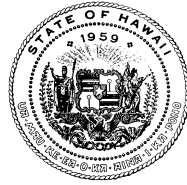


JOSH GREEN, M.D.
GOVERNOR OF HAWAI'I
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I



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File:

STATE TRAUMATIC BRAIN INJURY ADVISORY BOARD (STBIAB)

MEETING MINUTES

May 12, 2026

Present: Bill Rodrigues, Lisa Dau, Cameron Rogers, Stephanie Edwards, Karen Klemme, Rita Manriquez

Absent: Wayne Parsons

Others: Troy Furutani, HCAMP; Nicole Gustie, Queens Medical Center; Violet Horvath, Pacific Disabilities Center

DOH Staff: Michele Tong, Neurotrauma Program, Donovan Casison, Community Resources Branch

- I. **Call to Order** - Meeting called to order at 1:37 pm by STBIAB board member, Lisa Dau - Quorum was established.
- II. **Statement from Public and Written Testimonies Submitted** - No public or written testimonies submitted.
- III. **Approval of Minutes from March 3, 2026** - Board member, Karen Klemme, motioned to accept the minutes with no changes or edits. Board member, Rita Manriquez, seconded the motion. All board members present at the time of voting voted in favor of the minutes being accepted with no further discussion, questions, or edits. Voting to accept the minutes: Ayes 6, Nays 0, Abstentions 0
- IV. **Old Business**

A. Update Neurotrauma Strategic Plan Fiscal Year 2025-2030

- Neurotrauma Program, (NTP) staff reporting on activities for the Partner Agency Workgroup (PAW) reported attending the Kupuna Collective meeting after a PAW interview with Tani Salazar, from Executive Office on Aging. At the meeting, NTP staff learned about and networked with numerous community organizations including Kaua'i Community Health Center, Waikiki Community Center, Hui o Hau'ula Kupuna Supportive Navigator Program, UH Manoa Center on Aging, and Malama Village. Valuable resources such as "My Mobility Plan" and "Mini COH", a cognitive assessment tool for caregivers were shared. In an effort to continue identifying potential partners with whom to collaborate, PAW will need to prioritize agencies to interview rather than attempting to interview all listed agencies.
- In March, NTP staff represented Hawai'i at the Brain Injury Collaborative Summit. The summit was organized by the Brain Injury Association of America (BIAA), North American Brain Injury Society (NABIS), and National Association of State Head Injury Administrators (NASHIA). While at the summit, NTP staff met brain injury professionals, survivors, and caregivers from multiple states. BIAA used a brain injury tip sheet to encourage attendees to connect and share their brain injury experience with one another. Conference exhibitors included inpatient rehab services, innovative technologies, guided travel services for people with disabilities, and a children's book explaining brain injury.
- March 12th was Day at the Capitol, where brain injury advocates are scheduled to visit with congressional representatives of their own state to

request support for the TBI Reauthorization Act. NTP staff along with Brain Injury of Hawai'i (BIHi) members, Sienna and her mother Gail, were accompanied by a New York advocate to navigate the Capitol. The Hawai'i delegation met with staff from the offices of Brian Schatz, Mazie Hirono, Jill Tokuda and Ed Case, sharing stories and information about brain injury. NTP and BIHi are currently working to arrange a time when the representatives are home on break from Congressional duties, to meet with Hawai'i's brain injury community so they can hear about work being done in Hawai'i to prevent and treat brain injury and learn how they can support our efforts.

- At the invitation of NASHIA, Dr. Corrigan did a presentation advocating for TBI to be recognized as a chronic condition. He highlighted the fact that 18.2% of U.S. adults live with a TBI and yet it is not recognized as a chronic condition. However, spinal cord injury at a rate of 0.1% and multiple sclerosis at 0.2% are recognized as chronic conditions. Part of the difficulty in having TBI recognized as a chronic condition is in how TBI is defined. National and international organizations such as the World Health Organization, Centers for Disease Control and Prevention, and Center for Medicaid, all have different definitions for what symptoms and circumstances must exist for a TBI to qualify as a chronic condition. NTP staff also mentioned that Chelsea Pang, a nurse working in TBI programs that serve military personnel, expressed an interest in working together to have TBIs recognized as a chronic condition. A board member suggested that “traumatic” should be spelled out rather than abbreviated as “TBI” when presenting to policymakers, to emphasize the severity of the condition.

