



Report to the Iowa Advisory Council on Brain Injuries

April 18, 2014

Neuro-Resource Facilitation

Summary: The program continues to see more than 25,000 calls and contacts annually. This quarter, Neuro-Resource Facilitators have attended conferences and joined committees and task forces, to continue in their knowledge growth, for the purpose of becoming subspecialists in certain high-need areas.

- **Effectiveness:** NRF continues to be an asset to Iowans affected by brain injury. The COMBI SOS tool <http://tbims.org/combi/sos/> is currently being used for assessment of our client's beliefs of the level of brain injury supports and services available to them. This is a valid and reliable tool. This effort began June 1, 2013 and continues today. Follow up calls are required every 3 months, with this assessment. This is being attempted with all clients. We will have our first outcome data for this after 1 year.
- **Efficiency:** The Alliance receives referrals from the Iowa Brain Injury Resource Network (IBIRN) sites, Professionals, Community Providers, Hospitals/Rehab Facility, the TBI Registry at IDPH, friends and the BIA-Iowa website. More than 95% of NRF clients receive a follow up call at 3 and 6 months. Some have moved or voluntarily discontinued services.
- **Access:** 100% of new calls and contacts are responded to within 24 business hours. There were 357 new callers served. The geographical spread of NRF clients shows state wideness and is concentrated in Iowa, as expected, with a significant range of inquiries from across the nation. Many of these are professionals; followed family members and caregivers of those with brain injury in Iowa. If non-Iowans call for Neuro-Resource Facilitation support, they are given adequate brain injury information; then linked with supports in their own state, the United States Brain Injury Alliance or with the Brain Injury Association of America. The ratio of clients to staff was 434 at the end of the last quarter at. Several NRF clients have been able to close out their files with NRF, and therefore will remain in the database for future need, however are not listed as current at this time. National ratio averages for NRF are anywhere from 30 to 400 per NRF. Iowa continues to exceed most states' ratios. NRF Staff are operational in three locations in Iowa: Urbandale, Waterloo and Iowa City. However NRF is still a phone based service and support program.

Brain Injury Support Network (BISN Peer - Peer Mentoring)

- **Summary:** To date the Alliance maintains a dedicated Neuro-Resource Facilitator for the BISN program. The program is marketed monthly via e-newsletter (BrainStorming and Neuro Nuggets) as well mailings to those on BIA IA mailing lists throughout the year. The program continues to have a positive response and impact. During this quarter, there were not any new matches made, however 4 new mentors were trained. There have now been 50 mentors trained since the inception of BISN. The BISN Program Manager continues to monitor all partners and continues to send out BISN evaluations.
- ✓ **Effectiveness:** The program continues to get overall positive feedback which is used to adjust the program on an ongoing basis (3, 6 and 12 months). Since the inception of the feedback form for BISN, 29 responses have been received. Response received during the quarter averages 3.17 on scale of 1-5 for satisfaction.
- ✓ **Efficiency:** The program for this quarter had 8 active matches with 63% of mentors survivors and the remainder family members, caregivers or friends.
- ✓ **Access:** All inquiries receive a response within 72 hours. The geographical spread of mentors and mentees shows statewide-ness. Webinars training have occurred this quarter for mentors, and received all positive feedback, with no lower than a rating of 4 out of 5 possible. The Alliance Ambassador, along with other sources, such as website and monthly Brain Storming e-newsletter and monthly e-Neuro-Nuggets newsletter, also marketed this program to attempt to create referrals and intake accessibility. The Family Ambassador has been continually marketed through every Iowa Brain Injury Resource Tote Bag, the BIAIA website, and the monthly BIAIA and IBIRN site newsletters. The Ambassador participated in the Certified Brain Injury Specialist training, hosted by BIAIA, on March 12, 2014. As of contract end date 3-31-14, no BIAIA callers have pursued an interest in the services offered by the Family Ambassador. The Family Ambassador will now be shifting to a Mentor in the BISN Program.

Training and Education

Summary: BIA-Iowa staff continues to respond to requests for brain injury training and consultation. The Brain Injury Alliance of Iowa has provides onsite trainings throughout the state, and has continued to deliver webinars statewide.

- **Effectiveness:** Participant evaluations are consistently positive with measures in the 80% - 100% range. Staff utilizes the Academy for Certified Brain Injury Specialists (ACBIS) training guidelines for technical trainings.

