



MEMBER HANDBOOK

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Sept. 2021

Welcome

Congratulations on your appointment to the Advisory Council on Brain Injuries! As an appointed member of the Council, you are responsible for representing individuals in Iowa who are impacted by brain injury. For the Council to fulfill its mission, members like you need to be actively involved in the meetings and initiatives of the council. Your experiences, knowledge and leadership ability are valuable assets to the Council.

The purpose of this handbook is to serve as a resource to the various information you may need to fully participate as a member of the Council.

If you have any questions about the Council, your role as a Council member or the contents of this handbook, don't hesitate to reach out to council staff using the contact information at the bottom of this page.

Please note, you will periodically receive information from Council staff via email, including reminders about upcoming meetings. Emails sent by the Council staff will be sent blind carbon copy, unless it is sent to just one individual. Staff will not release appointed Council member contact information without prior permission from that individual.

Members who do not have email, or prefer an alternate means for communication should let the Council staff know of their preference (e.g. US postal service, phone call, text message).

Thank you for your service!

Iowa Department of Public Health

Brain Injury Services Program

515-281-8465

Brain.Injury@idph.iowa.gov

Background

Mission Statement

To represent individuals with brain injury, their families and all Iowans through advocacy, education, training, rehabilitation, research and prevention.

The Council will accomplish its mission through the following activities:

- Studying the needs of individuals with brain injury and their families.
- Making recommendations regarding the planning, development and administration of a comprehensive statewide service delivery system.
- Promoting and implementing injury prevention strategies.

History of the Advisory Council on Brain Injuries

In 1989, the Iowa Legislature established the Advisory Council on Head Injuries, which is now referred to as the Iowa Advisory Council on Brain Injuries. The Council was created to be responsive to the needs of Iowans with brain injury and to establish a comprehensive service delivery system.

Originally, the Council was assigned to the Iowa Department of Human Rights in the Division of Persons with Disabilities. In 1992, the Iowa Department of Public Health (IDPH) was designated as Iowa's lead state agency on brain injury and responsibility for the Council was transferred to the IDPH Bureau of Disabilities and Injury Prevention, now referred to as the Office of Disability, Injury and Violence Prevention.

The Council was established in Iowa law (*Code of Iowa 135.22A*) and the rules governing the Council are in 641 Iowa Administrative Code Chapter 56. Complete copies of these documents can be found in Appendix B and C of this handbook.

Over the years, the Council has had an active role in increasing awareness of brain injury and promoting prevention. The Council also serves as the advisory body for a federal Traumatic Brain Injury (TBI) State Partnership Program (SPP) grant awarded to the IDPH.

Major accomplishments of the Council have included producing the white paper *Cognitive Rehabilitation in Iowa* and the development and dissemination of resources for schools including a game for promoting awareness of injury prevention, a brain injury guide for teachers and updating a booklet on accommodations for cognitive disabilities. In collaboration with the Iowa Falls Prevention Coalition, the Council disseminated a falls risk self-assessment and falls prevention recommendations through Iowa Hy-Vee pharmacies and has sponsored their annual Falls Prevention Symposium. The Council has made recommendations to state agencies for the implementation of brain injury screening tools and workforce development training.

State Plan for Brain Injuries

Iowa's first State Plan for Brain Injuries was written in 1997, and is updated regularly. In preparation for developing each state plan, the council reviews various reports submitted by IDPH. This includes needs assessment reports from contracted partners, summaries of town hall listening sessions, and data reports summarizing the impact of brain injury in Iowa. The state plan is intended to provide statewide guidance for the design and implementation of brain injury related policies, programs, and prevention interventions. The identification of responsible parties and timelines are not included in the plan; however, the Council uses the state plan to guide the work of its various task force committees.

Brain Injury in Iowa

Brain injury is an important public health concern in Iowa. To better understand how brain injury impacts individuals living in Iowa, the Iowa Department of Public Health routinely conducts surveillance activities. Data is then shared in fact sheets, reports, or other ways. We also use this information to conduct outreach to individuals living in Iowa who have sustained a brain injury within our state. The purpose of the outreach is to inform individuals about the supports available through a fee-free service called NeuroResource Facilitation and how to connect to the state's contractor providing that service.

Annually, there are approximately 10,800 traumatic brain injuries (TBIs) in Iowa. This does not include the individuals who do not seek medical care or who are seen in a setting other than the hospital. This also does not include the individuals who receive medical care for non-traumatic brain injuries. The average annual cost for TBI-related emergency department visits is approximately \$46.3 million.

Children aged 5 to 14 years, older adolescents aged 15 to 24 years, and adults aged 85 years or older are most likely to sustain a TBI. Approximately one-quarter of emergency department visits for TBI-related injuries annually are by children 14 years old and younger. Iowans aged 85 years or older have the highest rates of TBI-related hospitalization and death.

The leading causes of TBIs in Iowa are from falls. In addition, injuries sustained by being struck by or against an object, motor vehicle traffic collisions, and assaults are also leading causes of TBI in Iowa.

Brain Injury Definitions

Brain injuries can be described in several different ways. Below is a list of terms and definitions that are commonly used. Brain injury may be defined differently in various settings. Variations in definitions may be based on eligibility requirements for certain programs and services.

Acquired Brain Injury (ABI) describes all types of brain injuries. Brain injuries are not hereditary, congenital, or degenerative nor caused by birth trauma. Brain injuries can also be described as traumatic or non-traumatic.

Traumatic Brain Injury (TBI) is caused by an external force to the head or body. For example, TBIs may be caused by hitting your head during a fall, car crash, a collision with another person or object, or from a blast injury (explosion). Concussions are a type of TBI, sometimes referred to as a mild TBI (mTBI).

Non-Traumatic Brain Injury (nTBI) results from an internal cause. This may be an illness, infection, stroke, poisoning or toxic such as a drug overdose, or from lack of oxygen to the brain (called anoxia).

