

HEADLINES

The Minneapolis Polytrauma Unit

By Suzanne Miller, M.A.

Tim Wicks, a platoon sergeant from the North Dakota Army National Guard, was unaware that he was being observed as he performed his duties during a reconnaissance mission in Afghanistan. When he moved close enough to a concealed, improvised explosive device, his observer detonated it. The force of the explosion caused injuries to his brain, pelvis, spine, and legs, leaving him unable to walk.

After a series of surgeries at Walter Reed Army Medical Center in Washington, D.C., he was transferred to the Minneapolis Veterans Affairs Medical Center's Polytrauma Unit. Now, each day, he has physical, occupational, and recreational therapy. He also has speech therapy, where he works on improving his problem-solving skills and memory that were affected by his mild brain

injury. When his injuries have healed more, he will begin strengthening his legs to walk again.

"If you lay around too much, things get old," Wicks says. "I believe keeping busy is important to my recovery."



In response to this need, in June 2005 four VA hospitals were selected as sites for specialized polytrauma centers: the Minneapolis Veterans Affairs Medical Center (MVAMC), and centers in Palo Alto, Calif., Tampa, Fla., and Richmond, Va. As of August 2006, the centers had treated over 240 patients injured in combat or support roles. Of those, more than 50 were treated at the Minneapolis polytrauma center.

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UPCOMING EVENTS:

Wednesday Workshops
January 24
February 28
March 28

Brain Injury Basics I
January 16

Brain Injury Basics II
February 20

Check page 11 for more details on these events

Brain Injury Association of Minnesota helpline:
612-378-2742
1-800-669-6442

www.braininjurymn.org

RECYCLE NOW!
Do you have a friend, loved one or colleague who could benefit from this newsletter?

If so, pass it on or call the Brain Injury Association of Minnesota and have one mailed to them.



Enhancing the Quality of Life, One Person at a Time

By Nissa French

It's a bird, it's a plane...no, it's a case manager! Much like a "Super Hero" that comic book characters count on to guide them out of unfavorable situations, case managers at the Brain Injury Association of Minnesota take on many different roles to assist people with brain injury in their efforts to return to a better quality of life after brain injury.

Each day, the Case Management staff provide information and support that guides individuals with brain injury in their efforts to live safely and independently in their chosen neighborhood. In the morning a case manager may help someone move into a new apartment, next coach someone else on how to apply for a job, then complete an independent skills assessment for a different individual and by the end of the day they've met with a teenager and his caregiver to review new options for his service support plan. And that's just today — tomorrow promises a completely different story.

Waiver Support Services

Case Management specifically supports individuals who have a brain injury diagnosis and have

been awarded either a Community Alternatives for Disabled Individuals (CADI) or a Traumatic Brain Injury (TBI) Waiver from Hennepin or Ramsey county. The CADI Waiver provides funding for home and community-based services for people who would otherwise require a level of care provided in a nursing facility while the TBI Waiver provides funding for similar services for people who have an acquired or traumatic brain injury.

"Once someone is awarded a Waiver, the county appoints a case

manager for them, which may be at the Association," explains Jackie Lothert, case manager at the Brain Injury Association of Minnesota. "We then work with each individual to select services that support their vision of a better quality of life."

Working closely with each Case Management participant, case managers use the Waiver funds to coordinate a tailored service plan, identify and connect with service providers, and regularly review

Case Management continues on page 6



Brain Injury Association of Minnesota

34 13th Ave NE, Suite B001
Minneapolis, MN 55413

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Guest Commentary: Taking it a Step Further

From the Board of Director's Chair

Sue
Lepore

In 2005, the Brain Injury Association of Minnesota Board of Directors embarked on an exciting project — to develop a three-year strategic plan and take a fresh look at the mission statement. With the transition of executive leadership, it was a good time to reflect on how we make a difference.

The development of the new strategic plan and mission statement was facilitated by the Board, with staff, brain injury professionals and client families throughout the state offering feedback to help guide the outcome.

Today the Association is operating with a new strategic plan, which will help us align all parts of our organizational activities into comprehensive and actionable strategies — strategies that ensure the path we are on will truly meet the needs of all Minnesotans affected by brain injury. We are also operating with a new mission statement.

A Renewed Mission

Mission statements are often taken for granted, or even overlooked, yet the mission statement is one of the most important aspects of an organization. Our mission statement describes our purpose and the value we provide. From the beginning in 1984, the Association has strived to create a better future for all persons affected by brain injury. Until 2006, the mission was "to create a better future through brain injury prevention, research, education and advocacy." As a result of the new strategic planning process, we are

taking that mission a step further so that it encompasses the diverse support already in place and allows for future growth.

Today, the mission of the Brain Injury Association of Minnesota is to **enhance the quality of life and bring the promise of a better tomorrow for all people affected by brain injury.** While other organizations may carry out pieces of this mission, our Association is the only statewide nonprofit with support services and staff solely dedicated to supporting all Minnesotans affected by brain injury.

Our mission is integrated into all aspects of our work because we understand that when brain injury and its residual effects hit, it's often difficult for people to learn to live life successfully after brain injury. Brain injury has lasting effects and we have multiple programs to empower individuals to build their bridge to a better quality of life. And people notice the difference our support makes. During development of the strategic plan, one person remarked, "The Association gets it. They know what to do."

Moving Forward

The new mission reiterates the Association's long-standing commitment to create a true bridge of help, hope and a voice for all Minnesotans affected by brain injury. As we near the end of 2006 with the first year of the strategic plan under our belts, I'm happy to report that more than 7,500 individuals have received supports to assist them in returning to home, school and work.

I am proud to be a part of carrying out the new strategic plan and mission for the Brain Injury Association of Minnesota; I hope you will join me. Call the office today at 800-669-6442 or 612-378-2742 to find out how you can receive support or get involved.

Get Involved!

For ideas on how to get involved with the Brain Injury Association of Minnesota and/or the brain injury community, visit the Brain Injury Association of Minnesota's Get Involved! Web page at www.braininjurymn.org/involved.html



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Mission

The mission of the Brain Injury Association of Minnesota is to enhance the quality of life and bring the promise of a better tomorrow for all people affected by brain injury.

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Headlines is published quarterly by the Brain Injury Association of Minnesota. The editor reserves the right to edit submitted materials for style and space. The Brain Injury Association of Minnesota does not endorse, support, or recommend any specific method, facility, treatment, program, or support group for persons with brain injury and their families. Please call for advertising rates.

Letters to the Editor Policy

Letters to the Editor should be limited to 300 words. Letters may be edited for spelling, grammar and length. In order for letters to be considered, please include your name, address and the daytime phone number of the author. The Brain Injury Association of Minnesota reserves the right to refuse letters for publication, and submission of material does not guarantee publication. Opinions expressed in Letters to the Editor are solely those of the author and do not represent the opinions or positions of the Brain Injury Association of Minnesota.



