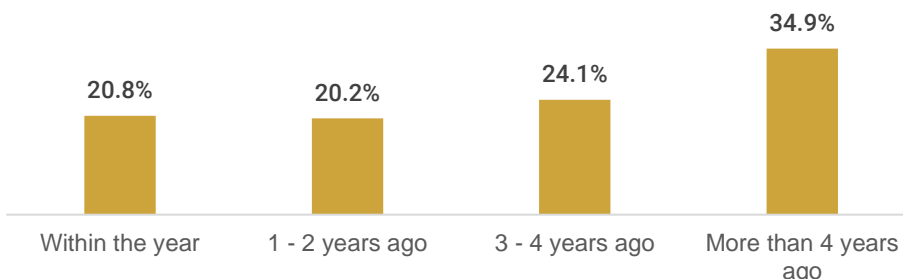


The lowest percent of positive screens at an agency was 6% while the highest was 59%. The average per agency was 30%.



The lowest percent of people receiving a blow to the head was 22% while the highest was 95%. The average per agency was 67%.

More than half the individuals who noted a length of time since their injury experienced it more than 3 years ago (n=361)



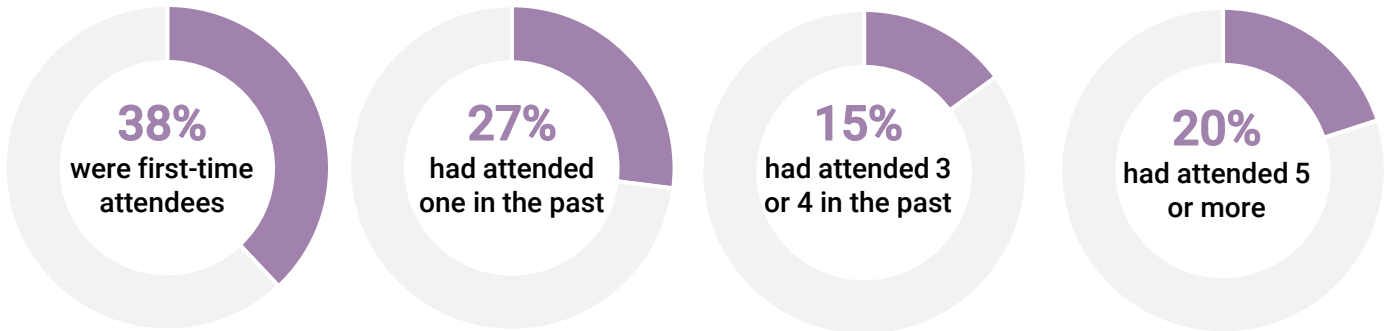
# 65%

of those with a positive screen reported receiving medical attention

# PRIORITY 6

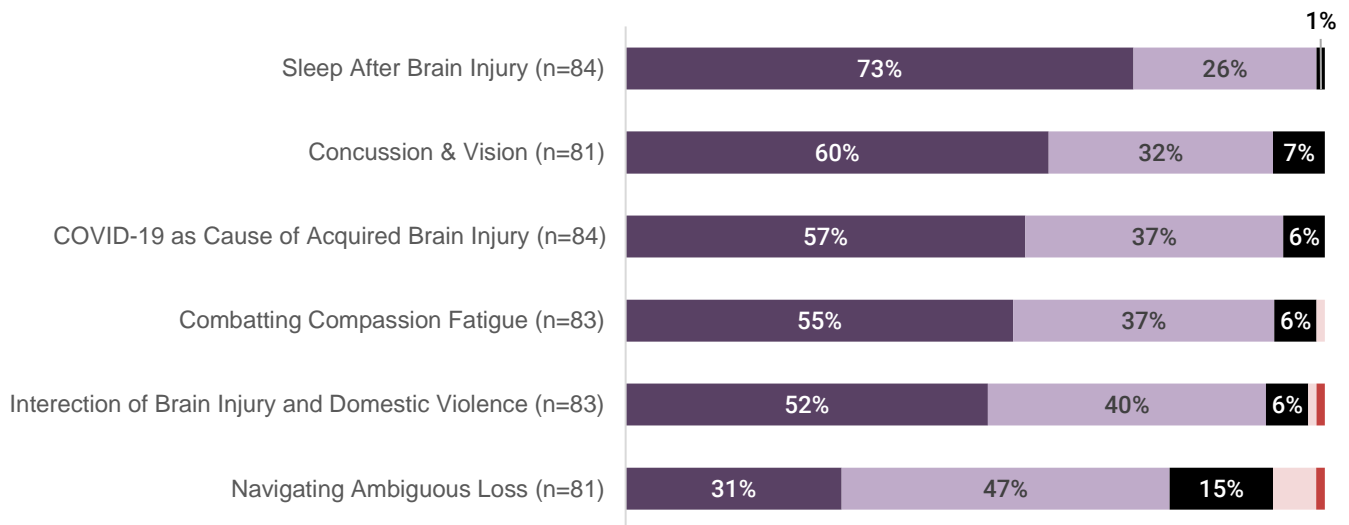
## Quality Improvement & Standards of Care

**138** Individuals registered for BIA's annual conference



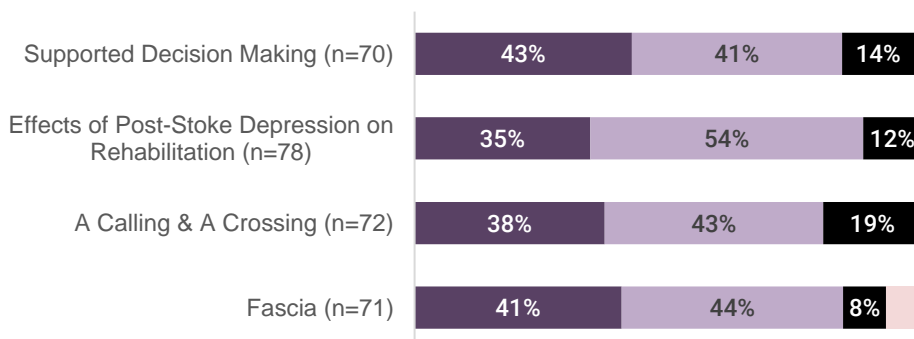
Very few people who completed the evaluation were unsatisfied with the six plenary sessions offered at the conference