The State of Iowa defines brain injury in **Iowa Code 135.22A**:

“Brain injury” means clinically evident damage to the brain resulting directly or indirectly from trauma, infection, anoxia, vascular lesions or tumor of the brain, not primarily related to a degenerative disease or aging process, which temporarily or permanently impairs a person’s physical, cognitive or behavioral functions, and is diagnosed by a physician. The diagnoses of clinically evident damage to the brain used for a diagnosis of brain injury shall be the same as specified by rule for the eligibility for the home and community-based services waiver for persons with brain injury under the medical assistance program.

Council Structure

The Council is made up of individuals who are survivors of brain injury, family members of individuals who have experienced a brain injury and professionals working in a field related to brain injury services. To fulfill the mission of the Council, its members have a responsibility to be a voice for individuals in Iowa who have been impacted by brain injury. Therefore, members of the Council need to be actively involved in the Council meetings and initiatives.

Appointed Members

The Council is composed of at least 50% individuals with lived experience, which means individuals who have had a brain injury or who are a family member of a person who has had a brain injury. State law requires most boards and commissions to be balanced according to gender and political affiliation. Geographical location and diversity is also considered. Appointed members are expected to regularly attend the quarterly meetings and strongly encouraged to participate on task force groups.

Application and Terms

Appointments to the council are made annually by the Governor of Iowa. Appointed members typically serve a two-year term, beginning in July.

Individuals who are interested in seeking an appointment* or reappointment to the Advisory Council on Brain Injuries should complete an application at

<https://talentbank.iowa.gov/board-detail/2038802a-3b6c-455a-919c-5df04d504477>

Applicants should include *all relevant personal and professional experience* when submitting an application. Individuals who are interested in reappointment to the Council should update their online application prior to the end of their term and let Council staff know they are interested in serving for another term.

As noted earlier, Council members should be actively involved. This includes regular attendance at Council meetings. Per Chapter 69.15, *Code of Iowa*, if an appointed member of Council does not attend three consecutive meetings within a year, they are to be considered to have resigned from the Council.

**Council members are encouraged to help recruit new members to the Council. Please remind individuals, should they not be selected immediately for appointment, to update their application annually and communicate with Council staff regarding their interest in appointment.*

Council Discussion and Voting

It is important that all members come to the meeting prepared to ask questions and participate in discussion. This means reviewing reports that have been submitted to the Council prior to the meeting. *Meeting materials are available for download at <https://idph.iowa.gov/brain-injuries/advisory-council-on-brain-injuries/meeting-information>.*

Appointed members are the voting members of the Council. Information about how to make a motion and voting is described in the Quarterly Meeting section.

Conflict of Interest

Members who have a potential conflict of interest related to a topic being discussed during a Council meeting, should refrain from participating in the discussion and announce their abstention, should the discussion lead to a motion and vote of the Council. You may have a conflict of interest is when you or one of your family members have the potential to benefit from decisions made by the Council.

Representing the Council

There may be times when you have the opportunity to represent the Council outside of its meetings. Members are encouraged to participate in the recruitment of new members to the Council and to promote the work of the Council. You may also have the opportunity to represent the Council at other committee meetings, conferences or workshops.

As a member of the Council, you may also become aware of opportunities to participate in brain injury advocacy. In those instances, it is important to know the expectations and limitations of your role.

If you are asked by an advocacy organization to speak at or participate in an event as a member of the Council, please let one of the Council staff know.

If you plan to identify yourself as a member of the Council, you should discuss this with Council staff prior to agreeing to speak with the Governor, members of the Legislature, or the media. While you may speak to your legislators as a private citizen, you must refrain from lobbying as a member of the Council.

Lobbying tries to directly influence a legislator or legislative body to encourage the passage, defeat or modification of legislation. Therefore, you should not identify yourself as a member of the Council when responding to calls to action or making direct appeals to decision-makers. Similarly, in instances when you have been identified as a member of the Council, you should clarify you are speaking as a private citizen.

The IDPH has a specific staff person who serves as our legislative liaison. If there is a particular policy that is of interest to the Council, the Council can provide information and education to the IDPH legislative liaison. This may include providing technical assistance in response to questions from the legislature or others, providing context on an issues such as historical and background information or examples from other states, or providing general education about issues such as the advantages and disadvantages of public policies.

Ex-officio Members

Ex-officio members are non-voting members of the Council. They represent various state agencies and are strongly encouraged to participate in Council discussion and to join a task force of the Council.

The state agencies represented on the Council include:

- Department for the Blind
- Department of Education
- Department of Human Services – Iowa Medicaid Enterprise
- Department of Human Services – Community Mental Health and Disability Services
- Department of Public Health
- Iowa Vocational Rehabilitation Services

Communication

Council staff sends out periodic communication to Council members via email, including reminders about upcoming meetings. Ex-officio members will also receive reminders about submitting reports in advance of the quarterly meetings. Staff will also send out calendar invites for the various meetings.

Members of the public who are interested in Council meetings can request to be on a meeting notification email distribution list.

Reports to the Council

Ex-officio members are asked to provide a report to the Council during the quarterly meetings. The Council relies on updates from ex-officio members about state agency programs and

activities and how this might impact people with brain injury. Reports should be emailed to Council staff around the 15th of the month when a quarterly meeting is held. This will ensure members have plenty of time to review the report prior to the meeting.

During the Council meeting, ex officio members will have a short amount of time to briefly summarize the key information from their report and answer questions. It is the responsibility of the members to review their report prior to the meeting; therefore, it is not necessary to go into great detail or read the entire report during the meeting.

Discussion and Voting

It is important that all members come to Council meetings prepared to ask questions and participate in discussion. This means reviewing reports that have been submitted to the Council prior to the meeting.

