



# DEVELOPMENTAL DISABILITIES DIVISION

## BULLETIN

Fall/Winter 2005-2006

<http://www.hawaii.gov/health/disability-services/developmental/current-dddbulletin.pdf>



### Developmental Disabilities Division's Mission

The mission of the Developmental Disabilities Division is to assure community based supports and services for persons with developmental disabilities through the principles of self-determination and person-centered planning.

Welcome to the Developmental Disabilities Division's (DDD) combined news bulletin with information from Division Administration, Case Management and Information Services Branch, and Developmental Disabilities Services Branch (Neurotrauma). The DDD news bulletin is a means to communicate Division happenings.

### DEVELOPMENTAL DISABILITIES DIVISION

FALL/WINTER 2005-2006  
BULLETIN

#### Editorial Staff

**DDD Administration**  
Phone: (808) 586-5840  
David Kanno  
Email: david.kanno@doh.hawaii.gov

**Case Management & Information Services Branch**  
Phone: (808) 733-9172 / (808) 733-9191  
Lynn Murakami-Akatsuka  
Email: lynn.akatsuka@doh.hawaii.gov  
Gail Yuen  
Email: gail.yuen@doh.hawaii.gov

**Developmental Disabilities Services Branch**  
Phone: (808) 453-6301  
Lester Matsumoto  
Email: lester.matsumoto@doh.hawaii.gov

### Message from David Fray, DDD Chief

## IMPROVING ACCESS TO DENTAL CARE FOR PERSONS WITH DEVELOPMENTAL DISABILITIES

How do you help an individual with developmental disabilities who has difficult behaviors due to dental pain? In Hawaii, accessing dental services for adults/individuals with developmental disabilities is important. The challenge of air travel for a person with dental pain with behavioral issues was the impetus for the Department to plan to improve dental services on neighbor islands. We are making great progress in Hawaii over the past year. Here are some examples of improving access to care:

- On Kauai PICL funds have made a difference. This partnership works with private dentists and behavioral desensitization assistance from the Arc of Kauai staff.
- Dr. Karen Hu of the Dental Health Division of the Department of Health has conducted an assessment of the dental needs of persons with developmental disability. The Arc of Maui collaborated with Dr. Hu to facilitate dental screenings for individuals on Maui. The preliminary results of the statewide dental screenings revealed low rates of decay in adults and high rates of periodontal gum disease. One

*continued on page 2*

### IN THIS ISSUE:

Improving Access to Dental Care for Persons with Developmental Disabilities . . . . .	1
David Fray Receives Easter Seals Award . . .	2
Hawaii Disability Rights Center Lawsuit Settled . . . . .	3
"Make a Friend Day" . . . . .	4

Long and Dedicated Volunteers at Prevent Child Abuse Hawaii . . . . .	5
Voting Rights for Individuals with Disabilities . . . . .	7
Pearl City Fun Fair and Music Festival . . .	8
"Eat for Relief" Help Hurricane Katrina Victims . . . . .	10
Don't Let Your Guard Down – Be Prepared! . . . . .	10

Individual Mentors Make Presentations . .	10
Self-Advocate and Family Advisory Groups .	11
TBI and Hawai'i's Military . . . . .	12
Domestic Violence Awareness Month in October . . . . .	12
Advisory Boards . . . . .	12
Hawai'i Senior's Fair – The Good Life Expo . . . . .	13
TBI Grant . . . . .	13

## Chief's Message

### Dental Care

*continued from page 1*

explanation may be due to the Medicaid reimbursement for extractions only in adults.

- An effective safety net exists on Oahu. Queen's Medical Center, has a dental residency program that provides anesthesia services to persons with developmental disability.
- A needs assessment based upon dental screenings conducted by volunteer dentists at the Special Olympics/ Special Smiles program has identified areas of access needs on some neighbor islands and facilitated the coordination of dental care for many people.
- Dr. Paul Glassman, the director of the special needs program at the University of the Pacific School of Dentistry in San Francisco, will present at the PAC Rim conference March 13, 2006 and provide training for local dentists and DOH staff outside the conference later that week.
- The cost of adding dental services to the full Medicaid population is a very large cost but is being considered during the upcoming legislative session. While the Department's Dental Health Division is tasked to improve the dental outcomes for all Medicaid beneficiaries, our Division considers dental care for persons with intellectual disabilities a priority.

