



Defense Health Board Meeting

November 12, 2009



Traumatic Brain Injury

Family Caregiver Panel Final Report

Anne M. Moessner, RN, MSN, CRRN

**TBI Clinical Nurse Specialist; Coordinator, TBI Model System; Mayo Clinic
Panel Chair**

**Lead Agency: Defense and Veterans Brain Injury Center
A component center of the Defense Centers of Excellence for
Psychological Health and Traumatic Brain Injury**



Presentation Objectives

- Review purpose of TBI Family Caregiver Panel
- Summarize final panel meeting (October, 2009)
- Request DHB approval of curriculum
- Present panel recommendations for:
 - Curriculum accountability/proponency
 - Communication and distribution of curriculum
 - Training for personnel who will distribute the curriculum
 - Updating and evaluation of curriculum
- Provide update on mild TBI module



National Defense Authorization Act of 2007 (NDAA), Section 744

- Mandated 15-member panel to *“develop coordinated, uniform, and consistent training curricula to be used in training family members in the provision of care and assistance to members and former members of the Armed Forces with traumatic brain injuries.”*
- Panel members:
 - Initially appointed March, 2008
 - Re-appointed June, 2009
 - Appointments expire June, 2010
- No plans for future meetings. However, many panel members available as ongoing consultants/experts for communication and training phase of project, and to assist with completion of mild TBI module.



Tasks of Panel

- Review literature and develop an evidence-base for the curriculum
- Develop consistent curriculum for TBI caregiver education
- Recommend mechanisms for the dissemination of curriculum throughout DoD and VA



DVBIC/DCoE Role

- Provide programmatic and logistical support to ensure
 - Development of curriculum according to congressional mandate
 - Ensure content accuracy

UNCLASSIFIED



October, 2009 Panel Meeting Agenda

- Review curriculum and August 2009 DHB recommendations, vote to approve
- CEMM multi-media presentation
- Discuss communication, dissemination, training, and evaluation of curriculum
- Re-examine Mild TBI module
- Consider responsible agencies for:
 - Policy
 - Programming and Budgeting
 - Implementation (to include education and distribution)
 - Maintenance and Updates
 - Evaluation



Curriculum Review, DHB Recommendations, Vote to Approve

- Discussion of final draft of curriculum
- Detailed review of report from TBI Family Caregiver focus groups
- Minor edits made with writers and graphics representatives present
- **Panel Vote to Approve: Unanimous**
- **Recommend: Approval of the Curriculum**
Traumatic Brain Injury: A Guide for Caregivers of Service Members and Veterans by DHB



DHB Recommendations

August 09 Meeting

- Include pictures of family caregivers
 - **Result of panel consideration: Concur**
- Provide certificate of completion to family caregivers
 - **Result of panel consideration: Partially Concur**
- Explore social networking opportunities
 - **Result of panel consideration: Needs Study**
- Develop plans for robust communication, distribution, training and evaluation
 - **Result of panel consideration: Concur**



CEMM Multimedia Presentation

- June 08- Panel selected CEMM to produce multimedia component of the curriculum
- Lt. Col. Randy Mauffray, Director, Center of Excellence for Medical Multimedia (CEMM), provided:
 - Detailed update/demonstration of CEMM web site
 - Current and future TBI content (including mild TBI)
 - Multimedia and interactive features
 - Family/caregiver interviews
 - Evaluation and other site capabilities
- **www.traumaticbraininjuryatoz.org**



CEMM Web Site

CEMM TBI - Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites

Address <http://www.traumaticbraininjuryatoz.org/> Go Links

Home | Resource Center | About the CEMM | Contact Us | Interactive Brain

Traumatic Brain Injury: The Journey Home

Welcome to **The Journey Home - the CEMM Traumatic Brain Injury (TBI) Web Site**. This site provides an informative and sensitive exploration of Traumatic Brain Injury (TBI), including information for patients, family members, and caregivers. Topics include types and symptoms of brain injury, TBI treatment and recovery, and helpful insights about the potential long-term effects of brain injury. Animation is used to help patients clearly understand the brain, and the results of injuries to different parts of the brain. Survivors and their caregivers share courageous stories about their own experiences, providing down-to-earth facts along with inspiration and hope. [Watch the Traumatic Brain Injury introduction video.](#)

