



MISSOURI BRAIN INJURY ADVISORY COUNCIL

Resource Kit

2025 Revision

Developed by:



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Table of CONTENTS

2	Acknowledgments
3	Common Acronyms
5	History/Introduction
6	Council Structure
6	Council Member Roles and Responsibilities
7	Sub-Committees and Other Council Opportunities
8	Council Meetings
8	Meeting Logistics
8	Motions
9	Expectations during Meetings
9	Robert’s Rules of Order, Simplified
10	Expense Reimbursement
11	Engagement Strategies for Survivors
14	Appendix A. Missouri Brain Injury Advisory Council Bylaws
18	Appendix B. Glossary of Terms
19	Appendix C. Sample Council Meeting Agenda
21	Appendix D. Description of Missouri Health and Senior Services Program



Acknowledgments

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Much of the content in this guide was adapted from the *Traumatic Brain Injury Advisory Board Toolkit*, developed in partnership by the ACL state grantees, and *Engagement Strategies for Survivors*, developed by the TBI Advisory and Leadership Group. *Nebraska's Appointee Handbook*, developed by the Nebraska Brain Injury Advisory Council, also served as an important resource for this work.

The guide was also made possible thanks to the valuable insight provided by current MBIAC members and staff at Missouri Department of Health and Human Services, Adult Brain Injury Program.

Common Acronyms

Acronym	How do people say it?	Spelled Out/Description
AAA	Triple A	Area Agency on Aging
ACL	A-C-L	Administration for Community Living
BI	B-I	Brain Injury
BIA-MO	B-I-A-M-O	Brain Injury Association of Missouri
BIW	B-I-W	Brain Injury Waiver
CIL	Sil	Center for Independent Living
CMS	C-M-S	Centers for Medicaid and Medicare Services
DHSS-ABI	D-H-S-S-A-B-I	Missouri Department of Health and Senior Services, Adult Brain Injury Program
DMH-BH	D-M-H-B-H	Department of Mental Health – Behavioral Health
DMH-DD	D-M-H-D-D	Department of Mental Health – Developmental Disabilities
HCBS	H-C-B-S	Home and Community-Based Services
GCD	G-C-D	Governor’s Council on Disability
MBIAC	M-B-I-A-C	Missouri Brain Injury Advisory Council
MoAT	M-O-A-T	Missouri Assistive Technology

Acronym	How do people say it?	Spelled Out/Description
MOBIRF	Mo-birf	Missouri Brain Injury Resource Facilitation
MOCADSV	Mo-kad-S-V	Missouri Coalition Against Domestic and Sexual Violence
MoDOT	Mo-dot	Missouri Department of Transportation
NASHIA	Nash-a	National Association of State Head Injury Administrators
NIDILRR	Nid-ill-er	National Institute on Disability, Independent Living, and Rehabilitation Research
OBISSS	Oh-biss	Online Brain Injury Screening and Support System
P&A	P and A	Protection and Advocacy
SAMHSA	Sam-sa	Substance Abuse and Mental Health Services Association
TARC	Tark	Traumatic Brain Injury Advisory and Resource Committee
TBI	T-B-I	Traumatic Brain Injury
UMKC-IHD	U-M-K-C-I-H-D	University of Missouri-Kansas City, Institute for Human Development
VA	V-A	U.S. Department of Veterans Affairs
VR	V-R	Vocational Rehabilitation

History/Introduction

The Missouri Brain Injury Advisory Council (MBIAC), established pursuant to RSMo 192.745, shall make recommendations to the Department of Health and Senior Services (DHSS) Director for developing and administering a state plan to provide services for brain injured persons. The Brain Injury Advisory Council is also a core component/requirement of the Federal Traumatic Brain Injury (TBI) Implementation Partnership grant and serves in an advisory capacity related to the grant activities.

To do this, the MBIAC studies gaps in services and makes recommendations to policymakers on how to improve, expand, coordinate, and develop a brain injury service delivery system for families and survivors. The MBIAC also works to develop services and resources that benefit people living with brain injury, caregivers, family members, healthcare providers and community stakeholders and emphasizes brain injury prevention.

MBIAC Vision Statement:

The vision of the MBIAC is excellence in TBI prevention, public awareness, and the provision of services and supports across the lifespan of people with brain injuries and their families.

