



2018-2021 State Plan Update

Focus Area 1: Individual and Family Service Access

Goal 1: Increase awareness of brain injury and increase utilization of Neuro-Resource Facilitation services in Iowa.

Action Step	Status	Summary of progress
1.1 Identify Underserved or inappropriately served populations for targeted outreach utilizing data driven process.	Complete	Iowa Department of Public Health (IDPH), in collaboration with stakeholders, identified the following target populations for targeted outreach and interventions: individuals with substance use disorder, individuals who experience homelessness, individuals receiving mental health services, justice involved individuals and individuals who are refugees.
1.2 Develop and disseminate awareness materials, to include reports, fact sheets and other brain injury information.	Progress made	In collaboration with the Council and IDPH, this action step has been included as an activity in the NeuroResource Facilitation (NRF) contract with the Brain Injury Alliance of Iowa (BIA-IA). Examples of materials created include infographics on the intersection of brain injury and targeted populations (defined in 1.1), promotion of Brain Injury Awareness Month and <i>Unmasking Brain Injury</i> project.
1.3 Expand the number of Iowa Brain Injury Resource Network (IBIRN) partners through targeted recruitment efforts, particularly those supporting underserved areas or populations.	Progress made	In collaboration with the Council and IDPH, this action step has been included as an activity in the NRF contract with the BIA-IA. Outreach to organizations serving the targeted populations (defined in 1.1) is currently underway and partners have been added to the IBIRN as a result. The Iowa Stroke Resource Network has been created to increase information dissemination and referral to NRF related to stroke.
1.4 Notify individuals on the Medicaid Home and Community Based Services Brain Injury Waiver waiting list of the availability of Neuro-Resource Facilitation Services.	Complete	In 2020, Department of Human Services began including information regarding resource facilitation on brain injury waiver denial letters. This information will continue to be included in all future letters.



Goal 2: Decrease delays experienced in accessing the Medicaid Home and Community Based Services (HCBS) Brain Injury Waiver.

Action Step	Status	Summary of progress
2.1 Host a “Medicaid HCBS Brain Injury Waiver Summit,” convening individuals with brain injury, family members, providers, state agency representatives, stakeholders, advocates and legislators, to identify barriers to waiver access and to develop a plan to eliminate identified barriers.	No progress	The council has not yet worked on this action step.

Goal 3: Increase brain injury screening, assessment and service coordination across systems of care that address multi-occurring conditions often experienced by individuals with brain injury.

Action Step	Status	Summary of progress
3.1 Host a “Brain Injury Multi-Occurring Conditions Summit” to select a brain injury screening tool for use across pediatrics, geriatrics, mental health, substance abuse, corrections and other settings.	Complete as modified	After conversations with stakeholders within target audience, it was determined the council should move forward with making a recommendation on a screening tool for Iowa. The Individual and Family Access Task Force adapted a screening tool for Iowa, which has been translated into several languages and is currently being implemented. A pediatric screening tool has also been adapted for Iowa by the task force.
3.2 Identify processes with service system partners for individualized training and screening implementation.	Complete	In collaboration with the IDPH and BIA-IA, this action step has been included as an activity in the Brain Injury Training contract with the Iowa Association of Community Providers.
3.3 Train service system partners on the use of the <i>Mayo Portland Adaptability Inventory – 4</i> for assessment and service coordination.	Progress made	The Iowa Association of Community Providers began training service providers and case managers through the IACP regional technical assistance training program in FY20.
3.4 Develop recommendations for enhanced person-centered planning to address multi-occurring conditions.	In process	Iowa participating in national learning collaborative on person-centered planning and is developing a toolkit for substance use treatment providers to support person-centered planning for patients with co-occurring brain injury.



Focus Area 2: Service System Enhancements

Goal 4: Develop service recommendations to meet the needs of lowans currently served out-of-state.

Action Step	Status	Summary of progress
4.1 Evaluate the service needs of lowans with brain injury currently served out-of-state.	No progress	The council did not work on this action step, and is not aware of progress made by other entities.
4.2 Utilize available data sources to determine the scope and costs related to services received by individuals within out-of-state placements and in-state institutional settings, including corrections and community-based neurobehavioral rehabilitation services.	No progress	The council did not work on this action step, and is not aware of progress made by other entities.
4.3 Analyze available data, including Medicaid Home and Community Based Services waiver claims, to determine service distribution and gaps across Iowa.	No progress	The council did not work on this action step, and is not aware of progress made by other entities.
4.4 Develop and disseminate identified recommendations to the governor and policy makers.	Some progress	The BIA-IA developed legislative priorities in 2018, 2019, and 2020 that included recommendations to the fully fund or increase funding to the HCBS Brain Injury Waiver to reduce unnecessary out of state placements, which is disseminated to policy makers during their annual Brain Injury Hill Day.