The Brain	Mild TBI	Moderate to Severe TBI	Caregiver's Journey	Personal Journeys
				
The anatomy and physiology of the brain, including an interactive brain to explore	The most common form of brain injury, also known as concussion	Information about treatment, recovery and long term effects for patients with more severe brain injuries and their caregivers	Information on the important role caregivers play in TBI recovery and resources for caregiver support and self care strategies	Personal Journeys: Real Life Stories of TBI Survivors and their Families
click here to enter	click here to enter	click here to enter	click here to enter	click here to enter

disclaimer | privacy policy | site map | www.cemm.org

DHB Defense Health Board CEMM The Center of Excellence for Medical Multimedia

Done Internet

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Communication, Training, Dissemination, Evaluation

- A marketing plan was developed by a Panel workgroup. The plan includes:
 - Market trend analysis
 - Caregiver access points
 - Barriers, market entry strategy
 - Channels of distribution
 - Media promotion strategies
 - Market metrics
- Curriculum to be distributed at appropriate intervals in a manner that supports and does not overwhelm the caregiver
- Educate and inform providers/advocates across the TBI care continuum about the availability, purpose and access to the curriculum



Communication, Training, Dissemination, Evaluation

Goal - high infiltration of message to target audiences

- **Audience:** Caregivers
- **Message:** *You are a vital part of the recovery process and care team and are not alone on this journey*
- **Audience:** High level decision/policy makers
- **Message:** *Curriculum is a critical tool for caregivers; policies and funding are necessary for effective distribution/maintenance*
- **Audience:** Providers/advocates
- **Message:** *Curriculum is a comprehensive tool to support caregivers and enhance recovery; help direct caregivers to tool*



Communication, Training, Dissemination, Evaluation

- Electronic Media
 - Web sites (Wounded Warrior, Brain Line, Brain Injury Association, DVBIC, Indian Health Services, National Military Family Association, Bob Woodruff Foundation, USO, VA, Military One Source, CDC, HRSA)
 - Mass command e mail
 - Pentagon Channel/Armed Forces Radio
 - Flat screen streams at VA/DoD sites
 - CEMM
- Print Media
 - Call to action flyers and highlighted messages
 - Posters with standardized message
- Conferences and meetings



Communication, Training, Dissemination, Evaluation

- Standardized presentations, Webinar training, insert training into existing meetings/trainings/conferences
- “Train the trainer” approach to Service Case Managers, Federal Recovery Coordinators, Recovery Care CoordinatorsAW2, Safe Harbor, VA OIF/OEF Case Managers, DVBIC Regional Care Coordinators, Tri-Service and VA clinicians with direct patient/family contact
- Identify and train current POC’s, additional annual training for new hires
- Panel members from different regions willing to train as civilian SMEs
- **Recommend: DVBIC prepare now so training may begin immediately after approval process complete**



Communication, Training, Dissemination, Evaluation

- Place print curriculum in hands of caregivers assigned a Federal Recovery Coordinator (FRC) or Recovery Care Coordinator (RCC) just entering the system of care (in-person)
 - 80% saturation from date of launch
 - 90% saturation by July 1, 2010
- Place curriculum in hands of caregivers of those in later phases of recovery and care and/or beyond the DoD/VA care centers (in-person, mail, download from CEMM)
 - 40% saturation from date of launch
 - 60% saturation beginning July 1, 2010
 - 80% saturation beginning two years from launch



Communication, Training, Dissemination, Evaluation

- Initial minimum print run of 5,000 curricula target
- Provide curriculum in its entirety vs. one module at a time
- Provide in person whenever possible, otherwise direct to CEMM; direct extended family to CEMM
- Distribution timing guidelines developed for both early and later phases of recovery
- Printing and inventory via Implementation Agency



