

# BSCIP Advisory Council Public Awareness Committee Meeting (Tentative Dates)-20240307\_140233-Meeting Recording

March 7, 2024, 7:02PM

53m 42s

🎙️ **Casavant, Robert** started transcription

👤 **Wanecski, John M** joined the meeting

 **Robinson, Kimberly S** 2:07

So Kerry, I say we go ahead and get started or after so if if you're OK, OK and so welcome everybody to the brain and spinal Cord Advisory Council Public Awareness Committee meeting.

 **Carrie Rayburn** 2:12

OK.

Yeah.

 **Robinson, Kimberly S** 2:22

Umm, thank you for taking the time out of your day to join us and Kerry is going to be a Co chairing today for Jill.

So with that, I'll turn it over to Kerry.

 **Carrie Rayburn** 2:36

Alright, thank you guys for coming.

We're gonna go ahead and start with roll call, right?

Is that going to be Josh?

 **Robinson, Kimberly S** 2:45

It's excellent.

No, it's actually Caitlin.

 **Carrie Rayburn** 2:49  
OK.

 **Robinson, Kimberly S** 2:50  
Caitlin's back so Josh won't be doing roll call for it now that she's back. Yeah.

 **Carrie Rayburn** 2:54  
Alright, welcome back, Caitlin.

 **Daws, Caitlin E** 2:57  
Thank you.  
OK.  
So umm, I'll start with Don Chester.

 **Chester, Don** 3:03  
Here.

 **Daws, Caitlin E** 3:05  
OK.  
Kevin Mullin.

 **Kevin Mullin (Guest)** 3:07  
Here.

 **Daws, Caitlin E** 3:09  
Doctor Rhonda Ross.

 **Dr. Brian Higdon** left the meeting

 **Daws, Caitlin E** 3:15  
Is Rhonda Ross on the call?  
I don't see her.  
Uh, potty Lance.  
Jennifer lannon.

Daniel Nicholson.  
Jeffrey secure.  
Michael foda.  
McDonald's.  
Madonna stateburg, I'm sorry.

 **Abilash Haridas, MD** 3:46  
OK.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 3:48  
The present.

 **Daws, Caitlin E** 3:49  
OK, Jill olenek.  
Doctor valbuena.

 **Dubrocq, Jose A** joined the meeting

 **Daws, Caitlin E** 3:59  
Doctor Higdon.  
I thought I saw Doctor Hector on the call.  
Is he not on here?

 **Robinson, Kimberly S** 4:10  
He was.

 **Daws, Caitlin E** 4:10  
No hectic it off.

 **Robinson, Kimberly S** 4:11  
Maybe.  
Maybe he got booted off.

 **Daws, Caitlin E** 4:14  
I'll watch for him to join again.



**Robinson, Kimberly S** 4:14

Yep.

Yeah.

And I also I also see Dan Nicholson.



**dan nicholson** joined the meeting



**Robinson, Kimberly S** 4:19

He just joined.



**Daws, Caitlin E** 4:20

OK.

President for Danielson.

Umm.

Doctor Herdes dies.

Pronounce that correctly.



**Abilash Haridas, MD** 4:30

Harry does here.

Thank you.



**Daws, Caitlin E** 4:32

OK.

Carrie rayborn.



**Carrie Rayburn** 4:37

Here.



**Daws, Caitlin E** 4:38

And ruthann Tattersall.



**Ruthan Tattersall** 4:43

Here.



**Daws, Caitlin E** 4:44

OK, perfect.



**Robinson, Kimberly S** 4:47

Alright, so if Doctor Higdon comes back for this committee, we will then have a quorum right now.

Carry you only have 5.



**Carrie Rayburn** 4:56

OK.



**Robinson, Kimberly S** 4:56

Umm, so we'll watch for Doctor Higdon to see if he comes back in.



**Carrie Rayburn** 5:00

OK.

So we just need to pause on approval of the Minutes, but we can move forward through the agenda, right?



**Robinson, Kimberly S** 5:07

Correct.



**Carrie Rayburn** 5:08

OK.

All right.

So the first thing on our agenda today is to hear some updates about the website umm and the News Feed section that Becky had told us about.

Is there any updates?

I know it's coming close.

The goal was may for it to be finished.

His Becky on here to give us an update.



**Robinson, Kimberly S** 5:35

I I see your Becky.



**Robinson, Rebecca** 5:37

Yes, I'm on here.



**Robinson, Kimberly S** 5:37

You wanna give me OK.



**CR Carrie Rayburn** 5:39

Hello.



**Robinson, Rebecca** 5:40

Umm I I guess.



**Samper, Christina** joined the meeting



**Robinson, Kimberly S** 5:45

Would you like me to give an update on the on the Resource Center?



**Robinson, Rebecca** 5:46

Are program administrator program managers not on?



**Robinson, Kimberly S** 5:52

No, no.

She's in another meeting right now.



**Robinson, Rebecca** 5:54

Ohh OK Ohh I'd thought she'd be gone OK.



**Robinson, Kimberly S** 5:56

I can give that up.

Yeah.

Would you like me to give that update, Becky?



**Robinson, Rebecca** 6:01

Yeah, go ahead.



**Robinson, Kimberly S** 6:03

OK, so we're making great strides with our website right now.

We've got our servers that are up and going and we're actually in development through development.

We're not just in the planning stage anymore.

We're actually in development and we're having what we call a dog and pony show tomorrow to see the progression on where they are right now and we are still on track and targeting to go live for May 1st.



**Dr. Higdon** joined the meeting



**Robinson, Kimberly S** 6:31

So it is progressing it's moving along quite rapidly.

Now we got past the hard part.

Now we're actually into the development and building the database then, so our website is gonna be coming out in like phase one, and then there'll be a phase two that will follow after that and that's so that we can get the website up and live and get it out there and moving and then we'll come back and we, we've identified what we're gonna be doing for phase two.

So that will come after we go live in May.

So I am still on track.

We are still anticipating being able to present to the Council at our face to face meeting or in person meeting.

Excuse me in May, which right now that date is going to be May 16th.

Just so everybody knows, I was gonna announce that at the end.

Excuse me in Caitlin?

Uh Doctor Higdon is now on the calls.



**Daws, Caitlin E** 7:25

I see that.



**Robinson, Kimberly S** 7:26

So carry it anytime when you wanna go back and and ask for approval of minutes you can you have a quorum.

