

Governor's Focus Veteran Peer Support Initiative
December 6 , 2012

Attendees: John Harris, Mike McMichael, Bob Kurtz, Ph. D., Dr. Harold Kudler, Kenneth Blackman, Ph.D., Samuel Hargrove, Wes Rider, TSgt Nicole Smashum, Belivia Spaulding, Heather McAllister

John Harris began the meeting with introductions for members present for the first time.

Mr. Harris stated that rather beginning today's meeting discussing strategies for the veterans peer initiative, the question of where the veterans peer initiative would be housed needed to be brought to the team for a group discussion.

Mr. McMichael and Mr. Hargrove shared with the team that they have been thinking about this during the time this group has been meeting and that they would like house it.

Mr. McMichael stated that he is very passionate about the veteran peer project, particularly because of his own experiences with recovery. Mr. McMichael shared that he and Mr. Hargrove have discussed developing a non-profit to house this initiative and they would like to discuss this with the team.

Mr. Harris asked what this would look like with the Mr. Hargrove and Mr. McMichael housing the veterans peer initiative.

Mr. McMichael answered that he and Mr. Hargrove would become a veteran owned non-profit, and that if they take ownership that they would develop the timeline, tracking tasks, and deliverables for the project. Mr. McMichael stated that he and Mr. Hargrove proposed that they would develop this under the non-profit agency Outside the Wire.

Mr. McMichael went on to explain that if the project were housed by the non-profit Outside the Wire that non-profit status would provide them an avenue for grants, and that they would get more support as a non-profit with continued support and partnership with the VA and DMH/DD/SAS.

Mr. Hargrove noted that the veteran peer project is still in its infancy, and that although we have few people in the collaborative, need to narrow it to a few key people to continue working on implementing the project and building collaborations from there.

Mr. McMichael suggested that the implementation team include DMH-John Harris, VA-Dr. Kudler, and possibly Peter Tillman (public affairs), and Dr. Anna Teague VA Mental Health. The smaller team would see the project through from beginning to end, including bringing in the team from Duke EPIC for assistance with implementing a project this large.

Mr. McMichael shared that the other benefit of working with Duke EPIC is that they have the experience necessary to implement the veteran peer project, and that they may have grants of their own that can be used to assist with this project. Additionally, Mr. McMichael believes that the Duke EPIC program has excellent grant writers and can assist with ideas, initiative goals and development of tasks necessary to meet these goals. Once this primary workgroup has completed the implementation plan then members from the current veterans peer initiative team will be brought back in.

Mr. Hargrove stated that he and Mr. McMichael do not want to waste anyone's time before all the steps are laid down. At this point, this team has not been able to develop a solid veteran peer definition or defined what the end goal is in regards to what this initiative would look like across the state. Mr. Hargrove stated that things need to move forward quickly as there is a great need for the veteran peer program in the community. Mr. Hargrove stated that Duke EPIC has already been approached

Mr. Hargrove asked the team to weigh in on what was being discussed.

Mr. Harris stated that he likes the idea, and that right now with the division it would be tough to implement this project in the current environment of change. Mr. Harris stated that if the project were housed with Outside the Wire that there would be more community-based support independence and that he likes the idea of the initiative having veteran leadership.

Mr. Harris feels that this is a good time for a veteran's initiative to start because of the new administration. In addition, the idea of utilizing the Duke program gives strength to data development,

research, and evidence based practices. Mr. Harris stated that another benefit of being veteran owned is that it allows the non-profit organization access to contract funds from FORSCOM, USARC. This designation also allows them to bid on SAM solicitations which used to be part of CCR, and also to VETBIZ which is part of the VA system. All of these different funding opportunities and streams give the project more avenues for support and financial resources; this will lead to greater financial stability. Mr. Harris concluded by stating he is in favor of the project being owned by Outside the Wire.

Mr. McMichael shared with the team that he has talked to the Duke Epic team, and that one issue to keep in mind is that their program is not free, and we will need to get the financial resources to pay for this program to work out. Mr. McMichael shared that this program is support by SAMSHA and their technical assistance center therefore; they will bring in good people.

The team discussed that other resources to pay veterans peers may be available under the new health reform bill that has a part about health and wellness, including specific areas such as peer support that can be funded under the wellness portion. Another option for funding veteran peers is available under waiver, under which, LME/MCO's can bill for this service. The team agreed that these funding sources would be of particular help for the National Guard and Reserve.

Dr. Harold Kudler shared that he believes that having this program under a non-profit owned by veterans is a good idea, and if the veteran peer program is not veteran centered it will not do what it needs to do. Kenneth Blackman stated that that the program needs to be both veterans centered and family centered if it is going to meet the great need that exists for this type of program in the community. Mr. Harris stated that there is one other thing that it will help with and that is the shortage of veteran service officers around the state.