Ex officio members, while not voting members, often have information or subject matter expertise that is important to discussion during Council meetings and are encouraged to participate in the discussions and ask questions. Their contributions often provide important information about trends being observed and opportunities for systems change.

Officers

Appointed members have the opportunity to serve as officers of the Council. Officers are elected at the first meeting of each fiscal year, which occurs in July. Officers serve until their successor has been appointed.

These positions include:

- **Chairperson:** Responsible for presiding at all meetings of the Council. The chairperson appoints task forces as necessary and designates the chairperson of each task force.
- **Vice-chairperson:** Performs duties of the chairperson if the chairperson is absent or unable to act. The vice-chairperson performs other duties as assigned by the chairperson.
- **Immediate past chairperson:** assists the chairperson at the first meeting of the chairperson's appointment, assists with notetaking if the Council staff person is not available; assists the chairperson to identify Council business and necessary task force meetings.

Staff to the Council will assist the officers as needed, including scheduling and setting up meetings, taking meeting notes, and performing other logistical and organizational tasks.

Task Force Groups

There are two standing task force groups of the Council. The Executive Task Force and the State Plan Task Force. The chairperson may establish additional task force groups, as needed, to carry out the business of the Council. One such group is the COVID-19 and Brain Injury Task Force which was established in 2021.

Task force groups may be composed of appointed members, ex-officio members, service partners and individuals from the public. The chair of the task force must be an appointed member of the Council. All members of the task force have voting privileges during task force meetings; however, all decisions made by the task force must be approved at the next regular Council meeting by a vote of the appointed members.

For the past several years, the chairperson has chosen to use task force groups that align with the priority areas of the state plan. These task force groups then hold meetings to discuss topics related to the objectives in that priority area and develop recommendations, reports or other products to support progress on the state plan.

Task force meetings are scheduled by the task force chairperson for typically one hour. Due to the brevity of the meeting, they are usually held via teleconference.

Executive Task Force is made up of the chairperson, vice-chairperson, immediate past chair, and chairperson of the State Plan Task Force. The Executive Task Force is active during the time between meetings, setting the agenda for the Council meetings and acting on Council business. At the next meeting of the Council, interim actions of the Executive Task Force will be presented and acted on by the entire Council.

State Plan Task Force is made up of members appointed by the chairperson. The State Plan Task Force develops its recommendations to the Governor in the form of the State Plan for Brain Injury. When developing the State Plan, they use data compiled in brain injury surveillance reports and input gathered from Iowans with brain injury, their families and caregivers, and other stakeholders.

Individual and Family Service Task Force identifies activities that the Council can support or be involved in that would improve the lives of individuals with brain injury and their families by making needed services available in the state of Iowa. Work of this group resulted in the use of a screening tool for the identification of lifetime history of brain injury within various organizations.

Service System Enhancement Task Force identifies unmet needs related to treating neurobehavioral symptoms, increasing treatment outcomes and reducing out-of-state placements. This group has focused on activities that include ensuring a well-trained and competent workforce by recommending specific training requirements.

Prevention Task Force works on initiatives related to the prevention, or reduction of the severity, of brain injuries in the state of Iowa. These activities have included distribution of bicycle helmets, promotion of falls prevention awareness, and raising awareness of concussion management best practices.

Communication

Council staff will send out periodic communication to Council members via email, including reminders about upcoming meetings. Staff will not release Council member contact information. Emails sent by the Council staff will be sent blind carbon copy unless the message is sent to just one individual.

Members who do not have email, or prefer an alternate means for communication, should let the Council staff know of their preference, for example, U.S. postal service, phone call, text message.

Quarterly Meetings

Meetings of the full Council are held at least quarterly. The Council meeting year starts in July and ends in June of the following year. The meeting calendar for the upcoming year is set in April, prior to the start of the new Council year. Meetings are typically scheduled for the fourth Friday of July, October, January, and April. Meetings begin at 10:00 am. In person meetings typically include a break for lunch and will adjourn around 2:00 pm. Meetings held electronically typically adjourn at 12:30 pm.

Meetings are typically held electronically if extenuating circumstances exist, such as the COVID-19 public health emergency or bad weather. A tele-conference line, or other means for remote participation, will be made available during in person meetings for individuals who are not able to participate in person.

A Council meeting may be cancelled or rescheduled if attendance is expected to be low, as business cannot be conducted without a quorum present. Therefore, members are asked to let Council staff know whether or not they will be in attendance prior to the meeting.

A simple majority of appointed Council members must be present at the Advisory Council on Brain Injuries' meetings (also known as a **"quorum"**) to vote or make motions.

Special or emergency meetings, while rare, may be called for business of the Council that cannot wait until the next scheduled meeting.

Promoting Full Inclusion

To ensure all members are fully included in meeting, Americans with Disabilities Act (ADA) accommodations are available upon request. Members can also support full inclusion by adopting certain practices, such as those listed below.

Promptness. Meetings should start and end on time. Please arrive a few minutes early to the meeting.

Participation. Everyone’s view is valuable. Each member can make a unique contribution. Therefore it is important to both speak freely and to allow time for others to speak as well.

Basic conversational courtesies. Listen attentively and respectfully of others. Do not interrupt or participate in side conversations. Some individuals who have experienced brain injury may have decreased speed in processing conversation or expressing themselves. It is important to give individuals the time they need to participate in the discussion.

Technology courtesies. While we recognize the need to stay connected, we encourage people to put their cell phones on silent and put them aside during meetings to remove distractions such as email and text messages. If a meeting is held using online platform, such as Zoom, it is more engaging to see people, so please have your video on. You may need to have yourself on mute until you want to speak to limit background noise or feedback experienced by others.