Another board member expressed support for efforts to add TBI to the list of conditions recognized as chronic and affecting an individual throughout their lifetime.

B. University of Hawaii College of Education – BrainSpace contract

- HCAMP presented on the website launch of the BrainSpace concussion education curriculum. This curriculum can be found at: <https://hawaiiiconcussion.com/> . On the website, there are three categories, High School, Middle School, and Youth Leagues. Each category lists modules for athletes, coaches, parents, and officials. Curriculum under the High School and Middle School categories are basically the same since athletic trainers (AT) by law are required to be present for all games. Youth Leagues are not required to have an AT on the field for each game. The Youth League curriculum is tailored to address the lack of resources and medical professionals at these games. Content for each module is customized to an individual’s role as it relates to the athlete. The athlete module emphasizes taking concussions seriously and caring for teammates while the coach’s module focuses on recognition of concussion symptoms and post-concussion protocol. The parent module covers home care/management and school notification while the official’s module emphasizes their role as observers who can decide when it is appropriate to remove an athlete from play. Since the launch of BrainSpace, HCAMP has encountered some bugs in the program and are in the process of fixing them. They are also looking to simplify access to the modules by reducing button clicks and having users identify their category. Board members are

encouraged to test out the curriculum and email HCAMP with any questions or issues.

- STBIAB member Cameron of Maui Memorial Medical Center inquired whether the HCAMP platform could include helmet safety content related to bikes and e-bikes, given recent trauma data showing increased youth injuries in this area. She focused on the need for safety due to the rise of e-bike usage and subsequent injuries the hospital has seen in large part due to speed, tricks, and no helmets. She also mentioned student-produced videos on e-bike safety. HCAMP staff indicated that while embedding new content into the curriculum coding may not be feasible, additional videos could be posted on the site as supplementary resources. NTP staff agreed to forward Cameron’s video to HCAMP and a member that was interested in the video. Violet Horvath, from Pacific Disabilities Center, mentioned adding a link to the video in the June Neurotrauma Newsletter. Maui Memorial Medical Center is tentatively committed to presenting the video at the September meeting, pending confirmation of a scheduling conflict. STBIAB member Stephanie asked whether the platform was ready to be shared on social media. HCAMP responded that the platform is ready to share. Another STBIAB member, Lisa, noted the platform is sports-focused and suggested adding a link to the KIPC (Keiki Injury Prevention Coalition) website for sports-related content.

V. New Business – none

VI. Open Forum

A. Neurotrauma news and announcements from across the state.

- Kaaui BIG suggested an unofficial roundtable be held after adjournment

for members to catch up with one another.

- A board member shared a personal update regarding her housing situation and involvement with the Family Life Center's Rapid Rehousing program. She also noted that she had provided TBI education informally to police officers during recent personal interactions. NTP staff redirected the discussion as it moved beyond the scope of the agenda.

B. Public comment on issues not on the agenda for consideration at the next meeting.

- Participants in the meeting were invited to suggest items for the next meeting agenda. A board member suggested adding a legislation update to the next agenda and noting that members who monitored specific bills should be encouraged to share updates.

VII. Next State Traumatic Brain Injury Advisory Board Meeting

- Date: July 14, 2026
- Time: 1:30 pm to 4:00 pm
- Location: Diamond Head Health Center and Zoom

2026 STBIAB Meeting Dates

January 13, ~~March 10~~, March 3, May 12, July 14, September 8, November 10

Meeting Adjourned at 2:28 pm