MBIAC Mission Statement:

The council's mission is to lead in the development of a collaborative statewide system of prevention, public awareness, and provision of services and supports driven by the needs of individuals with brain injury and their families.

Many states have a Brain Injury Council, with each Council operating differently. Missouri's is written into statute, which means it is mandated by state law. The MBIAC is governed by a set of bylaws, which are the written rules that guide the council and establish membership structure, procedures for running meetings, and operational guidelines. A copy of MBIAC's Bylaws can be found in **Appendix A**. A glossary of terms you might encounter while serving on the Council can be found in **Appendix B**.

Council Structure

MBIAC's Bylaws state that the Council should have 15 members, and these members must apply to and be appointed by the Department Director. Voting members are those who have been appointed by the Department and they serve three-year terms. Missouri's 15-member board must include four people with brain injuries or family members of people with brain injuries and eleven other individuals from professional groups, health institutions, community groups, and private industry. Additionally, state agencies that offer services impacting people with brain injuries and their families must appoint individuals to attend council meetings as non-voting participants.

In addition to Council members and state agency representatives, other stakeholders often attend the meetings. MBIAC meetings are open to the public, which means that anyone can attend as a guest. Guests are not able to vote and may be asked to wait until the "Public Comment" portion of the meeting to participate.

Council Member Roles and Responsibilities

The MBIAC is led by two elected Officers, the Chair and Vice-Chair. The Council elects these positions during the first meeting of the calendar year and they serve in their roles for one year.

The Chair's role is to be the Executive Officer of the council and preside at all meetings, among other responsibilities. The Chair does not vote on issues unless there is a tie. The Vice-Chair

supports the Chair and serves as Chair when the Chair is unavailable. The MBIAC Bylaws also require that the Department of Health and Senior Services identify a staff member to support the council. This person helps facilitate Council activities, serves as a liaison between the Council and DHSS leadership and takes notes during Council meetings.

Select Duties of the MBIAC Chair

- Call the meeting to order
 - State the Orders of Business before the Council
 - State the question and put it to a vote
 - Announce the result of the vote
 - Use Robert's Rules of Order, as needed
 - Create sub-committees, as needed
-

As mentioned, both Council members and guests can attend meetings, but their roles in meetings are different. The table below explains some of the responsibilities of appointed, voting Council members and guests attending a Council meeting.

Responsibilities of Voting Members	Responsibilities of Non-Voting Members
<ul style="list-style-type: none"> • Attend at least half of the meetings each year • Review agenda/relevant materials prior to meetings • Cast a vote on issues brought to a Council vote • Be actively involved in committees when applicable • Provide support and insight to represent Missourians with TBI and their families • Give prior notice when unable to attend a meeting • Obtain written approval from Department Director before representing the Council before a legislative authority or public forum • Adhere to Conflict of Interest Policy • Must formally resign in writing 	<ul style="list-style-type: none"> • Provide support and insight to represent Missourians with TBI and their families • Contribute to conversations when appropriate

A list of 2024 Council Members can be found [here](#).

Sub-Committees and Other Council Opportunities

The Chair can create standing and temporary sub-committees or task forces, as needed. These sub-committees may assist with an activity or operation of the Council. Sub-committees are opportunities for Council members to get involved in more specific tasks or take on leadership roles.

Other opportunities for engagement are also available through the Council. For example, the Council is currently developing more structured opportunities to support Council members who are survivors or family members of survivors. One example is enhancing new Council member mentorship through a “buddy program,” which would pair survivors and family members with peer mentors on the council for advice and support. This program is under development and if you are interested in participating, please contact the Council Chair.

Council Meetings

Although the content and flow of each meeting varies, there are some similarities you can expect to see across meetings.

Meeting Logistics

The Council is required to gather at least four times per year, though additional meetings may be held as needed. Typically, the MBIAC meets quarterly. Meetings may be held in-person in Jefferson City, virtually or hybrid (option to attend in-person or virtually). Usually, the Council meets on the fourth Monday of the month (January, April, July and October) at 10:00am CST. MBIAC members are notified of meeting dates at least 30 days before the meeting. If a Council member is unable to attend a meeting, they should contact the DHSS support staff member in advance to let them know.

The meeting agenda is developed and sent to Council members prior to each meeting. The agenda includes the topics that will be covered and who is responsible for updating the group on each topic. A sample agenda is included in Appendix C. Each Council meeting also has a notetaker who takes meeting minutes. Council members will receive a copy of the meeting minutes after the meeting.