■ Very satisfied ■ Satisfied ■ Neutral ■ Unsatisfied ■ Very unsatisfied



A majority were satisfied with the four professional sessions offered at the conference

■ Very satisfied ■ Satisfied ■ Neutral ■ Unsatisfied ■ Very unsatisfied



*I enjoyed most of the topics this year. They were all interesting to me and I felt like I learned a lot, and I had some take aways that I will begin to use in my everyday practice.*



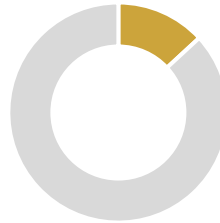
# PRIORITY 7

## Evaluating Needs

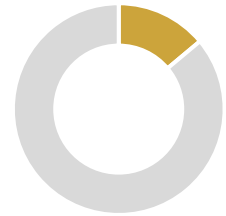
*Staff are very personal and do a terrific job with responding and following up even when I didn't just ensure everything is okay or to ask if there was more they could do. That level of care did not go unnoticed. Thanks you all BIA-NE staff who help me and my mom.*



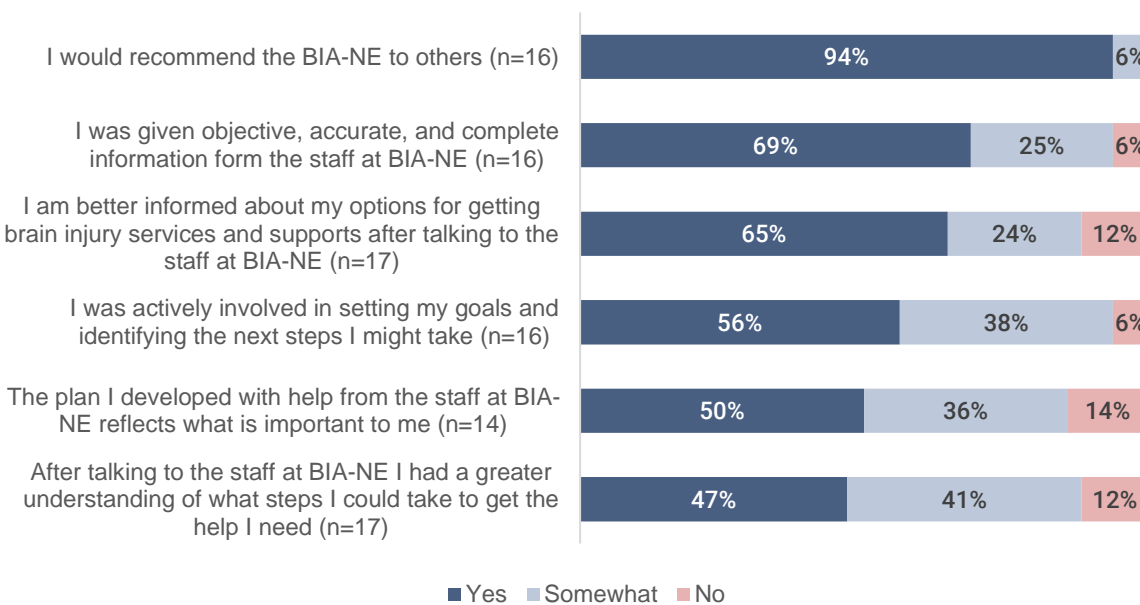
About 15% of the recipients completed the client satisfaction survey in October 2021 (n=119)



About 16% of the recipients completed the client satisfaction survey in May 2022 (n=68)



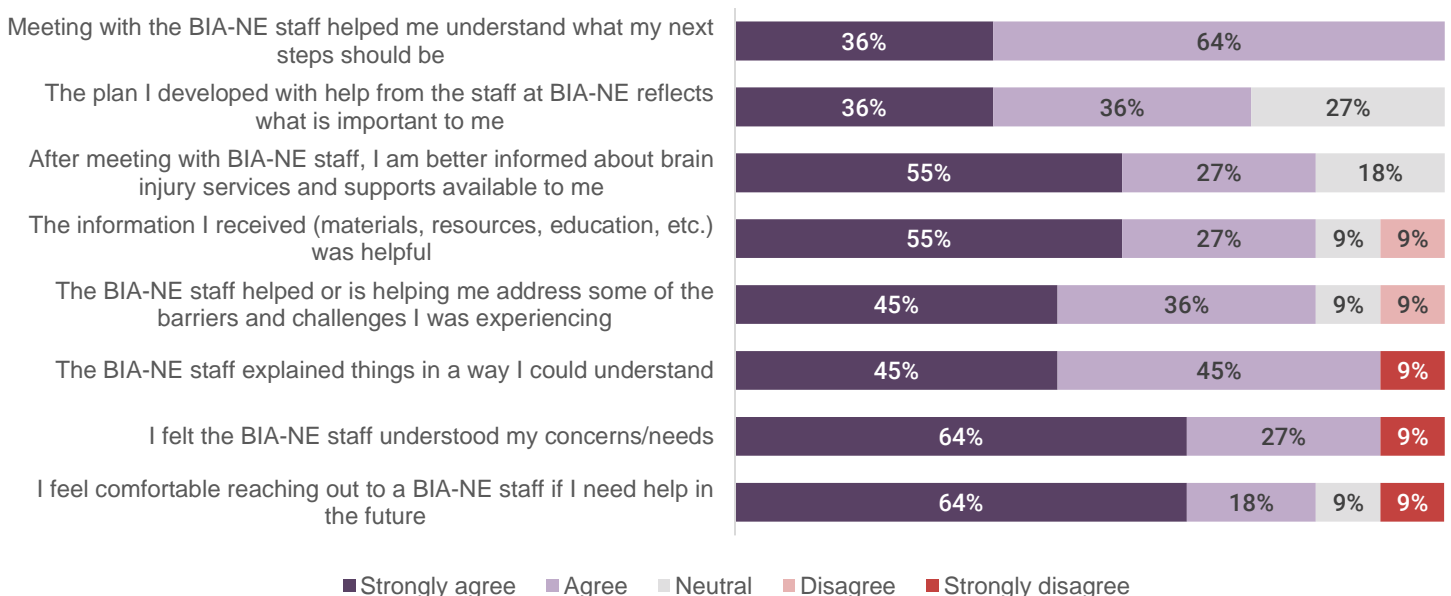
Results from the survey conducted in October 2021 showed nearly all would recommend Resource Facilitation to others



