



NASHIA Tip of the Month!

Creating an Effective State Advisory Board

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“A committee is organic rather than mechanical in its nature: it is not a structure but a plant. It takes root and grows, it flowers...scattering the seed from which other committees will bloom in their turn.”
C. Northcote Parkinson

Whether by statute or as a state initiative, advisory boards are important elements for effective work in the field of brain injury and help to provide programmatic oversight for effective service delivery systems and legislative supports. An advisory board can and should offer a forum for program stakeholders to communicate their opinions, share their expertise, and coordinate services. It should also support and represent the interests of each program within a larger entity. Alabama has had an advisory board in place, the Alabama Head Injury Task Force (AHITF), since 1989 and it still meets quarterly today. The AHITF has helped to create an effective, sustainable system of services and supports for Alabamians with brain injury and their families.

Key components of an effective advisory board:

- *A mission statement and state action plan* - Your advisory board should have a solid purpose and guide via an overall mission statement or goals that summarize your state's needs, and a living, breathing state action plan that is reviewed annually to ensure that the group's goals continue to be fulfilled. Both items provide guidance to help a state system identify and prioritize issues and serve as a visual check to stay on target with activities. Members should be surveyed annually as well to identify programs, services, strengths and expertise that can be shared with the whole state brain injury system.
- *A diverse membership of key partners* – Your advisory board should be as diverse as your state population and be reflective of goals established and maintained by the state plan, without being too big to organize meetings in a central location. Strong partnerships with a multitude of state programs allow states to leverage partner resources for maximizing services and supports, grant objectives, and possible funding opportunities. Above all, consumers and family members are included and lead active roles in committee work and goals. The AHITF is comprised of members from mental health, education, public health, protection and advocacy, child death review, minority health, the MCHB title V program, domestic violence, prevention, seatbelt and helmet safety, TBI Model Systems, pediatric services, neuropsychologists, physicians, vocational rehabilitation, veterans affairs, independent living, brain injury affiliates, consumers, family members and Medicaid.
- *Strong working committees* – Workgroups for crucial tasks and ongoing initiatives should be established and chaired by members to meet outside of and report to your advisory board. Each committee's activities should be reflected in your state plan. Possible standing or ad hoc committees could include work on prevention, behavioral issues, sports-related concussions, legislation, children and youth, waivers, training and education, grants, consumer/family needs and substance abuse.

- *Lead agency commitment* – The lead agency sets the tone and pace for objectives and agendas. Alabama's commitment to brain injury is reflected by the active involvement that the lead agency, the Alabama Department of Rehabilitation Services (ADRS), takes in Advisory Board work. The ADRS Commissioner chairs the AHITF, works towards ensuring involvement from the top down for other agencies' involvement within the group.
- Provide ongoing *training and education* statewide – There is an ongoing need to increase awareness of brain injury issues to existing programs, and your advisory board members can be a tremendous asset in helping to educate organizations on what those issues are, and how to better serve those with brain injury and their families. A statewide training plan can be put into place to monitor who needs training and who can best provide it by region and topic.

A strong and effective advisory board can be a tremendous asset to both new and well-established members. Starting and maintaining one is a lot of work – keeping members engaged can be a challenge, and there is always turnover to manage. However, the bottom line is that your advisory board can be a real asset to enhancing and sustaining state programs and services for citizens with brain injury if provided with a sense of purpose, realistic tasks, regular feedback, and most importantly, a belief that their input is valued.

For further information contact NASHIA at info@nashia.org.