From the Executive Director

Ardis Sandstrom



Each year about this time, millions of Americans sit down and plan out a few New Year's resolutions. Some make resolutions to quit smoking, loose a little weight or spend less money. While this list is made with good intentions, the resolutions often fall to the wayside within just a few weeks. Many people make them, but few make a real commitment to following through.

This year I challenge you to scratch the habitual list of New Year's resolutions and try a different New Year's resolution; one that really promises valuable results. ***I'm personally asking you to join us to make a difference.*** I know you've heard me say it before, that only together we can truly make a difference, and it's true!

You have more power than you think, especially when it comes to creating positive change for

The Four Things

Okay, lets step back a moment and look at the big picture. After all, we spend so much time focusing on the little things, e.g. our daily brain injury challenges, that we may miss the big picture. I've said before that eliminating the negative does not get you the positive.

Fixing all the things that are wrong in your life won't make you happy; it will just leave you feeling sad and empty, albeit for no apparent reason. To be truly happy in life you need to set yourself up to be happy.

In my search for happiness I believe I've stumbled across a plan to live a good life. A life resplendent with meaning and happiness, a life I can value, a life that is a novel no one else has read and that I am proud to have written. My good friend Nan gave me a book for Christmas called "The Four Agreements" by Luis Miguel Ruiz. I like this book

the Minnesotans affected by brain injury. And it doesn't have to take a huge time commitment. Here are four options for you to make a difference:

1. Become a Member. Your membership in the Association is not only an approval of our mission, it's also a voice that states, "more needs to be done for Minnesotans affected by brain injury and I am behind this cause." Becoming a member shows those affected by brain injury that they have your support. It also helps drive policy change by demonstrating to legislators that the majority of Minnesotans do care about improving the quality of life for people affected by brain injury. Help strengthen the voice of the brain injury community and join us today. It only takes a few minutes; call us at 800-669-6442 to learn more about our Membership levels and show that you care.

2. Donate. This year the Minnesota Department of Health increased its estimate of Minnesotans living with a disability due to brain injury to 100,000 and our Resource Facilitation and Multicultural Outreach programs, free support

services for people affected by brain injury, are experiencing dramatic increases in referrals. The need for support is growing! Every dollar makes a difference; donate today to help ensure that support services continue to be available for persons affected by brain injury.

3. Volunteer. We have many opportunities for you to volunteer and make a difference. Whether it's one hour a month or one day a

can make a critical difference. That involvement can be as quick as submitting a pre-filled form urging your policymakers to take the right action.

As you consider the above list of options, remember that it all starts with one. One person standing up for an issue leads to two, then four, then a group, and before you know it, that issue has thousands of supporters behind it. The estimated 100,000 Minnesotans living with a disability due to brain injury

The estimated 100,000 Minnesotans living with a disability due to brain injury need you to stand up and make a difference.

week, you have skills and talents that can help create positive change for Minnesotans affected by brain injury. Check out our Volunteer opportunities online at www.braininjurymn.org.

4. Advocate. We have a track record for initiating systems change, but we can't do it alone! You can help by becoming an advocate for the thousands of Minnesotans affected by brain injury. Simply join our "Action E-List" through our Web site and an e-mail will alert you when your involvement

need you to stand up and make a difference.

This New Year, I challenge you to be the one. Be the one to write "I will make a difference in the lives of Minnesotans affected by brain injury by joining the Brain Injury Association of Minnesota." Then give us a call at 800-669-6442 to find out what opportunity is a fit for you. And ask a friend to join you. Because it all starts with one; and you hold that potential.



for too many reasons to list here, if you like what I say about it, I encourage you to get a hold of a copy and read it; the book is short but says much.

Central in this book is the idea that we hear many things, some with which we disagree and some with which we agree. Those things with which we agree become a part of us. He offers four "agreements" we can make with ourselves to live a better life. They are:

1. Speak impeccably.
2. Don't take offense.
3. Don't make assumptions.
4. Always do your best.

To speak impeccably means to say what you mean and mean what you say. As brain injury sufferers we know how hard this can be even if that is our intention.

Ruiz says it is the hardest one of the four agreements and the most important. If you just practice this first agreement your life will be much improved. Reading this I just realized why it is so hard for me to live successfully with a brain injury, one of my cardinal deficits is expressing myself in speech. However, be that as it may, whining or giving up isn't in my nature. In fact, the tougher the challenge the more inclined I am to smile and say, "Bring it on!" Laughing out loud with fear and hope born of desperation gives me that adrenaline rush I need to overcome.

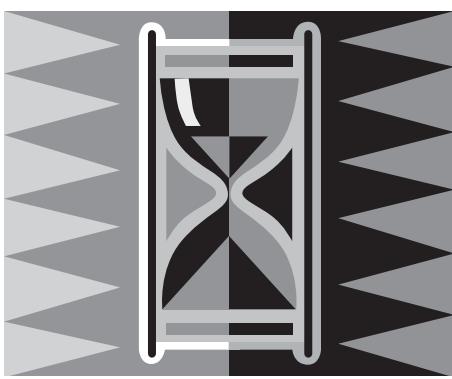
The second agreement is don't take offense at what others say about you. Imagine holding a mirror in front of you as they talk. They are really just talking to themselves. Whenever I see someone talking judgmentally about someone it really just tells me how they feel about themselves. Great people talk about ideas, mediocre people talk about things, and small people talk about other people.

Don't make assumptions is the

third agreement. This is where you need to confirm that things really are as they seem to you. With a brain injury this is so important and such a major issue that I will probably devote a whole essay to just that. This is also where you don't put any value in gossip. Gossip is negative and colors your view of others when they have no defense. Let everyone you meet be your friend, your fair supervisor, or your favorite teacher and let personal experience guide you.

Lastly, always do your best. Your best will be different from day to day, but as long as you are doing your best you can have no regrets. A criminal does his time and goes free, absolved. We punish ourselves everyday all our lives for our mistakes, this is unjust and not what we would accept from others, why do we do this to ourselves? As long as you always do your best you can be free from regret. Just do your best, if your best isn't good enough, oh well, what more could you have done? If it wasn't your best then tell yourself that you'll do better in the future.

Perfection isn't a goal to reach; it is a point to move towards.



NEWS BRIEFS

What's new at the Brain Injury Association of Minnesota and in the brain injury community

Out & About

Brain Injury Association of Minnesota staff and volunteers conduct outreach to improve the general public's knowledge about the organization and brain injury causes and symptoms in hopes of creating a world where all avoidable brain injuries are prevented, all non-preventable brain injuries are minimized, and all individuals with brain injury maximize their quality of life.

At Events: Staff and volunteers exhibited at many events the past few months, including the Tubman Family Alliance Health Fair, Hmong Resource Fair, Sports Alliance Annual Summit for Youth Sports Leaders, and Project Homeless Connect.

In Print: The Association helped place the "Assistive Technology for People with Brain Injury" and "Life After Brain Injury" articles in the October 2006 issue of *Access Press*. The Association also ran brain injury awareness advertisements in the *Minneapolis/St. Paul Medical Guide*, *Asian Pages*, and the Minnesota Corrections Association Web site.

