

# 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	Next Step/s
1.1 Identify underserved or inappropriately served populations for targeted outreach utilizing data driven process.	In process	Iowa Department of Public Health (IDPH) will ask the Advisory Council on Brain Injuries (Council) to provide a recommendation regarding underserved/inappropriately served population/s for targeted outreach.
1.2 Develop and disseminate awareness materials, to include reports, fact sheets and other brain injury information.	Ongoing	This step, in collaboration with the Council and IDPH, has been included as an activity in the Brain Injury Alliance of Iowa (BIA-IA) FY20 contract, to include materials developed or adapted for the identified population in step 1.1.
1.3 Expand the number of Iowa Brain Injury Resource Network partners through targeted recruitment efforts, particularly those supporting underserved areas or populations.	Ongoing	This step, in collaboration with the Council and IDPH, has been included as an activity in the BIA-IA FY20 contract to include materials developed or adapted for the identified population in step 1.1.
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.	In process	IDPH staff will continue to make the request to Department of Human Services (DHS) for the inclusion of information regarding resource facilitation on brain injury waiver denial letters.

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

Action Step	Status	Next Step/s
2.1 Host a “Medicaid HCBS Brain Injury Waiver Summit,” convening individuals with brain	No progress	The Council will determine feasibility of the Council or other stakeholders hosting a summit, with possibility of holding in

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.		conjunction with another large event such as the annual brain injury conference.
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**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	Next Step/s
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. Screening tool was recommended and approved on 6/3/2019	NA
3.2 Identify processes with service system partners for individualized training and screening implementation.	In process	This step, in collaboration with BIA-IA and IDPH, has been included as an activity in the Iowa Association of Community Providers (IACP) FY20 contract.
3.3 Train service system partners on the use of the <i>Mayo Portland Adaptability Inventory – 4</i> for assessment and service coordination.	In process	This step, in collaboration with BIA-IA and IDPH, has been included as an activity in the IACP FY20 contract.
3.4 Develop recommendations for enhanced person-centered planning to address multi-occurring conditions.	In process	Council staff will participate in national learning collaborative on person-centered planning and bring forth options to the council for recommendation on implementing person-centered planning.

**Focus Area 2: Service System Enhancements**

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

<b>Action Step</b>	<b>Status</b>	<b>Next Step/s</b>
4.1 Evaluate the service needs of lowans with brain injury currently served out-of-state.	No progress	Determine what data may be currently available, or what data may need to be collected, for evaluating service needs of lowans with brain injury currently served out-of-state.
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	Conduct environmental scan to determine available data sources for analysis.
4.3 Analyze available data, including Medicaid Home and Community Based Services waiver claims, to determine service distribution and gaps across Iowa.	No progress	Complete step 4.2; then, determine who will complete the analysis.
4.4 Develop and disseminate identified recommendations to the governor and policy makers.	No progress	Complete 4.3; then, draft recommendations.

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

<b>Action Step</b>	<b>Status</b>	<b>Next Step/s</b>
5.1 Design and implement a direct support professional brain injury training curriculum, leading to voluntary credentialing or certification.	In process	In lieu of designing a curriculum, a Council task force will review the <a href="#">Qualified Brain Injury Specialist Professional</a> curriculum.
5.2 Design and implement a pre-service curriculum for postsecondary students in health and human services programs, aimed at increasing knowledge and capacity to effectively provide services to lowans experiencing brain injury.	In process	This action step has been included as an activity in the IACP FY20 contract utilizing the <a href="#">ACBIS Brain Injury Fundamentals curriculum</a> within two Iowa community colleges.

5.3 Develop a proposal to establish enhanced reimbursement rates for utilizing credentialed or certified brain injury direct support professionals.	No progress	Determine options for the Council to make a formal recommendation.
5.4 Design and implement a brain injury training for hospital-based discharge planners and Medicaid-based case managers.	In process	This action step has been included as an activity in the IACP FY20 contract utilizing the ACBIS Brain Injury Fundamentals curriculum targeting case managers within Iowa's Managed Care Organizations. BIA-IA, through their FY20 contract, will continue to provide training and information to hospital-based discharge planners regarding brain injury using tools developed in FY19.