Mr. Rider stated that the new LME/MCO waivers allow more flexibility to set rates and buy services that are needed in the community. Mr. Rider pointed out that if the veteran peer program contracted with LME/MCO- that this would only need to be for MH/SA services, and suggested that they look at different funding streams to assist paying with other services the veteran peer program might offer.

Dr. Blackman pointed out that there would need to be several funding sources and not to count on only one. Dr. Blackman went onto to state that one of the benefits of a 503c is that it provides the ability to obtain funds from donations, this potential revenue stream would be from people who want to donate to the military. Dr. Blackman also discussed that the idea of the “pie model” is that you do not “medicalize” the operation because veterans do not want to have their problems medicalized.

Dr. Kudler agreed stating that by “medicalizing” the service that it would be seen as a barrier that creates the obstacle of it always being seen as a mental health intervention.

Mr. Rider agreed, stating that this makes sense from his standpoint and believes that the team is a step further than the last meeting in defining how to address the need for a veteran peer program and veteran peers.

Mr. McMichael shared with the team that the name Outside the Wire comes from his experiences of going outside the wire and bringing veterans back in- Mr. Harris pointed out that Outside the Wire is a connotation to the warzone as well.

Mr. Hargrove states that this work is a passion for him, and he wants to help veterans who are hurting.

Mr. Hargrove shared that he and Mr. McMichael are already doing peer work but have not formalized it into a program and would like to do so.

Mr. McMichael stated that what he and Mr. Hargrove have been doing is what a peer is based on what we have been discussing this for some time. Per Mr. McMichael, the role that a peer takes is to help deescalate situations, getting the veteran to recovery, following up with call/contact and seeing how they are doing, in other words, the peer’s job is to get the veteran to the resource, not to diagnose or provide treatment.

Dr. Kudler states that what Mr. McMichael describes is similar to the experience he has had with patients. Mr. McMichael confirmed this, and stated that he often gets calls from the VA for assistance.

Mr. Harris stated it would be important to build support with veterans centers-community based outpatient clinics (CBOCS), Mr. McMichael agreed.

Mr. McMichael shared with the group that he envisions the Vet-to-Vet program to develop an amazing database of resources that can be used to refer veterans to services who need it. Harold stated that this is important because many times people are not aware of what services are available and can help veterans in need.

Mr. McMichael stated the next steps for he and Mr. Hargrove would be to arrange a meeting between Duke EPIC, Outside the Wire, John Harris-DMH/DD/SAS, and the VA- Harold Kudler/Dr. Anna Teague, Peter Tillman-Durham VA. Dr. Kudler will assist the team in getting in touch with Dr. Teague. This primary group of stakeholders will come up with ideas, timelines, and tasks. After a template/outline is developed, the entire group can move forward on the project. In regards to the notes for this project, until there is another alternative, they will be posted on the Veteran's Focus Website. Mr. Harris stated that there should also be a role for the National Guard in this project. Mr. Hargrove suggested TSgt Smashum being part of it. Mr. McMichael stated not at this point but definitely in the future.

Dr. Kudler stated that the National Guard is in and out all the time, and that because of this they can be peers and guard members depending on their deployment status. Dr. Kudler shared that he recommends building a relationship with Stephanie Nissen from the National Guard from the beginning.

Mike says he has been talking to the guard about having a peer within each unit of the National Guard.

Mr. Harris stated that the idea of being imbedded into the community is a good one, as it still needs to be seen how the LME/MCO's are going to address the needs of veterans in the military communities.

Mr. Rider let the group know that he would be reaching out to this group for a veteran representative to assist them in their work on the peer project currently underway with DMH/DD/SAS and BHRP. Mr. Rider also offered any support he can give as the team works on the veteran peer project.

Mr. McMichael thanked Mr. Rider on all the work his team has done so far with peer training.

Dr. Kurtz shared that he attends the veteran peer initiative meetings as a representative of Operation Recovery, and that in a stakeholder phone call today the possibility of a member of the veteran peer

initiative joining them was discussed. Dr. Kurtz asked if anyone that was part of the veteran peer initiative would be willing to conference call in with them. Dr. Kurtz also suggested that participating in the Operation Recovery project might be a subcommittee of the veteran peer support group.

On behalf of Outside the Wire, Mr. Hargrove thanked everyone for attending the meeting.

Mr. Harris concluded the meeting by scheduling the next meeting for January 24, 2013. This meeting will be held at the North Carolina Institute of Medicine 630 Davis Drive Suite 100 Morrisville, NC 27560. Please note that this meeting will be a subcommittee meeting of the implementation team.