A teleconference line is available during in person meetings for members and others who are not able to join the meeting in person. It is important for individuals in the meeting room to speak clearly and loudly so the individuals on the phone can hear you. Members who are on the phone should be given opportunities to participate in the discussion. The chairperson will attempt to pause the discussion to allow time to get comments from members participating remotely.

Avoid acronyms and jargon. Speak in plain language whenever possible. Acronyms should be avoided or explained when used. If you do not understand terms being used, please do not hesitate to ask for clarification. Members of the Council come from a variety of backgrounds and experiences; therefore, everyone may not be familiar with various acronyms or terms commonly used among brain injury professionals. A list of common acronyms has also been included in the Resources Section of this handbook.

Be prepared. Council staff will make all attempts to gather and provide meeting materials in advance. These materials may include the agenda, previous meeting minutes for Council approval, and meeting reports that will be presented during the meeting. As a member of the Council, you should review materials prior to the meeting so that time doesn’t need to be spent reading the materials, but can instead focus on discussion and questions.

Meeting Communication

Meeting agendas are posted publicly and will be sent to members of the Council at least 3 days prior to the meeting. **If you have an item you would like added to the agenda, please notify Council staff or the chairperson at least a week prior to the meeting.**

Meeting materials, including agenda, previous meeting minutes, and reports are available for download at <https://idph.iowa.gov/brain-injuries/advisory-council-on-brain-injuries/meeting-information>

Meeting Structure

Each meeting will follow a similar structure and is outlined in the agenda. An agenda may include the following:

1. Establish quorum
 - a. Council staff will take a roll-call
 - b. Staff will confirm whether more than 50% of appointed members are present
2. Chair calls the meeting to order
3. Review the agenda**
4. Review and approve minutes from the previous meeting
 - a. An appointed member will make a motion to approve the minutes
 - b. Another appointed member will second that motion
 - c. Any discussion related to the motion, such as recommendations for changes to the minutes will be entertained
 - d. Chairperson will call for a vote
5. Reports from the task force groups
6. Report from the Iowa Department of Public Health's brain injury services program
7. Reports from ex-officio members
8. Updates from select organizations
9. Presentation or discussion from a guest speaker (individuals who wish to be on the agenda should make a request to Council staff at least one week prior to the Council meeting)
10. Adjournment

***Meetings held in person will typically break for lunch.*

During the meeting, the Council may wish to make a formal decision or recommendation on a topic. When that is the case, the chairperson will ask for a motion OR an appointed member may make a motion, stating what specific action should be taken. For example, "I move to approve the minutes" or "I move to approve the budget".

After a motion has been made, another appointed member must second the motion. They will typically say "I second", "second", or "I second the motion".

When a motion and a second has been received, the chairperson will call for discussion. This is an opportunity to for both appointed and ex-officio members to discuss the topic and ask questions. As a result of this discussion, the person who made the original motion can revise their motion. This is sometimes referred to as a "friendly amendment". The person who seconded the original motion can choose whether or not to accept the revision.

After discussion, a vote will be taken on the motion or a subsequent friendly amendment. Appointed members will either vote for, against or abstain from voting on the motion. An affirmative vote of two-thirds of the appointed members present is required for a vote to pass.

The following table summarizes the process, including who is responsible for each step:

Action	Who
Make a motion	<ul style="list-style-type: none"> ● Chairperson will invite a motion, or ● Appointed member asks to make a motion; chair will allow or not
Second the motion	Appointed member
Discussion	<p>All members, except those with a conflict of interest</p> <p>Outcome may be:</p> <ul style="list-style-type: none"> ● Amend the motion through a “friendly amendment”, if needed (appointed member who originated the motion), or ● Delay action by putting additional time for discussion on the agenda of the next Council meeting (called “Tabling the motion”) ● Send to a task force for further discussion and bring recommendation to next meeting (chair)
Call for a vote	<p>Chairperson</p> <ul style="list-style-type: none"> ● Quorum (at least 50% of appointed members present) is required to have a vote
Vote	<p>Appointed members</p> <ul style="list-style-type: none"> ● 2/3 of present appointed members must vote yes for the motion to pass ● Members with a conflict of interest should abstain from voting

Meeting Reports and Other Resources

Meeting agendas, minutes, reports, and other documents for quarterly and task force meetings will be made available in advance of meetings. Council staff will email documents to members of the Council and post the information on the Council meeting website. For in person meetings, printed packets of the agenda, past meeting minutes, and key reports will be made available to members of the Council.

Meeting information is retained for two years and available online and in person, upon request.

The Council meeting site is <https://idph.iowa.gov/brain-injuries/advisory-council-on-brain-injuries/meeting-information>. To access the documents:

1. Look in the lists of Upcoming Meetings or Past Meetings for the meeting date you are interested in
2. Click “Details” to view available documents
3. Click the description hyperlink to download the document

The images below illustrate the steps described above, for accessing Council meeting materials.

Advisory Council on Brain Injuries - Meeting Information

Upcoming Meetings

- 07/23/2021 - Advisory Council on Brain Injuries - Quarterly Meeting - Details
- 10/22/2021 - Quarterly Meeting: Advisory Council on Brain Injuries - TBD - Details
- 01/28/2022 - Quarterly Meeting: Advisory Council on Brain Injuries - TBD - Details
- 04/22/2022 - Quarterly Meeting: Advisory Council on Brain Injuries - TBD - Details

Past Meetings

- 07/19/2021 - Covid 19 & Brain Injury Task Force - This meeting will be held on Zoom (see agenda for details) - Details
- 07/07/2021 - ACBI Covid-19 & Brain Injury task force - see agenda for log in information - Details
- 06/16/2021 - State Plan task force - This meeting will be held on Zoom (see agenda for details) - Details
- 06/11/2021 - Prevention Task Force - This meeting will be held via Google Meet (see agenda for details) - Details
- 06/08/2021 - Covid and Brain Injury task force - This meeting will be held on Zoom (see agenda for details) - Details
- 05/14/2021 - Prevention Task Force - This meeting will be held via Google Meet (see agenda for details) - Details

Advisory Council on Brain Injuries - Meeting Information

Upcoming Meeting Detail

Title: Advisory Council on Brain Injuries - Advisory Council on Brain Injuries - Quarterly Meeting

Date: 07/23/2021

Time: 10AM - 12:30PM

Agenda: Agenda - July 23, 2021

Other Files:

- FOR APPROVAL: April 2021 minutes (draft)
- Report: DHS IIME July 2021 (Q4 waiver)
- Report: DHS MHDs July 2021
- Report: IDPH Brain Injury Services Program July 2021 (updated 7.22.2021)
- Report: IDPH July 2021

Contact Council staff for assistance, if needed.