 **Carrie Rayburn** 7:32

OK.

Alright, thank you, Ken.

 **Robinson, Rebecca** 7:35

And just to jump in, Kerry, I wanna apologize because not knowing about where the rims is because I haven't really talked to the development team and I've been very busy working on the resource directory behind the scenes to try to get that cleaned up for promotion.

 **Carrie Rayburn** 7:51

Umm.

 **Robinson, Rebecca** 7:53

So I wasn't quite sure where they were.

 **Carrie Rayburn** 7:54

You do not have to call.

I just remembered you sharing about the website with us for the Resource Center, so that's just why I called on you that.

 **Robinson, Rebecca** 8:03

Right.

 **Carrie Rayburn** 8:04

Thank you.

 **Robinson, Rebecca** 8:05

OK, that's OK.

 **Robinson, Kimberly S** 8:08

We'll just put Becky on the spot anyways.

 **Carrie Rayburn** 8:11

2nd right?

Umm.

And then any success stories since the last time we were together was January and didn't know if there were any success stories that you wanted to share, team or anyone else on the call.

 **Robinson, Kimberly S** 8:27

I don't know if any of my managers have a success story.

They care to share.

I don't have any.

Uh, that was submitted to me.

 **CR** **Carrie Rayburn** 8:35

Quinn.

 **Robinson, Kimberly S** 8:37

You any of my managers that are on the call, do you have a success story you would like to share with Council?

 **WM** **Wanecski, John M** 8:43

Hi, good afternoon.

This is John.

No, I I don't really have.

I don't really have any today, sorry.

 **CR** **Carrie Rayburn** 8:49

OK.

 **Robinson, Kimberly S** 8:50

OK.

 **CR** **Carrie Rayburn** 8:53

And then I am going to put Becky on the spot again to talk about the pure mentorship program.

That is you right, Becky?



**Robinson, Rebecca** 9:02

That is me and it is it is slow, but sure I still only have 4 people and I've I've gotten a couple new ones to start the enrollment process and our new provider enrollment person has tried reaching out to the latest two people and they just have not gotten back with her.



**CR Carrie Rayburn** 9:04

OK.

How is this doing?

Umm.



**Robinson, Rebecca** 9:25

She's tried, like, three times for each of them.

And they haven't responded to her.

So I don't know whether they have just decided not to do it.

I'm I'm not quite sure, but we're just having a really hard time getting people on board.



**CR Carrie Rayburn** 9:34

Mm-hmm.

OK.

Of the four that have been trained, have they been out to visit with people yet or?



**Robinson, Rebecca** 9:47

Not really.

I haven't gotten any response from any of the case managers around the state of anybody.



**CR Carrie Rayburn** 9:52

OK.

OK.

No, that's OK.

And you said there all the four are spinal cord are any of the new people inquiring or they brain injury or?



**Robinson, Rebecca** 10:07

Yes.

The one of them is brain injury.



**Carrie Rayburn** 10:13

OK.



**Robinson, Rebecca** 10:13

One brain injury.

One funnel or.



**Carrie Rayburn** 10:16

OK.

Great.



**Robinson, Kimberly S** 10:21

So if I can, if I can speak to that for just a moment.



**Carrie Rayburn** 10:21

And then I think but.



**Robinson, Kimberly S** 10:25

Umm so because we're having such a a non response for our peer mentoring and so forth.

Beth and I have been strategizing over how to improve umm, that part of our program and that's something that Doctor Higgins, I'm gonna wanna put on our agenda for May.

We are.

We're working on another strategy for that, but it's nothing that I can really present to the Council today, but we've we've come up with some ideas on how to better improve that program, and I have my provider enrollment department researching some other avenues for us for peer mentoring that I think will be much more successful.

**CR** **Carrie Rayburn** 10:55  
Umm.

 **Robinson, Kimberly S** 11:11  
But again, umm, that's just a kind of preluding to what I want to put on for our may agenda.  
So by then I should be able to present to the Council kind of what we were planning and moving forward on with that.

**CR** **Carrie Rayburn** 11:21  
But.

**CD** **Chester, Don** 11:23  
I'm good.  
The best yes.

 **Robinson, Kimberly S** 11:27  
We're not giving up on what we excuse me and what we have started, but we've come up with a strategy to improve that plan, but it's nothing that I can really go into right now.

**CR** **Carrie Rayburn** 11:37  
OK.  
OK.  
Well, look forward to hearing about that more in May.  
And then Dan, you had raised your hand, do you have a question?

**CD** **Chester, Don** 11:45  
Thanks.

**DN** **dan nicholson** 11:46  
Yeah.  
So I'm just trying to understand a little bit more about the mentoring program.

Are we having trouble finding mentors or people who want to be mentored?  
Mentor ease.



**Robinson, Rebecca** 12:00

Mouse.



**dan nicholson** 12:02

Both ohk OK.



**Carrie Rayburn** 12:06

The time.



**dan nicholson** 12:07

I l'd be happy to be a mentor.



**Robinson, Rebecca** 12:11

OK.



**Carrie Rayburn** 12:12

That's great.



**Robinson, Rebecca** 12:12

If you could just reach out to me, I could give you the information.



**dan nicholson** 12:13

So.

OK, great.

I will.



**Carrie Rayburn** 12:20

Thank you, Dan.



**dan nicholson** 12:21

No worries.

 **Dr. Higdon** 12:23  
Very good.

 **Carrie Rayburn** 12:28  
Alright, so I think we'll go ahead and take this moment now that we have a quorum, if we Caitlin sent out the minutes from our January meeting.  
So I'd like to call for approval for the January minutes.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 12:45  
I moved to a person.

 **Chester, Don** 12:45  
Hi, it's Don Chester.  
So moved.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 12:48  
I second Madonna.

 **Carrie Rayburn** 12:50  
Thank you.

 **Robinson, Kimberly S** 12:53  
And so the Minutes are approved.

 **Carrie Rayburn** 12:56  
Yes.

 **Robinson, Kimberly S** 12:57  
OK.

 **Kevin Mullin (Guest)** 13:00  
If I can, this is cabin.  
If I can jump in quickly now that we have a quorum, I think in our last meeting we had some stuff that was even held over from the previous year that we needed to be

voted on.

Did we get that finalized in situated or no?



