

Traumatic Brain Injury Services Coordinating Council (TBISCC)
Meeting Minutes
Thursday, September 10, 2026, 10:00 am - 1:30 pm
One Commerce Plaza, 99 Washington Avenue, Albany, NY
16th Floor, Conference Room 1613

Topic	Discussion	Action/Next Steps/Who/When
Attendance	Council Members Present (in-person): Michael Davison, Michael Jabonaski, Maxine Smalling, Evan Seiden, Paul Partridge, Brigitte Hartman-DeCenzo, Christina LeBeau, Clifford Hymowitz, Miriam Kragness, Kate Berryan, Joanne Scandale Council Members Present (via WebEx): Jessica Pidgeon Council Members Absent: Maureen Hanse, Brent Feuz and Edward Devitt, Megan Clothier DOH Staff (in-person): Michael Chittenden, Tyler Winne, Richard Lehnert, Brittany Hoffert, Sridhar Reddy Nimmakayala, Dawn Lenahan DOH Staff (via WebEx): Jess Dell'Anno (Senior Attorney), Laura Lincourt, Constance Jones, Teri Schmidt, Sonya Warren Note: The meeting was conducted in-person and via WebEx.	
Welcome/Roll Call/Approval of Minutes/Ethics Reading	M. Jabonaski, Department of Health: Called the meeting into order at 10:08 a.m., roll call was conducted, and quorum was achieved. The slight delay at the start, due to technical issues, was resolved quickly. M. Jabonaski, Department of Health: Read Ethics Reading aloud. The piece read can be found on the agenda for the September 10, 2026, meeting. Council members attending in person and remotely all confirmed they have heard the reading, and they did not have suggestions or edits that they wished to be made to the reading. M. Jabonaski, Department of Health: Asked Council members to review the March 5, 2026, meeting minutes that were revised during the June 4, 2026, meeting. Mr. Jabonaski also asked Council to review the June 4, 2026, meeting minutes. M. Jabonaski, Department of Health: Motioned for March 5, 2026, meeting minutes and June 4, 2026, meeting minutes to be approved. C. Hymowitz, Public Representative: Seconded the motion. Members voted on the meeting minutes to be approved: 11 yes: 0 no	Council members are to review the Legislative Report and provide feedback at the December 17, 2026, meeting on the items they would like to be updated.

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	M. Jabonaski, Department of Health: Noted that the Legislative report is available for public viewing on the Traumatic Brain Injury Services Coordinating Council website, and a hard copy was provided to attendees at the meeting. M. Jabonaski, Department of Health: Asked that all Council members review the Legislative Report before the December 17, 2026, meeting. He requested feedback on what needs to be updated.	
Presentation From Michele R. Kellen, M. Ed. Professional Development	A presentation was given by Michele R. Kellen from the Brain Injury Association of New York State. This presentation highlighted how professionals can access enduring courses and continuing education opportunities anytime, allowing them to learn at their own pace and on their own schedule. After the presentation Council members had an opportunity to ask questions about the presentation.	
Discussion of Action Items From June 4, 2026 Meeting	D. Lenahan, Department of Health: Provided general updates that were requested during the June 4, 2026, meeting specific to the Nursing Home Transition and Diversion waiver and the Traumatic Brain Injury waiver. The Traumatic Brain Injury waiver has been at a consistent level of enrollment and consistent level of services over the last year. M. Chittenden, Department of Health: The update on the Nursing Home Transition and Diversion waiver is that the queue is still being processed, and when that final number of participants is captured, we then can build a strategy for the waiver. The Regional Resource Development Centers have been doing a great job processing participants and there is progress being made. Participants will not be kicked off the waiver because of the cap being in place. People do leave the waiver due to multiple reasons of their choosing. C. Hymowitz, Public Representative: The biggest problem that he sees within his community is that there is no housing for people who are on the waiver. Can we get a breakdown on the number of people using the housing subsidy by region for the next meeting? There might be a direct correlation on the housing availability for the housing subsidy program and the region that it is in reference to. Having the numbers broken down by region could help show those areas. B. Hoffert, Department of Health: Shared that another issue in addition to the lack of housing availability on the subsidy is that landlords do not always want to participate with the program. There are regulations and requirements that they have to follow, such as fair market value, which might deter landlords from wanting to participate.	The Department of Health will provide the number of people that are using the housing subsidy that are on the Nursing Home Transition and Diversion waiver and the Traumatic Brain Injury waiver. The total number requested will also be shown broken down by region.