Health's Dental Health Division (DHD), Family Health Service Division (FHSD), Developmental Disabilities Division (DDD) and District Health Officers (DHOs) from Kauai, Maui and Hawaii counties participated in a series of meetings over a period of eleven months to identify key oral health issues in State of Hawaii and collectively determine strategies to address these challenges. This was done first by discussing oral health problems in each respective county and health specialty areas, and then by looking for commonalities of oral health issues. The group used available data to support their discussions including the "2004 Hawaii Oral Health Data Profile" by Dr. Mark Greer, Chief of DHD to measure areas of concern. After identifying statewide oral health issues and suggesting strategies to address these problems, the group analyzed the strategies using the decision-making matrix. Progress this year has been encouraging.

The Department's Oral Health Taskforce findings for persons with Developmental Disability:

The adult Medicaid population which includes the adult developmental disabilities population is at risk for poor oral hygiene and missing teeth (due to extractions as opposed to restorative dental services being provided).

- Limited benefits for adult DD Medicaid recipients
- DD population has perceived/real behavioral problems resulting in reluctance in treating such individuals by practicing dentists

*(continued on page 3)*

## DAVID FRAY RECEIVES EASTER SEALS AWARD



*Dr. Fray with his award in hand talking on a microphone to attendees at the Annual Easter Seals Awards Dinner.*

Congratulations to Dr. David Fray, Developmental Disabilities Division Chief, for being one of two recipients of the EDI (Equality, Dignity and Independence) Advocacy Award. This award recognizes individuals for their active work in furthering public awareness and seeking changes in policy and practice on behalf of persons with disabilities.

Dr. Fray and Sue Brown, the other recipient of the award, were honored at the Easter Seals Hawaii Kuoko'a (Independence) Awards Banquet on Wednesday, October 26. The Board of Directors and staff of Easter Seals Hawaii gathered together at this special dinner to celebrate and honor principal supporters for their commitment to their families.

We proudly salute you for outstanding work!

## Chief's Message

### Dental Care

*continued from page 2*

- Lack of awareness/concern of some care givers or guardians toward preventive care & hygiene
- Limited number of providers able to serve persons with disabilities

The three major strategies to address these issues are:

1. Provide fluoride through
  - a. community water fluoridation
  - b. topical fluoride application (varnish)
  - c. dietary supplements
2. Increase the availability and accessibility of dental services:
  - a. Increase the number of trained dental and other health

professionals for provision of oral health care to people with disabilities

- b. Expand oral health coverage for Medicaid adults by increasing the number of allowable services and increase Medicaid coverage flexibility
  - c. Look for opportunities for funding and/or expansions with other providers or partners
3. Dental education for health professionals, caregivers, and the general public.

The DDD appreciates the contribution of the Dental Health Division's three clinics on Oahu that provide comprehensive dentistry to persons with Developmental Disabilities. Statewide other public health clinics are interested in

providing more care for the persons we serve. The lack of access to care over time creates significant health risks to our clients. Hawaii Revised Statute 333F requires our division lead, develop and administer a comprehensive system of support to enable community living within available state and federal resources. The DD Act Bill of Rights mandates appropriate dental services (Public Law 106-402, 114 Stat. 1687 (2000)). The Division goals are to (1) provide training with the Dental Health Division, (2) promote best practices and (3) increase access to dental care (especially on neighbor islands). It is exciting to see progress in this area and I encourage everyone to be informed about the importance of oral health.

## Chief's Message

### HAWAII DISABILITY RIGHTS CENTER LAWSUIT SETTLED

On August 12, 2005, the State settled a lawsuit filed in 2003 between the Hawaii Disability Rights Center, et al., and the State of Hawaii, et al., Civil No. 03-00524 HG-KSC concerning admissions and eligibility to the Developmental Disabilities Division's Home and Community-Based Services program.

Prior to this settlement, the State settled another lawsuit in 2000 between Janet Makin, et al. and the State of Hawaii, et al., Civil No. 98-00997 DAE (Makin lawsuit) concerning the numbers admitted into the Home and Community-Based Services program. In the years preceding this Makin lawsuit (Fiscal Years 1997 to 2000) the DDD admitted, on the average,

about 120 individuals into the Home and Community-Based Services program each year.

During the Makin lawsuit settlement years (Fiscal Years 2001 to 2003), the DDD admitted approximately 270 individuals into the waiver program each year, a 125% increase in the average over the pre-Makin years.