Goal 5: Develop a well-trained and competent workforce for current service providers and for the jobs of tomorrow.

Action Step	Status	Summary of progress
5.1 Design and implement a direct support professional brain injury training curriculum, leading to voluntary credentialing or certification.	In process	In collaboration with the IDPH, this action step has been included as an activity in the Brain Injury Training contract with the Iowa Association of Community Providers.
5.2 Design and implement a pre-service curriculum for postsecondary students in health and human services programs, aimed at	In process	In collaboration with the IDPH, this action step has been included as an activity in the Brain Injury Training contract with



increasing knowledge and capacity to effectively provide services to lowans experiencing brain injury.		the Iowa Association of Community Providers and implemented as a pilot within an Iowa community college.
5.3 Develop a proposal to establish enhanced reimbursement rates for utilizing credentialed or certified brain injury direct support professionals.	In process	The Iowa Association of Community Providers and the Brain Injury Alliance of Iowa have and will continue to advocate for increased reimbursement rates for direct support professionals including the Behavioral Programming HCBS BI Waiver service, to increase access and provider capacity statewide.
5.4 Design and implement a brain injury training for hospital-based discharge planners and Medicaid-based case managers.	No progress	In collaboration with the IDPH, this action step has been included as an activity in the Brain Injury Training contract with the Iowa Association of Community Providers and implementing the ACBIS Brain Injury Fundamentals curriculum to train case managers within Iowa’s Managed Care Organizations. BIA-IA created a discharge planners “brain injury tool kit” and an on-demand video for hospital-based discharge planners.

Goal 6: Evaluate fiscal formulas to ensure services are adequately funded.

Action Step	Status	Summary of progress
6.1 Reformulate the Medicaid Home and Community Based Services Brain Injury Waiver reimbursement structure to reflect current and actual costs.	Some progress	In FY20, the spending cap for individual services was lifted for the Home and Community Based Services Brain Injury waiver.
6.2 Survey funding needs for acute, post-acute, and community-based services and supports and make recommendations for improvement as identified.	Some progress	IACP conducted a service provider needs assessment and has included several questions regarding barriers to providing services to individuals with brain injury.
6.3 Adequately fund the Brain Injury Services Program to ensure staffing (e.g., programmatic, epidemiological and evaluative) and resources for program services (e.g., neuro-resource	Ongoing	The Brain Injury Services Program continues to be level funded, maintaining staffing and resources for program services and availability of adequate match to draw down federal TBI grant



<p>facilitation and training), to position the Iowa Department of Public Health for accessing federal funding opportunities.</p>		<p>funds. In 2018, the program was able to grow by adding a Brain Injury Grant Manager position using federal funds.</p>
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Goal 7: Enhance the diversity of the Advisory Council on Brain Injuries to ensure the concepts of person-centered programming, self-advocacy and self-directed care are included in system enhancement initiatives.

Action Step	Status	Summary of progress
<p>7.1 Work with Iowa’s governor to align the diversity of the Advisory Council on Brain Injuries to reflect the Administration on Community Living’s recommendations for state brain injury advisory councils.</p>	<p>In process</p>	<p>Council staff continue to provide data to the governor’s staff regarding needs of the council and to market opportunities for stakeholders and advocates to join the council as appointed members and task force members.</p>
<p>7.2 Expand the number of partners and advocates collaborating with the Advisory Council on Brain Injuries through targeted recruitment.</p>	<p>Progress made</p>	<p>Council staff to continue marketing the council opportunities to stakeholders and advocates to attend Council quarterly meetings and participate in task force activities. A representative from the Developmental Disabilities Council (a sister program under the Administration for Community Living) has been regularly attending meetings of the council and joined the State Plan Task Force.</p>

Focus Area 3: Prevention of Brain Injury

Goal 8: Reduce falls in Iowa Department of Public Health.