On the Radio: Public Service Announcements that stress the importance of wearing a helmet while enjoying winter activities will be aired on multiple Minnesota radio stations. Tune into 104.9 KRFO (Owatonna), 101.7 KLDJ (Duluth), 107.7 KBMX (Duluth), 105.5 KDDG (Albany), 100.7 KIKV (Alexandria) or 94.9 KMXK (St. Cloud) to hear the message!

Call for Peer Awards

Nominations

The Brain Injury Association of Minnesota is excited to announce that we are again seeking nominations for recognition of excellence in brain injury service provision. We encourage everyone in the brain injury community to identify outstanding service in brain injury.

There are three categories for the Peer Awards:

1. *First Year of Service Award* – recognizes a new professional whose initiative and dedication has made a positive impact on services for persons with brain injury.
2. *Career Service Recognition* – awarded to a professional who has three or more years of experience working with persons with brain injury and has dramatically improved the quality of life for persons with brain injury.
3. *Service Provider of the Year* – recognizes an organization or service provider whose vision and mission have consistently "opened doors" for persons with brain injury.

Please submit a 500 word description as to why this person or organization should be recognized for this award to: Janis Carey Wack at janiscw@braininjurymn.org or Brain Injury Association of Minnesota, Attn: Janis Carey Wack, 34 13th Avenue NE, Suite B001, Minneapolis, MN 55413. Submissions deadline for nominations is February 28, 2007.

Peer/Mentor Support Connection Informational Sessions

The Peer/Mentor Support Connection provided its first Mentoring informational session on October 24, 2006 at the Miller Dwan Medical Center in Duluth. The session was attended by individuals with brain injury and service providers. The evening included an overview on what programs and services are provided by the Association and information about becoming involved with the Peer/Mentor Support Connection program. Stay tuned for details about the next informational session, which will be held in early 2007 in southern Minnesota.

The Peer/Mentor Support Connection matches trained volunteers (Mentors) with individuals living with a brain injury or their family members (Peers) to support them through the process of adjustment to life with a brain injury. The program is currently seeking individuals who have suffered an acquired brain injury (e.g. stroke, tumor) to volunteer as Mentors. For more details, contact the Brain Injury Association of Minnesota at 612-378-2742 or 800-669-6442.

Association Honored with Public Policy Award

The Brain Injury Association of Minnesota was honored with the Odyssey Policy Award on October 5 by the Minnesota Department of Human Services and the Minnesota Board on Aging. The annual award recognizes an organization that demonstrates outstanding public policy leadership and efforts

to improve the quality of life for seniors and persons with disability.

The Public Policy program at the Association aggressively conducts outreach to build support for public policies that can bring about a vision of quality services and create a more supportive society for persons with disability.

To date in 2006, Public Policy program staff have attended more than 90 legislator hearings to advocate on behalf of public policy priorities and have registered almost 700 Citizen Advocates in Minnesota, who have signed on to act as an active network of community members ready to stay informed about the issues and advocate for sound public policy efforts.

Strengthening the voice of those living with a disability, through direct lobbying of policy makers by staff, grassroots lobbying with Citizen Advocates and partnering with like-minded organizations, is core to the Association's work. The Association will continue its work to ensure that more people affected by brain injury have access to a better quality of life.

Board Members Finish First Year of Service

The Brain Injury Association of Minnesota would like to thank its newest board members, **Jay Bowden, Jim Collins, Paul Godlewski, Sandy Kasprzak, Dr. Andrew Kiragu, and Mohsin Zafar** for their first year of service on the Association Board of Directors. They were elected by Association members and will serve on the Board through 2008.

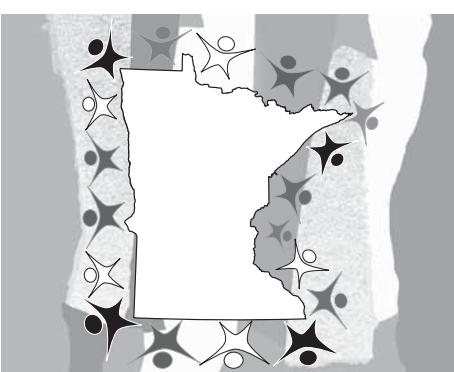
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Multicultural Corner



I.M. Brainy – R You?

By Raye Black

The lights dim, anticipation settles over the crowd and, as the strobe lights pulse throughout the room, a chant rises from the crowd, "Brainy, Brainy, Brainy, Brainy..." And the crowd goes wild as the four-foot stuffed animal takes the stage in his trademark jelly bean helmet! Okay, so Brainy's no Justin Timberlake, but he does have an exceptional way of capturing kid's attention about a very important topic.

Brainy the bear (pictured at right) is the safety mascot of the Multicultural Outreach program and has been my partner in injury prevention outreach to underserved and communities of color since the start. He's been a great assistant for reaching kids and their parents about an extremely important topic.

Of all types of preventable injuries, traumatic brain injury (TBI) continues to be the leading cause of death and disability among children and young adults. As prevention is the only known cure for brain injury, it is important to educate kids and parents about taking the proper safety precautions to ultimately prevent brain injury. For example, a properly fitted bicycle helmet can prevent 85 percent of bicycle-related brain injuries.

As a stuffed animal, Brainy sets a friendly tone with kids from the start. Add his colorful jellybean helmet, sing-along songs about injury prevention, and interactive activities, and the kids are all ears to learn about safety. With Brainy, kids can learn about preventing injuries in reference to motor vehicle, pedestrian and sports safety. Once kids complete the interactive safety session, they are rewarded with their very own "I.M. Brainy" certificate to show off to their friends.

Last summer Brainy made appearances at more than 80 events throughout Minnesota and taught more than 5,000 kids and parents about the importance of summer recreation safety. Brainy is now shifting gears and ready, in costume, to teach winter safety tips.

Brainy's the hottest safety ticket in town and if you haven't seen him "live" yet, check out his upcoming "tour" information and remember that Brainy's always accepting performance requests. There isn't a school gathering, county fair, family event, ice arena or carnival that Brainy can't handle.

And remember, as an adult, you are a role model to children. You can support our injury prevention efforts by reinforcing safety precautions yourself. The number one way to do this is by wearing a helmet whenever you enjoy recreational activities. Safety is important at all ages; thank you for joining us in our brain injury prevention efforts!



Raye Black and Brainy gear up for the winter season. Photo by Nissa French

Upcoming Winter 2006-2007 Brainy Appearances:

- Soul Academy, Minneapolis
- Friendship Academy of Fine Arts, Minneapolis
- YMCA, Northeast Minneapolis

To book Brainy for your own injury prevention show, please contact Raye Black, Brainy's manager, at 612-378-2742, 800-669-6442 or rayeb@braininjurymn.org.



