

**Testimony**  
**Long-Term Care Interim Committee**  
**Representative Kreidt, Chairman**  
**September 28, 2010**

Chairman Kreidt and members of the Long-Term Care Interim Committee, I am Susan Wagner, Human Service Program Administrator, with the Division of Mental Health and Substance Abuse Services, for the Department of Human Services (DHS). I am here to provide information on the status of implementation of 2009 Senate Bill 2198 relating to traumatic brain injury services (TBI).

DHS entered into a contract with the Head Injury Association of North Dakota (HIAND) on September 1, 2009 to provide information and referral services, informal supports, facilitate peer mentoring services and support groups, public awareness and education, and individual and programmatic advocacy efforts. Mr. Richard Ott is the executive director. HIAND has established a toll-free number and website and is in the process of opening an office. To date, HIAND has had 64 consults or contacts with individuals. HIAND has assisted individuals with providing necessary information about services and resources, transportation, financial assistance and other personal matters, request for a personal computer, and ongoing information and support. HIAND participated in a Talking Circle at Three Affiliated Tribes and continues to foster relationships with tribal entities including the Indigenous People's Brain Injury Association. HIAND continues to distribute informational material at every opportunity including public events such as the "Brain Train" event sponsored by St. Alexis Hospital on August 28, 2010. HIAND

sponsored a TBI Symposium on May 24, 2010 that was attended by 23 individuals who provide services to individuals who have sustained a TBI. HIAND is currently working on establishing a statewide mentoring program. Mentoring services will be provided to individuals who have sustained a TBI as well as family members. Prospective mentors are being recruited to participate in the first training event scheduled for October 29, 2010. A second initiative that HIAND is working on is formalizing an educational taskforce to help address problems, barriers, etc. that can occur when a student who has sustained a TBI is returning to school.

The Division of Vocational Rehabilitation (DVR) provides extended employment support services to individuals who have sustained a TBI. As of 9/27/10, DVR served 206 individuals with a primary and or secondary disability of TBI in FFY 2010, that is from October 1, 2009 – September 27, 2010. Of those 206 individuals, 17 have been employed. Of the 17 employed, one is receiving VR 'Other' extended services. In addition, 9 individuals are now closed with VR and continue to receive VR 'Other' extended services.

DHS entered into a contract with Community Options for Residential and Employment Services, Inc., on May 1, 2010, to provide pre-vocational skills training and mentoring services to individuals who have sustained a TBI. The goal of the work of Community Options is to assess the individual needs related to employment, develop an individual plan, and prepare individuals to work with DVR. Services can be provided on an individual as well as group basis and include such topics as resume development, interviewing, personal interests and skills, time management, working with others, goal setting, and finding your skills.

To date, services have been provided to 13 individuals. Services are available on a statewide basis.

DHS entered into a contract with HIT, Inc., on December 1, 2009, to provide social and recreational services to individuals who have sustained a TBI. Services have primarily been provided to four individuals in the Bismarck and Mandan communities. However, with the need for services in the eastern part of the state, HIT is subcontracting with an individual in Fargo to provide services to one individual and is in the process of a similar arrangement in Grand Forks. The contract has potential to provide services to nine individuals at any given time. Activities provided can be on an individual as well as group basis. Such activities as bowling, playing pool, walking, shopping, craftwork, movies, and going out to eat have been provided to date.

Funds designated for quality assurance and training have been expended to assist the Indigenous People's Brain Injury Association with their annual conference in May of this year; participate in a statewide effort with Protection and Advocacy, Department of Public Instruction, Dakota Medical Foundation, and the federal TBI grant to distribute a book for children on TBI to all elementary schools and libraries in North Dakota; will assist a number of individuals who will be providing mentoring services to attend a national conference on TBI in October of this year; and are in the process of talking with Sanford Health to partner with them to co-sponsor their conference in 2011.

Lastly, the legislation directed the DHS to host at least annually a meeting with the Adjutant General, Department of Health, Department of Public Instruction, and the Office of Veterans Affairs for the purpose of

discussing the provision of services to individuals who have sustained a TBI. In addition, the legislation directs the state agencies and political subdivisions to cooperate with the DHS to permit the DHS to efficiently coordinate services while avoiding duplication of services. To date, three meetings of this group have been held. In order to accomplish a thorough review and discussion of systems issues and enhance communication and collaboration, representation at the meetings has been expanded to include the HIAND, regional human services, Protection and Advocacy, and UND-CRH TBI Grant Administrator. Valuable information has been shared regarding the kinds of services each agency provides. We have also discussed challenges faced by individuals who have sustained a TBI, their family members and caregivers, and agency and or systems challenges. Future meetings will focus on how to best meet those challenges, continued coordination of services, and collaboration.

This concludes my testimony. I would be happy to answer any questions the committee might have. Thank you.