For Fiscal Years 2004 and 2005 after the end of the Makin lawsuit settlement years continuing through the Hawaii Disability Rights lawsuit on waitlisting years, the DDD continued to admit high numbers into the waiver program (approximately 248 individuals per year). In order to admit these larger

numbers into the waiver, the Development Disabilities Division had to secure additional funds from the legislature through advocating for individuals with Developmental Disabilities.

Other successes during Fiscal Years 2004 and 2005 resulting from the Makin and HDRC lawsuit settlements are: 1) The increase in provider capacity for waiver services, and 2) The introduction of consumer-directed personal assistance through the waiver.

The successes related to our waiver program indicate the DDD's commitment to our population with Developmental Disabilities.

## “MAKE A FRIEND DAY”

“We want people to see us for what we can give to our community. We are not only recipients of support.” Recognizing the need for persons with disabilities to have opportunities to contribute to the community in which they live, Case Management Unit 4 coordinated and facilitated “Make a Friend Day”, on August 1, 2005.

First, 6 individuals with disabilities and their families who reside on the Windward side volunteered to work with the staff of CMU 4. We then forged a partnership with a youth group from the Keolumana United Methodist Church in Kailua. Together, we initiated “Make a Friend Day” to build “friendships” by working collaboratively on a Windward community project with approximately 50 seniors and the staff at the Aloha Nursing and Rehab Centre located in Kaneohe. Nona Wong, of Nona’s Orchids, Inc., in Kahaluu generously donated over 30 dozen beautiful dendrobium orchid sprays that we collectively assembled into creative floral arrangements.

There was fun and excitement in the air as every participant, young and old, enjoyed making over 150 mini floral arrangements for the residents and day program participants at Aloha Nursing. After the floral making was completed, our volunteer participants, together with the youth group, brought cheer to senior residents who were unable to participate. They personally delivered flower arrangements to residents who were unable to leave their rooms. Appreciative smiles touched the hearts of enthusiastic presenters.

*(continued on page 5)*



*Michael Diem assisting resident with flower arrangement.*



*Practicum student Kyoko Tomita (front), Christopher Urata (left) and church members getting ready to deliver flowers to residents.*



*Dustin Park with case manager Ching Tseng playing games at Hoomaluhia Botanical Garden.*



*Michelle Wright making friends with resident.*

## Make A Friend Day

(continued from page 4)

The activity at Aloha Nursing was followed by a potluck picnic at Hoomaluhia Botanical Garden for “Make A Friend Day” volunteers to celebrate the success of our efforts. Everyone had fun “hanging out” together as we shared stories over lunch, fed the ducks and all participated in team building games. Our volunteers and the church youth group were individually recognized and honored for their active participation and hard work. They each received certificates of appreciation as well as “goodie bags” of snacks and prizes generously donated by Central Pacific Bank, Zippy’s Restaurants, Jamba Juice, Keolumana United Methodist Church and by the CMU 4 staff.



*Kammy Kam with Auntie Freida and case manager Shan Wang receiving Certificate of Appreciation for participation.*

With the success of this event, we look forward to future collaborative projects on the Windward side. Friendships and pride develop when individuals with disabilities partner

with members of community organizations to work toward common goals. We can and will contribute to the community in which we live.



## LONG AND DEDICATED VOLUNTEERS AT PREVENT CHILD ABUSE HAWAII

Prevent Child Abuse Hawaii (PCAH) is a private non-profit organization dedicated to prevent child abuse through education, public awareness and advocacy which promote positive parenting and healthy families where children

are valued and loved. As with many agencies and organizations, PCAH relies on assistance from volunteers. The organization provides an environment where individuals with developmental disabilities/mental retardation (DD/MR) can work with

others in an integrated setting.

Two individuals, **Marisa Nip** and **Cory Cote** have been faithful volunteers for years. Marisa started

(continued on page 6)

## Volunteers

(continued from page 5)

with PCAH in 1991 and Cory in 1999. They have been great assets to the organization helping with sorting, collating, folding, stapling, labeling, glueing, stuffing envelopes, preparing materials for mailing and other purposes, cutting ribbon for the Blue Ribbon campaigns, and numerous other responsibilities. They help to organize materials for the organization's annual conference, fundraising and special events throughout the year.

Attendance in the office and at many of the activities not only provide many worthwhile work experiences but are a tremendous opportunity to socialize. Marisa and Cory have participated in community events and holiday celebrations with other volunteers and staff offering many opportunities to integrate, improve social or employment skills, and build self-confidence.