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Case Management, continued from page 1

the support plan in place to ensure that each individual receives the highest level of customized service possible. The Waiver funds can be used to pay for services and supports such as independent living skills, homemaking, personal care services, supported employment, transportation, behavioral services, or day program fees. Each person's needs and vision of a better quality of life is unique, so, accordingly, each plan of support organized by Case Management is different.

One Minnesotan Jackie supports is Carlos Alvarez. Carlos has a Waiver from Hennepin County and has been working with Jackie for about two years. "It's really rewarding to

Jackie Lothert and Carlos Alvarez

Photo by Nissa French

work with Carlos because he's very appreciative of the assistance we provide," notes Jackie. "And because I speak Spanish, I'm able to really connect with him by communicating in his native language."

Simple Becomes Complicated

Carlos Alvarez can remember when it was easy to go for a quick jog, sit in a crowded church, find the right words to say and dial a telephone number correctly the first time. The simple things in life used to seem trivial — until the ability to do them changed.

Carlos suffered his first stroke in 1998. "It was like somebody slapped my hand," said Carlos.

"We were in the food court at the mall and I just lost all control. My drink fell to the ground and I became very disoriented."

Over the next year, Carlos suffered two additional strokes. Strokes are a common cause of brain injury and, according to the National Stroke Association, strokes are the number one cause of adult disability in America. Some will completely recover from a stroke, but many will live with some type of disability. For Carlos, the strokes have impaired his communication skills and short term memory, among contributing to other health issues.

Many simple tasks have become complicated for Carlos because of his short-term memory impairment. For example, sometimes he will drink the glass of water next to his medication and forget to take the pills altogether. He's also extremely sensitive to loud noises and large groups of people can be overwhelming.

Regaining Independence

With intensive therapy and support from people like his mother, Hortencia, and his Association case manager, Jackie, Carlos has come a long way in regaining his independence. He understands how the strokes have impacted the way his brain functions and works hard to accommodate for it.

"When I get frustrated or if things are overwhelming, I leave and go to a quieter place where I can calm down," says Carlos. "I used to get angry, but I've learned to just walk away."

Along with 250 other Minnesotans who receive support through the Association's Case Management program, Carlos meets with Jackie in person at least four times a year. Carlos and his mother also talk with Jackie about care-related issues regularly over the phone.

"Our goal is to make a personal connection with every person in our program," notes Jackie. "We focus on getting to know each individual and understanding what their ambitions are so we can help them achieve success as they view it."

With guidance from Jackie, Carlos is finding different ways to increase his level of independence and achieve the new goals he has for life. He participates in a day program at the Courage Center three times a week, attends services at a smaller church and sticks to a new health regimen with the support of his mother.

And the positive impact is clear. When asked how he feels about the support he receives from Case Management, a wide smile crosses Carlos' face as he announces, "We like Jackie!"

Quality of Life Areas:

- * Relationship Building
- * Memory Enhancement
- * Socialization Skills
- * Recreation Planning
- * Coping Techniques
- * Health and Wellness

Day to Day Activities:

- * Grocery shopping
- * Cooking
- * Money management
- * Grooming
- * Housekeeping



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"The Choice is Yours"

Walk for Thought a Huge Success!

By Nissa French

Great weather was enjoyed by all at the 5th Annual Walk for Thought locations in Winona, Blackduck and St. Paul. This year \$78,500 was raised and a record 1,088 walkers brought awareness and funds to provide help, hope and a voice for people affected by brain injury!

"The Annual Walk for Thought has grown phenomenally since its 2002 inception," notes Ardis Sandstrom, executive director, Brain Injury Association of Minnesota. "What started out as

a small Twin Cities event with 375 participants has expanded to include two greater Minnesota Walk locations with more than 1,080 participants. In the coming years, we look forward to growing this event even more by increasing participation at the established sites and expanding to include additional out-state Walk sites."

Teams and individuals participated in the 2006 family-friendly event to support the Brain Injury Association of Minnesota's efforts to enhance the quality of life and bring the promise of a better tomorrow for all people affected

by brain injury. The event also helped raise awareness about the prevalence and effects of brain injury, which is the leading cause of death and disability in children and young adults in the United States.

A sample photograph library of the 2006 event is below; be sure to visit www.braininjurymn.org/walkforthought.html for more event photographs, including team photographs, and information about the 2007 Annual Walk for Thought.

Congratulations to the Top 2006 Fundraising Teams!

Dragonfly Clan	\$7,770	Team Kraetsch	\$1,800
Stampeding Turtles	\$3,500	Mindful Mayo Walkers	\$1,667
Team Teddy	\$3,055	Brain Stormers	\$1,534
Team McVary	\$2,890	Craigs Cracked Craniums	\$1,420
TBI Metro Services	\$2,669	Team Gillette	\$1,060
Team Nichole	\$1,845	Mighty Mains'l Marchers	\$1,045

Thank You to the Five-Year Team Captains!

- Amy McVary
- Barb Fulton
- Jeff Zinn
- Regions Hospital
- Russ Philstrom
- Sue Winkel
- Stamped Turtles
- Terri Traudt
- TBI Metro Services
- Tracy Winkel-Johnson



September 30
October 7
Winona
Blackduck
St. Paul



Photos by Melissa Albert, Andi Billig, Erin Mulcahy-Billig, Jackie Lothert, Liz Rolfsmeier, Craig Valenty

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With additional support from:
American Agency Inc., Otto Bang • Culligan • Great Harvest Bread Company • Integrity Living Options • Quan Emerteq • TBI Metro Services (a service of Opportunity Partners)



Volunteer Corner

Volunteer Spotlight: Colleen Schmidt

Colleen has been a Volunteer Program intern since August 2006. She is pursuing a Master's degree in Community Psychology at Metropolitan State University. This internship gives her the opportunity to learn about services and resources for people affected by brain injury and also how individuals build community and wellness through volunteerism.

Reason for interning at the Association: I am interning for two reasons. The first is that it is a cause that is very near and dear to my heart; my husband lives with effects of a brain injury and I truly would like to see my husband's quality of life improved. The second reason is because my graduate program focuses on the idea of community. Communities provide resources and actions that will bring about a better tomorrow and this is in the Brain Injury Association of Minnesota's mission.

What I do outside of interning: I spend a great deal of my time with my husband and two dogs and getting together with all of my extended family. Every Sunday, we enjoy a project in the afternoon (holiday decorations, construction work, and anything else that comes to mind during the week). I also enjoy the outdoors and reading a good book.

The best thing about interning at the Association: The fantastic people that I had the pleasure of working with and the opportunity to learn so many wonderful things about volunteer coordination and the organization in general. It was an opportunity that I will never forget and I would encourage anyone to get involved with an organization that promotes the well-being of members.



Colleen Schmidt

Photo by Nissa French

Internships Available

By Kimberly Ferencik

The Brain Injury Association of Minnesota has internship openings in its Public Awareness, Development, Education, Multicultural Outreach, Public Policy, Resource Facilitation and Volunteer programs. We are accepting applications for the Spring semester right now!