**Robinson, Kimberly S** 13:13

Uh, for minutes, I think we did get all the minutes approved.



**Kevin Mullin (Guest)** 13:18

Was there anything else in our previous meeting?



**Robinson, Kimberly S** 13:18

In our last meeting.



**Dr. Higdon** 13:20

I think for the other committee there, there had been some stuff that kept on rolling over for the quality improvement committee.

Is that what you're thinking of?



**Kevin Mullin (Guest)** 13:28

There might be dark I exactly I'm trying to just keep up with it all cause I got notes on different parts of the group.



**Dr. Higdon** 13:29

Like the survey.

On both.

Yeah, I think that's on the quality improvement regarding the survey that was sent out.



**Kevin Mullin (Guest)** 13:39

Got it.

Alright, thank you.



**Carrie Rayburn** 13:42

Thank you.

OK, moving on to the next item on our agenda is to.

Just discuss any recent events or upcoming events that anybody has been to or

where they shared information about the program.  
So anybody have anything coming up?

**DA** **Dubrocq, Jose A** 14:13

Well, this is how Jose Dubrock from a region 5.  
There is an event, but it's in September.  
It's an 88 disability fair.

**CR** **Carrie Rayburn** 14:20

OK.

**DA** **Dubrocq, Jose A** 14:22

They just had one last year and we participated.  
It's going to be held in Miami at the Westchester Library and it's a really, really, really good event.

**CR** **Carrie Rayburn** 14:30

OK, OK.  
Alright.  
Does anyone from B skip attend the family cafe?

 **Collins, Valerie B** 14:42

Yeah.  
Yes, this is best.  
Yes, we're going.  
I'm in the process of registration and getting all the documents together for our staff, but there I believe there's five of us that will be there this year in Orlando.

**CR** **Carrie Rayburn** 14:57

But that's great.  
And can you remind me when that is?  
I think it's in the summer, right?

 **Collins, Valerie B** 15:03

Yes, it is.

June 14th through the 16th this year.  
It's like Friday, Saturday, Sunday.

 **Carrie Rayburn** 15:11

Awesome.  
Thank you.

 **Collins, Valerie B** 15:15

Yeah.  
And there's another one too.  
While we're talking about events in Jacksonville, it is in the I haven't got the dates for it yet this year.

 **Carrie Rayburn** 15:19

Umm.

 **Collins, Valerie B** 15:24

They just started it last year.  
It's kind of like a mini family cafe, but it's like it was the end of July last year near the end of July.

 **Carrie Rayburn** 15:33

OK.

 **Collins, Valerie B** 15:34

So as soon as I get the dates, I'll let you guys know about that.  
But that one's in Jacksonville at the Prime Osborn Center.

 **Carrie Rayburn** 15:42

OK.

 **Dr. Higdon** 15:42

All right.

 **Carrie Rayburn** 15:43  
Thank you.

 **Dr. Higdon** 15:43  
Yeah, hopefully I can go.

 **Carrie Rayburn** 15:47  
Thank you.

 **Collins, Valerie B** 15:48  
Yep, I'll let you guys now.

 **Carrie Rayburn** 15:50  
Umm, so on the next item on our agenda is to update on an additional ways or methods to increase public awareness of the Resource Center website as well as be skip itself.  
So we had discussed an our January meeting about sending out a survey to all the trauma facilities and I know that we chose a date to close that, but I didn't see in the Minutes what that date was.  
Has that survey been sent out and completed, or is that still in the process?

 **Robinson, Rebecca** 16:28  
Are you gonna take it?  
Came.  
Or you want me to?

 **Robinson, Kimberly S** 16:31  
No, that's that's you.  
You have the update on survey.

 **Robinson, Rebecca** 16:33  
OK I I did send out the second I sent it out for the second time.  
Carrie and I gave them all the way until the end of February.

 **Carrie Rayburn** 16:39  
OK.

 **Robinson, Rebecca** 16:43  
I got 2 responses.  
Two additional responses.

 **Carrie Rayburn** 16:46  
Ohh wow.  
OK.

 **Robinson, Rebecca** 16:48  
Yeah, was all I got.

 **Carrie Rayburn** 16:49  
And So what we're what was the number of responses that you received the first time?

 **Robinson, Rebecca** 16:55  
I think it was like 5 or 6.

 **Carrie Rayburn** 16:58  
OK.  
So we're still under 10 then, OK.

 **Robinson, Rebecca** 17:00  
Ohh yeah.

 **Carrie Rayburn** 17:03  
Wow, OK.

 **Chester, Don** 17:04  
Do you?

Do you?

Do we know if we're sending it to the right person?



**Robinson, Rebecca** 17:08

Well, it's the list that I got from Kim.



**Robinson, Kimberly S** 17:09

Yes.

So words that we're sending it to, yeah.

So we're sending it to the trauma managers and that's that's the list I got from a Kate Kosovar.



**Chester, Don** 17:16

Luke.

To good list.



**Robinson, Kimberly S** 17:24

Yeah.



**Chester, Don** 17:26

I'm surprised.



**Carrie Rayburn** 17:29

I'm surprised too.

I do.

We know just like a like, you know, an estimated number of facilities that were on there.



**Robinson, Kimberly S** 17:37

I think there's 36l.



**Robinson, Rebecca** 17:38

Ohh yeah, and I think the last time I sent it out it was like 28 people.

 **Carrie Rayburn** 17:39  
OK.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 17:40  
Yeah, there's.

 **Carrie Rayburn** 17:44  
OK.  
OK.

I know we had talked about doing a possible like a second phase for the questionnaire and then sending it on to rehab facilities.

I don't know with.

If we would have a better outcome if we send it to rehab facilities or if there is some sort of master list that we have access to, or if that needs to be created, have you guys sent out anything specifically to rehab facilities in the past?

 **Robinson, Kimberly S** 18:19

You know, we've just started out with the trauma center, so there were some positive outcomes from those surveys carry and just to bring you up to speed and up, some of them were that they wanted more information about.

 **Carrie Rayburn** 18:21  
OK.  
OK.  
Yes.

 **Robinson, Kimberly S** 18:35

Primarily it was they wanted more information about our about the program and the services that we provide.

So the surveys that we're returning the first time, all that contact information was sent out to the managers and the managers have been reaching out to those individuals and setting up and providing in services specifically as requested.