Besides their volunteer work, both Marisa and Cory have paid jobs. Marisa works at the Kahala Theatres and Cory at McKinley High School and McDonald's Restaurant Discovery Bay. Marisa also volunteers at Hawaii International Child and Hope Chapel and previously volunteered at Pali Preschool. Cory previously volunteered at the State Capitol in the office of a House Representative. They both contribute to the community in ways that give them a sense of belonging and an opportunity to learn. They have earned the respect that come to all who contribute to the well-being of others. Other individuals with DD/MR have used their volunteer experience to move on to paid



Marisa (left) and Cory (right) taking a break from their work posing with Prevent Child Abuse Hawaii Program Director Jennifer Murphy (center).



Marisa (left) and Cory (right) preparing information cards for Blue Ribbon Campaign.

employment with other organizations and businesses.

The Developmental Disabilities Division supports individuals through volunteer program resources, assists individuals to live a life in the community rich in

community association and contribution, and supports them to play a valued role in the community with participation in community activities as volunteering. Individuals, families, caregivers, and

(continued on page 7)

## Volunteers

(continued from page 6)

community members advocate for services through volunteerism. Volunteer services have evolved to include more partnerships, collaborations, and sharing of resources. Individuals with disabilities are taking advantage of volunteer opportunities available to them. The rewards for all parties are

endless. The opportunity for full participation within the community and the recognition of the real value that performing volunteer service can bring to the lives of all people are immeasurable.

Volunteerism and community service have been avenues through which individuals have been able to help their communities, gain marketable skills that could

eventually lead to paid employment, test out interests and possible career paths, develop personal and professional social connections, and experience a sense of accomplishment. If your organization has opportunities for individuals with DD/MR to provide volunteer services, contact Gail Yuen at 733-9191 or e-mail at [gail.yuen@doh.hawaii.gov](mailto:gail.yuen@doh.hawaii.gov).

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## VOTING RIGHTS FOR INDIVIDUALS WITH DISABILITIES

Voting is a fundamental right for each qualified U.S. citizen to be part of a community's political problem solving process. A vote gives people a voice and influence in making laws that affect their lives. By participating in the voting process a person communicates to politicians what they value and want. Each U.S. citizen has the responsibility to make educated and informed choices in selecting the candidate that they feel will best represent the community.

Today, most people assume that all U.S. citizens are able to vote. However, earlier in U.S. history the prevailing attitude was that people with disabilities were incapable of voting. The gradual change in attitude started with the broader civil rights movement, which sparked several disenfranchised groups to demand equality. People with disabilities were empowered to push for legal protection which led to three important laws in voting reform for people with disabilities: The Voting Rights Act of 1965, the Voting Accessibility for the Elderly and Handicapped Act of 1984, and the Americans with Disabilities Act of 1990. These laws helped to create a more accessibility sensitive atmosphere in voting,



acknowledging that there was a need to include people with disabilities in the voting process.

However, some individuals with disabilities types were still excluded from the voting process. People with developmental and cognitive disabilities were considered by many lawmakers to be incapable of casting a valid vote. In many states people with these disabilities were prevented from voting based on guardianship and mental competency laws.

Recognizing that voting is a fundamental right, election officials in Hawaii follow the law provided to protect voting rights. Hawaii Revised Statutes (HRS) §§ 11-23(a)

and 11-25 outline procedures used to both challenge and protect an individual's right to vote. Any challenge to an individual's right to vote is carefully investigated before action is taken. Any action taken can be reversed and/or addressed under HRS § 11-25, providing a remedy to voters. Any actions that election officials take are not arbitrary, but must meet specific procedural and evidence requirements. For people with cognitive and developmental disabilities, these protections are ways to ensure that they are included in the voting process.

As part of a massive national voting reform movement, Congress passed the Help America Vote Act (HAVA), in 2002, to improve federal election procedures across the nation. Under HAVA § 301(a)(3) voting systems are required to be accessible to people with disabilities. Likewise, the Election Assistance Commission (EAC), which was created by HAVA has Voluntary Voting Guidelines that also require that voting systems are accessible to people with disabilities. Along with new guidelines, HAVA provided

(continued on page 8)

## Voting Rights

(continued from page 7)

funds to states wanting to improve their voting process. The Election Assistance for Individuals with Disabilities Grant was created to assist states with accessibility needs by providing funds specifically to make the voting process accessible. Along with funding, many states utilized alternative methods of voting, which included, the Direct Electronic Recording Voting System (DRE) and online voting.