We offer a flexible schedule and number of hours to satisfy your school's internship requirement. We ask for a minimum of one term with eight or more hours per week, primarily weekday hours but some early evening and weekend hours may also be available. Interns receive training, guidance and feedback in order to develop professional skills and gain experience working in a nonprofit setting. The Brain Injury Association of Minnesota is committed to providing a friendly, supportive, professional experience for its interns.

A complete list of position responsibilities and qualifications can be found on our Web site, www.braininjurymn.org/intern.html, or call Kimberly at 612-238-3234 or 800-669-6442.

Speakers Bureau

By Kimberly Ferencik

If you have a passion to enhance the quality of life and bring the promise of a better tomorrow for all people affected by brain injury and enjoy public speaking, we need you!

The Brain Injury Association of Minnesota is launching a Speakers Bureau and we are looking for volunteers! We provide training and presentation materials. You provide time, talent and transportation.

We are looking for individuals affected by brain injury, either on a personal or professional level, who are comfortable speaking in public. Volunteers need to be dependable, prompt and able to convey clearly the important messages of the presentation. We need volunteers around the state because speaking engagements will be throughout Minnesota. This position offers a flexible schedule and a number of hours. Presentation requests may come for weekdays, evenings or weekends. We ask for a one-year commitment, but the number of presentations will vary depending on your availability and requests from the community.

If interested, contact the volunteer coordinator at 612-378-2742, 800-669-6442 or kimberlyf@braininjurymn.org.



What Did Volunteers Do For You In 2006? A Lot.

By Kimberly Ferencik

In 2006, volunteers donated over 7,000 hours to enhance the quality of life and bring the promise of a better tomorrow for all people affected by brain injury.

When people with brain injury and their loved ones said, "I wish I could talk to someone who has gone through what I'm going through," volunteers stepped forward to fill that need through the Peer/Mentor Support Connection. In 2006, the Peer/Mentor Support Connection trained the first volunteer Mentors to support individuals living with a brain injury or their family members (Peers). Mentors connect with Peers by phone or e-mail to support them through the process of adjustment to life with a brain injury, deal with the associated challenges and celebrate accomplishments.

When it came time to plan the 5th Annual Walk for Thought, volunteers jumped on board. Volunteers with St. Theresa's Institute for Leadership and Service at St. Mary's University and the Blackduck High School Student Council organized and hosted Walks in Winona and Blackduck. In the Twin Cities, volunteers made signs, served coffee and bagels, cheered on walkers and snapped a lot of pictures, making the day even better for all the team captains and walkers.

You may not know it, but every day volunteers are working for you, at the office and in the community –

- answering phones
- mailing information
- photographing events
- writing newsletter articles
- finding new service providers
- translating articles into Spanish
- correcting addresses in our database
- preparing program evaluations and reports
- showing people the right way to wear a bike helmet
- telling the public about brain injury and Association services
- delivering Consumer Guides of brain injury resources around the state

Imagine if there were no volunteers to do these important things. Individuals with a variety of skills, expertise and time volunteer so the Brain Injury Association of Minnesota can reach more people and better serve those in need. If you'd like to join this amazing group of people in 2007, visit our Web site at www.braininjurymn.org or contact the volunteer coordinator for more information at 612-238-3234 or 800-669-6442.



Education Corner

Education: The Key to Empowerment for Everyone



By Janis Carey Wack

We know that many of the people we serve are seeking education

and information about brain injury. They use this information to obtain services, clarify needs with their employers, help their families understand what is really going on and better understand for themselves the what's, how's and why's of life with a brain injury. Understanding what is at the root of an issue is the first place to go to build strength and feel in control, therefore, empowered to get needs met.

Educational opportunities abound through the Brain Injury Association of Minnesota! These opportunities are for people living with brain injury, their family

and friends and the professionals who serve them. The Brain Injury Association of Minnesota's Web site provides a variety of informational materials to start with, including a library of articles on different issues related to brain injury. We also have a video library online stocked with educational videos on a variety of brain injury topics; I encourage you to visit the Web site, peruse the video titles and fill out the request form to rent a video that interests you.

Classes are also offered that give general information through the Brain Injury Basics format and more specific topics via the Wednesday Workshops. Curriculums for topics such as Supported Employment and Long Term Care can be used by service providers to train new staff. Mandated training such as "Shaken Baby: inflicted Traumatic Brain Injury" can also be obtained through the Education program

at the Brain Injury Association of Minnesota. Providers sometimes need customized training and the Education program is able to oblige those requests, as well. Consumers, families and staff can be informed and empowered through all of these educational offerings!

The 22nd Annual Conference for Professionals in Brain Injury

"Collaborative Models" and will provide professionals with a wonderful opportunity to connect with their colleagues to accomplish more collaboration.

At the Conference, exciting keynote speakers, Dr. Yehuda Ben Yishay and Marty McMorrow, will usher in two days of stellar brain injury education. Professionals, save April 19 and 20 on your

The Brain Injury Association of Minnesota's Web site provides a variety of informational materials to start with, including a library of articles on different issues related to brain injury.

will be on April 19 and 20, 2007 in St. Cloud, Minnesota. This will be a perfect opportunity for professionals who serve people living with brain injury to learn more, be energized, network and become empowered to serve individuals affected by brain injury. The theme of this year's conference is "Creating

calendar now for the 22nd Annual Conference for Professionals in Brain Injury. Look for more information forthcoming on the Association Web site and via mail. We have already been contacted by a professional in Alaska who's planning on attending!

For persons affected by brain
Education continues on page 11

Comprehensive Brain Injury Care and Rehabilitation

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 - Survivors Group
 - Statewide Physicians Referral Network
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Brain Injury Perspective

By Shauna Sheffer

The Power of a Smile

A smile is one of the few forms of nonverbal communication that can transcend culture boundaries. A smile indicates life, happiness, hope. But what happens when tragedy strikes? Is it possible to keep smiling?

Brandon Fairchild was a happy, smiling 12-year-old. He played sports, had a great group of friends, and was always the one there to cheer you up and tell you a joke. One afternoon, Brandon came home with flu-like symptoms and a massive headache. His mother, Shelly Woltjer took him to a doctor three times before a cat scan diagnosed Brandon with an astrocytoma – a brain tumor.

Riding the Roller Coaster

Brandon was immediately rushed to Minneapolis Children's Hospital for emergency surgery to drain fluid from his brain. Two days later, Brandon was back at the hospital to have the tumor removed.

Within a week, Shelly and Brandon came home. "I was glad to be back at school with all my friends, especially my best friend Ryan," said Brandon. "But I would get really tired and could only go for a half day." Just two months after being home, Brandon collapsed at school.

Back in the hospital for a second time, doctors determined he had an aneurysm in his middle cerebral artery and would need yet another surgery to repair it. Brandon and his family tried to keep a positive attitude and kept smiling. "The principle at my school gave Ryan days off of school so he could come and visit me at the hospital," said Brandon. "We would just hang out and watch movies and play video games. It was great."