 **Carrie Rayburn** 18:54  
Ohh that's great.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 18:57  
And I think on him, I think that we were going to try to get you guys on our next meeting agenda too.

 **Chester, Don** 18:57  
At this time.

 **Robinson, Kimberly S** 18:57  
Becky, do you know?  
Yes.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 19:07  
Where where all the trauma?  
Medical directors and the program managers and directors attend.  
We have a couple of different meetings, a FTC, Florida T quip, collaborative foot sack, and then fcot as well.  
So we were going to try to get somebody on each of those meetings and then we'll touch all the trauma centers in the state of Florida.

 **Robinson, Kimberly S** 19:31  
OK.

 **Carrie Rayburn** 19:31  
That would be great.

 **Robinson, Kimberly S** 19:32  
And Becky, my question back to you is of those two that two extra responses that we got back, are you able to tell the Council what their responses were were there, was there anything specific that they were asking for?

 **Robinson, Rebecca** 19:40

Umm.

I've got.

I've got them right here in my hand.

Uh, and this one was from HCA, Florida, Lake Monroe Hospital.

And on question #3, what resources would better support your facility on the referral process?

They said for the BS IP case manager.

Come on site and provide follow up directly to the patient or families and provide them with their required packet for onboarding.

Umm.

And says done question four, what barriers, if any, do your staff experience that extensive need to provide medical records and updated medical screening form limited services be SIP is able to provide for DME, HHC and assistance with rehab placement.

Umm.

And then the rest of it, they answered yes, too pretty much.

And then the last question.

Uh, what is your perception of the brain and spinal cord program?

I would like to know the percentage of patients that the hospital refers to be SIP.

Uh, that BSc provides services to and what those services involved.

So they want to break down on who they refer, what kind of services we provided to those clients.

And then the second one came from Tampa General Hospital.



**Robinson, Kimberly S** 21:23

The.



**Robinson, Rebecca** 21:27

Uh, question three.

What resources would better support your facility on the referral process?

Streamline the process for reporting.

Currently manual process also BSc IP request frequent updates from our staff which takes away from takes away from productivity.

Updates are also a very manual process.

Umm.

What barriers have staff do your staff experience productive time to provide frequent updates to BSSID staff?

Uh, and what they don't understand, I guess.

I mean, we have to have that information to be able to proceed forward. Umm.

Is your facility your staff aware of what services are provided by the brain and spinal Cord Injury program for eligible clients?

I would like regular updates and reports of services provided to our patients referred to the program we currently received none.

 **Dr. Higdon** 22:29

Please, right.

 **Robinson, Kimberly S** 22:37

So on some of those remarks and some of those remarks where they're asking for reports that has to be a public records request, that's not even something that I could respond back to them and provide that that would have to be a public records request.

 **Robinson, Rebecca** 22:37

That's the first.

Right.

 **Carrie Rayburn** 22:56

So like, we're not allowed to share what services we provided to people that has to go through separate a separate way.

Is that what you mean?

 **Robinson, Kimberly S** 23:05

Umm, no.

So if so, the reports were they're asking for their clients that they referred to the program and what services that they've received and so forth like that, that's a public records request.

We can provide information to him on services that we provide as a program to eligible clients that that's no problem.

 **Carrie Rayburn** 23:17  
OK.

 **Robinson, Kimberly S** 23:28  
It's just when you get into but reporting questions and specifics that has to go through public request.

 **Carrie Rayburn** 23:37  
OK.

 **Robinson, Rebecca** 23:41  
And I'll get these two requests sent out to the regional managers. Kim.

 **Robinson, Kimberly S** 23:46  
OK.  
Thank you.

 **Carrie Rayburn** 23:50  
Yes.  
So I know go you guys presenting at the meeting with all of the the trauma centers present would be a great way or there any other members of the committee that have additional ways for us to reach those that did not respond to the surveys that we sent out.

 **Samper, Christina** left the meeting

 **Carrie Rayburn** 24:10  
Any other ideas there?

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 24:15  
Yeah, I think the best way is going to be.  
This is Madonna and I'm also a trauma program director.  
The best way is going to be going through these committees and then I think maybe getting it out to a FTC.

I've been speaking with Candace.

She is the head of that, which is the Florida trauma Coordinators group for the state of Florida.

She chairs that, so I've already been in contact with her and I know that we're having discussions about this because there's been a very significant turnover throughout the state of trauma program leadership.

 **Samper, Christina** joined the meeting

**D** **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 24:56

So I think it's just something that's kind of falling through the cracks and we need to reeducate on.

**CR** **Carrie Rayburn** 24:56

Yeah.

OK.

Thank you.

Drive.

**D** **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 25:12

I think the rehab centers is another really great opportunity.

I don't know if Doctor Higdon is on this call, but.

**DH** **Dr. Higdon** 25:20

Yep, I'm here.

**D** **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 25:22

Umm, I think that's a great Ave to get feedback from because I know he doctor Hegna and you've brought up in previous meetings how sometimes they get to you and the you know some you guys are filing it.

**KM** **Kevin Mullin (Guest)** 25:33

And spinal cord.

**DH** **Dr. Higdon** 25:37

Yeah.

**D** **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 25:37

So I think rehab centers are a great opportunity.

**DH** **Dr. Higdon** 25:41

Umm, I previously shared that list maintained by umm.

I CMS centers uh Medicare, Medicaid Services that has a list of inpatient rehab facilities.

There's no like statewide meeting for Earths like there is for trauma hospitals it seems.

But there is kind of a list of those places that's maintained.

Uh, but.

Some of them are wearing.

Some of them aren't aware, and even within a hospital there may be just because of staff turnover, there may be some lack of awareness.

Umm.

And opportunities to educate for them.

**CR** **Carrie Rayburn** 26:25

With the do you feel a survey would be the best way to to do that as well?

**DH** **Dr. Higdon** 26:33

Umm I I think it depends in in.

In some hospitals, treat more you know traumatic brain and traumatic spinal cord than others.

Umm, but all of them are sort of have the umm.

**KM** **Kevin Mullin (Guest)** 26:44

Yeah.

**DH** **Dr. Higdon** 26:46

How about possibility so there?

Probably each one of them is probably seeing some, although to varying degrees. Uh, as far as the survey, you know the, the, the, the survey is probably gonna go to an administrator and hopefully it did.

Ministrations is aware of it.

