

## Transcript from a short video "A Provider's Perspective on the Pandemic" a video from our Pandemic Wisdom series

Janet Williams PhD. is the founder of <u>Minds Matter LLC</u> an organization grounded in person-centered practices that provides supports to people with brain injury.

Visit their <u>website</u> to learn more.

Greetings from Kansas! My name is Janet Williams and I want to talk to you a little bit today about the COVID virus and person-centered planning, and our experience as a provider, in Kansas, of services to people with brain injuries.

It's been quite a ride -- for the past 5-6 weeks, we have been on a stay-at-home order. Probably in about two weeks that stay-at-home order will end and we have to make some plans from there as well. So, I own a company called Minds Matter. We started providing home and community-based, person-centered planning for people about thirty years ago. Our motto is "Nothing for me without me" so we include people in every aspect of their goals, of their therapy, and of what they want for themselves. They choose who they're going to have involved -- whether that be their family, significant others, or those they choose to call family. Some people don't have anyone at all. And so, right now, we work with 175 people with brain injuries. We've worked with many thousands over the past thirty years. We go in with a "whatever it takes" motto. And people have a list of services, any kind of therapy that they would need, we have on staff. So we have physical therapists, occupational therapists, speech therapists, cognitive therapists and behavioral therapists. We teach independent living skills through all of those therapies, and then have a service called Transitional Living when we're ready to kind of fade-out and have people continue to work with their attendantcare providers.

So, many of the people we work with can't be left alone. They have twenty-four-hour support in their own home. The other really unique thing to Kansas is we don't have any congregate living for people with brain injuries. And, it's always been our philosophy that people need to get home, and get to know their own home, and own community, and get to learn the skills exactly where they will use them. Well, I will tell you that has been an incredible strength for people during this COVID crisis. We don't have anybody living with other people with disabilities, with care-providers coming and going, and so it has been, I think, a very positive thing. As an agency we work with other disability groups and have a conference call every Friday, and we talk about what are the social determinants of health that we need to be aware of that have really become stark during this whole crisis. We've got people who need food, people who need masks, people who need transportation -- a lot of our transportation has stopped

-- they need attendant care because, you know, if an attendant has child-care issues or they have someone in their home with a compromised immune system they may not want to come to work. We've even had it to the point where nurses haven't been showing up to some persons homes, and we're not exactly sure why, but we've had people with skin breakdowns, so our therapists will go in.

One big, wonderful thing that happened in Kansas is telehealth. Our state of Kansas decided that we could provide all of these therapies through telehealth, or over the telephone, when possible. So we had about ten people go on hold, we had about twenty people still need the in-person because they have high physical or behavioral needs, and the rest we were able to transition into telehealth. I am an in-person kind of person, did not think telehealth was gonna work, but I am here to say it's been pretty incredible.

[We're] getting lost of reports from the people we provide support to that they're not sure what they would do without it. They're focusing. They are working on goals, making sure that they're either making progress or at least not regressing during this time. We have seen it help people decrease their anxiety, learn a lot more about the precautions that they need to take, and continue to work on whatever physical, behavioral, and cognitive goals that they had. Do I think telehealth is for everyone forever? No, but that's the other great thing, because we've had an opportunity pretty quickly, we're collecting a lot of data on when we think it works, when we don't think it works, and we're hoping we'll be able to continue that on through.

So, social isolation has really decreased for us. We make sure that people may be socially-distances but they're not isolated. We have kept people out of emergency rooms, and we've kept people out of the hospital, and we've even helped some people move out of nursing homes, and we're just making sure that people have what they need during this really, really challenging time. And I will say that it has been personcentered planning that has made that possible, because we are checking in with every person, everyone has a different set of services that are tailored to what works for them -- not only on a regular basis, but also, certainly, during the COVID virus. So, I would encourage anyone to really, really look at that person-centered planning process and how to make sure people are included in every single decision.

Thank You.