Others in Attendance

Council meetings are open to the public; therefore, there may be people attending the meeting in addition to the Council members and staff. **Members of the public should not sit at the Council table or speak during a meeting, unless asked to do so.** There will be an area designated for the public to sit and observe the meeting. Instances when the Council may invite others to the table and to speak at meetings include:

- Providing a report to the Council
- Giving a presentation or other information per request of the Council
- Having been asked by the chair to speak
- During the public comment period on the agenda

Professional Development and Other Opportunities

In your role as a member of the Council, you may be offered opportunities to participate in professional development and other public relations opportunities. For some events registration fees and travel will be paid for directly by IDPH or be reimbursable to you. Others may not. It is important to clarify with the Council staff, prior to an event, if you have any questions about who will pay for travel and registration and what are allowable expenses.

Council funds should be used as last resort. For example, members who would have their employer typically pay for registration or travel should still do so. More information about reimbursable expenses is outlined later in this handbook.

Annual Conferences

The Council may choose to pay for members to attend national or state conferences. In this event, travel and registration may be covered expenses. If you are selected to attend one of these events, Council staff will provide detailed information about what expenses might be incurred, who will pay the expenses and how to request reimbursement.

Stakeholder Day

Each year, the Administration for Community Living hosts a stakeholder day in Washington DC, in conjunction with the Brain Injury Awareness Hill Day. The Council may opt to send an appointed member, typically the chairperson, to represent the Council at this event. Council staff will provide detailed information about allowable expenses the council members may need to pay and how to request reimbursement.

Proclamation Signings

Members of the Council are welcome to attend public signings of Governor Proclamations. These typically occur in March for Brain Injury Awareness Month and in August for Concussion Awareness Month. Due to the brevity of these events, travel **is not** typically reimbursed. However, Council staff will attempt to coordinate this event with a time when the Council members may already be in the Des Moines area, for example to attend a conference or council meeting.

Travel Reimbursement

Appointed members of the Council are eligible for reimbursement of travel-related meeting expenses. **It is important to work with council staff to ensure you are submitting reimbursement requests correctly.** A copy of the Travel Reimbursement Form is included in Appendix A of this handbook.

Receipts **MUST** be provided for all expenses being requested for reimbursement. **Receipts must identify the date, time, city, state, itemize what was eaten and the cost** (credit card receipts are not acceptable). **Members will only be reimbursed up to the maximum reimbursable about outlined in the tables below.**

Meals

Receipts **MUST** be provided for all meals. Alcoholic beverages are not an allowable expense. Tip may be included for sit-down service up to 15% of the pre-tax amount.

Expense	Reimbursable amount	Notes
Breakfast	Up to \$12.00	If departing home prior to 6:00 am
Lunch	Up to \$15.00	
Dinner	Up to \$29.00	If returning home after 7:00 pm

Transportation

Expense	Reimbursable amount	Notes
Mileage OR Public Transportation	\$.39/mile OR Actual expense	Receipt is required for public transportation expenses (such as taxi, bus)

Expense	Reimbursable amount	Notes
Parking	Actual expense	Receipt is required. Check with staff for any other restrictions prior to parking where a fee may be imposed.

Lodging

Council appointed members are permitted to request the “Iowa board and commission rate” when booking a hotel room for official business. A copy of your letter of appointment serves as proof of your status when requested by the hotel. Council staff will assist you in identifying hotels which honor this rate.

Incidentals incurred during your stay will not be reimbursed unless they qualify for another reimbursable (for example, room service may qualify as an eligible meal).

Expense	Reimbursable amount	Notes
Lodging	Up to \$120 per night + tax	<ul style="list-style-type: none"> ● Prior to booking lodging, contact council staff for assistance identifying a hotel that accepts the state rate and that the expense will be reimbursable. ● Request a “board and commission rate” when booking a hotel room for official business. ● Your appointment letter will serve as proof you are eligible for the state rate.

W-9s, Direct Deposit and Travel Reimbursement

Appointed members who are interested in travel reimbursement must have a current W-9 Form on file. A W-9 is an Internal Revenue Service form which is used to confirm a person’s taxpayer identification or social security number.

To request travel reimbursement, Council appointed members must complete a travel reimbursement form. Council staff will provide a form to you during in person meetings and for other planned travel, such as the Brain Injury Alliance annual conference. Please work with Council staff to ensure the form is completed thoroughly and correctly so there are no delays in your reimbursement.

Tips for completing the travel reimbursement form:

- Use pen to complete your form. If you use pencil, the form will be returned to you.
- Ensure the address on the form is the same as the address on your W-9 Form.
- Enter the date and time of travel (when you leave home and when you return), or ensure that information is correct if it has been prefilled for you.
- Enter the amount of the eligible expenses in the correct field for each day.
- Attach proof of expense (itemized receipt).

- Sign and date the form.

Reimbursement will be in the form of a check mailed to you or electronic direct deposit to your bank account. **If you prefer a direct deposit, ask Council staff to give you a direct deposit request form.** This form will include your banking information where you want the travel reimbursement to be deposited.