Action Step	Status	Summary of progress
<p>8.1 Identify populations, including individuals with brain injury and other disabilities, and occupations at high risk of falls in Iowa.</p>	<p>In process</p>	<p>A question regarding brain injury was included in the 2020 Behavioral Risk Factor Surveillance Survey. When data is available from that question, it will be used to identify populations and health inequities that may be targeted for interventions.</p>



8.2 Adapt existing falls prevention awareness and evidence-based strategies for targeted populations, as needed.	Progress made	The Iowa Falls Prevention Coalition has provided education to its members and stakeholders on adapting falls prevention programs to better meet the needs of individuals with disabilities, such as recommending modifications to the Walk with Ease Program. Falls prevention programs were promoted disability service providers through newsletters and webinars hosted by the Iowa Association of Community Providers.
8.3 Expand falls prevention awareness and evidence-based strategies for older Iowans and caregivers of young children.	Progress made	The Iowa Falls Prevention Coalition are currently in process of implementing the Iowa Falls Prevention Statewide Strategies to expand falls prevention awareness and other activities for older adults. They also hosted annual Falls Prevention Awareness activities such as webinars, a governor’s proclamation, and tai chi demonstrations.

Goal 9: Decrease the incidence of traumatic brain injury related to motorized and non-motorized vehicle crashes.

Action Step	Status	Summary of progress
9.1 Increase the availability of information related to the importance of helmet use in brain injury prevention across multiple, motorized and non-motorized, risk areas.	Progress made	Healthy Habit All Stars’ module on wearing a bicycle helmet was created and is currently promoted by IDPH.
9.2 Increase the availability of bicycle helmets to youth.	Progress made	Bicycle helmets were distributed by IDPH and BIA-IA. On With Life created an annual bicycle helmet awareness campaign, including distribution of bike helmets.

Goal 10: Increase awareness and utilization of best practices for concussion prevention and management.

Action Step	Status	Summary of progress
10.1 Increase the distribution of concussion awareness and prevention materials to parents, Iowa educators, athletic personnel, healthcare providers, freestanding youth sports organizations and other target groups.	Progress made	Healthy Habit All Stars’ module on concussion was created and is currently promoted by IDPH. The Iowa Concussion Consortium hosts an annual concussion symposium. Iowa has obtained a subscription to the Get Schooled on Concussions’ Teacher Acute



		Concussion Tool, making just-in-time concussion information available to Iowa teachers.
10.2 Increase the distribution of concussion awareness and prevention materials among the public.	Progress made	Annually, August has been proclaimed by the governor to be Concussion Awareness Month in an effort to raise awareness among the general public. A variety of concussion resources have been added to the IDPH Brain Injury Program’s concussion webpage and members of the Iowa Concussion Coalition promoted awareness through social media messaging and newsletter articles.
10.3 Include a concussion section to the annual surveillance report, Brain Injury in Iowa.	In process	A concussion question was included in the 2018 Iowa Youth Survey and will be included in future surveys. That data will be included in future reports from IDPH.

Goal 11: Reduce preventable acquired brain injury.

Action Step	Status	Summary of progress
11.1 Develop and disseminate material regarding acquired brain injury health risk factors, behaviors and exposures (e.g., obesity, substance abuse, physical activity, nutrition, toxic exposure) among targeted populations.	Progress made	A concussion questions was added to the 2018 Iowa Youth Survey and a brain injury question to the 2020 Behavioral Risk Factor Surveillance Survey to determine health disparities experienced by individuals who report having had a concussion or other brain injuries. BIA-IA developed fact sheets for target populations (identified in 1.1) regarding intersection of brain injury and conditions experienced by those target groups.
11.2 Adapt evidence-based programs for reducing health risk factors, behaviors, or exposures, for the inclusion of people with brain injury and other disabilities.	Progress made	IDPH and University of Iowa-Center for Disabilities and Development, Iowa’s University Center of Excellence in Developmental Disabilities, have partnered to promote the inclusion of individuals with disabilities, including individuals with brain injury, in evidence-based and other programs to increase physical activity and improve nutrition. 10 Disability service organizations hosted 14 Weeks to a Healthier You in 2019 and the YMCA of Blackhawk County is implementing an



		inclusive Girls on the Run program and recruiting youth with disabilities to participate.
11.3 Recommend a policy that requires a brain injury prevention plan for individuals receiving publicly funded long-term services and supports.	No progress	The council did not work on this action step, and is not aware of progress made by other entities.