*It would be nice to have BIA-NE make check-up calls on a regular basis to clients.*

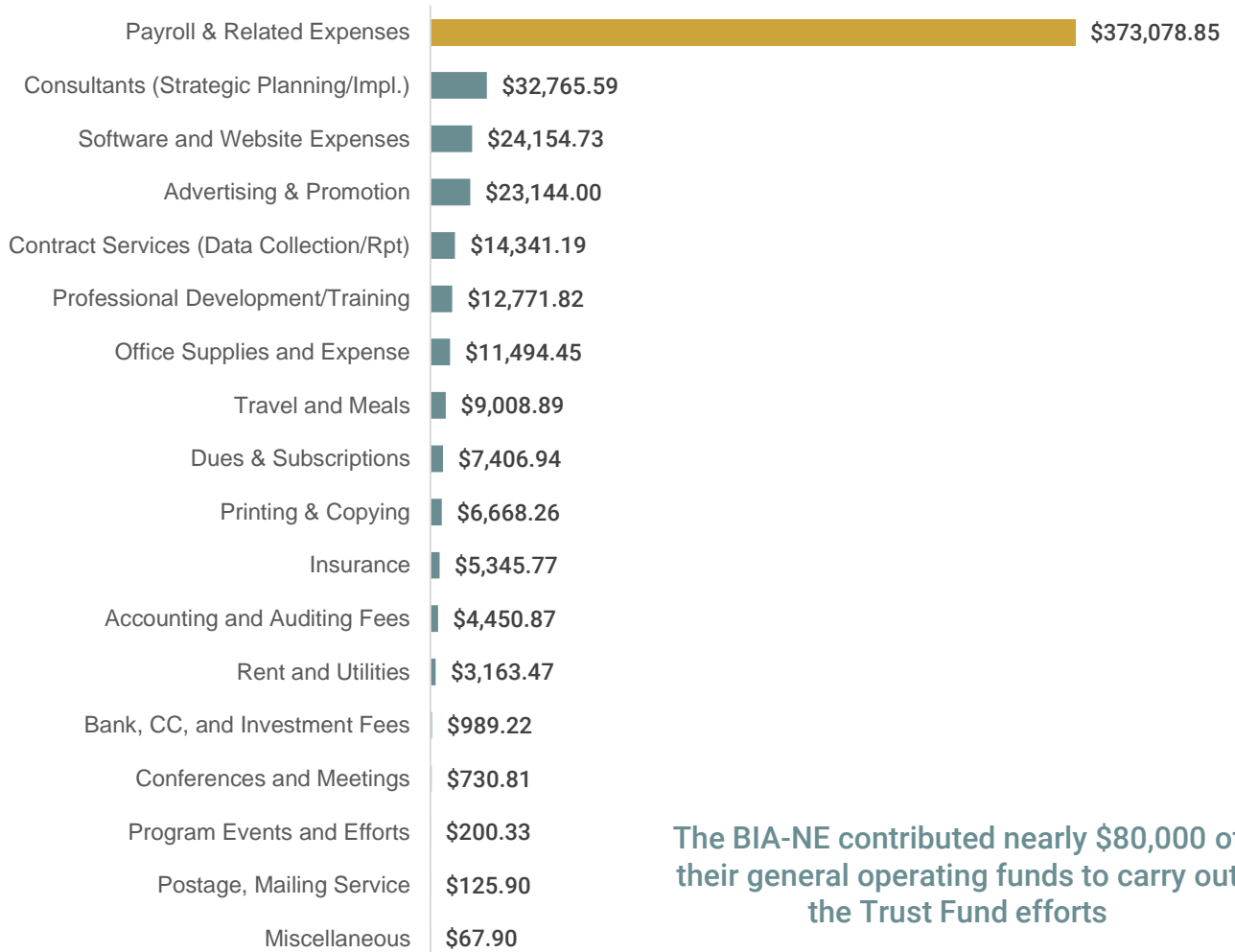


During the May 2022 client satisfaction survey, all respondents agreed that BIA-NE staff helped them identify next steps (n=11)



# TRUST FUND SPENDING

Of the \$450,000 budgeted through the Trust Fund, BIA-NE spent slightly less than \$530,000, with a majority (70%) being on payroll and related expenses



The BIA-NE contributed nearly \$80,000 of their general operating funds to carry out the Trust Fund efforts

