



# NASHIA

**Support States • Grow Leaders • Connect Partners**

**[nashia.org](http://nashia.org)**

# **An Introduction to the Online Brain Injury Screening & Support System**

**November 9, 2022**



**National Association of State Head Injury Administrators**

# Welcome and Objectives

---

- About NASHIA
- Meet the the OBISSS Team
- What is the OBISSS?
- Who can subscribe?
- What comes with a subscription?
- Sneak Peek
- Reporting
- Costs and Funding Strategies
- Next Steps and Questions

# About Us

---

## **National Association of State Head Injury Administrators**

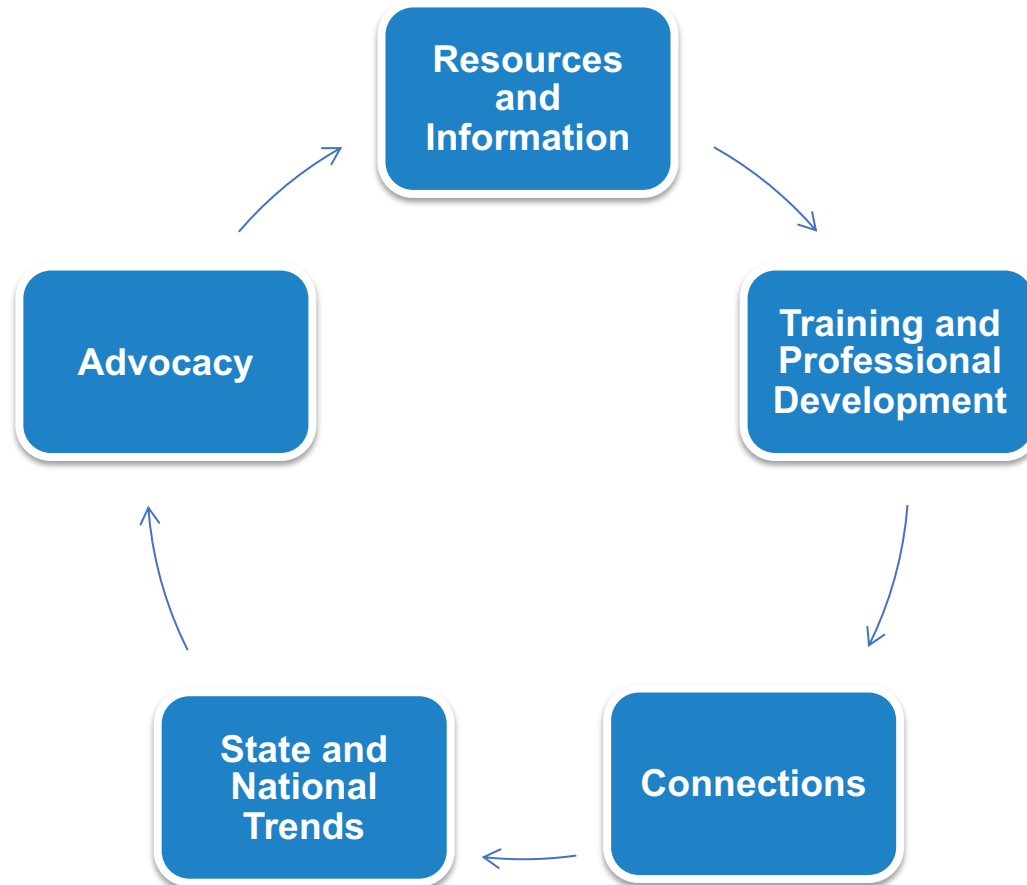
Nonprofit organization created to assist State government in promoting partnerships and building systems to meet the needs of individuals with brain injury and their families.



**NASHIA**

# NASHIA Services and Supports

---



# NASHIA OBISSS Team



**Rebecca Wolfkiel**  
Executive Director

**Maria Crowley**  
Director, Professional  
Development



**Haleigh Cushen**  
Manager, Membership  
& Operations Support

**Judy Dettmer**  
Director, Strategic  
Partnerships



# Why Screen?

---

History of brain injury often hidden among individuals:

- With other cognitive challenges
- With other disabilities
- With behavioral health challenges such as mental health, substance use
- In special populations - IPV, veterans, homeless, older adults, children, justice-involvement

If provider knows of/suspects history of brain injury:

- Engagement from the start of relationship
- Make the appropriate referrals
- Make simple accommodations to better support deficits
- Provide psychoeducation for the individual-equipped to self-advocate



# The Online Brain Injury Screening and Support System (OBISSS)

---

- Utilizes an online version of the OSU TBI-ID (+ ABI) and the SQBI
- Identifies history of traumatic **and** non-traumatic brain injury
- Self-administered but setting driven
- Collects additional demographics
- If positive, identifies related challenges and shares strategies
- Refers back to your system of support
- Contributes to national dataset