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

Action Step	Status	Next Step/s
6.1 Reformulate the Medicaid Home and Community Based Services Brain Injury Waiver reimbursement structure to reflect current and actual costs.	No progress	Conduct analysis of current and actual costs.
6.2 Survey funding needs for acute, post-acute, and community-based services and supports and make recommendations for improvement as identified.	No progress	Include questions in the IACP annual provider needs assessment and target organizations in acute, post-acute and community-based services to complete that needs assessment.
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 facilitation and training), to position the Iowa Department of Public Health for accessing federal funding opportunities.	Ongoing	The Brain Injury Services Program was level funded for FY20, ensuring level funding of program services, ensuring staffing, and availability of adequate match to draw down federal TBI grant funds.

**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.**

<b>Action Step</b>	<b>Status</b>	<b>Next Step/s</b>
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.	In process	Council staff continue to provide data to the governor’s staff regarding needs of the council and market opportunities for current and potential partners and advocates to join the council as appointed members and task force members.
7.2 Expand the number of partners and advocates collaborating with the Advisory Council on Brain Injuries through targeted recruitment, including representation from the underserved population identified in step 1.1.	Progress made	Council staff to continue marketing the council to current and potential partners and advocates, including those individuals and professionals in the underserved population identified in 1.1, to attend Council quarterly meetings and participate in task force activities. Task force to provide recommendations of organizations and individuals to target as well as methods for outreach.

***Focus Area 3: Prevention of Brain Injury***

**Goal 8: Reduce falls in Iowa.**

<b>Action Step</b>	<b>Status</b>	<b>Next Step/s</b>
8.1 Identify populations, including individuals with brain injury and other disabilities, and occupations at high risk of falls in Iowa.	In process	Determine brain injury question/s to submit for consideration to Iowa’s 2020 BRFSS.
8.2 Adapt existing falls prevention awareness and evidence-based strategies for targeted populations, as needed.	In process	In FY20, Community Health Partners, in partnership with IDPH and IACP, will work to implement and adapt Walk With Ease, as a falls prevention strategy for individuals with brain injury and other disabilities.
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.

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

Action Step	Status	Next Step/s
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.	In process	Promote newly developed <a href="#">Healthy Habit All Stars module for helmet use</a> . Prevention task force to explore and recommend additional strategies for increased availability of additional information regarding the importance of helmet use for motorized and non-motorized risk areas.
9.2 Increase the availability of bicycle helmets to youth.	Progress made	648 helmets were distributed in FY19. For FY20, determine availability of funds to continue to distribute bicycle helmets to Iowa youth.

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

Action Step	Status	Next Step/s
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	In FY20, Prevention task force to make recommendations regarding development of additional materials for distribution.
10.2 Increase the distribution of concussion awareness and prevention materials among the public.	Progress made	In FY20, Prevention task force to make recommendations regarding concussion awareness and prevention materials to be developed for distribution.
10.3 Include a concussion section to the annual surveillance report, Brain Injury in Iowa.	In process	In FY20, IDPH will include data from the Iowa Youth Survey and Brain Injury Registry in the <i>2019 Brain Injury in Iowa</i> report.

**Goal 11: Reduce preventable acquired brain injury.**

Action Step	Status	Next Step/s
11.1 Develop and disseminate material regarding acquired brain injury health risk factors, behaviors and exposures (e.g., obesity,	In progress	In FY20, IDPH epidemiologist to develop disability and health report for Iowa using 2018 Iowa Youth Survey and 2018 BRFSS results.

substance abuse, physical activity, nutrition, toxic exposure) among targeted populations.		
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.	In process	In FY20, Community Health Partners, in partnership with IDPH and IACP, will hold a webinar for brain injury service providers to recruit participation of organizations and individuals to participate in the evidence based program Walk with Ease to increase physical activity and reduce falls risk among individuals with brain injury and other disabilities. In FY20, discuss current evidence based strategies being used in Iowa (e.g. 5210 Healthy Choices Count!)
11.3 Recommend a policy that requires a brain injury prevention plan for individuals receiving publicly funded long-term services and supports.	No progress	Prevention task force, in partnership with staff from Iowa Medicaid, to draft and recommend policy language for requirement of brain injury prevention plan for individuals receiving publicly funded long-term services and supports.

More information about the Advisory Council on Brain Injuries, including a link to the State Plan for Brain Injuries 2018-2021, can be found at <http://idph.iowa.gov/brain-injuries/advisory-council-on-brain-injuries>