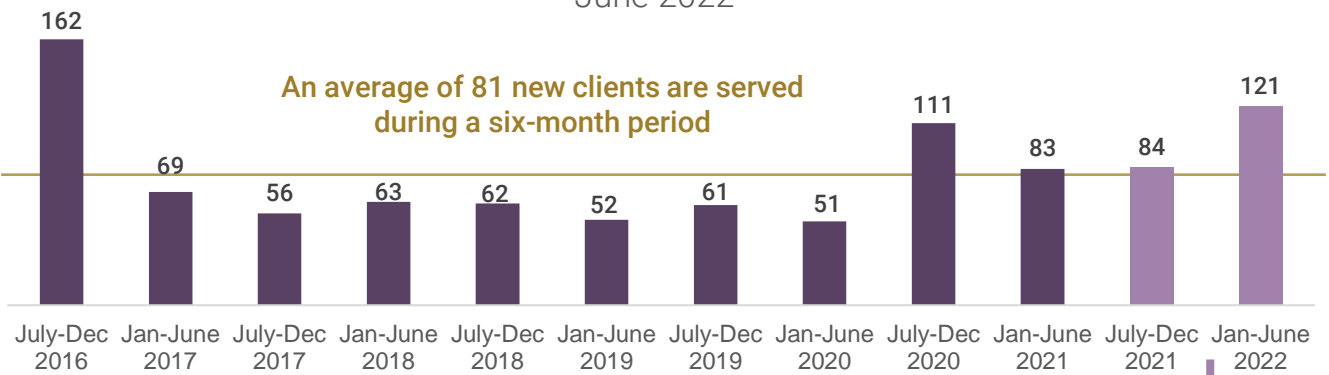
# BIA-NE Resource Facilitation

Resource Facilitation (RF) is a free service through the Brain Injury Alliance of Nebraska (BIA-NE). Resource Facilitators provide support and referrals to 1) individuals with brain injury; 2) family members and caregivers; and 3) health care or other social service professionals related to brain injury. Beyond helping individuals identify and navigate resources, Resource Facilitators assist with monitoring an individual’s progress.

**975**

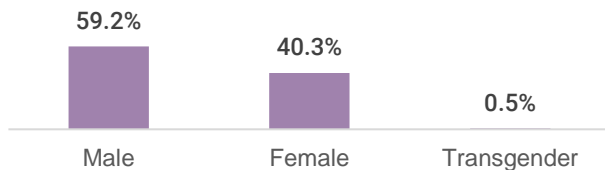
individuals have received RF support since July 2016<sup>1</sup>

BIA-NE had the highest number of new clients served from January - June 2022<sup>2</sup>

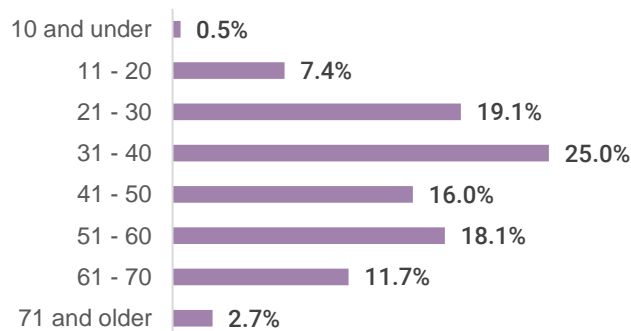


## New Clients Served

About 60% of the new clients were male (n=201); among all clients in the database, 56% are male



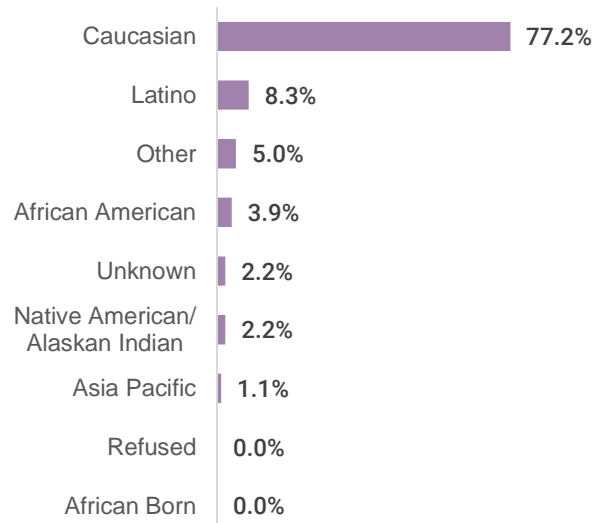
New clients were between the ages of 7 and 92, with the average age being 41 (n=189)



**205**

New clients were served from 7/1/21 – 6/30/22

A majority of new clients were Caucasian (n=180); among all clients in the database, nearly 83% are Caucasian<sup>3</sup>



<sup>1</sup> This number does not include people that may have been assisted through other agencies (i.e., an agency called to get a referral or recommendation for one of their clients). It only includes BIA-NE clients who have an individual folder in the database.

<sup>2</sup> BIA-NE started using the database in July 2016. Individuals entered in the database between July-December 2016 are not limited to new clients; they may have been clients served prior to July 2016.

<sup>3</sup> An “unknown” response means the RF did not ask the client for the individual’s race. It does not indicate that the client does not know his or her race. The “Refused” response option would be selected if the client did not want to provide his or her race.

## Levels of Resource Facilitation

### Information & Referral

These are typically one-time interactions. An individual can ask questions and potentially receive a referral to another organization or service. A common example of this level of support are the hotline calls made to the BIA-NE.

### Intake & Referral

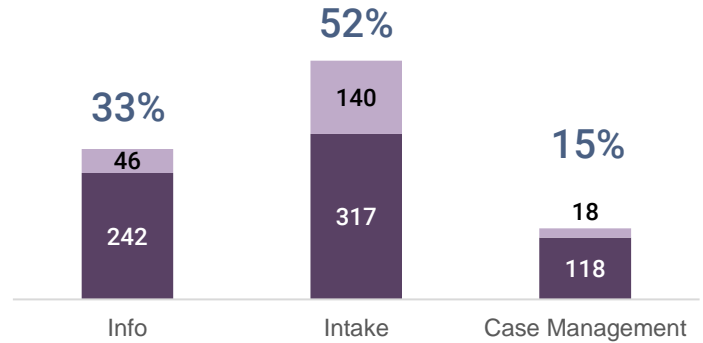
The Resource Facilitator is considered the point person or the point contact within the BIA-NE. Families and individuals reach out as needed to navigate resources and understand the impacts of brain injury.