Resources

Staff to the Council

The Brain Injury Services Program staff serve as staff to the Council. You can reach staff by calling 515-281-8465 or by emailing Brain.Injury@idph.iowa.gov.

<p>Maggie Ferguson Brain injury & disability program manager 515-281-8465 maggie.ferguson@idph.iowa.gov</p>	<p>Jim Pender TBI grant manager 515-204-7978 james.pender@idph.iowa.gov</p>	<p>Toby Yak Epidemiologist 515-322-3766 toby.yak@idph.iowa.gov</p>
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Please reach out to Council staff with questions about Council meetings, reimbursement of travel expenses or other questions you might have about the program or council.

Mentors

Individuals who have served on the Council for more than one term or have other experience serving on boards are encouraged to mentor new members on how to be effective as a Council member. Similarly, newer members are encouraged to seek out a mentor if they are interested in developing their leadership skills. Leadership opportunities may include serving as a task force chair or co-chair. Speak with one of the Council staff to learn more.

The Iowa Talent Bank also helps people serve as a mentor or to find a mentor with experience servicing on city, county or state boards or commissions. The Iowa Talent Bank uses an individual’s interests (such as arts, culture, civil rights and so on), their interest in learning more about serving on local or state boards and commissions, or in sharing their experience serving on boards and commissions to pair individuals with potential mentors or mentees. If you are interested in serving as a mentor or in finding a mentor, log onto your Iowa Talent Bank account profile (<https://talentbank.iowa.gov/>) and click on the Mentorship tab on the left-hand side of the page to answer some general questions and find a “match.”

Common Terms and Acronyms

While the Council strives to limit use of acronyms, there are some that may be used frequently. Below is a table of terms that you might hear during a meeting. If at any time during an Council meeting you hear a term that is unfamiliar to you, please feel free to pause the conversation to get clarification. It is likely you are not the only one who is unfamiliar with the term.

Acronym	Term	Notes
ABI	Acquired Brain Injury	

Acronym	Term	Notes
ACBI	Advisory Council on Brain Injury	May also be referred to as “the Council”
ACBIS “ack-bis”	Academy for the Certification of Brain Injury Specialists	A nationally recognized program from the Brain Injury Association of America
ACL	Administration for Community Living	Federal agency which administers grant programs
AEA	Area Education Agency	Provide support and technical assistance to schools
BI	Brain Injury	
BIAIA	Brain Injury Alliance of Iowa	
BIRT “bert”	Brain Injury Resource Teams	Specialists within some Area Education Agencies
BISN “bison”	Brain Injury Support Network	Peer support and training offered through IDPH contract with the BIAIA
BISP “bisp”	Brain Injury Services Program	The name of the program administered by the Iowa Dept of Public Health
CBIS “see-bis”	Certified Brain Injury Specialist	A nationally recognized brain injury certification
CBIS-T “see-bist”	Certified Brain Injury Specialist - Trainer	A nationally recognized brain injury certification
CCO	Consumer Choice Option	A program through the HCBS waiver allowing for flexibility in services and for hiring your own support staff
CDAC “see-dack”	Consumer directed attendant care	Medicaid funded personal attendant service
CDC	Centers for Disease Control and Prevention	Federal public health agency
CDD	Center for Disabilities and Development (Univ. of Iowa)	A part of the University of Iowa Hospital providing specialty care and programs for people with disabilities
CMS	Centers for Medicare & Medicaid Services	Federal agency overseeing Medicaid and Medicare
CNRS	Community Neurobehavioral Rehabilitation Services	
DHS	Iowa Department of Human Services	
HCBS	Home and Community Based Services	Services for individuals with disabilities who are living outside of facilities
HIPPA “hip-a”	Health Information Portability & Privacy Act	
HHS	Health and Human Services	
IACP	Iowa Association of Community Providers	Trade association in Iowa for disability service providers
IBIRN “eye-burn”	Iowa Brain Injury Resource Network	

Acronym	Term	Notes
ICF/ID	Intermediate Care Facility for Individuals with Intellectual Disabilities	
IDPH	Iowa Department of Public Health	
IME	Iowa Medicaid Enterprise	
IVRS	Iowa Vocational Rehabilitation Services	
MHDS-C	DHS Mental Health and Disability Services - Community	
MHDS-F	DHS Mental Health and Disability Services - Facility	
NASHIA "nah-shaw"	National Association of State Head Injury Administrators	National membership association
NRF "nerf"	Neuro-Resource Facilitation	A program of the BIAIA, funded by a contract from the IDPH
SNF "sniff"	Skilled Nursing Facilities	
TBI	Traumatic Brain Injury	
VA	Department of Veterans Affairs	Federal agency overseeing Veteran's affairs
REAP	Remove/Reduce Educate Adjust/Accommodate Pace	Concussion management process endorsed by the IDPH and IDoE
MCO	Managed Care Organization	Medicaid contractor
ICC	Iowa Concussion Consortium	A program of the BIAIA
DRI	Disability Rights Iowa	Iowa's protection and advocacy organization
SCL	Supported Community Living	
USBIA	United States Brain Injury Alliance	