Some Department of Health and Senior Services programs provide an update at every MBIAC meeting. Appendix D contains a brief description of each of the Department of Health and Human Services programs you can expect to hear about at each meeting.

Sometimes, Council members need specific accommodations participate fully in a meeting. There are many accommodations available to support Council members in physical and virtual environments, and with the sharing of information. If you need any accommodations to support your engagement with the Council, please contact the Chair.

Motions

During Council meetings, items may be brought to a Council vote. In order to vote, the meeting must have a quorum. A quorum is the minimum number of members that must be present at the meeting to make the meeting proceedings valid. According to Missouri's bylaws, the majority of Council members must be present for there to be a quorum.

When an issue is brought to a vote or a motion is made, only voting members may cast a vote and the response options are "yes," "no" and "abstain." A person may abstain

from a vote if there is a conflict of interest, they decide not to vote, or, in the case of approving past meeting minutes, they were not at the meeting. Roll call votes may be used to decide upon a motion and proxy voting is not allowed. MBIAC Bylaws and the statute creating the MBIAC both state that Council members cannot participate in or influence Council decisions or votes if they (or their organization) would be directly involved with the matter or would gain income from it.

CONFLICT OF INTEREST

A conflict of interest is a situation in which someone has competing interests or loyalties. If a member has a conflict of interest, they should contact the Chair to discuss the situation.

Expectations during Meetings

The expectations for participants in MBIAC meetings are similar to other professional settings. Participants are asked to respect others with their actions (e.g., putting cell phones on silent and avoiding distracting side conversations) and words (e.g., using people first language and respecting differences of opinion).

Robert's Rules of Order, Simplified

Like many other states, the MBIAC uses Robert's Rules of Order to propose and discuss motions, guide conversations, and vote on issues. Robert's Rules of Order help describe how business will be conducted. They are based on the Golden Rule and seek to be fair to all participating groups: the member, minority, majority, absentee, and organization. Robert's Rules can help guide Council discussions and actions. A simplified version from the National Association of State Head Injury Administrators (NASHIA) can be found below:

1. **The organization is paramount.** To it belongs the power. Its interest and convenience supersede those of an individual member.
2. **All members are equal.** Each member has an equal right to propose business, discuss it, and vote – rights which cannot be suspended or restricted save in the interest of the whole, and then only by a two-thirds vote.
3. **One thing at a time.** There can be but one main proposition before the assembly at one time. Only one member can have the floor at one time.
4. **Full discussion before action.** This applies to all main propositions and may be suspended only by a two-thirds vote.

5. **Proposition rather than persons.** The objective is the opinion and decision of the group upon the proposition, hence debate is impersonal.
6. **Propositions may yield to privileges.** Matters affecting the convenience or privileges of the assembly or an individual may interrupt consideration of a question.
7. **No discussion for interruptions.** Matters of sufficient urgency to interrupt discussion may not themselves be discussed.
8. **No discussion for suspension.** Motions which have the effect of suspending a rule are not debatable.
9. **No second time in the same form.** To protect the assembly against waste of time, a question once decided may, as a general rule, not be presented again at the same meeting in the same form under similar circumstances unless a reconsideration is ordered.
10. **The majority decides – usually.** The majority decides all ordinary questions, but it requires more than a majority to limit a member's parliamentary rights to introduce and discuss questions and vote, or to suspend or modify (without notice) a rule of order previously adopted.
11. **Two-thirds vote for extraordinary questions** – such as motions to amend bylaws, to change or repeal (without notice) a motion previously adopted, to suspend the rules, or restrict the rights of members to introduce questions, discuss them and vote.
12. **Silence gives consent.** The right to vote must be exercised. Silence has the same effect as assent to the will of the prevailing side.

Expense Reimbursement

According to [Missouri Revised Statute 192.745](#), MBIAC members do not receive compensation for their services. Council members may be reimbursed for expenses incurred while serving their Council duties, but this is subject to appropriations. Currently, there are no appropriations allocated to the Council, so all MBIAC-related expenses (travel to meetings, etc.) are the responsibility of the individual Council member.