### Case Management

The most intensive level of RF where people develop a personalized plan that includes setting goals, monitoring progress, and evaluating outcomes. These are generally for clients that need more than just resources or referrals to another organization.

Intake is the most common level of RF offered, accounting for 47% of the clients prior to July 2021 and 69% of the new clients (n=881)

■ July 2016 - June 2021 ■ July 2021 - June 2022



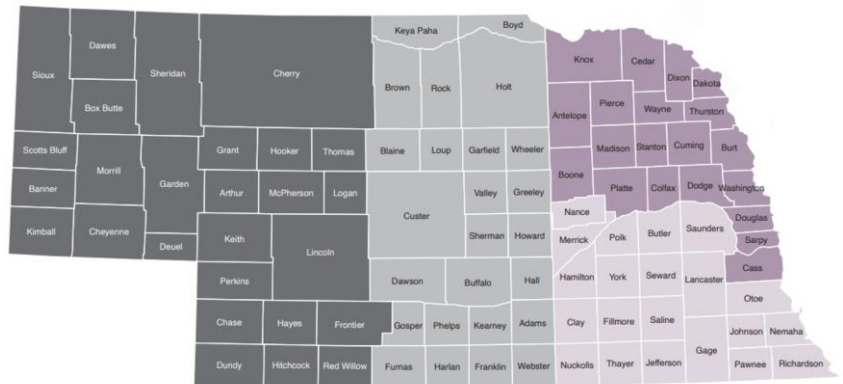
*Staff are very personal and do a terrific job with responding and following up even when I didn't just ensure everything is okay or to ask if there was more they could do. That level of care did not go unnoticed. Thank you all BIA-NE staff who help me and my mom.*



## Client Location

# 5 FTE

Resource Facilitators serve the state. Prior to October 2021, 1 FTE and 1 part-time contractor (located in Omaha and Lincoln) served the state



Region	July 2016 – June 2021 Clients (n=616)	New Clients July 2021 – June 2022 (n=182)
Western (dark gray)	6.3%	36.8%
Central (light gray)	7.6%	8.8%
Omaha Metro (dark purple)	50.2%	28%
Lincoln Metro (light purple)	31.2%	24.7%
Out of State	4.2%	1.6%

There was a substantial increase in clients served in the Western area of the state with the addition of new resource facilitators

## Hearing about BIA-NE

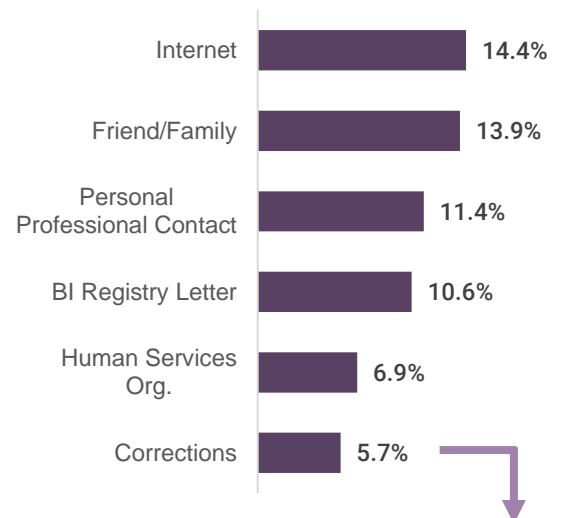
How clients heard about BIA-NE in the previous year has changed compared to how clients have typically reported hearing about the organization

Referral Source	New Clients Served 7/1/21 - 6/30/22	Compared to New Clients Served Prior to July 2021
ADRC	6.0%	↑
Agency on Aging	2.0%	↑
BI Registry Letter	1.5%	↓
Counselor	2.5%	=
Clinic	1.0%	=
Corrections	22.0%	↑
DHHS	2.5%	↑
Domestic Violence Shelter	3.0%	↑
Early Development Network	0.0%	=
Friend/Family	19.5%	↑
Hospital – Lincoln	1.0%	=
Hospital – Omaha	2.0%	=
Human Services Org.	4.5%	↓
Internet	11.5%	↓
League of Human Dignity	0.5%	=
LTC Community	0.5%	=
Madonna – Lincoln	1.5%	↓
Madonna – Omaha	1.0%	↑
Media	2.0%	=
National	0.5%	=
Other	3.0%	↑
Out of Home Placement	0.5%	=
Personal Professional Contact	6.5%	↓
QLI	0.5%	=
Rehab	0.5%	=
School	0.5%	=
Support Group	2.0%	↓
Unknown	0.5%	↓
VA	1.0%	=
VR Nebraska	0.0%	=

*It took a couple weeks [for me to reach out to the BIA-NE] because I had to go back and find the article in the newspaper. I was convinced to reach out after I saw an episode of the 'Doctors' and saw football players being treated for concussions. I thought if they can be helped, I should also reach out to get help.*



About one-fourth of all the clients in the database were referred by or heard about the BIA-NE from the internet or family/friends (n=961)<sup>4</sup>