After one month in hospital, Brandon returned home just before Christmas and the first thing he wanted to do was see his best friend. After taking only a couple steps into Ryan's house, Brandon collapsed again due to another brain aneurysm. After a third surgery, Brandon started back at school. At this point, Shelly contacted the Association's Resource Facilitation program for support. "The Resource Facilitator helped answer my questions, gave me advice on finances, and helped



Brandon Fairchild

Photo by Shelly Woltjer

connect me to the services I needed," said Shelly.

Look Back, Looking Forward

Shelly has noticed some changes with Brandon's behavior since the incidents, such as impulsiveness, inability to understand his limitations, and impairment with his executive functioning. "But he still has his great sense of humor!" laughed Shelly.

Today, Shelly is initiating a support group for others in Kandiyohi County who are dealing with brain injury. She is also a Mentor as part of the Peer/Mentor Support Connection program at the Brain Injury Association of Minnesota. "Coping with a brain injury is hard for everyone," said Shelly. "I wanted to be a Mentor to show people they are not alone and provide hope for the future."

After all of the ups and downs, Shelly, Brandon, and their family have gained a lot. "You really learn how important family and friends are when you go through something like this," said Brandon. Shelly agrees, "If you can keep your family strong, you can get through it." Out of all the hardship, pain, and loss, what is most remarkable is what Brandon has managed to keep – his smile.

I was 'normal,' I just thought everyone had these issues," noted Riggle.

It wasn't until 1980 when a friend and psychologist showed him the newest research on brain injury that he came to realize that he suffered effects from a traumatic brain injury (TBI). After years of searching, Riggle was officially diagnosed with a TBI at the University of Iowa.

Learning to Cope, Living with Hope

Today, Riggle still copes with effects from his brain injury. Noises are amplified to an unbearable point. Crowded rooms are nearly deafening and it is very hard for him to hold conversations if there are competing outside noises. He has overcome this challenge by learning to read lips and cupping his ear to channel specific sounds. He still has minor hallucinations, but has learned not to be startled and recognize that what he sees may not be really there. "One day I walked out onto my front porch and watched a cat turn into a flowerpot," chuckled Riggle. "I stared at that pot for awhile as I watched the hallucination of the cat disappear and realize what was really in front of me."

Despite all his obstacles, Riggle is living a very successful life as a pastor for St. Paul Lutheran ELCA in Hull, Iowa, and works to increase awareness about brain injury. He recently spoke to students at Northwestern College in Orange City, Iowa, about the spiritual implications of brain injury.

Support Comes Full Circle

While Riggle would like to see more outlets for support and research on brain injury, he's glad to have one of the leading brain injury support organizations close to home – The Brain Injury Association of Minnesota – and hopes others use its programs for support as well. "The Brain Injury Association of Minnesota is a good place because [they] recognize the brain injury reality," said Riggle. "I encourage others who are affected by brain injury to not give up, because there are people who can help."

Riggle recently went through training to be a Mentor as part of the Peer/Mentor Support Connection program at the Association. The program connects individuals with brain injury or their family members (Peers) with trained volunteers (Mentors) who have a personal experience with brain injury. It is also the first program of its kind to offer statewide support through telephone and e-mail. "Mentoring is important because it lets other people know that they are not in this alone," states Riggle. "What they are experiencing can be overwhelming, but there are people who can support them."

Danger in Aisle Three

Every day, children are injured in shopping cart accidents by either falling from them or having the cart tip over. According to the American Academy of Pediatrics, 23,000 children are treated in hospital emergency departments for injuries from shopping carts. The most common injuries are to the head and neck.

Reverend John M. Riggle knows all too well about the dangers of shopping carts. In 1959, at only 2 ½ years old, he fell from a shopping cart at a St. Louis Park grocery store. He landed directly on the right side of his head and then somersaulted several times across the floor. His mother rushed him to the doctor's office where Riggle complained about severe headaches that came and went. The doctor advised his parents to keep an eye on him for the rest of the day.

The headaches continued until dinner, at which point Riggle collapsed into a coma right onto his dinner plate. He was rushed to Methodist Hospital and a neurosurgeon opened both sides of Riggle's head to even out the immense pressure and found that he sustained a fractured skull and blood clotting. Riggle remained in a coma for less than 24 hours, spent the next week in the hospital, and was one of the first civilians to get a plastic plate, instead of the standard metal plate, in his head.

The prognosis for Riggle was ever changing. "The neurosurgeon told my parents that if I lived, I would be paralyzed for the rest of my life." But in a matter of days, Riggle was able to talk and started remembering things. Only a short time after that, he was running up and down the hallways like a 2 ½ year old should, with nurses chasing after him. "At that point the doctor said I was going to be normal," explained Riggle. "But the truth was, I wasn't."

Growing up, Riggle's reality of "normal" included short-term memory issues, headaches, double vision, and auditory and visual hallucinations. Due to his right temporal lobe damage, controlling behavior and overly expressive emotions proved to be difficult. "Since everyone kept saying



Reverend John Riggle
Photo submitted

Education, continued from page 9
 injury, three Regional Consumer Conferences will also be offered in 2007 to provide useful brain injury education, information about available resources and an opportunity to network. The three communities hosting the conferences are Mankato, Brainerd and Buffalo. Each one will have a planning committee to make sure that the conference presents information pertinent to consumers and families in their region. If you live or work in those areas and would like to participate on a planning committee, please contact Janis Carey Wack at 612-238-3246, 800-699-6442, or janiscw@braininjurymn.org.

If you are looking to become empowered through education, please contact Janis Carey Wack at 612-238-3246, 800-66-6442 or janiscw@braininjurymn.org, check out the Brain Injury Association of Minnesota's Web site at www.braininjurymn.org, or schedule a training (fees apply) for your staff today.



Education Calendar

Save the Date – Upcoming Education Opportunities! Registration is required for all education opportunities. Call 612-378-2742 or 800-669-6442 to register or for more information.

Wednesday Workshops

Jan. 24 — Adult Protection

101: What Service Providers Need to Know, presented by Jim Koepfer, Ramsey County, will provide an overview of how the adult protection process works, what to expect with the mandated reporting process, how to identify a vulnerable adult and who is responsible for addressing self neglect where there is a case manager involved.

Feb. 28 — Spirituality and

Disability, presented by Rev. Jerry Storms, Peace Community Counseling Center, will discuss the spiritual journey that many individuals with disabilities partake as they come to grips with life changing circumstances brought on by brain injury.

March 28 — Recreation and Leisure Pursuits after Disability,

presented by Tara Hallberg and Becca Stenzel, Reach for Resources, will review how the quality of life can be greatly

enhanced by how a person spends their leisure time. Participants will gain knowledge on how to assess recreation and leisure options for individuals living with a disability and the other considerations to a successful recreation and leisure plan.

Brain Injury Basics

Admission for Brain Injury Basics classes is free for persons with brain injury and their family members. The fee for professionals is \$20.