# OBISSS Advantages

---

- ✓ Uses reliable and valid tools and strategies
- ✓ Customized for your State needs
- ✓ Customized to refer to your programs/services
- ✓ Data is confidential and secure
- ✓ Reporting is provided to you

# Subscriptions

---

- Any system or setting
- Access can be shared with who you choose
- 12-month Plan, can begin at any month of the year
- Can be bundled with your NASHIA membership



# Packages

## Package A: \$6,500\*

- 12-Month access to include Self-Administered OSU TBI-ID, Symptoms Questionnaire for Brain Injury, and demographics collection
- Up to 5,000 completed screens
- Inclusion of State-specific resources
- Quarterly HIPAA Compliant raw data reports throughout the 12 months
- One descriptive report
- Promotional flier and video for State marketing

## Package B: \$5,000\*

(for organizations currently conducting online questions other than the SQBI)

- 12-Month access to include Self-Administered OSU TBI-ID and demographics collection
- Up to 5,000 completed screens
- Inclusion of State-specific resources
- Quarterly HIPAA Compliant raw data reports throughout the 12 months
- One descriptive report
- Promotional flier and video for State marketing

***\*Add-ons can be included: additional screens, reports, and data-collecting questions.***

# Sneak Peek

---





**Is the OBISSS a public platform?** Only in the sense that you can share the link with anyone you are serving. NASHIA manages the OBISSS through a secure, HIPAA-compliant data platform.

**What to do?** Share the link and your email address with the individual who is completing the screen. Then review the emailed results.



**Questions?**

**Alabama OBISSS Administrator:**

[Redacted contact information]

**Your link:** [nashia.org/obisss](https://nashia.org/obisss)

**Your password:** [Redacted]

**Or scan below to access:**



**NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS**

*Leading source of information on national trends and best practices for state employees, public brain injury programs, and agencies across the country. Visit us at: [nashia.org](https://nashia.org)*

# Access by Link or QR Code



NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS

## Welcome

Please log in with your State and provided password to continue to the NASHIA OBISSS.

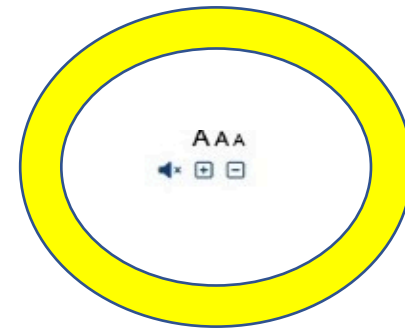
State

Password

Submit



**NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS**



## Welcome

### What is the OBISSS?

The OBISSS (Online Brain Injury Screening and Support System) is a tool that allows you to answer questions to review your history for a brain injury and learn about possible related challenges.

Please complete the questions below with your information (or the information of the participant) the best that you can.

Page 1 of 1

Enter the email address of the person who asked you to complete this screener. This should be the professional working with you.:

\* must provide value



Which State do you live in or which State directed you to take this screener?

\* must provide value



What is your age today?

1 characters remaining

\* must provide value



Submit



**NATIONAL ASSOCIATION  
OF STATE HEAD INJURY  
ADMINISTRATORS**



## Consent Form for Adults

Please complete the consent form below with your information (or the information of the participant).

**National Association of State Head Injury Administrators (NASHIA)  
Online Brain Injury Screening and Support System (OBISSS)**

### What is the OBISSS?

The OBISSS is a tool that allows someone to answer questions to review their history for a brain injury and learn about possible related problems. NASHIA is using:

- the Ohio State University Traumatic Brain Injury Identification Method (OSU TBI-ID) and
- the Symptoms Questionnaire for Brain Injury (SQBI)

to learn more about who has had a possible brain injury in their life and any thinking or learning problems people may have.

### Consent for screening information and referral for support for brain injury:

By consenting (giving permission) to use the OBISSS, you agree to sharing the information you provide with the person who asked you to take this screener.

The personal information you give us on this consent form:

- name
- date of birth
- state
- email address
- phone number





## Basic Information

Page 1 of 1



Please complete the questions below with your information (or the information of the participant) the best that you can.

Please enter your first name and middle initial.

\* must provide value



Test

4 words remaining

Please enter your last name.

\* must provide value



Name

2 words remaining

Which gender do you most identify with?

\* must provide value



Transgender Female



Which race do you most identify with?

\* must provide value



Korean





## OSU-TBI-ID

Please complete the survey below to the best of your ability.

Page 1 of 2

How old are you?

\* must provide value



22

1 characters remaining

These next questions ask about injuries that may have occurred anytime in your lifetime.



In your lifetime, have you ever been hospitalized or treated in an emergency room following an injury to your head or neck? Think about any childhood injuries you remember or were told about.