In 2004, Hawaii was one of the first states to utilize the DRE in its elections. The Office of Elections surveyed each polling place for accessibility and when possible, provided temporary ramps, call buttons, parking signage, and other accessibility products to make each polling place accessible. Likewise, people with disabilities were included in the selection of the DRE and in the outreach efforts to educate people with disabilities about their rights, accessibility options, and how to use the DRE.

The Arc of Hawaii provided outreach workshops for individuals with developmental disabilities.

Chris Hogan, Training Coordinator/HIPAA Officer, of the Arc of Hawaii provided outreach to over 207 individuals across Oahu. The workshops covered voting rights, clarifying misconceptions about the voting process. The participants were given time to use and become comfortable using the DRE. The participants responded positively. Hogan made the following suggestions to assist people in their effort to vote independently:

1. If a voter has a guardian, determine if the guardian is okay with the person voting before providing assistance.
2. Make sure the voter knows his/her voting rights.
3. A voter can ask for assistance. Under HRS § 11-139 a voter can ask anyone, except an employer or union agent, to assist him/her.
4. If a voter is unsure about whom he/she wants to choose, provide information out of newspapers about candidates. Have the voter write out a "cheat sheet" if that will help.
5. If possible, get a sample DRE or appropriate version of the accessible voting system and make it available to voters to practice on and get comfortable.

For example, place the sample in a lobby or area that is readily accessible to voters.

6. If you, a family member, or a friend accompanies the voter, be sure that the DRE, is placed for privacy while the voter casts his or her ballot.

In 2005 and 2006, the Office of Elections will continue to improve voting accessibility. New auxiliary aids kits are being ordered, which will include magnifiers, signature guides, pen grips, and communication cards for the deaf and hard of hearing. There will be an accessible alternative method of voting, other than the paper ballot, available for people with disabilities. Educational workshops will resume in late 2005 focusing on voter registration, and in 2006 covering voter information about accessible options. Service providers and people with disabilities are encouraged to get involved as volunteers or just passing on the information. For information contact Joan Bird at the Disability and Communication Access Board (DCAB) at 586-8121 or email [joan.bird@doh.hawaii.gov](mailto:joan.bird@doh.hawaii.gov).



The 1st Annual Fun Fair & Music Festival held on August 27, 2005 on the Waimano Ridge campus field was a huge success. Over 800 persons attended the event. The

event was sponsored by the Pearl City Community Association (PCCA) in collaboration with the Department of Health, Developmental Disabilities Division.

There was food, games, inflatables, pony rides, a plant sale, an open market, crafts, wellness and

(continued on page 9)

## Pearl City Fun Fair

*continued from page 8*

informational booths and entertainment throughout the day with special guest performances by the *Royal Hawaiian Band*, the *Love Notes* and *Beethoven's Nightmare* (World's First Deaf Rock and Roll band).

Individuals with developmental disabilities had an opportunity to sell their arts and crafts with other local vendors, to the local community. The Developmental Disabilities Division had an informational booth manned by Carol Batangan-Rivera, Jessica Garlock-Tualii, Mae Ho, and Lisa Maetani.

The Honorable Mayor Mufi Hannemann and Dr. Linda Rosen, Deputy Director of the Department of Health, spoke at the event. The Honolulu City Council recognized the Pearl City Community Association with a Certificate commending them for putting on the community event.

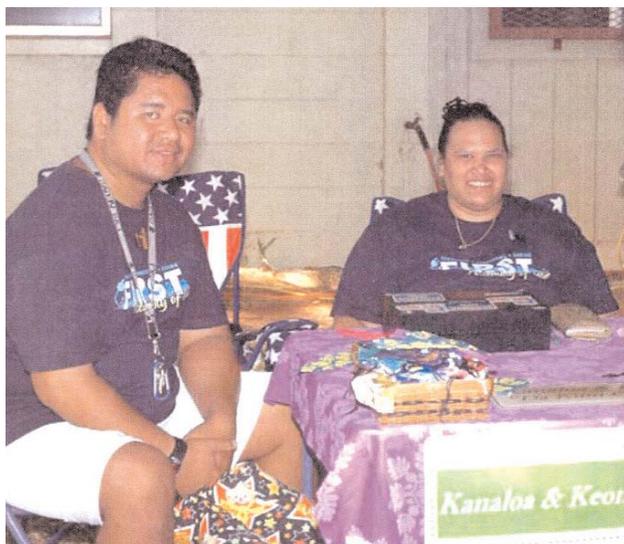
Everyone had a wonderful and fun-filled day.