Brain Injury Basics I: An Introduction

An introductory class that defines what a brain injury is and what side effects are related to brain injury. The class also teaches various skills such as how to relate to persons with brain injury and compensation strategies. This class will be offered on January 16th at the Association's office in Minneapolis from 6:00 – 8:30 p.m.

Brain Injury Basics II: Adjustment to Disability

This class addresses the various adjustments and life changes that individuals face after a brain injury. The major stages of adjustment along with the emotional aspects of change and the difficulties that go along with those will be discussed. Class will be held on February 20th at the Association's office in Minneapolis from 6:00 – 8:30 p.m.

Customized Staff Training Opportunities

The Brain Injury Association of Minnesota also provides customized training opportunities for professional staff throughout Minnesota. A certified trainer is available to lead trainings focused on Supported Employment, Case Management and Brain Injury, Family Violence and Brain Injury, Long-Term Care and Participants with Brain Injury, and Shaken Baby Syndrome/inflicted Traumatic Brain Injury. Call 612-378-2742 or 800-669-6442 for more details!

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For more than 35 years, the law firm of Schwebel, Goetz & Sieben has represented the victims of traumatic brain injury and their families. If you or a loved one have suffered from a brain injury, your well being comes first. Attorney Paul Godlewski,

board member of the Brain Injury Association of Minnesota, will make sure your medical bills and wage losses are paid, handle all insurance details, go to trial if necessary and fight to make sure you receive full compensation for your losses.

As always, there are no fees unless you receive a settlement. For a free consultation, call 612.344.0327.



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Military, continued from page 1

Polytrauma centers reflect a shift in the pattern of injuries from previous wars to those now coming from Afghanistan and Iraq. Some of the news is good: ceramic body armor and Kevlar helmets decrease the chance of a fatal penetrating wound to vital organs and to the back or side of the head. Better emergency medicine in the field and rapid evacuation techniques are saving more lives. But increased encounters with explosive devices such as roadside bombs are resulting in more injury to unshielded arms and legs and a higher rate of traumatic brain injury.

According to U.S. Department

Looking for assistance reintegrating into the community, school and work after brain injury?

Call the Brain Injury Help Line at 1-800-669-6442!

The Brain Injury Association of Minnesota is **HERE FOR YOU**. We have free support programs for people with brain injury, their loved ones and the professionals who serve them.

of Defense figures as of late August 2006, over two-thirds of service people wounded in action in Operation Enduring Freedom (in Afghanistan and related areas) and in Operation Iraqi Freedom were injured by blasts from artillery, mortar, rockets, bombs, grenades, or other explosive devices. Over half of service people killed in action died as a result of one of these types of explosion. Forty percent of those injured by blasts evacuated to Walter Reed Army Medical Center are found to have a brain injury, notes Barbara Sigford, M.D., director of Physical Medicine and Rehabilitation, MVAMC.

From the Field to Rehab

By the time wounded troops arrive at the MVAMC polytrauma center, they have been through a chain of military facilities. When injured, they are treated in the field or a treatment station only as long as it takes to stabilize them for transportation. In an average of 1.8 days they are moved to a support hospital in Landstuhl, Germany, where further stabilization procedures are performed. They usually stay there less than a week, according to Sigford.

Then they are moved to a medical facility in the United

States, usually either Walter Reed in Washington, D.C., or National Naval Medical Center in Bethesda, Md. There, they receive acute

Increased encounters with explosive devices such as roadside bombs are resulting in more injury to unshielded arms and legs and a higher rate of traumatic brain injury.

medical treatment such as surgery, amputation, infection control, or burn care. In previous wars, more acute medical procedures were done closer to the injury site, Sigford says, and the change to performing most acute treatment in the United States has resulted in more troops surviving.

Once they are stable enough to travel, patients with a TBI severe enough to obstruct their rehabilitation go to one of the four polytrauma centers. Patients arriving at the MVAMC have a complex set of needs. "Most often, individuals don't have only a brain injury; they have brain injury in combination with other issues such as amputation or vision loss or fractures," says Sigford.

It is this complex mix of issues that polytrauma centers are designed to handle. "We coordinate the rehabilitation effort and account for all the impairments as we move through the rehabilitation process," Sigford

explains. "For example, to use a new prosthesis, you must have a certain amount of learning ability just to get it on or off. The brain

injury may change when we fit a prosthesis, the type we use and how we train the patient to use it."

Ready when called

Before being selected as a polytrauma center, the MVAMC specialized in treating brain injuries for over 15 years. It became a traumatic brain injury lead site in 1992. "When the war in Iraq started, we were already well-established with the military and in our treatment approaches for TBI," says Sigford. "Since 90 percent of patients who need a polytrauma center have brain injury, it was logical that TBI lead sites move into treating polytrauma patients. That's because it is really the traumatic brain injury that is driving the care."

To prepare for its new role, the center increased its bed capacity and staff. The staff was retrained to treat specific injury combinations, such as a brain

Military continues on page 16



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Legislative Corner

Keeping up to date with public policy

Elections Shake Up Minnesota Legislature

By Jeff Nachbar

 November 7th's election results will mean big changes at the Minnesota Legislature. The people of Minnesota have spoken through the ballot box and we hope that you took the time to participate in this important process.

After every election there is an array of emotions – some are happy, mad, or frustrated and others simply shrug their shoulders at the results. Elections can be messy; they create winners and losers and often hard feelings. It is, however, the way we collectively decide who will represent us and make the critical policy decisions that shape our society.

Regardless of your own personal politics, or feelings about this past election, it's important to remember that brain injury is not a partisan issue; it can happen to anyone. Some candidates might be better than others on our issues, but no one party has a monopoly on care, concern or desire to create positive change for the estimated 100,000 Minnesotans living with a disability due to brain injury.

Now that we've had a little time to reflect, let's take a look at the election results, do some political analysis, and get back to the task of accomplishing our mission – to enhance the quality of life and bring the promise of a better tomorrow for all people affected by brain injury.

Regardless of your own personal politics, or feelings about this past election, it's important to remember that brain injury is not a partisan issue; it can happen to anyone.

Changes in Minnesota

The DFL took over the majority in the House for the first time in eight years. The Minnesota Senate will remain even more solidly controlled by the DFL, and our Republican Governor Tim Pawlenty, was re-elected to another four year term. There will be 53 (out of 201) new legislators at the Capitol in January. Of these new members: 30 are men, 23 are women; nine are Republicans and 44 are Democrats. Even with

all these new faces, 89 percent of House incumbents who sought reelection won their races.

The House will go from having a narrow Republican majority (68-66) to having a large DFL majority (85-49). That is a DFL gain of 19 House seats. Twelve Republican incumbents were defeated and the DFL picked up seven open seats that were previously held by Republicans. No DFL incumbents were defeated.