- **Efficiency:** The number of trainings this quarter of this fiscal year is 14; 1 Iowa Brain Injury Resource Network site, and 13 sites that are non-IBIRN sites. The total number of people trained was 342. Year to date, there have been 37 trainings provided, training a total of 1762 people. This number represents professionals, survivors, family members and other community partners trained. Two case consultations were provided this quarter
- **Access:** The geographic distribution of trainings of this specific year has been statewide, through the use of webinar and Internet access as well as onsite trainings.

Tote Bags

Summary: The Brain Injury Resource Network Tote Bag continues to be a highly valued resource. Recently, the Brain Injury Alliance of Iowa has been able to locate and acquire replacement materials for the tote bags in the area of family support and employer support. Tote distribution is consistent and includes all IBIRN sites, including Level 1 and 2 trauma centers.

- **Effectiveness:** Tote bag evaluation cards continue to indicate a very positive response. 75% of people strongly agreed that the tote bag contained information that was useful and beneficial to their understanding of brain injury. 58% of people strongly agreed that the tote bag contained information that helped them access services and supports. The items ranked with highest necessity were the two books geared towards families. A majority of respondents indicate that they would “have liked the option of contacting another family who has experienced brain injury”. This is an ongoing challenge for BIA-IA and is being addressed, in part by the BSN program, as well as the Ambassador program that was established January 2013. Specific tote bag contents are preferred over others and this feedback has been refined and used in consideration of the tote bag update. IBIRN sites have also been provided the opportunity to view the Tote Bag webinar and provide feedback.
- **Efficiency:** Totes are currently distributed to all 143 IBIRN locations, disseminated at conferences and events, and provided for all NRF clients. The Virtual Tote Bag is also available on the BIA IA’s website. Tote bags are shipped throughout the state as well as to others in bordering states. The average cost per tote is \$20.00.
- **Access:** Over the past quarter we have contracted with our former Director of Programs and Services (Natasha Retz) to contact each IBIRN site to assure accuracy of contact data and to assess status of tote reserves. His has resulted in a surge of outgoing totes, with 314 distributed during this quarter. The total for the year stands at 805 distributed. IBIRN sites number 143 this quarter. We are providing increased contact to our IBIRN sites by providing each site with a NRF contact person in their established region.

That NRF now contacts each IBIRN site at least every 6 months, to assess needs.

Online Caregiver Brain Injury Training

The Objective was to identify an online, on-demand brain injury 101 training for families and caregivers that can be accessed through the BIAIA website. We were also asked to receive input from families and caregivers regarding the training selected and ways to market it and service resources on the website. We also were asked to develop a feedback mechanism to measure the effectiveness of the training. We were also asked to make the training available on demand, so we linked it to our website. We were asked to provide IDPH and the ACBI a report to include the following items:

- Information on the curriculum - Caregiving and TBI: What you need to know", courtesy of BrainLine.
<http://www.brainline.org/webcasts/2-What-You-Need-to-Know/webcast2.html>
- The feedback tool used is a 5 point questionnaire on Survey Monkey, asking for impact of the training on their knowledge.
- 93 individuals had viewed the training, by the end of this quarter.
- At the end of the quarter, only 1 of those 93 viewers participated in the feedback survey, using the tool provided. That feedback was 100% positive, with the lowest rating being 4 out of a possible 5.

Educator Series of webinars

The Brain Injury Alliance of Iowa partnered with Mayo Clinic, IACP and IDPH staff to provide six educator specific webinars, to be scheduled when school is in session (August 2013 – March 2014). Webinars were to include a feedback mechanism to measure the effectiveness of the training. Webinars were then to be archived for future viewing. An online feedback tool was set up using GoToWebinar and Survey Monkey, and linked to the ACBI website, for use. In addition to the 210 individuals who participated in the live webinars, the trainings have been made available by archive to all viewers of the ACBI/HRSA grant page of IDPH website. The overall feedback on the webinars showed a median of 75% positive. Link to recorded webinars -<https://www.idph.state.ia.us/ACBI/HRSAGrant.aspx>

See Attachment for topics and speakers.

Needs Assessment

The Brain Injury Alliance of Iowa completed a statewide needs assessment of our constituency including individuals with brain injury, family members, caregivers, professionals, IBIRN sites, Chapters, Support Groups, collaborating organizations, and policy makers. This was done both in person with focus groups and town hall meetings with BIA-IA Chapters and Support groups as well as via online and written surveys. A written report of this needs assessment is attached.