Communication, Training, Dissemination, Evaluation

- Annual assessment of effectiveness/usefulness for purposes of modifying and updating
- Develop data collection mechanism to track distribution and gather metrics
- Evaluation synchronized with marketing plan/goals
- Capture both dissemination and impact on end users and clinicians
- Feedback via CEMM and card placed in print curriculum
- **Recommend: Funding needed for proper qualitative and quantitative evaluation**



Mild TBI Module

- Panel remains supportive of developing/disseminating mild TBI education
- Panel members willing to work as civilian SMEs with DVBIC and CEMM to complete
- **Recommend: Continue work on mild TBI content. Due to rapidly changing scientific understanding of mild TBI, utilize CEMM rather than print product**



Policy and Execution

- The effectiveness of the TBI Family Caregiver Curriculum will, to a large extent, be dependent upon the designation of:
 - An office with the authority to publish policy for the curriculum
 - An implementation agency to execute the policy



Policy and Execution

- Policy must cover the following elements:
 - Assignment of responsibilities
 - Communication
 - Training
 - Dissemination
 - Programming and budgeting
 - Evaluation
 - Maintenance and updates



Policy and Execution

- Criteria for Selection of Policy and Proponency Agency
 - Policy making body
 - DoD/VA collaborative track record
 - Capacity to influence chains of command
 - Capacity to influence across medical as well as personnel, chaplains, finance, etc.
 - **Recommend: Office of Undersecretary of Defense for Personnel and Readiness**



Policy and Execution

- Criteria for Selection of Implementation Agency
 - Experience with dissemination of materials across the DoD/VA
 - Extensive knowledge of the curriculum
 - Commitment to sustaining the curriculum
 - **Recommend: DVBIC**



Summary of Panel Recommendations

- Approval of the Curriculum *Traumatic Brain Injury: A Guide for Caregivers of Service Members and Veterans* by DHB
- Office of Undersecretary of Defense for Personnel and Readiness as Policy and Proponency Agency
- Defense and Veterans Brain Injury Center (DVBIC) as Implementation Agency



Summary of Panel Recommendations

- DVBIC prepare for dissemination so training may begin as soon as possible after approval process complete
- Funding needed for proper qualitative and quantitative evaluation
- Continue work on mild TBI content. Due to rapidly changing scientific understanding of mild TBI, utilize CEMM rather than print product



TBI Family Caregivers

- Liza Biggers
- Shannon Maxwell



Spc Ethan Biggers





Spc Ethan Biggers





LtCol Tim Maxwell

Wounded Oct. 7, 2004
Penetrating TBI







TBI Family Caregiver Panel Members

Appointed Members

- Sharon Benedict, PhD, VA
- Liza Biggers, Family Caregiver
- Cheryl Lee Church, EdD, VA
- Barbara Cohoon, PhD, RN, NMFA
- Frederick Flynn, DO, FAAN, USA
- Col Nancy A. Fortuin, MPH, USA
- Kelly Gourdin, BA, Samueli Institute
- LCDR Pamela L. Herbig, PMHNP, CNS-BC, USN
- CAPT Janie Martin Heppel, MPH, HRSA
- Shannon Maxwell, Hope for the Warriors, Family Caregiver



TBI Family Caregiver Panel Members

Appointed Members

- Anne Moessner, RN, MSN, Mayo Clinic
- CDR Larry M. Miller, MPAS, PA-C, USN
- Rose Mary Pries, DrPH, VA
- Carolyn Rocchio, Brain Injury Association of America, Family Caregiver
- Kelly Sarmiento, MPH, CDC

Ex Officio Members

- Elizabeth Moy Martin, RNC, MA, DVBIC
- Gretchen Stephens, MPA, OTR/L, VA



TBI Family Caregiver Panel Members

Consultants

- COL Jonathan B. Dodson, USA, retired
- SGM Mike Welsh, USA, retired

Contingency Members

- Patricia Collins, BSN, MN, Tri Care
- CDR Russell Shilling PhD, MSC, USN
- Major Megumi Vogt, MD, USAF



In Appreciation

- DVBIC staff, writers, Henry Jackson Foundation, focus group facilitators and participants, CEMM, interviewees for vignettes
- Commander Ed Feeks
- The Defense Health Board



TBI Family Caregiver Panel

Questions/Discussion?