Uh, I think one of the better ways is just to track, you know, where these patients are going to in my arguments, always finished the trauma hospitals doing the reporting and what.

 **Samper, Christina** left the meeting

 **Dr. Higdon** 27:19

But sometimes there's still some catches being made.

 **Robinson, Kimberly S** 27:25

So we can pull that list that you gave previously.

Doctor Higdon and Becky can go through, looks through that, and if the survey would you wanna send out the same survey questions that we sent to the trauma centers or do you want to create something new for rehab centers?

 **Dr. Higdon** 27:30

Umm.

But.

 **Kevin Mullin (Guest)** 27:38

Yeah, yeah.

 **Dr. Higdon** 27:46

I think a lot of it would be similar, yeah.

I I I'd wanna go, you know, question my question, make sure it's it's applicable, but because there's you know there's no longer questions of medical stability.

I guess if you centers will take uh trainings your patients that are below Rancho 4 umm would be the only thing where they they may not be eligible.

But again, they probably be reported even if they're not eligible for enrollment yet.

 **Robinson, Kimberly S** 28:18

OK, so you want to look at the current survey and maybe change some of the questions around to be more specific to rehabs.

 **Dr. Higdon** 28:27  
Yeah.

 **Robinson, Kimberly S** 28:28  
OK.  
So then I would ask Becky if you can pull all those survey questions and put them into a Word document.  
Then we can send that out to the Council to actually look at, and then that can be a topic of discussion for the next uh PAC meeting.

 **Dr. Higdon** 28:48  
Sounds good.

 **Carrie Rayburn** 28:49  
And that will be our next meeting will be in our at our in person meeting, correct.

 **Robinson, Kimberly S** 28:54  
Yes.

 **Carrie Rayburn** 28:55  
OK.

 **Robinson, Kimberly S** 28:56  
But she didn't March.  
Yes, I I have to thank my months here.  
Yes.

 **Carrie Rayburn** 29:05  
OK.

 **Robinson, Rebecca** 29:06  
And of course, it would be good if we could verify somehow that the people that are

on the list and their addresses are correct so that we can ensure that they're gonna get these surveys.

Because I think a lot of, like Joel said, a lot of turnover, you know, and people, different people come in and they're so they're not getting the surveys.

 **Carrie Rayburn** 29:18

You know.

Right.

Would that just be an email sent out first before the survey?

Like you're gonna receive an email if you.

This is a correct email that might give them an opportunity if it is an administrator, it's just to pass that on and say, well, these are our case managers.

 **Robinson, Rebecca** 29:40

What?

 **Carrie Rayburn** 29:45

Information.

Uh, because I think they're good.

 **Robinson, Rebecca** 29:47

Yeah, I'm not sure how we wanna do it.

 **Carrie Rayburn** 29:49

Have are gonna be the ones that would know the most probably about the program versus an administrator.

 **Robinson, Kimberly S** 29:58

So let's we'll pull that list.

That doctor Higgin provided.

And let's see what's on that list and the information they give us and maybe go go from there.

You'll have to take a look at it and see what's there in the.

 **Carrie Rayburn** 30:11  
OK.

 **Robinson, Kimberly S** 30:12  
Yeah, hopefully it's the most, you know, they hopefully they update it on the fly, so to speak.  
So it's current, but maybe not.  
So let us let us evaluate that list.  
And in the meantime, Becky, I'll send out the survey.

 **Carrie Rayburn** 30:25  
OK.

 **Robinson, Kimberly S** 30:29  
In a Word document for you all to look at so that it'll be up open for discussion for the next meeting.  
And then yeah, you guys can maybe vote on it.  
You know, we can make changes at that meeting and if we can complete it at that meeting and have a quorum, we can vote on it and then start implementing right away.

 **Carrie Rayburn** 30:49  
I'm sounds good.  
Thank you.

 **Robinson, Kimberly S** 30:53  
Sure.

 **Carrie Rayburn** 30:58  
So the next item on our agenda is to review the goals for our committee guide.  
Conversation.  
Umm.  
And determine our focus.  
So the first one is to develop a strategy and associated task to disseminate

information and resources to the public.

So can you tell us how you share the different ways that you're sharing information now in case everyone's not aware of what we're doing, like how people are learning about the program currently?



**Robinson, Kimberly S** 31:35

The primarily it is through are in services that we give to our referring facility, primarily the the trauma centers.



**Carrie Rayburn** 31:43

The.

Required.



**Robinson, Kimberly S** 31:46

We do have Flyers that we hand out.

We're very active.

I think Jose in region 5, he's he probably goes to the most events and seminars down in Miami.

So events that we can actually participate in and go to were actually going there and handing out information clay out and Pensacola I know has been working with HDA out there and going to several events where he he gives out some Flyers.



**Carrie Rayburn** 32:13

Umm.



**Robinson, Kimberly S** 32:15

He hasn't had the opportunity for a table, but we also are on the sills website and sports abilities website and I think fast.

So we are on other peoples websites as well.



**Carrie Rayburn** 32:33

Great.

Umm Jill had wanted me to ask a couple of questions that she had suggested.

Are there any current issues right now that we need to put out more information about?

Do you see people calling with questions or not knowing something specific that we need to provide specific information on?

 **Robinson, Kimberly S** 32:58

Not that I'm aware of.

I would turn that over to Beth and managers out there to see if they're getting any feedback or maybe even Kaitlin through central registry.

 **dan nicholson** left the meeting

 **CR** **Carrie Rayburn** 33:14

Sir, is there a trend that you guys see at all where people are calling to ask specific questions?

I think Joe was thinking if maybe just some of the Flyers and things that we handed out, like when were they last updated, that kind of stuff.

If you were seeing any information that had been missing.

 **Robinson, Kimberly S** 33:33

You know, our Flyers are pretty current because our information, it doesn't really change our information about the program doesn't really change.

 **DH** **Dr. Higdon** 33:35

Yep.

 **CR** **Carrie Rayburn** 33:35

OK, great.

The.

 **Robinson, Kimberly S** 33:41

Contacts might change, but that would be about it.

Most of the information that we get through our uh dipex email box, you know, we get clients who call in and want to know their loved one has this kind of injury.

You know what are the resources?

How do we get enrolled in the program there?

Those are the kind of calls that central registry gets as well.