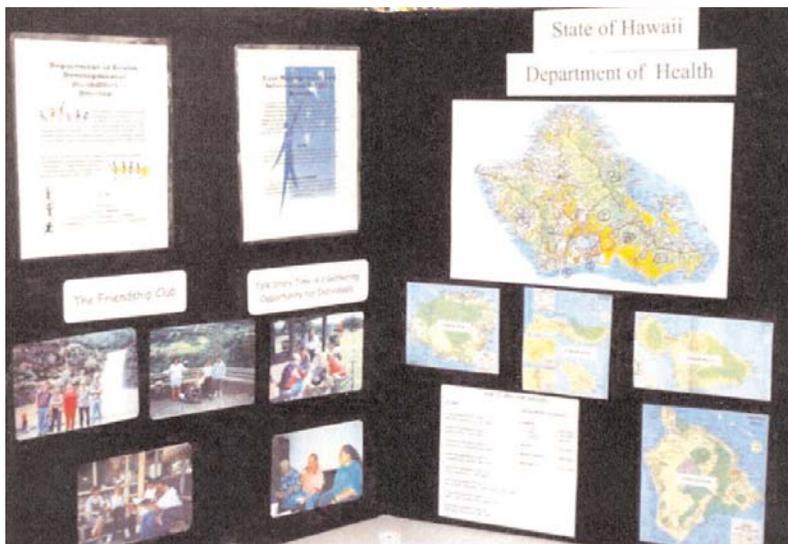
*Sew Happy group selling scrub tops, cabana sets, and other sewn garments.*



*Jessica Garlock-Tualii (left) and Lisa Maetani (right) Developmental Disabilities Division (DDD) Social Workers manning the DDD services wheel of questions and answers game.*



*Crafters Jonathan and Sarah Ahina of Kanaloa & Keoni – Da Kind Crafts with their products.*



*The Developmental Disabilities Division informational display.*

## “EAT FOR RELIEF” HELP HURRICANE KATRINA VICTIMS

Case Management Unit 6 of the Case Management and Information Services Branch of the Developmental Disabilities Division put on a fundraiser on October 3rd called the “Eat For Relief” Bake/Food Sale, to raise money for the victims of Hurricane Katrina, through the American Red Cross in Hawaii.



beef stew and hot dogs. “Broke da mout” baked goods topped off the delicious meals. The entire division was invited to participate in the fundraiser, as well as the staff at the MedQuest office located on the 3rd floor of the Dole site.

Case Manager Lyndall Kawakami coordinated the fundraising event, with the help and generosity of employees at the Dole site at 801 Dillingham Boulevard. Plate lunch items included homemade chili with rice, kalua pork, chicken adobo, ono

CMU 6 is pleased to announce that we were able to raise \$850.00 thanks to everyone’s big hearts, generosity and empty stomachs. The American Red Cross 2005 Hurricane Katrina Relief Fund was thrilled to receive such a generous donation that will definitely help the most needy!

## INDIVIDUAL MENTORS MAKE PRESENTATIONS

Joey Lakins and Evan Murakami work for the Department of Health as Individual Mentors at the Case Management and Information Services Branch. Joey’s and Evan’s goals are to mentor other individuals with disabilities to develop their own individualized service plans and to provide informational sessions to these individuals, community groups, agencies, parents and guardians on self-advocacy.

Joey and Evan put together a presentation on Person Centered Planning. Since July 2005, they have done six presentations. Three of them were for individuals with disabilities and



the other three were for the staff and caregivers of provider agencies.

At the end of these informational sessions, the audience was given an evaluation form on the mentors and their presentation. The feedback that we got was incredibly

supportive. Here are a few of the things that the staff at Responsive Caregivers of Hawaii had to say: “It’s educational to have this in-service for staff development to provide quality service to the client,” “I felt that the presenters gave a very informative

## DON’T LET YOUR GUARD DOWN – BE PREPARED!



Hawaii’s beautiful weather can turn to powerful storms, such as hurricanes, generally during the months from June to December. The effects can include damaging surf and storm surges along coastlines, destructive winds, water spouts and tornadoes, heavy rain and flooding. Should one of these powerful storms strike an island, no area will be safe from its effects.

The state Civil Defense has added disaster preparation information on its Web Site to assist people with disabilities:

[www.scd.hawaii.gov](http://www.scd.hawaii.gov)

Under “special needs information,” there is a checklist for people with special needs that can be downloaded and printed. The checklist covers topics such as reducing hazards in the home, preparing a disaster kit, fire safety and evacuations.