The Senate will have a larger DFL majority, growing from 38-29 to 44-23. A total of seven incumbent Republican Senators were defeated and one open seat previously held by Republicans was picked up by the DFL. Two Senate DFL incumbents were defeated leaving the Senate DFL Caucus with a net gain of six seats.

In statewide elections, the U.S. Senate remains DFL with the election of Amy Klobuchar and the Governor remains Republican with Tim Pawlenty. The Attorney General remains DFL with Lori Swanson. Both the Secretary of State and the State Auditor switched to DFL control.

It will take some time for things to sort themselves out before we really know what the impact of all these changes will be. There is no doubt that the DFL will control much of the legislative process. However, there is one thing that hasn't changed – we have a lot of education to do.

If we want our policymakers to make decisions that are in the best interests of those affected by brain injury, we must get involved

in the legislative process and be at the table when these decisions are made. We can't do this alone, so let's work together and make change happen!

Board Sets 2007 Legislative Priorities

On November 14th, the Brain Injury Association of Minnesota's Board of Directors approved the following policies as the Association's priorities for the 2007 legislative session:

1. Health Care: Medicaid/Medical Assistance (MA) Funding

- Increase MA income and asset standards
- Ensure adequate funding for MA in the state budget

2. Education: Special Education Funding

- Restore the special education growth factor
- Protect state special education standards

3. Prevention: Primary Seatbelt Law

- Change state law to primary enforcement standard
- Every seat, every person, every time

To have the largest impact and best chance at success, we are focusing on a limited number of top priorities, rather than scattering ourselves too thin. The Board considered the following in arriving at these priorities:

- The 2007 Legislature will set Minnesota's budget for the next two years.
- Health care and education are the two largest items in the state budget.
- Health care and education budget decisions made during the 2007 session will impact funding of programs affecting people with brain injury for many years come.

Why Medical Assistance (MA)?

- MA is the single most important healthcare program impacting people with brain injury and many other physical and developmental disabilities.
- Eligibility for MA is determined by income and asset standards that are too low and have not been raised in many years.
- MA faces tremendous financial pressure as both federal and state governments look for budget items to cut.

Why Special Education?

- 450 students in Minnesota K-12 public schools have been identified with traumatic brain injury and receive special education services.
- Special education state funding was frozen in the 2003 budget, resulting in local districts having to pick up the extra costs.
- Federal special education standards are weak when compared to Minnesota standards and the state is facing pressure to bring state standards down to the federal level.

Why Seatbelts?

- Preventing future brain injuries is a viable strategy for reducing harm and saving money.
- Almost half of traumatic brain injuries in Minnesota are caused by motor vehicle crashes.
- Everyone in the vehicle needs to be protected.
- Current law does not allow law enforcement to stop a motorist for a seatbelt violation. This almost passed in the 2006 session; one final push could put it over the top.

Please contact Jeff Nachbar or Kim Kang at 612-378-2742 or 800-669-6442 if you have any questions or want to get involved.

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R. Tuominen
Patricia Turonie

In memory of Alcuin Stroeing

Quincy Stroeing



By Shauna Sheffer

The Brain Injury Association of Minnesota would like to thank Tracy Winkel-Johnson for her dedication as Walk for Thought team captain for five years running and her team, the Dragonfly Clan, for achieving the top fundraiser slot for the 2006 Walk for Thought. The Team has raised more than \$24,000 through the years!

The Dragonfly Clan was created in honor of Tracy's brother, Steve whose car was accidentally broadsided during a police car chase. Steve and his best friend were both severely injured in the accident. His friend died almost

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instantly, while Steve suffered major head trauma and lapsed into a coma.

It was at the hospital where Tracy and her family were visited by a representative from the Brain Injury Association of Minnesota, who told them that if Steve pulled through, Steve and the family could access the support and resources they needed.

"Unfortunately, my brother didn't pull through," said Tracy "but because the people at the Brain Injury Association of Minnesota were so thoughtful, we had all the donations from Steve's funeral go to the Brain Injury Association of Minnesota."

Tracy decided that the Walk for Thought would be the perfect outlet to remember her brother and give back to the Brain Injury Association of Minnesota. In order to keep her title as the top fundraiser for several years in a

row, Tracy has developed her skills as a master fundraiser.

"The key is to ask everybody!" said Tracy. "I keep a list of all the people I have asked the previous years and I'm constantly adding to it."

And Tracy gets creative too. Her husband has his own rock band and they held a benefit concert, "Rock for Thought," to raise donations for Walk for Thought.

The great thing about fundraising is that anyone can do it. "If you don't have time to volunteer, the Walk for Thought is a great way to show your support."

Tracy admits that she couldn't have done this alone. She's



Tracy Winkel-Johnson and her husband, Chad Johnson (left), and her parents, Sue and James Winkel (right), make up the Dragonfly Clan

Photo submitted

grateful for her wonderful family and friends who give their support. "I cannot take credit for the success of our fundraising," Tracy explains. "The credit goes to Steve, because he is our inspiration."



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injury occurring with vision loss or fractures. An area of the hospital was remodeled to fit the needs of polytrauma patients. For example, dark blue door frames stand out against beige walls, so they can easily be seen by someone with impaired vision. Dark blue bathroom sinks are highly visible against light blue wall paint.

"Think about what it would be like if you could barely see or could only discriminate light from dark and you are relearning to shave," Sigford says. "The contrast gives you visual cues to know, 'this is where I rinse my razor.'"

Patients stay at the Polytrauma Unit from two weeks to over five months, depending on how severely they are injured. In the private sector, the average hospital stay for a patient with TBI not necessarily associated with polytrauma would be from 14 to 63 days, according to Sigford.

Family and Community

Family members usually choose to live close to the hospital during the patient's stay. They can live at no cost in Fisher House, across the street from the medical center. The polytrauma center does not keep strict visiting hours, so families may visit at any time. They can attend their family member's therapy sessions and meet individually with a staff psychologist for education and help in coping with the patient's injury.

In addition, the family receives help from the patient's social work manager, who assists with personal arrangements such as travel plans, child care, and obtaining car seats and playpens. "The families are disrupted out of their normal routines for extensive periods of time," says Sigford. "They've gone through such a traumatic period that by the time they get to us, they are emotionally exhausted. We help them adjust and cope."

Want More Information About Combat-Related Brain Injury?

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- Article: *TBI: Vets, VA Face New War's Hallmark Injury*
- Article: *The Minneapolis Polytrauma Unit*

Sigford emphasizes the need for community awareness once polytrauma patients leave the unit. "Here they have the whole rehabilitation team acting as their support system and providing them with help physically, medically, and emotionally. When they go home, their next job is to reintegrate into the community. They are still going to need a team to help them do that. That may be their family, their neighbors, their church, and their employers.

The more people can understand about the effects of brain injury and trauma and provide the right support, the better we'll be able to reintegrate people."

This article is an abbreviated version of the article, "The Minneapolis Polytrauma Unit", that appeared in the October 2006 issue of Minnesota Healthcare News and it is reproduced with permission of Minnesota Physician Publishing, Inc.



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