As you know, how do we enroll and what services do you provide and that information is available you know across the state through our regions and through our case managers, our regional managers, central registry, we have the specific detects of email box that the public can email to and ask questions and that's monitored daily and is responded to probably within 24 hours of getting an email in there.

If somebody should be getting a response back.

 **Carrie Rayburn** 34:38

That's great.

Is that the the way that?

 **Robinson, Rebecca** 34:41

I have.

I have one of those set up at for the Resource Center too as well.

Kim and I check that every morning and respond to any responses.

 **Robinson, Kimberly S** 34:46

Yep, Yep, that's correct.

Yep.

 **Carrie Rayburn** 34:51

Yeah, that's great.

Is that the way that you guys are finding that former clients that have been kind of discharged from the program if they need questions, is that the way they reach back out to you all is through that registry that you're talking about?

 **Robinson, Kimberly S** 35:06

Usually they'll reach back out to either central registry or to their previous case manager.

If they still have any information.

 **Carrie Rayburn** 35:14

OK.

All right, one of the.

I guess ways to get our name out there and to share information with the public. One question I had was if we had like an email database where we could send out newsletters or Flyers of information to those those programs that we're sending surveys to, do we have anything like that?

Cool space.



**Robinson, Kimberly S** 35:46

Well, we have the we have the trauma emails, we'd have a support groups, we can provide it, uh, information through those emails, we would have to pull information through the Resource Center to see what kind of resources are there that we could bless you, send information to, but we don't have like a we don't have a database set up with it with things like that.

It's there's no like a merge or anything.

There's no big database that we just can hit and send out.

We don't have that set up at all.



**Carrie Rayburn** 36:20

OK.

Is there.

Once the client like discharges from the program, is there does communication stop from us as well then?

Or is there still like reminders that get sent out to former clients?



**Robinson, Kimberly S** 36:36

So there's the client surveys that gets sent out once the case is closed and Becky refresh my memory.



**Carrie Rayburn** 36:41

OK.



**Robinson, Kimberly S** 36:43

It's 30 days, six months.



**Robinson, Rebecca** 36:47

Yep, active and ineligible.



**Robinson, Kimberly S** 36:47

A year and a year.



**Carrie Rayburn** 36:54

OK.



**Robinson, Rebecca** 36:55

So it's 44 surveys that go out.

Those are the 4:30 day, six month and eligible inactive.



**Carrie Rayburn** 37:03

OK.

Does anybody have anything?

Any ideas that they want to share questions that they have?



**Kevin Mullin (Guest)** 37:21

The biggest thing that I'm taking from this meeting right now is really it's going to be our marketing aspects and starting to get this name back out there again for both mentor and mentees.

And just overall health of this, you know be skip.

So I think it's just really it during the next meeting.

I think that's where we gonna put a little bit of this focus really in some more of the marketing aspects.



**Carrie Rayburn** 37:45

I know it was mentioned in the past like inviting Members from legal or communications come and talk with us with some of the questions that we had of regarding marketing in ways to kind of put information out there, be a social media is that the does anyone from those areas come to our in person meeting Kim?



**Abilash Haridas, MD** left the meeting



**Robinson, Kimberly S** 38:11

We've had a one person from communications come.

Her name was Liz, and she spoke about the options we have for public like Facebook and so forth.

Our Bureau has a communications person.

Her name is Lindsey and I have been working with her on how can we utilize the Department of Health Facebook page and I guess that page really isn't used too much, but her and I have looked at some other options on what we can use through the department to put be skip out there.

 **Carrie Rayburn** 38:35  
So.

 **Robinson, Kimberly S** 38:45  
So I I've been in discussions with her.

 **Carrie Rayburn** 38:46  
OK.

 **Robinson, Kimberly S** 38:49  
Uh, as you all know, and you're gonna hear me sing again.  
Communications is slow.  
It is slow.  
There is nothing quick about the Department of Health.

 **Carrie Rayburn** 39:01  
Right.  
Would it be helpful as a committee if we were to create like Flyers or even post for Facebook as a committee to present to communications that then could be rotated on social media platforms?  
Is that helpful?  
Is that?

 **Robinson, Kimberly S** 39:21  
So you could we could do that.  
You could create that and and then if it's a when I'm not.

If I'm not gonna stay, if I'm when it's approved by communications, then absolutely we could use it.

 **Carrie Rayburn** 39:35

OK.

So maybe that's something that we could do in our in person meeting if we could have like a breakout session where we just created layouts or you know a post that would be then put on social media that talked about the program or talked about the peer mentorship and then it could just be rotated.

However, communications wants to put it out on social media, but they would already have the information.

 **Robinson, Kimberly S** 39:59

It's stop.

 **Carrie Rayburn** 40:03

It would all be approved ahead of time, so then they can just pull from the list and maybe like once a month post if it's not used at that often or you know just once a month at least like it kind of pull from the things that we've created to put on social media.

 **Robinson, Kimberly S** 40:05

Thank you.

 **Carrie Rayburn** 40:19

I think that's such an area that we we need to try to encourage utilizing it because there's generations of people.

That's where they get their sole information from now is social media.

And so I think information about the program there is really vital to getting the word out.

 **Robinson, Kimberly S** 40:32

Agree.

So I'm trying to pull up.

Give me one second.

Let me pull my report here.  
So we had talked about using DOHC Facebook YouTube.  
And this says X accounts.  
Don't.  
Ohh, I guess X is the new something that Twitter.

 **Carrie Rayburn** 40:58  
Twitter.

 **Robinson, Rebecca** 40:58  
Twitter.

 **Carrie Rayburn** 40:59  
This.

 **Robinson, Kimberly S** 41:00  
OK.  
Thank you.  
I don't know that one.  
So we talked about those 3 platforms.  
Yeah, I know I'm old as dirt here so.

 **Carrie Rayburn** 41:07  
Ohh yeah.

 **Robinson, Kimberly S** 41:11  
So that's those are the platforms I've been in discussions with Lindsey about.

 **Carrie Rayburn** 41:16  
OK.

 **Dr. Higdon** 41:20  
There's a whole generation on Tik T.O.K, but I don't think anyone in the Florida  
Florida State government is gonna touch that with a 10 foot pole.



**Robinson, Rebecca** 41:27

No, I think not.



**Kevin Mullin (Guest)** 41:31

If they're smart, they won't.

Let's hope they're smart.