Engagement Strategies for Survivors

Having the voices of TBI survivors and their families represented on the MBIAC in meaningful ways is critical. Joining the Council is a great way to use your experiences and insights to make a difference in the lives of others impacted by brain injury in Missouri. Below are some considerations and guidance (adapted from the TBI Advisory and Leadership group of the TBI TARC) for individuals with brain injuries and their families who want to participate fully in Council meetings.

1. Knowing Yourself

Before your first Council meeting, you may want to gather some information to help you prepare. For example, you may want to talk to the Council Chair or other Council members to find out how long meetings typically last. If the meeting is longer than you're used to, you might want to plan ahead to take breaks or clear your schedule of other activities on the day of a Council meeting. You may also want to confirm you know how to get to the meeting (whether it's being held in person or online).

Asking yourself a few questions can also help set yourself up for success. For example, you might solidify your sense of purpose on the Council by asking yourself, *Why did I decide to become involved with this Council?* You also might consider the strengths and skills you have that will be helpful on the Council. If you're having trouble identifying your strengths and skills, ask friends or family who know you well.

2. Telling your story

At some point during your time on the Council, you may be asked to share your brain injury story during a meeting or to another audience, like legislators. Consider what parts of your personal story are most relevant to share (keeping in mind the Council's mission and the context, like the audience, and the time frame). Don't forget, you can tell a powerful story in a short amount of time! To feel more comfortable sharing your experience, you might practice telling your story to friends, family, or service providers. You can also record yourself on your phone or computer to hear how your story sounds. Another tip is to write a brief script or outline of your story to keep yourself on track.

Good questions to ask yourself about telling your story include, *Why am I telling my story today?* or *When should I share my story during the meeting?*

3. Managing strong emotions

Sitting on a Council focused on brain injury may bring up feelings of loss or grief as you think about your own experience with brain injury. Sometimes we can anticipate these feelings and sometimes they happen unexpectedly. It's okay if you start to feel overwhelmed during a meeting. If you notice yourself beginning to have hard feelings, it might be an opportunity to practice the coping strategies you already have (these include doing breathing exercises or taking a break to step away and process your feelings).

Some questions to consider include, *What signs do I notice in my body when I start to feel overwhelmed?* Or *What types of things tend to make me feel overwhelmed?* Becoming more aware of how you respond to difficult topics, or what brings about strong feelings, can help you feel more present and connected to yourself. It can also help you engage more with the task at hand, rather than the hard feelings.

4. Organizing yourself

Joining the MBIAC may mean that you're managing a lot of new information, which might feel overwhelming at first. You might be getting more calendar invitations or emails than you're used to, and you're likely meeting lots of new people. As you begin settling into your Council role, it can be useful to think about strategies to help yourself get organized and stay organized.

For example, consider if you prefer a digital or paper system for managing Council materials. If you choose digital, some Council members find it helpful to carbon copy (cc) themselves on all Council-related emails, so they get a copy in their inbox as a reminder of what's happening. Those who prefer hard copies might organize their Council materials in a file cabinet or folder system.

Another thing to consider is making sure you know how to attend meetings (that you can locate meeting links if virtual, and that you know where to go for in-person meetings). You might also develop a system for putting meetings in your planner or reminding yourself to review meeting minutes and agendas prior to Council meetings.

If you need additional organizational support, talk to your Council Chair or other Council members to learn more about how they organize themselves.

5. Asking for accommodations

To participate fully in Council meetings, you may benefit from certain accommodations. Accommodations can come in many forms. Examples of accommodations that may help support you in full Council participation may include closed captioning, recordings of meetings, written handouts, or scheduled breaks.

If you're unsure what types of accommodations might be helpful, you may want to talk to other survivors and families on the Council. To request accommodations, contact the Council Chair to discuss your options. It is recommended that you reach out at least two weeks prior to a Council meeting to ensure there is time to secure accommodations.

6. Getting involved and staying engaged

Most likely, your first few Council meetings will be spent getting to know other Council members and getting accustomed to Council proceedings. Adjusting to the culture and expectations of a council can take time, so don't worry if it takes time for you to feel settled in. As you get a feel for the Council, you might identify areas where you'd like to contribute or other Council members you'd like to connect with.

Having a clear understanding of your abilities and priorities can also help you make the most of your time on the Council. Finding the meetings, tasks, or environments that are a good fit for you can make a big difference in your experience. If you're facing challenges or difficulties with your Council involvement, consider talking to the Council Chair or another trusted Council member.