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	K. Berryan, Public Representative: We do have landlords within the community who are in favor of working with the housing subsidy programs because they know that the rent will get paid on time, and that there is oversight in the apartments because staff are going there at least once a week to see the participant. B. Hoffert, Department of Health: We do encourage the Service Coordinators to inform the landlords of the benefits of working with the housing subsidy. M. Smalling, Office of Mental Health: We need to get the data. Once we have the data that will increase our understanding. Having understanding will help us evaluate specifically where the need is. If we can identify that a number of traumatic brain injury survivors live in a particular area, we can work to allocate more designated housing for those individuals. E. Seiden, Department of Education: Housing placement is often driven by primary diagnosis first. For people with dual diagnoses, that raises the question of which diagnosis is used to decide placement. Housing should be based on the person's actual housing need, not solely on diagnosis. M. Smalling, Office of Mental Health: We have to, as state agencies, be able to move beyond the diagnosis and look at people as individuals to better serve them. K. Berryan, Public Representative: The survivors have always just been as one thing when diagnosed. Finding housing, rehab, and resources for survivors is the biggest push with the bill. The daughter of a Council member was denied many services and housing because of behaviors that she has, along with additional diagnoses. With a traumatic brain injury there is often a dual diagnosis, and we need to be able to treat those survivors for all of their needs. J. Scandale, Public Representative: Where in New York State are the participants who are enrolled in the Traumatic Brain Injury waiver located? We are talking a lot about the needs of people, and it would be helpful as a Council to be able to know the regions that are most prevalent with waiver participants so we can better assess the needs of the individuals and specifically housing. D. Lenahan, Department of Health: We are as a program are doing more audits and QA for the regional offices to collect more data to make these advocacy changes and also to improve the functions within the program. This also pertains to environmental modifications and how that is reviewed. We are looking over the procedures to help improve our workflow and processes and better educate the regions on ways to	The Department of Health will provide the number of people that are on the Traumatic Brain Injury waiver and broken down by region.

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	improve this. Getting the correct data and working with the regions more closely will overall help the waiver and the participants. Another follow-up from June 4 meeting was that we reached out to the regions to see who would be interested in hosting an offsite meeting, we have gotten some feedback and will look at this being in place for 2027. The process for social transportation is also being looked at per the request from the June 4 meeting. It is a complex process, and it is on the program's radar to see if there are areas of improvement that can be made. A lot of this is to have our Service Coordinators work, using community resources, to help with transport specifically to social activities, not medical. We need more data to help see what is possible and the direct need. C. Hymowitz, Public Representative: After a meeting with Michael Jabonaski and Michael Chittenden they agreed that I will be added to the agenda for the Most Integrated Setting Coordination Council (MISCC) meeting, and not just in the public comment section. *****The letter on the action item did not need to be voted on or reviewed by the Council. M. Kragness, Public Representative: A document was drafted for the Council to review based off of housing research, after a meeting with two individuals from the Berkshire County ARC in Massachusetts. The drafted document shared the questions that were asked of the Berkshire County ARC, which are: why they chose to designate housing for traumatic brain injury survivors, what does the housing look like, and what activities are available for those individuals? There are obstacles that were also found with this housing structure, such as how you qualify for the program (which has flaws), and the funding of the program. M. Chittenden Department of Health: We received approval for the National Association of State Head Injury membership for two people for 2027. Cliff Hymowitz and Brigitte Hartman-DeCenzo will be sponsored for the two memberships for 2027. C. Hymowitz Public Representative: Wants an update from the Department of Education about the Advanced Home Healthcare Aide position. The curriculum has been approved, but there has not been training. E. Seiden, Department of Education: A follow-up will be done with the new Executive Secretary of Nursing on the status of this. M. Smalling, Office of Mental Health: We should ask if there are any agencies that are approved to start the training.	