APPENDIX B – Code of Iowa 135.22A Advisory Council on Brain Injuries

1. For purposes of this section, unless the context otherwise requires:
 - a. "*Brain injury*" means an injury to the brain* as defined in section 135.22.
 - b. "*Council*" means the advisory council on brain injuries.
2. The advisory council on brain injuries is established. The following persons or their designees shall serve as ex officio, nonvoting members of the council:
 - a. The director of public health.
 - b. The director of human services and any division administrators of the department of human services so assigned by the director.
 - c. The director of the department of education.
 - d. The chief of the special education bureau of the department of education.
 - e. The administrator of the division of vocational rehabilitation services of the department of education.
 - f. The director of the department for the blind.
3. The council shall be composed of a minimum of nine members appointed by the governor in addition to the ex-officio members, and the governor may appoint additional members. Insofar as practicable, the council shall include persons with brain injuries, family members of persons with brain injuries, representatives of industry, labor, business, and agriculture, representatives of federal, state, and local government, and representatives of religious, charitable, fraternal, civic, educational, medical, legal, veteran, welfare, and other professional groups and organizations. Members shall be appointed representing every geographic and employment area of the state and shall include members of both sexes. A simple majority of the members appointed by the governor shall constitute a quorum.
4. Members of the council appointed by the governor shall be appointed for terms of two years. Vacancies on the council shall be filled for the remainder of the term of the original appointment. Members whose terms expire may be re-appointed.
5. The voting members of the council shall appoint a chairperson and a vice chairperson and other officers as the council deems necessary. The officers shall serve until their successors are appointed and qualified. Members of the council shall receive actual expenses for their services. Members may also be eligible to receive compensation as provided in section 7E.6. The council shall adopt rules pursuant to chapter 17A.
6. The council shall do all of the following:
 - a. Promote meetings and programs for the discussion of methods to reduce the debilitating effects of brain injuries, and disseminate information in cooperation with any other department, agency, or entity on the prevention, evaluation, care, treatment, and rehabilitation of persons affected by brain injuries.
 - b. Study and review current prevention, evaluation, care, treatment, and rehabilitation technologies and recommend appropriate preparation, training, retraining, and distribution

of personnel and resources in the provision of services to persons with brain injuries through private and public residential facilities, day programs, and other specialized services.

- c. Participate in developing and disseminating criteria and standards which may be required for future funding or licensing of facilities, day programs, and other specialized services for persons with brain injuries in this state.
- d. Make recommendations to the governor for developing and administering a state plan to provide services for persons with brain injuries.
- e. Meet at least quarterly.

7. The department is designated as Iowa's lead agency for brain injury. For the purposes of this section, the designation of lead agency authorizes the department to perform or oversee the performance of those functions specified in subsection 6, paragraphs "a" through "c". The council is assigned to the department for administrative purposes. The director shall be responsible for budgeting, program coordination, and related management functions.

8. The council may receive gifts, grants, or donations made for any of the purposes of its programs and disburse and administer them in accordance with their terms and under the direction of the director.

APPENDIX C – Chapter 55 Advisory Council on Brain Injuries (Administrative Rules)

641—55.1(135) Definitions. For the purposes of this chapter, the following definitions shall apply:

“Appointed members” means members of the advisory council on brain injuries who have been appointed by the governor’s office.

“Brain injury” means a brain injury as defined in Iowa Code section 135.22.

“Chairperson” means the chairperson of the advisory council on brain injuries, who has been elected by the majority of the council’s members.

“Council” means the advisory council on brain injuries.

“Department” means the Iowa department of public health.

“Ex officio members” means designated state agency staff who are statutory members of the advisory council on brain injuries.

“Person from the public” means a person or agency who does not have an affiliation with the advisory council on brain injuries but who has knowledge or skills beneficial to the council for specific task forces or projects.

“Service partners” means representatives of organizations who partner with the Iowa department of public health or the advisory council on brain injuries to carry out activities related to the mission of the council.

641—55.2(135) Mission of council. The council’s mission is to represent individuals with brain injury, their families, and all Iowans through advocacy, education, training, rehabilitation, research and prevention. By means of these efforts, the council brings about awareness to others and serves as a source of hope and healing to survivors of brain injury. The council will accomplish this mission through the following activities:

1. Studying the needs of individuals with brain injury and their families.
2. Making recommendations regarding the planning, development, and administration of a comprehensive statewide service delivery system.
3. Promoting and implementing injury prevention strategies.

641—55.3(135) Council established. The advisory council on brain injuries, part of the Iowa department of public health, is established pursuant to Iowa Code section 135.22A.

55.3(1) The council shall consist of a minimum of nine appointed members in addition to the ex officio members.

a. The following persons or their designees shall serve as ex officio, nonvoting members of the council:

- (1) The director of public health.
- (2) The director of human services and any division administrators of the department of human services so assigned by the director.
- (3) The director of the department of education.
- (4) The chief of the special education bureau of the department of education.
- (5) The administrator of the division of vocational rehabilitation services of the

department of education.

- (6) The director of the department for the blind.
- (7) The commissioner of insurance.

b. Appointed members.

(1) Insofar as practicable, the council shall include persons with brain injuries; family members of persons with brain injuries; representatives of industry, labor, business, and agriculture; representatives of federal, state, and local government; and representatives of religious, charitable, fraternal, civic, educational, medical, legal, veteran, welfare, and other professional groups and organizations.

(2) Members shall be appointed to represent every geographic area of the state and shall include members of both sexes.

55.3(2) Appointed members' terms shall be for two years.

55.3(3) Vacancies shall be filled in the same manner in which the original appointments were made for the balance of the unexpired term.

55.3(4) Members whose terms expire may be reappointed.

641—55.4(135) Officers.

55.4(1) Officers of the council shall be a chairperson, vice-chairperson and immediate past chairperson.

- a.* The officers shall be elected at the first meeting of each fiscal year.
- b.* Vacancy in the office of chairperson shall be filled by elevation of the vice-chairperson.
- c.* Vacancy in the office of vice-chairperson shall be filled by election at the next meeting

after the vacancy occurs.

55.4(2) Duties of the officers.

a. The chairperson shall:

- (1) Preside at all meetings of the council,
- (2) Appoint such task forces as deemed necessary, and
- (3) Designate the chairperson of each task force from the appointed members of the council.

b. The vice-chairperson shall:

- (1) Perform the duties of the chairperson if the chairperson is absent or unable to act.