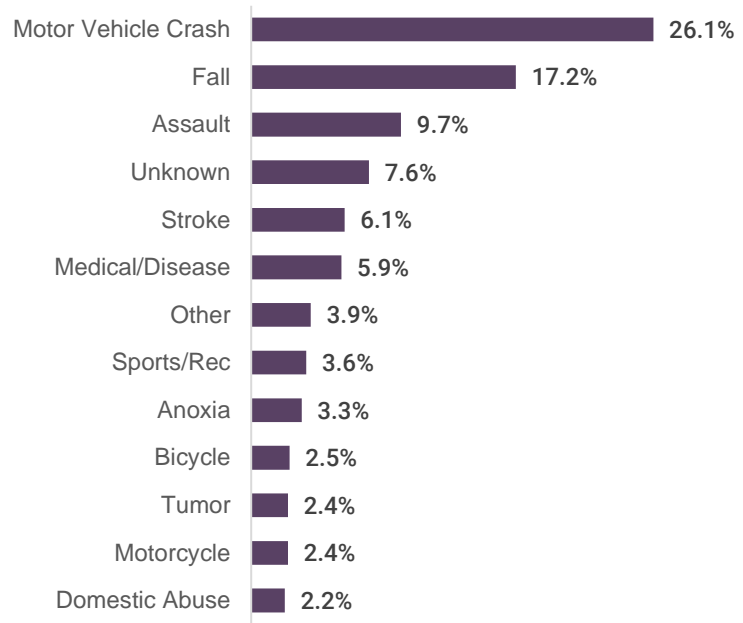
Among new clients (n=200), the most common way people heard about BIA-NE was through Corrections (22%). This is likely due to the Resource Facilitators in western Nebraska who work within the Lincoln County Jail.

<sup>4</sup> The remaining response options accounted for 4% or less of the clients.

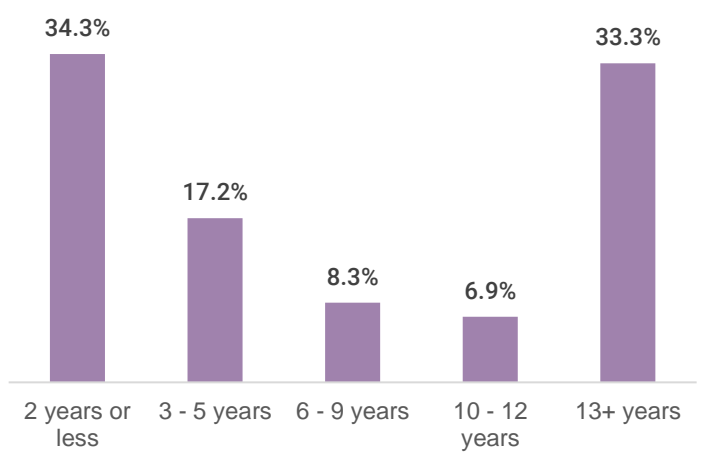


## Causes of Injury

About one-fourth of the brain injuries reported in the database were from motor vehicle crashes (n=1,007)<sup>5</sup>

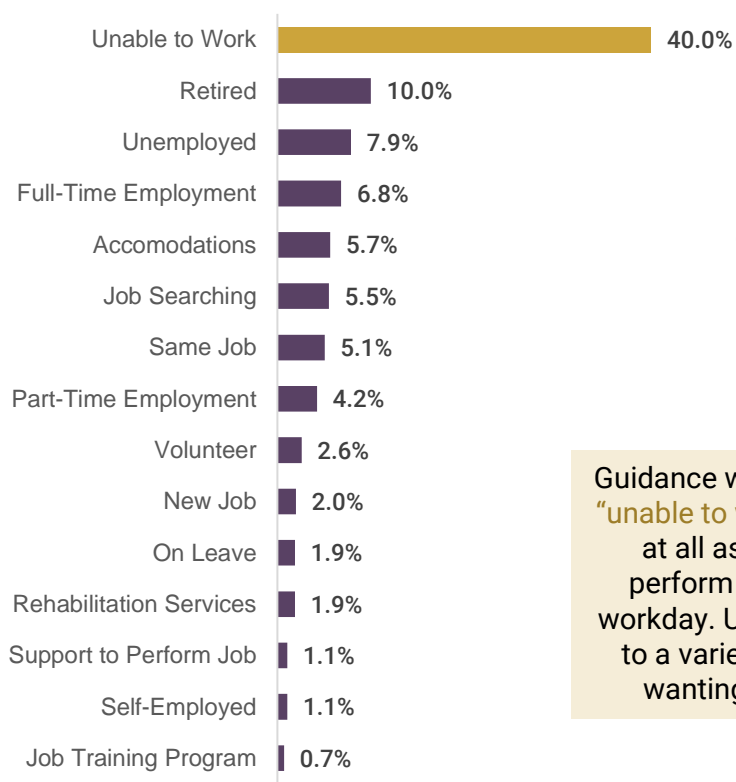


A majority of new clients reported their injury was either in the previous two years or 13 or more years ago (n=204)



## Employment

Among all clients in the database, 40% were recorded as being **unable to work** at intake (n=849)



**36%**

of new clients served from 7/1/21 – 6/30/22 were reported as being unable to work