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	E. Seiden, Department of Education and M. Smalling, Office of Mental Health: Both agree to follow up on the credentialing, if it is available, who is offering the training, and if the payment structure is established.	Evan Seiden and Maxine Smalling will follow up with the Council on the status of the Advanced Home Health Aide training.
Open Discussion	M. Davison, Public Representative: Voiced concern over Council members who are consistently not attending the meetings. What is the protocol on attendance and replacement of those members who do not come consistently? M. Jabonaski, Department of Health: We will get more information and have an update during the next meeting on the status of those Council members. M. Smalling, Office of Mental Health: Regarding the Legislative Report recommendations, there are some recommendations that we, as individual Council members, can begin to work on. Regarding the Legislative Report section III-e, piloting a housing model, can we start to collaborate on this item? M. Kragness, Public Representative: The recommendation of III-e was the exact motivation behind the research that has been conducted, which is working towards this recommendation and how we are going to address it. We would like to see other Council members partner with them to continue working on this and other recommendations put forward in the Legislative Report, not wanting to wait for three months at a time for progress to be potentially made. C. Hymowitz, Public Representative: Voiced interest in partnering with M. Kragness to work on the housing recommendation. M. Smalling, Office of Mental Health: State agencies that are a part of the Council, specifically the Office of Mental Health, Department of Health, and Office for People With Developmental Disabilities need to pull together resources to help with the housing pilot and other recommendations. M. Chittenden, Department of Health: Today the topics that have been covered are all pertaining to the Legislative report: 1. the need for data; 2. establishing the registry, which is directly tied to the data; 3. the housing side of that recommendation was covered; and 4. promoting provider education is exactly what	An update will be given at the December 2026 Council meeting regarding Council members who are consistently absent and new Council members to take their place. Sharing the proposed agenda for the December 2026 meeting with all Council members prior to the meeting to make sure all items are covered.

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	the presentation earlier in the meeting was about. The Legislative Report recommendations items are being touched on at the meeting, not all topics will be covered every time. The agenda can be drafted from the report recommendations and sent to members prior to the meeting to see what other items that Council members would like to be included within the upcoming meeting. C. Hymowitz, Public Representative: Would like to be nominated for the Chair position of the Traumatic Brain Injury Services Coordinating Council. B. Hartman-DeCenzo, Office of Addiction Services and Supports: What is the process of becoming the Chair? M. Chittenden, Department of Health: We will follow up with information from the bylaws about the appointing of the Chair position at the next meeting. The information will be shared before the meeting, and it will be gone over at the December meeting.	Share the bylaws with the Council members prior to the December 2026 meeting on how the Chair position is appointed. This will be a topic on the agenda for the December meeting.
Public Comment	Janeen Javoroski, New York State Victim Services: Requested help from the Council on different recommendations for housing placements in the Capital Region and what resources are available. C. LeBeau, Public Representative: On the Brain Injury Association of New York State website there are resources available for both traumatic brain injury survivors and their caregiver. Janeen Javoroski, New York State Victim Services: Requested a resource for searching different housing opportunities. Dianne Schwartz: Shared that on the New York State Department of Health website there is a skilled nursing category and within that you can find a traumatic brain injury subcategory for housing resources across the state.	
Adjournment	M. Jabonaski, Department of Health: Motioned for meeting to be adjourned. C. LeBeau, Public Representative: Seconded the motion. Meeting was adjourned at 12:47 p.m.	