Appendix A. Missouri Brain Injury Advisory Council Bylaws, as adopted January 23, 2012

The Mission of the Missouri Brain Injury Advisory Council ("Council") is to lead in the development of a collaborative statewide system of prevention, public awareness, and provision of services and supports driven by the needs of individuals with brain injuries and their families.

I. Membership

- A. The membership of the Council shall consist of fifteen (15) members appointed by the Director of the Department of Health and Senior Services. Members shall serve their appointed term and until their successors are appointed and by the Director.
- B. The Department of Health and Senior Services (DHSS) will designate a staff member to provide administrative support to the Council by facilitating Council activities and serving as the communication link between the Council and appropriate DHSS leadership authorities.
- C. Any person desiring to resign from the Council shall notify the Director of the Department of Health and Senior Services in writing and submit a copy to the Council Chair. The resignation letter shall indicate the date the resignation becomes effective.
- D. All members shall attend at least half of the meetings in any calendar year. The Chair may contact those failing to meet this requirement to either improve compliance or request a resignation letter.
- E. Any member of the Council wishing to represent the Council before a legislative authority or before any public forum (including hearings, meetings, media interviews, etc.) shall obtain prior written approval from the Department Director.

II. Officers

- A. Officers of the Council shall be Chair and Vice-Chair. They shall be elected by the Council at the first meeting of the calendar year.
- B. The Chair shall be the principal executive officer of the Council. The Chair shall preside at all meetings. The Chair may sign all instruments as may be authorized by the Council. The Chair shall perform all other duties incident to the office of Chair as prescribed by the Council.

- C. In the absence of the Chair, or in the event of the Chair's inability to serve, the Vice-Chair shall be empowered to perform duties of the Chair. The Vice-Chair shall perform all other duties incident to the office of Vice-Chair as prescribed by the Council.
- D. In the event the Vice-Chair permanently assumes the Chair position, the Council shall elect a Vice-Chair at the following regular Council meeting.
- E. The Chair and Vice-Chair shall serve for one year or until their successors are elected, and their term of office shall begin at the close of the meeting at which they are elected.
- F. No member shall concurrently hold more than one office, or serve more than three consecutive terms in the same office.

III. Meetings

- A. The Council shall hold regular meetings at least four (4) times per year or at the call of the Chair. Members shall be notified of meeting dates at least 30 calendar days in advance. When possible, members shall be notified of special meeting dates at least 30 days in advance.
- B. Meetings may be held and attended in person, by teleconference, or by web conference.
- C. A quorum shall consist of the majority of the members of the Council, exempting any who has submitted their resignation to the Chair.
- D. Members shall give prior notice to the DHSS staff member when they will not be attending a meeting of the Council.
- E. No member of the Council may participate in or seek to influence a decision or vote of the Council if the member or the member's organization would be directly involved with the matter or if the member would derive income from it.
- F. Proxy voting shall not be permitted. Members must attend the meeting in person, by web conference, or via telephone in order to vote. All members attending at least fifty percent (50%) of meetings within the past year shall be allowed to vote for Chair and Vice Chair.

- G. The Chair abstains from voting except in the circumstances of a tie vote.
- H. The DHSS staff member shall be responsible for the minutes of the Council meetings.
- I. All meetings of the Council shall be open to the public except as provided in chapter 610, RSMo.

IV. Committees

- A. The Chair shall be empowered to appoint such standing and temporary committees or task forces as may be necessary to carry out the duties and to facilitate the operation of the Council.
- B. The Chair shall be empowered to appoint a Committee chair of each standing or temporary committee or task force created to carry out the duties and to facilitate the operation of the Council.
- C. The DHSS staff member shall provide administrative support to all appointed committees and task forces.
- D. An executive committee consisting of the Chair, Vice-Chair and the Past-Chair shall be empowered to act on Council emergency business.

IV. Parliamentary Authority

- A. The rules contained in the current edition of Robert's Rules of Order, Newly Revised, shall guide the Council in all cases to which they are applicable and in which they are not inconsistent with these Bylaws and any special rules of order the Council may adopt.

V. Bylaws and Standing Rules

- A. Bylaws of the Council shall become operative upon their ratification by a simple majority vote at that meeting at which they are considered.
- B. Bylaws of the Council may be amended by a simple majority vote at that meeting at which they are considered.
- C. Proposed amendments to Council Bylaws shall be distributed to membership of the Council at least 30 days prior to the meeting at which they are to be voted upon.

