Topic	Discussion	Action/Next Steps/Who/When
Attendance	Council Members Present: Dr. Jeff Bazarian, Chair, Susan Montgomery (NYSDOH), Megan Clothier, Edward Devitt, Paul Novak, Clifford Hymowitz, Dennis Barlow (access-VR), Dr. Paul Partridge (OPWDD), and Maxine Smalling (OMH). A quorum of members was present.	
	Council Members Absent: Michael Kaplan, Crystal Collins (Justice Center), Michael Davison, Brent Feuz.	
	DOH Staff: Maribeth Gnozzio, Anna Ko, Thomas Rees, Carla Nazaire, Tiffany Tran-Lee, and Susan Lawless.	
	Presenters: Susan Lawless (NYSDOH), Amanda Saake NYS (OMH) Note: the meeting was conducted via WebEx, in compliance with NYS Open Meeting law and the Governor's Executive Order 11. The meeting was recorded.	
Welcome / Approval of December 9, 2021 and March 23, 2022 Meeting Minutes/ Review of Old Business	M. Gnozzio called the meeting to order at 11:05 am. M. Gnozzio advised that S. Montgomery serves as the Department of Health Representative, Dr. Bazarian is the Chair of the Council, and T. Rees is the NYSDOH Waiver Unit Supervisor assisting the Council. Mr. Rees completed the roll call. M. Gnozzio informed the Council members that due to prior Open Meeting Law requirements, since there were not a sufficient number of visible members present at the March 24, 2022 meetings, Council members were asked to vote again to accept the previous meeting minutes. Council members must be visible and heard to formally vote and accept the minutes. A sufficient quorum was present to vote on the meeting minutes and members were asked to use their video cameras. Due to video conference issues of one member, the voting on the meeting minutes was suspended until the matter was resolved. S. Lawless, Counsel from the NYSDOH Division of Legal Affairs provided the Council with additional information and updates on Open Meeting Law.	
Open Public Meeting Law	Susan Lawless : Ms. Lawless explained that new requirements will go into effect upon the expiration of the Governor's Executive Order 11. Executive Order 11 has allowed videoconferencing during the pandemic. Meetings conducted after this date will be dictated by the new Open Meeting Law slated to sunset and <i>is deemed repealed July 1, 2024</i> . Ms. Lawless noted that the Governor extended the EO 11.	
	Under recent amendments to the NYS Open Meeting Law, videoconferencing will only be allowed to occur if there is an in-person quorum in the location(s) where the meeting is held. Individual members of the Council may only attend by videoconference under "extraordinary circumstances." Ms. Lawless provided a definition of allowable "extraordinary circumstances" and noted that members participating via video	

M. Gnozzio informed the group that physical space for the remainder of the 2022 TBISCC meetings has been reserved at the Albany location, to allow members and other stakeholders to attend. Currently the Council may conduct its meetings at multiple physical locations, provided all locations are open to inperson public attendance and Council members. The locations can be connected by videoconference. The Council needs to decide if it wishes to adopt terms for "extraordinary circumstances." M. Gnozzio asked if the resolution will be included in the bylaws. S. Lawless said that the resolution would need be adopted, and she will research if the bylaws require an amendment. Dr. Bazarian expressed concern about meeting the quorum requirement. The Council voted to table adopting terms for "extraordinary circumstances" at this time. The majority of Council members voted on the model resolution, and it was adopted. Dr. Bazarian, C. Hymowitz, and E. Devitt voted to abstain. P. Novak, M. Clothier, M. Smalling, P. Partridge, D. Barlow and S. Montgomery voted yes. Dr. Bazarian will be the contact for notifying of the remote option.