\* must provide value



Yes

No

reset



## Screening Results

- Thank you for completing these questions.
- The results showed that you have NOT had a potential exposure to brain injury some time in your life.
- The results are being emailed to you at the email address you gave us on the consent form. This information is also being shared with the person who asked you to complete this screener.
- There are no more questions to complete. Thank you.

<< Previous Page

Submit



## Screening Results

- Thank you for completing these questions.
- The results show that you have had a potential exposure to brain injury some time in your life.
- This is only a screening tool. It is not meant to diagnose brain injury or take the place of medical findings, but the results can help you get the support you need to be successful. Screening positive does not mean you have problems.
- The results of this screener will be emailed to you at the address you gave us on the consent form. The results will also be emailed to the person who asked you to complete this screener.



<< Previous Page





Submit



## Symptoms Questionnaire for Brain Injury - Adult (SQBI-A)

Please complete the questionnaire below to the best of your ability.

### SECTION 1: In recent weeks, how much have you been bothered by the following problems?

	I do not experience this problem at all.	I experience this problem but it does not bother me.	I am mildly bothered by this problem.	I am moderately bothered by this problem.	I am extremely bothered by this problem.	
 <b>Losing or misplacing important items (e.g. keys, wallet, papers)</b> <small>* must provide value</small>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	reset
 <b>Forgetting what people tell me</b> <small>* must provide value</small>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
 <b>Forgetting what I've read</b> <small>* must provide value</small>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	reset
						





## Symptoms Questionnaire for Brain Injury Results

-Thank you for answering these questions.

-The results show that you are having problems in at least one area.

-You will be sent tip sheets to the email address that you gave us on the Consent Form. The person who asked you to complete this screener will also get an email with this information.

-The results show that you are having problems in the following area(s):



- Ways to Remember Information



- Managing Delays in Processing



- Managing Attention



# Notifications to Participants and Providers

- Participant will receive an email that includes:
  - the completed consent form, the OSU TBI-ID results, and State Resources if applicable (if participant email address is provided)
  - SQBI Tips Sheets based on areas of challenges, if any indicated (if participant email address is provided)
- Provider will receive a copy of what participant receives (for participant record and to ensure dissemination)
- Provider will receive strategies for service delivery based on the SQBI





## Ways to Understand and Process Language

People with language problems can have a hard time knowing what others are saying and they can struggle to put their own thoughts into words. They may also have a hard time with reading. These problems can make you feel nervous to talk to people, can make it hard to do work, and can make you to feel alone. Practicing and using the following tips can be helpful:

1. Don't be afraid to ask for what you need. Ask people to speak slower, repeat what they said, or to ask their question in a different way if you don't understand them.
2. You may find it helpful to write down important points or tasks. You can also use a voice recorder.
3. To best follow what you are reading, try to read in places with no distractions. Read sentences aloud to yourself and use a bookmark or finger when reading a sentence to focus on one line at a time and not lose your place.



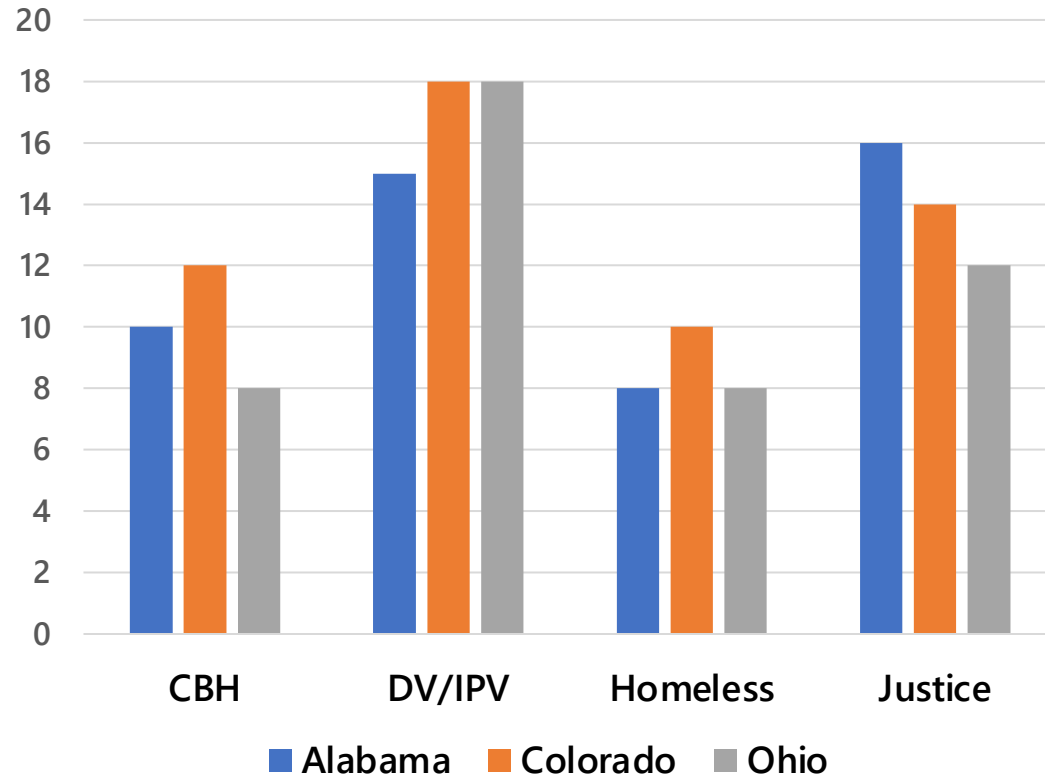
# Reporting to Include:

- State Incidence with Comparison to the Aggregate
- Data Comparison of Positive Screens by Setting, Demographics, Etc.
- Descriptive Data on Type of Injury as Identified on the OSU TBI-ID
- Statistics on Identified Areas of Challenges from the SQBI

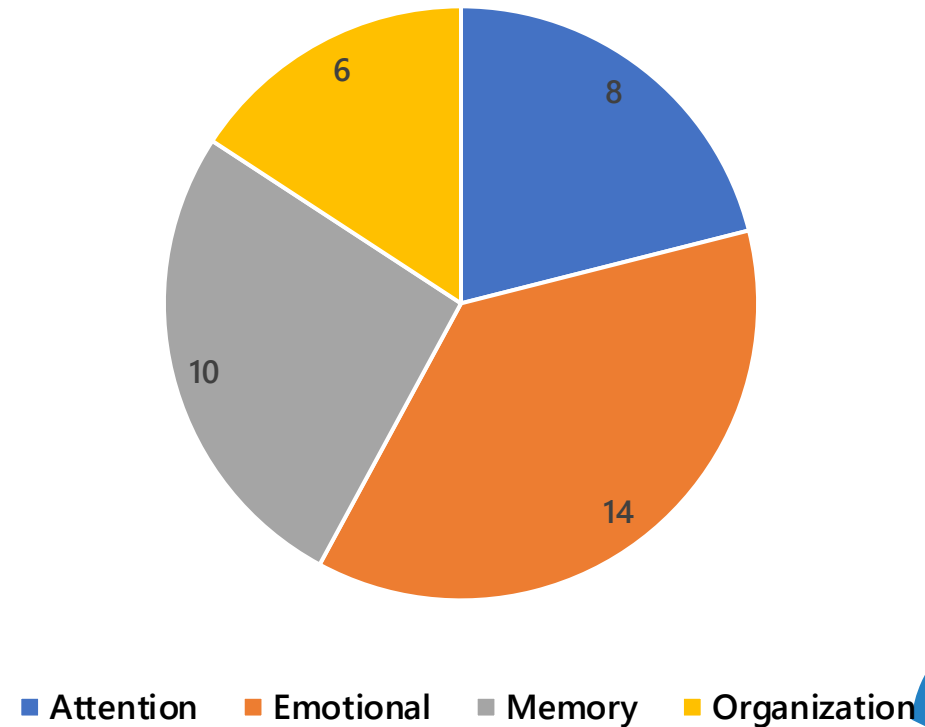


# Examples of Reporting

## Positive Screen by Setting by State



## Areas of Challenge Indicated



# Funding Strategies

---

- Existing TBI Grant – tied to your current activities?
- Existing State Funds – Trust Fund, State dollars
- Blended Funding – other partners that can share cost
  - Other State Systems:
    - Mental Health, Vocational Rehabilitation, Veterans Affairs, Developmental Disabilities, Health Departments, State Aging Agencies
  - Advocacy Affiliates
  - Community Providers
  - Protection and Advocacy Programs
- New Funding – other sources of revenue
  - Grants
  - Foundations



**NASHIA**

# Next Steps

---

1. Please complete our **OBISSS Interest Form** to indicate your level of interest and provide us with contact information.

**OBISSS Interest Form:**

**<https://form.jotform.com/223046622402141>**

2. We will contact you to schedule a demo of the OBISSS.



**NASHIA**

# Questions?

---



**NASHIA**

# For More Information:

- View the **OBISSS Factsheet**  
(found at [NASHIA.org](http://NASHIA.org))
- Contact an OBISSS Team Member

[rwolfkiel@nashia.org](mailto:rwolfkiel@nashia.org)

[hcushen@nashia.org](mailto:hcushen@nashia.org)

[mcrowley@nashia.org](mailto:mcrowley@nashia.org)

[jdettmer@nashia.org](mailto:jdettmer@nashia.org)