Direct links to the “checklist for people with special needs” and “emergency procedures” are on the Hawaii State Department of Health’s Developmental Disabilities Division website. Please be prepared for your self-advocate and family!

*continued on page 11*

## Individual Mentors

*continued from page 10*

presentation,” and “I would recommend this presentation to other staff and caregivers.” They also received great responses from the self-advocates at the Winners at Work program. They were really honest with what they liked about the presentation on Person Centered Planning and how proud they were of the job that Joey and Evan were doing. They were asked questions about how they got started doing presentations and if they thought that they too could someday become individual mentors as well. The advocates had also made comments about the fact that before Joey’s and Evan’s presentation, they didn’t know that their case manager, along with their circle of supports, were actually the people that could help them with services and help them with the best quality of life possible. It was an awesome feeling for the Mentors. It gave them a sense of accomplishment.

The mentors are scheduled to do two more presentations before the end of the year. So far they’ve done presentations at Hawaii Health Services, Goodwill-(Kilihau), Kokuia Villa, Alternative Care Services of Hawaii, and Responsive Caregivers of Hawaii. If there are any provider agencies that would like the mentors to do a presentation on Person Centered Planning they should call Joey and Evan at 733-9167, and they would be more than happy to make arrangements to do the presentations.

## SELF-ADVOCATE AND FAMILY ADVISORY GROUPS

The Developmental Disabilities Division (DDD) believes that it is essential to have participation by self-advocates and families in developing services, policies and guidelines affecting persons with developmental disabilities. While the DDD is accountable for decisions, it needs to have the input and advice from the people it serves. As a result, the DDD is establishing a statewide system of island advisory groups consisting of self-advocates and family members.

There will be an advisory group on each Neighbor Island and 2 groups on Oahu. The 2 Oahu groups will be geographically defined by: (1) East Oahu: Case Management Unit (CMU) 1, 4, 7, 8 and (2) West Oahu: CMU 2, 3, 5 and 6. Each of these advisory groups will select a representative to a DDD state advisory group. There will be 8-14 people in each advisory group which will meet on at least a quarterly basis. Case Management Unit staff will facilitate the group discussion and provide logistical support such as preparing an agenda, taking minutes and finding a meeting room.

The role of advisory group members are to: (1) participate in the island advisory group and provide recommendations to the DDD, (2) work to reach consensus in the group, (3) be available for contact by other self-advocates and family members and (4) attend 75% of scheduled meetings.

Each group will seek to have representation by:

- Self-Advocates or family members of persons with medical needs
- Self-Advocates or family members of persons with challenging behaviors
- Family members with school age children
- Self-Advocates or family members of adults
- Self-Advocates or family members of persons in the wavier
- Self-Advocates or family members of persons not in the waiver

For information on your island’s advisory group, please contact the supervisor of your Case Management Unit.





## NEUROTRAUMA NEWS

Neurotrauma Supports  
Developmental Disabilities  
Services Branch  
Developmental Disabilities  
Division

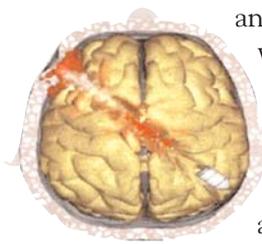
2201 Waimano Home Road  
Pearl City, Hawaii 96782-1474  
Telephone: 453-6301  
E-mail: [ntrauma@doh.hawaii.gov](mailto:ntrauma@doh.hawaii.gov)

If you have Microsoft Windows media player, check our website: [www.hawaii.gov/health/disability-services/neurotrauma/index.html](http://www.hawaii.gov/health/disability-services/neurotrauma/index.html) <<http://www.hawaii.gov/health/disability-services/neurotrauma/index.html>> for more videos on topics relevant to survivors of brain, spinal cord injury and stroke.

## TBI AND HAWAII'S MILITARY

A rare collaborative effort was accomplished in promoting traumatic brain injury awareness and prevention. On August 31 and September 1, 2005 the Brain Injury Association of Hawai'i, the Defense and Veterans Brain Injury Center (DVBIC) and the DOH's Neurotrauma Supports were brought together by the Kaneohe Marine Corp Base Safety Center to do seven training sessions. One session was held at Camp Smith and six at Kaneohe Marine Corp Base. There was an estimated total of 2,000 Marine and Naval personnel who attended.

Focus on the training sessions was on the types of brain injury military personnel are sustaining from the recent war and ongoing conflicts in Iraq and Afghanistan. Besides bullet



Picture of a bullet piercing the skull.

and fragment wounds, traumatic brain injuries are being caused by explosives and rocket blasts

that violently rock the brain inside its skull.