On average, it has been 9 years since the date of injury for those individuals

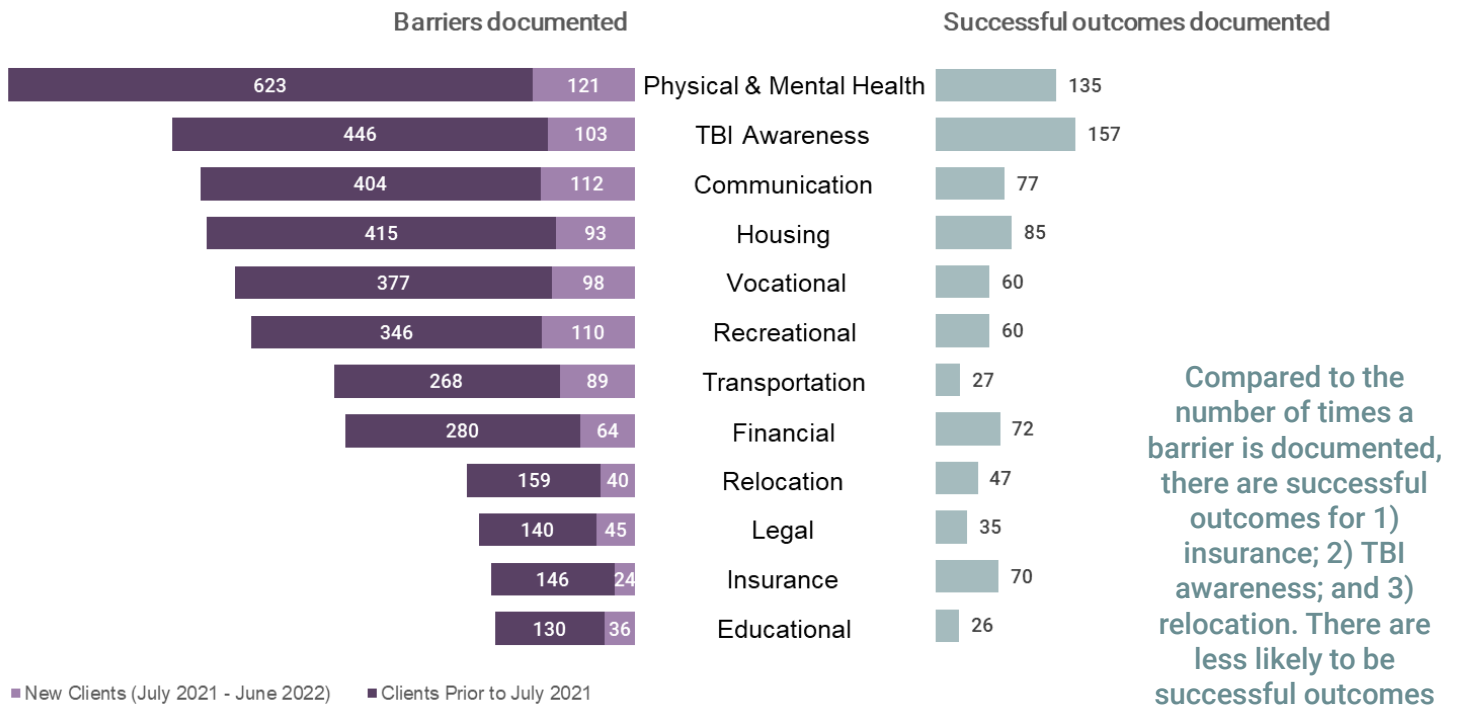
The average age of those who reported being unable to work was 42

Guidance was provided to BIA-NE staff in January 2020 so that “unable to work” was defined as a client not being able to work at all as a result of their injury, such as not being able to perform normal functions or being able to get through the workday. Unemployment could be not having employment due to a variety of reasons, which could be person (such as not wanting to lose benefits), having a poor job market, etc.

<sup>5</sup> The following causes of injury accounted for less than 2% of the clients: pedestrian, cerebral vascular accident (CVA), gunshot, military combat/active duty, all terrain vehicle (ATV), shaken baby syndrome, and suicide attempt.

## Barriers

Slightly more than 4,600 barriers have been documented among 801 clients (20% of the barriers were reported for **new clients**)<sup>6</sup>; there were 261 clients that accounted for 851 successful outcomes<sup>7</sup>

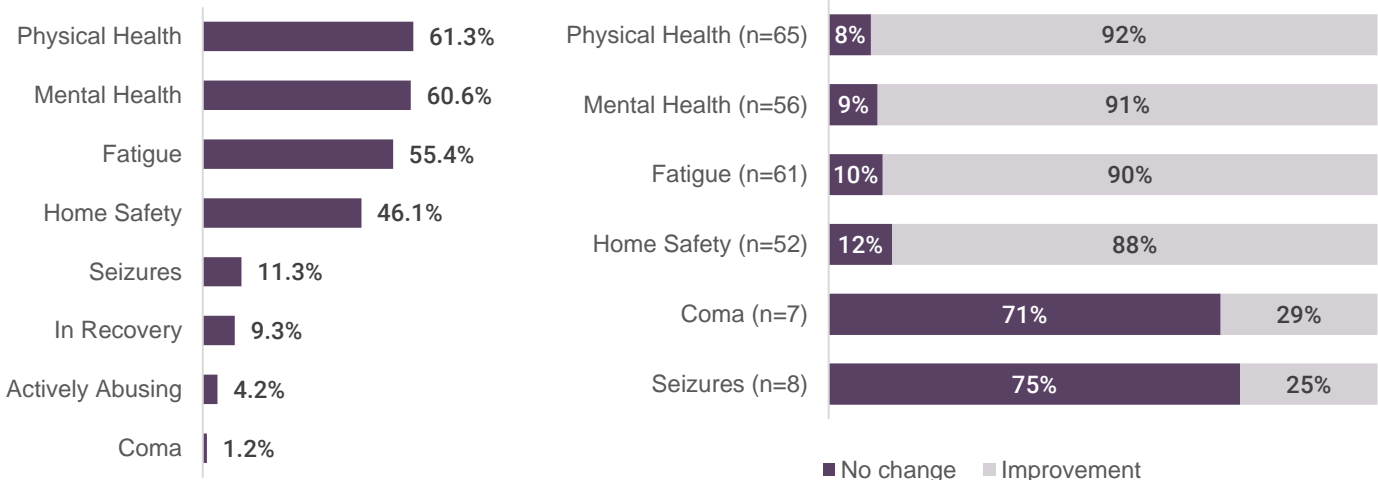


Compared to the number of times a barrier is documented, there are successful outcomes for 1) insurance; 2) TBI awareness; and 3) relocation. There are less likely to be successful outcomes documented for transportation

## Health Concerns & Improvements

More than half of clients reported concerns with physical and mental health at intake (n=852)

Among the clients that had a health update recorded in the database (n=133), many had noted improvements



<sup>6</sup> Clients can select multiple barriers, which accounts for the high number of total barriers.

<sup>7</sup> Resource facilitators are instructed to indicate a client has a "successful outcome" when a barrier has been substantially minimized or solved for that client.