TBI Service Goal Recommendations and Service Gaps

A presentation by NYSDOH was introduced as a follow-up to the previous March 24, 2022 meeting discussion, regarding the goals and recommendations of the Council. **Dr. Bazarian** presented to the Council membership a brief description of the National Traumatic Brain Injury: A Roadmap for Accelerating Progress (2022) report and his involvement in the project. He suggested ideas at the national level that could be adapted for NYS TBI workplan/roadmap. **M. Gnozzio** presented that the National plan could be adapted for NYS rather than NYS creating a new plan, the National Plan Goals and Recommendations could be amended and adapted to address NYS TBI service recipients, stakeholders, and caregivers. The workplan can be used to generate more discussion about which goals and recommendations will work on a statewide basis. **Dr. Bazarian** recommends the National Academies Press as the NYS Plan and asks the Council to consider how this could be adapted to fit NYS needs and goals. **E. Devitt** believes this would be a great starting point and useful for NYS TBI survivors. **Dr. Bazarian** believes it will benefit TBI families, too. **M. Gnozzio** asked that the Council consider using the report as a model which could then be used to develop a full Council report to the Legislature rather than presenting separate letters or recommendations. **C. Nazaire** then presented a PowerPoint of Traumatic Brain Injury a Roadmap for Accelerating Progress goals and recommendations.

C. Nazaire explained the tasks of the National committee as they developed the goals and recommendations. Each task force developed a report that identifies major barriers and knowledge gaps impeding progress, highlights opportunities for collaborative action, and recommendations to help guide action in the field. **C. Nazaire:** the key messages are: TBI is not an isolated incident, there is not a comprehensive framework for addressing TBI, an updated and more precise TBI classification system is

	needed, etc. In 2017 TBI contributed to 224,000 U.S. hospitalizations and 61,000 deaths. Since 2000, 440,000 military service members had a TBI diagnosis. This presents lifetime costs for about 2 million people who experience TBI resulting in over \$750 billion for required services. The presentation included a map of the stages of a care journey after TBI which includes: recognition, acute care, classification, rehabilitation, follow-up, and recovery reintegration. The journey is not smooth or continuous and may bounce around the map depending on the severity of the TBI. The summary concluded with the recommendations and research agenda of the committee and closes out the presentation with the research agenda proposed in the roadmap for accelerating progress. After presentation and discussion, Dr. Bazarian requests the YouTube link be provided to Council members so that they may review the full report presentation. Dr. Bazarian would like the Council to start a review of the plan to put together in a framework for their future efforts. M. Gnozzio expressed her desire to maintain the plan as a working document and a standing item for future Council meetings and agenda items.	
OMH Peer Credentialing	Council member C. Hymowitz introduced Amanda Saake, Special Assistant to the Commissioner, Director of Office of Consumer Affairs, Office of Mental Health, who provided a PowerPoint presentation on the OMH Peer Credentialing Program. A. Saake discussed that there are three OMH Peer Credentials available to providers: New York Certified Peer Specialist (adult mental health peer certification), Youth Peer Advocate Credential, and the Family Peer Advocate Credential. The training and certification are funded by the NYS Office of Mental Health. She then gave an overview of peer certification, including the purpose, the history, information about the certification board, and how to become certified. There are two levels of certification: NY Certified Peer Specialist and the NY Certified Peer Specialist-Provisional. A. Saake also shared some articles that will be sent to the Council Members after the meeting. A. Saake presented that review of promising programs from other states such as Georgia, Texas, and New Hampshire could be of benefit to the Council. She provides her contact information for further questions or comments from the Council members if they would like to reach out. After the presentation, M. Gnozzio asked how many people are currently receiving these services. A. Saake stated that it is hard to determine as many recipients are not Medicaid recipients and are serviced by the counties, therefore, it is difficult to get exact numbers. There will be an expansion of new initiatives in the fall and winter. M. Smalling praised A. Saake's expertise in the Peer Credentialing area of OMH.	
Review and Approval of March 24, 2022 and December 9, 2021 Meeting Minutes	M. Gnozzio informed the Council members that there is a sufficient quorum to vote on the prior meeting minutes and to please use their video cameras, so voting can begin. The meeting minutes for the December 9, 2021 and March 24, 2022 meetings were presented to the Council for action. C. Hymowitz moved to adopt both meeting minutes as presented, and S. Montgomery seconded the motion. A voice vote was completed, and all were in favor, none opposed.	

Public Comment	No Public Comments.	
Items to Discuss at the Next Meeting	M. Gnozzio suggested that the main focus of the next meeting will be on the workplan as the primary agenda item.	
Adjournment	The meeting was moved to be adjourned by Dr. Bazarian . C. Hymowitz motioned to approve. M. Clothier seconded the motion. All were in favor, none opposed. The meeting adjourned at 1:12 pm.	