**Carrie Rayburn** 41:34

Where are we?



**Dr. Higdon** 41:34

Yeah.



**Carrie Rayburn** 41:34

Right.

We'll leave that up to you, Doctor Higdon.

You can you can.



**Dr. Higdon** 41:38

Oh, no, no, that's not my generation.



**Carrie Rayburn** 41:42

Mine either.

Alright.

And then another section of that goal is to identify audiences and other stakeholders to best create awareness of the program.

I don't know if we if anyone has anything to add in that section.

If you have, you know, like Kim had mentioned earlier, that we were on the CIL's website and other places have highlighted the program.

If you guys have suggestions about other places where we can have links to our information, let the group know.



**Robinson, Kimberly S** 42:11

It's not there.

Like.

Right.

We didn't.

I mean once and the.

 **Carrie Rayburn** 42:32

OK.

The second goal is to develop a strategy and associated task to identify and develop educational opportunities and resources for the traumatic brain and traumatic spinal cord community.

 **Robinson, Kimberly S** 42:34

Nothing.

 **Carrie Rayburn** 42:44

Umm are there any immediate educational opportunities that we need to develop?

Do we have educational information that we send out to clients?

Whatever you know, routine basis once they're enrolled in the program.

Uh, this opportunity up information.

 **Robinson, Kimberly S** 43:05

Not.

I'm gonna say.

Not on a there is an information that I don't think Bethenny and you might be able or the manager speak to this.

We have packets, informational packets that we can send out to the clients and it has different information whether it's spinal cord, brain, injured, uh, client and it's some of the same information that we put out at our tables.

When we go to like Family Cafe, we've had things printed out.

 **Carrie Rayburn** 43:34

Mm-hmm.

 **Robinson, Kimberly S** 43:36

Specifically, we've ordered specific categories of information.  
We also reach out to.

 **Fernandez, Aleskia** joined the meeting

 **Samper, Christina** joined the meeting

 **Robinson, Kimberly S** 43:43  
Umm like a ohh Becky helped me here.  
Uh, Reeves?  
The that Reeves.

 **CR** **Carrie Rayburn** 43:52  
Christopher Reeves funded.

 **Robinson, Kimberly S** 43:52  
What is it?

 **Collins, Valerie B** 43:52  
Christopher Reeve.

 **Robinson, Kimberly S** 43:53  
Thank you.  
Thank you Christopher Reeves Foundation that sends us information.

 **Robinson, Rebecca** 43:56  
Ah.

 **Robinson, Kimberly S** 43:58  
So we we gather, so we actually have packets that we can hand out or mail do either the the client or caregivers or anybody that's actually interested in in wanting that information.

 **Samper, Christina** left the meeting

**CR** **Carrie Rayburn** 44:12

Good is there to the managers.

I guess this would be a question for you guys.

Is there gaps in materials for you?

Is there anything that we can help? Umm.

Create as a committee for you guys to pass out information that could also translate to other outlets that we put it on, but I didn't know if you guys had any gaps or needs for information on specific topics that kept up coming.

 **Robinson, Kimberly S** 44:43

Build, yeah.

 **Collins, Valerie B** 44:46

Not not that I've heard.

I don't know if the managers have any feedback from case managers on that, but not that I'm aware of.

 **Robinson, Kimberly S** 44:52

That's.

**WM** **Wanecski, John M** 44:57

I've gotten no feedback on that from the managers that there's gaps with that.

**CR** **Carrie Rayburn** 44:57

OK.

OK.

 **Robinson, Kimberly S** 45:04

It's coming information.

**CR** **Carrie Rayburn** 45:06

But.



**Robinson, Kimberly S** 45:11

People have to.



**Carrie Rayburn** 45:14

Alright.

And then our third goal is to develop a strategy and associated task to conduct outreach activities as needed to achieve the Council goals.

So to ensure relevant outreach and communication to the populations regarding current issues.

And then identifying audiences.

It's the same.

It sounds like the same one I did finding audiences and stakeholders to best can talk conduct the outreach.

So I think you know, gathering the traumas centers, information and the rehabs, resources of knowing what the rehabs are here in the state, I think that's kind of identifying our stakeholders, but the best ways to communicate, I think is, would it be even within the realm of possibility to have a database, you know, there's so many different programs that I have signed up for that send out, like regular newsletters with information and up-to-date things that they wanna share with the people that sign up for those.

Is that something that's even within our capacity of B skip to have?

You know newsletters or information go out in that way.



**Robinson, Kimberly S** 46:28

So we used to have a newsletter that the Resource Center sent out a long, long time ago in the problem with the newsletter again is routing it through communications. Getting it approved before the information expires.

That that's our biggest obstacle.



**Carrie Rayburn** 46:45

OK.



**Robinson, Kimberly S** 46:47

Communications, getting things approved or communications is probably our biggest obstacle.

 **Carrie Rayburn** 46:53  
OK.

 **Robinson, Kimberly S** 46:56  
Putting together a a database of email, you know, clients or support groups or so forth.  
That's not a huge obstacle for us.  
That's not it.

 **Carrie Rayburn** 47:09  
OK.

 **Robinson, Kimberly S** 47:09  
Our our problem is whatever we wanna send out or share again routing it through communications.

 **Carrie Rayburn** 47:18  
So anything that you send out through that database would have to be approved first.

 **Robinson, Kimberly S** 47:24  
Yes.

 **Carrie Rayburn** 47:25  
OK.

 **Robinson, Kimberly S** 47:27  
Anything that goes so keep this in mind that anything that we wanna put out to the public asked to be approved through communications.

 **Carrie Rayburn** 47:32  
Umm.

 **Robinson, Kimberly S** 47:35  
That's the bottom line.

 **CR** **Carrie Rayburn** 47:38  
OK, what is the quickest turn around you've ever seen from communications?  
So I'm just curious.

 **DH** **Dr. Higdon** 47:43  
So.

 **Robinson, Kimberly S** 47:44  
Bye the quickest.

 **DH** **Dr. Higdon** 47:45  
Looking back.

 **Robinson, Kimberly S** 47:47  
Ohm.  
Let me think about that.  
Maybe two months.

 **CR** **Carrie Rayburn** 47:57  
Wow, OK.

 **Robinson, Kimberly S** 47:59  
Maybe two months.

 **CR** **Carrie Rayburn** 48:01  
OK.  
So maybe when we're meeting next week or next month or month, two months from now.  
Sorry, our next meeting.  
Umm, if we want to if if anybody you know thinks it's a good idea to do the email or the social media and we create this information, then maybe we could look at

starting in database with just that pre-approved information, not necessarily things that have to be you know are time sensitive.