- D. Any Bylaw of the Council may be suspended at any meeting by a simple majority vote at that meeting at which they are considered.
- E. After approval of Bylaw changes by vote of the membership, the Bylaws will be submitted to the DHSS Department Director for review. Any changes proposed by the DHSS Department Director will be recommended to the Council for review and finalization.

Appendix B. Glossary of Terms

Term	Explanation for Council Members
Authority Clause	How the entity was established and empowered, i.e. by legislation. The authority clause may dictate such things as the composition of the entity, the number of members, etc.
Bylaws	Rules or laws established by a group to regulate itself.
Committees	Types of committees could include standing committees (long term), temporary committees, or task forces. Committees typically have specific projects or duties.
Council Staff	Describes the source and responsibilities of administrative staff.
Mission	A formal summary of the aims and values of the entity.
Nominations and Elections	Development of a nominating committee for officer positions; how members propose to be a candidate in an election and how elections are conducted.
Officers	Members with specific Council duties. There may be officer titles, protocol for electing officers, term limits, and duties.
Order of Business	Topics to be included in an agenda.
Parliamentary Authority/Procedure	Describes how business will be conducted. Often refers to Robert's Rules of Order.
Quorum	The minimum number of members that must be present at any meeting to make the proceedings of that meeting valid.
Vision	The declaration of the entity's objectives, intended to guide its internal decision-making.

Appendix C. Sample Council Meeting Agenda

Meeting Agenda

Missouri Brain Injury Advisory Council

Agenda

April 22, 2024

10:00 a.m. – 1:00 p.m.

Convene:

Welcome/Introductions

Roll Call

Approval of January 22, 2024, Meeting Minutes

Dr. Eric Hart, Co-Chair

Amy Moffett, Brain Injury Manager

Dr. Eric Hart, Co-Chair

2024 Meetings:

July 22, 2024

October 28, 2024

University of Missouri:

Department of Physical Medicine

Rehabilitation:

Melissa Van Dyne, M.Ed, ThinkFirst MO Director

Nancy Foster, ThinkFirst MO

Educational Program Coordinator III

Legislative Priorities:

Governor's Council on Disability

Brain Injury Association of Missouri

Laura Mueth, Senior Program Specialist

Maureen Cunningham, Executive Director

Update Reports:

Missouri Department of Transportation

Public Health Workforce Grant

Scott Jones, Highway Safety Division

Amy Moffett, Brain Injury Manager

DHSS Report:

Adult Brain Injury Program Report

Brain Injury Waiver Update

Amy Moffett, Brain Injury Manager

Anna Monrotus, Sr Public Health

Program Specialist

Traumatic Brain Injury (TBI) Grant

Beth Dauber, Project Coordinator

Brain Injury Association of Missouri

Report:

Maureen Cunningham, Executive Director

MBIAC Application Review:

All Council Members

Reports:

All Council Members

Public Comments:

Next MBIAC meeting: July 22, 2024

Appendix D. Description of [Missouri Health and Senior Services Programs](#)

[Adult Brain Injury Program \(ABI\)](#): The ABI Program assists Missourians, ages 21-65, who have a TBI. The program provides two primary services:

1. **[Service Coordination](#):** This service is available to all ABI program participants. It includes an evaluation and assessment of needs, assistance with creating and updating a service plan, and assistance identifying resources, information, education, and advocacy.
2. **[Rehabilitation Services](#):** Rehabilitation services are available to those who meet financial guidelines. Services include neuropsychological evaluation, adjustment counseling, community support training, pre-employment training, and more.

[Brain Injury Waiver Program \(BIW\)](#): The Brain Injury Waiver provides Home and Community-Based Services to TBI survivors ages 21-65 who require a nursing home level of care. Services include personal care, applied behavior analysis, assistive technology, neuropsychological evaluation, occupational, speech, and physical therapies, and more.

[Traumatic Brain Injury Grant](#): This is a federal grant administered through the Administration on Community Living that supports many TBI-related activities in Missouri. Missouri DHSS works with the MBIAC, the Brain Injury Association of Missouri, the University of Missouri-Kansas City's Institute for Human Development, and other key stakeholders to plan and implement grant activities. The goal of the grant is to improve the systems of supports and services for individuals with TBI. The MBIAC serves as the grant's advisory council.