## Client Engagement

**919** contacts were reported by Resource Facilitators between July 1, 2021 and June 30, 2022



*Everyone we had contact with was extremely supportive, understanding and empathetic with our situation and our daughters concussion symptoms and situations.*

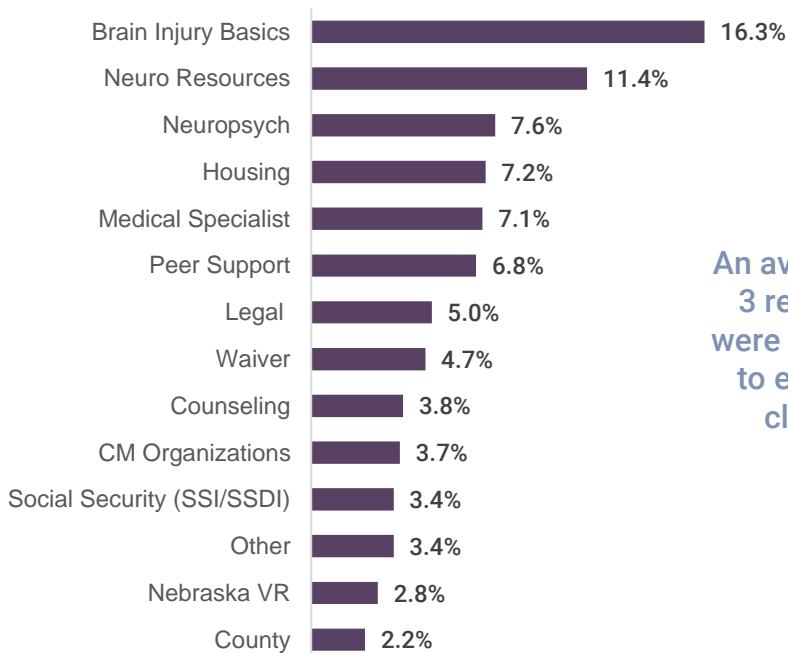


*It would be nice to have BIA-NE make check-up calls on a regular basis to clients.*



## Referrals

The most common of the 761 referrals provided to clients were for Brain Injury Basics<sup>9</sup>

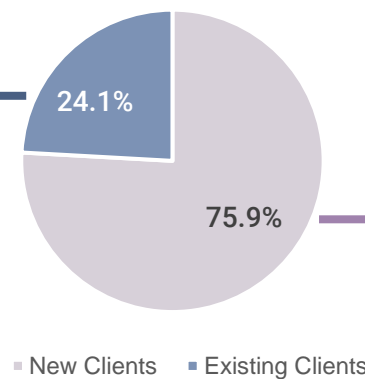


**761**

referrals were provided to new and existing clients between July 1, 2021 and June 30, 2022

A majority of the referrals were provided to new clients (n=170)

An average of 3 referrals were provided to existing clients



An average of 5 referrals were provided to new clients

<sup>8</sup> Client support indicates that the Resource Facilitator was able to engage with new or existing clients to provide services, support, or resources. The remaining 30% account for engagement where a client was unreachable, or the Resource Facilitator had to leave a message.

<sup>9</sup> The following accounted for less than 1% of referrals: school support, VA, transportation, website, and churches.

**UNIVERSITY OF NEBRASKA MEDICAL CENTER**  
**NE Revised Statute 71-3703 - Brain Injury Oversight Committee**  
**BUDGET**

**SOURCES OF FUNDS**

Cash Funds - State of Nebraska / Nebraska DHHS \$ 500,000

**TOTAL SOURCES OF FUNDS**

\$ 500,000

**USES OF FUNDS**

Funds Available to Committee to provide Awards \$ 450,000

**Administration, Accounting, Budgeting**

UNMC Contracted Services for Administration, Accounting,  
 Coordination and Website Maintenance \$ 45,000

Committee Operating Expenses \$ 5,000

**TOTAL USES OF FUNDS**

\$ 500,000

**ENDING FUND BALANCE**

\$ -

Note: No more than 10% of the fund shall be used for administration of the fund

**UNIVERSITY OF NEBRASKA MEDICAL CENTER**  
**NE Revised Statute 71-3703 - Brain Injury Oversight Committee**  
**FY2021 (July 1 2020 - June 30th 2021), Actual**

**SOURCES OF FUNDS**

Cash Funds - State of Nebraska / Nebraska DHHS	\$ 500,000	
<b>TOTAL SOURCES OF FUNDS</b>		<u><u>\$ 500,000</u></u>

**USES OF FUNDS**

Award made to Brain Injury Alliance of Nebraska	\$ 450,000	
<b>Administration, Accounting, Budgeting</b>		
UNMC Contracted Services for Administration, Accounting, Coordination and Website Maintenance	\$ 45,000	
Committee Operating Expenses	\$ -	
<b>TOTAL USES OF FUNDS</b>		<u><u>\$ 495,000</u></u>

<b>ENDING FUND BALANCE, JUNE 30th 2021</b>		<u><u>\$ 5,000</u></u>
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Note: No more than 10% of the fund shall be used for administration of the fund

**UNIVERSITY OF NEBRASKA MEDICAL CENTER**  
**NE Revised Statute 71-3703 - Brain Injury Oversight Committee**  
**FY2022 (July 1 2021 - June 30th 2022), Actual**

**SOURCES OF FUNDS**

Beginning Fund Balance, July 1st 2021	\$	5,000
Cash Funds - State of Nebraska / Nebraska DHHS	\$	500,000

**TOTAL SOURCES OF FUNDS**

**\$ 505,000**

**USES OF FUNDS**

Award made to Brain Injury Alliance of Nebraska	\$	450,000
---	----	---------

**Administration, Accounting, Budgeting**

UNMC Contracted Services for Administration, Accounting, Coordination and Website Maintenance	\$	45,000
--	----	--------

Committee Operating Expenses	\$	2,570
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**TOTAL USES OF FUNDS**

**\$ 497,570**

**ENDING FUND BALANCE, JUNE 30th 2022**

**\$ 7,430**

Note: No more than 10% of the fund shall be used for administration of the fund