But I think you know I'm more aware of things that are ongoing, like with the amputee coalition, because I've signed up for their emails.

And so I think that's just so why to keep our name relevant if people are signing up for the emails and they're getting, you know, things from us consistently, that might be helpful.

I don't know what anyone else's thoughts are on that.



**Robinson, Kimberly S** 48:54

So if I can make a recommendation.



**Robinson, Rebecca** 48:54

I sign up for a lot of the newsletters as well.

Perry, when they come in from different brand injuries, organizations or spinal cord organizations just to get our name out there.



**Carrie Rayburn** 48:58

Umm.

Right, good.



**Robinson, Kimberly S** 49:07

So if I could make a recommendation to the Council, umm, if there is a specific let's say flyer or information that you know, like we have our brain injured.

Uh, guides and we have our spinal cord guide that we put together.

If there's something else that the Council would like for us to create that we can hand out, umm, that may be something for us to work on for public awareness is just some kind of new informational packet.

You know, gather we can put pictures in it.

We can, you know, we have to stay within the DoH brand, which you all are not gonna know.

What that is, but we could put together, you know, any kind of informational packet that you want and then it would be on, uh, biscuit to make sure that it's within the branding and then route it through communications.

**CR** **Carrie Rayburn** 49:52

Right.

 **Robinson, Kimberly S** 50:06

And if there's something that you guys feel very strongly that we need to put together for information to be able to hand out to our population, we serve then by all means, let's let's work on that.

That's just another angle.

And like you said, if it's not something that has to go out urgent and it's not gonna change constantly, then that may be a way to look forward or move forward for a public awareness.

**CR** **Carrie Rayburn** 50:31

Who?

I think in and this is personal opinion, I'd love to hear what others in the committee think, but I think moving in any way digitally would be a really great idea, especially with this new Resource Center and the new website like whether that be email or social media.

I think that like that would be ideal for us.

What are everyone's thoughts on that?

**KM** **Kevin Mullin (Guest)** 51:00

I agree wholeheartedly.

We have to start going digital.

Umm, it's just the only way.

Businesses literally getting done now.

**CR** **Carrie Rayburn** 51:09

Yeah.

Cried.

Alright.

Is it anybody else have any questions or anything that they'd like to add today that's kind of gone over everything on our agenda?

OK.

And then kill me.

You said our next meeting is going to be in May.

What day was that again?



**Robinson, Kimberly S** 51:51

It's Thursday, May 16th.

I am Caitlin is currently working on a quote for the Florida Hotel in Orlando, FL.



**CR** **Carrie Rayburn** 51:54

OK.

It's in Orlando.



**Robinson, Kimberly S** 52:03

That's where we're yeah, that's where we're trying to have the meeting at the Florida Hotel in Orlando.



**CR** **Carrie Rayburn** 52:10

OK.



**Robinson, Kimberly S** 52:11

And it'll it'll be a one day meeting.



**DH** **Dr. Higdon** 52:11

Do you what time of day is just start?



**Robinson, Kimberly S** 52:14

I'm sorry.

Say that again.



**DH** **Dr. Higdon** 52:16

Is it going to start in the morning?



**Robinson, Kimberly S** 52:18

Yes, it will be like last year's.

You know, I anticipate from 9 to 11 will be the committee meetings in the morning

and then we'll break for lunch and then have our annual meeting in the afternoon from 1:00 to 4:00.

 **Dr. Higdon** 52:34  
OK.

 **Robinson, Kimberly S** 52:36  
I tried to encompass everything in one day.

 **Dr. Higdon** 52:39  
Mm-hmm.

 **Carrie Rayburn** 52:43  
OK.  
All right.  
Well, thank you guys for your time today.  
I appreciate you being here and I look forward to seeing you all in May.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 52:55  
Thank you.

 **Chester, Don** 52:55  
Look forward to seeing you.

 **Robinson, Kimberly S** 52:55  
It's so so you have to.

 **Chester, Don** 52:56  
Thank you.

 **Dubrocq, Jose A** left the meeting

 **Robinson, Kimberly S** 52:57  
You have to have a motion, a motion, to adjourn.

 **Carrie Rayburn** 52:58  
We have to.

 **Robinson, Rebecca** 52:58  
Is.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 52:58  
Ohh don't we have the motion to ohh.

 **Robinson, Rebecca** 52:58  
Thank you.

 **Chester, Don** left the meeting

 **Dr. Higdon** 53:02  
Motion.

 **Robinson, Kimberly S** 53:02  
Motion to adjourn.

 **Carrie Rayburn** 53:02  
Thank you guys, almost forgot.  
Ohh do we have a motion to close the meeting?

 **Dr. Higdon** 53:10  
Motion.

 **Kevin Mullin (Guest)** 53:10  
This is Kevin motion, I second.

 **Carrie Rayburn** 53:14  
OK.  
Meetings adjourned.  
Thank you all.

 **Kevin Mullin (Guest)** 53:17  
Thank you.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** 53:17  
Thank you.

 **Wanecski, John M** 53:18  
Take care.  
Thank you.

 **Dr. Higdon** 53:19  
This carry.

 **Ruthan Tattersall** left the meeting

 **Carrie Rayburn** 53:21  
Thank you.

 **d9d9b37d-4447-44f4-acb7-a8a152c6a335** left the meeting

 **Fernandez, Aleskia** left the meeting

 **Wanecski, John M** left the meeting

 **Dr. Higdon** left the meeting

 **Daws, Caitlin E** left the meeting

 **Robinson, Rebecca** left the meeting

 **Collins, Valerie B** left the meeting

 **Robinson, Kimberly S** 53:27  
Hey, did you need me?

 **Carrie Rayburn** 53:28  
Thank you, Kim.

 **Robinson, Kimberly S** 53:30  
Oh, you're welcome.  
You're welcome.

 **Melia, Robert G.** left the meeting

 **Kevin Mullin (Guest)** left the meeting

 **Carrie Rayburn** left the meeting

 **Robinson, Kimberly S** left the meeting

 **Casavant, Robert** stopped transcription