When so acting, the vice-chairperson shall have all the powers of and be subject to all restrictions upon the chairperson.

- (2) Perform such other duties as may be assigned by the chairperson.

c. The immediate past chairperson shall:

- (1) Assist the chairperson at the first meeting of the chairperson's appointment.

(2) Perform the duties of the chairperson if the chairperson and vice-chairperson are absent or unable to act. When so acting, the immediate past chairperson shall have all the powers of and be subject to all restrictions upon the chairperson.

- (3) Assist with note taking if there is no council staff person available.

- (4) Assist the chairperson to identify council business and necessary task force meetings.

55.4(3) The officers shall serve until their successors are appointed.

641—55.5(135) Duties of the council. The council shall perform the following duties:

55.5(1) Promote meetings and programs for the discussion of methods to reduce the debilitating effects of brain injuries, and disseminate information in cooperation with any other department, agency, or entity on the prevention, evaluation, care, treatment, and rehabilitation of persons affected by brain injuries.

55.5(2) Study and review current prevention, evaluation, care, treatment, and rehabilitation technologies and recommend appropriate preparation, training, retraining, and distribution of personnel and resources in the provision of services to persons with brain injuries through private and public residential facilities, day programs, and other specialized services.

55.5(3) Participate in developing and disseminating criteria and standards which may be required for future funding or licensing of facilities, day programs, and other specialized services for persons with brain injuries in Iowa.

55.5(4) Make recommendations to the governor for developing and administering a state plan to provide services for persons with brain injuries in Iowa.

641—55.6(135) Meetings.

55.6(1) The council shall meet at least quarterly.

- a.* The annual meeting schedule shall be established by the beginning of the fiscal year.
- b.* Meetings will be held the following months: January, April, July and October.

55.6(2) Notice of routine meetings and agenda will be made available to the members a minimum of five working days prior to the meeting.

55.6(3) Meetings may be scheduled as business requires, but notice must be given to members at least five working days prior to the meeting.

55.6(4) All meetings will be held in facilities accessible to and functional for people with physical disabilities.

55.6(5) Notification for reasonable accommodations should be made to department staff at least three working days prior to the meeting.

55.6(6) All meetings are open to the public in accordance with the open meetings law, Iowa Code chapter 21.

55.6(7) Cameras and recording devices may be used at open meetings, provided they do not obstruct the meeting. The presiding officer may request a person using such a device to discontinue its use if it is obstructing the meeting.

55.6(8) The presiding officer may exclude any person from the meeting for repeated behavior that disrupts or obstructs the meeting.

55.6(9) The operation of council meetings will be governed by the following rules of procedure:

- a.* A simple majority of the appointed members shall constitute a quorum. Motions may not be made without a quorum.
- b.* When a quorum is present, a motion is carried by affirmative vote of two-thirds of

appointed members present.

c. Time for public comment will be made during each council meeting.

55.6(10) Meeting attendance.

a. Council members are expected to be present in person for council meetings with the exception of extenuating circumstances that have been cleared beforehand by the chairperson.

b. Any council member who is unable to attend a meeting will notify council staff at least 24 hours prior to the start of a regularly scheduled meeting. A meeting may be canceled if attendance is expected to be low.

c. If there are extenuating circumstances, a teleconference may be set up for the member to participate in the business portion of the meeting.

d. Appointed members may be recommended for dismissal from the council if they miss more than three meetings annually.

55.6(11) Special meetings. Special meetings shall be for business of the council that cannot wait until the next scheduled meeting.

a. Special meetings may be called by the chairperson to discuss emergent issues within a 24-hour time period.

b. A majority of council members may call a special meeting.

c. Special meetings shall be held in accordance with Iowa Code chapter 21.

55.6(12) Electronic meetings.

a. The council may conduct a meeting by electronic means only in circumstances where such a meeting in person is impossible or impractical, pursuant to Iowa Code section 21.8.

b. Any vote by E-mail shall have the tabulated results presented at the next regular meeting of the council and the ballots retained for a period of six months for confirmation of results.

641—55.7(135) Minutes. The advisory council shall keep minutes of all its meetings showing the date, time, place, members present, members absent, and the general topics discussed.

55.7(1) The minutes shall reflect the actions agreed upon by the members for topics requiring the members' input or consensus.

55.7(2) If a meeting is convened within a 24-hour time period to discuss emergent issues, the minutes shall reflect the emergent nature of the meeting.

55.7(3) If a meeting is conducted via telephone, the minutes shall reflect the reason for the use of this method of meeting.

55.7(4) The minutes shall be available at the council staff office for inspection Monday through Friday from 8:30 a.m. to 4:30 p.m.

641—55.8(135) Task forces. The chairperson of the council may establish task forces as needed to carry out the business of the council.

55.8(1) The council will have two standing task forces: the executive task force and the state plan task force.

a. The executive task force shall be made up of the council chairperson, vice-chairperson, immediate past chairperson and chairperson of the state plan task force.

b. The state plan task force shall be made up of members appointed by the chairperson.

55.8(2) The council may designate additional task forces to perform such duties as may be deemed necessary.

55.8(3) Task forces may be composed of appointed members, ex officio members, service partners, and persons from the public.

55.8(4) The chairperson of each task force will be an appointed member of the council.

55.8(5) All members of task forces shall have voting privileges during task force meetings; however, all decisions made by task forces must be approved at the next regular council meeting by a vote of the appointed members.

55.8(6) Task force meetings shall be scheduled at least five working days prior to the meeting.

641—55.9(135) Expenses of advisory council members. The following may be considered necessary expenses for reimbursement of advisory council members when the expenses are incurred on behalf of advisory council business and are subject to established state reimbursement rates:

1. Reimbursement for travel in a private car.
2. Actual lodging and meal expenses, including sales tax on lodging and meals.
3. Actual expenses of public transportation.

Notes