DVBIC Teams from Walter Reed Hospital in Washington, D.C. and San Diego demonstrated the effects of brain injury and highlighted the TBI risk factors. They told of one Marine's experience with TBI after being hit by a rocket.

BIA-Hawaii speakers presented some information on TBI in Hawai'i and some of the causes and risks involved. Special thanks to Courtney, Mark, and Hal for sharing their personal experiences with TBI.

The intent of the Safety Center was to hold these "Stand Down" sessions to strive for safety during the upcoming Labor Day weekend. The message stressed was to wear helmets when biking or motor-cycling, use your seatbelts and not drive under the influence.

Camouflaged brain-looking helmets donated by the *Use Your Brain* Project of the Lynn Fund were circulated to some of the Marine and Naval personnel in attendance.

## ADVISORY BOARDS

The State Traumatic Brain Injury Advisory (STBIAB) held its annual meeting in August, reviewing its past year's accomplishments and updating their Action Plan for the upcoming year. Elzy Kaina, RN/Case Manager, from Rehab. Hospital of the Pacific was introduced as the new chair. Also distributed was the new Members Handbook which included the amendment to the Sunshine Law.

The Neurotrauma Advisory Board (NTAB) in its meeting in October approved expenditure from the NT Special Fund for a University of Hawaii mentoring project and a

## DOMESTIC VIOLENCE AWARENESS MONTH IN OCTOBER

Although not the primary cause of traumatic brain injury (TBI) in Hawai'i, there is a linkage between domestic violence and TBI. Victims of domestic violence often sustain injuries to the head, neck, and face. Repeated brain injuries lead to problems with thinking, emotions and physical abilities.

In partnership with the Alabama Dept. of Rehabilitation Services and the Hawaii State Coalition Against Domestic Violence, a poster exhibit

was on display at the DOH, State Bldg. at Kapolei, the Waianae Coast Comprehensive Health Center, and Leeward Health Center. There was information on characteristics of brain injury and how to seek assistance through the Domestic Violence Clearinghouse and Legal Hotline. Concurrently the Neurotrauma website showed two videos, "Victim's Video" (an overview of TBI and domestic violence) and "Tool Kit Video" for providers.

*continued on page 13*



**Have a Safe and Happy Holiday Season**

## Advisory Boards

*continued from page 12*

Queen's Medical Center follow-up study. The STBIAB meets on the third Friday of odd-numbered months and the NTAB on the

fourth Friday, even-numbered months, from 1:30 to 4:00 pm.

Both advisory board meetings are held at the Capitol Center, 1177 Alakea St., Room 302 on Oahu (also at the State Building in

Kapolei for Neurotrauma) and the State video conference centers (VCCs) on Maui, Hawai'i and Kauai. Meetings are open to the public. Call 453-6294 for the dates, times or more information.

## HAWAII SENIORS' FAIR – THE GOOD LIFE EXPO

Neurotrauma staff was there and handed out over 270 bags with our program brochures, newsletters and business cards, along with products with contact information. There were two videos showing falls prevention and informational handouts from the Home Safety Council and the SAFE STEPS Program.

Attendees were asked to complete a questionnaire on whether they had or knew of someone who had a neurotrauma injury (TBI, spinal cord injury or stroke). Those that said they had or knew of someone then listed some of the problems encountered. These included having feelings of anger or depression; difficulties with planning, organizing or memory; being dizzy or disoriented; difficulty communicating with others; problems with housing, transportation, medical services, finances, relationships and employment. Two seniors' retirement homes requested a presentation on the SAFE STEPS Program.

## TBI GRANT



*Lester Matsumoto, Neurotrauma Staff in Denver*

Two Neurotrauma staff attended the Annual NASHIA State of the States meeting in Denver in September.

This year's theme was collaboration at the national, state and local levels. By developing and strengthening partnerships, State agencies can enhance survivors' linkages and access to services. Staff was able to share their recent collaborative effort

with BIA and the Defense and Veterans Brain Injury Center. Dr. Sandra Salan, medical officer from the Social Security Admin., reported that TBI survivors often lack the insight to report and do not apply for benefits. If they do, they lack awareness of their disability or are in state of denial. She said they would much rather admit to having a mental disorder than a brain injury.



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Linda Lingle, Governor  
Chiyome Leinaala Fukino, M.D.,  
Director of Health