

- Ms. White: TBI coordinator, DMHDDSAS
- Mr. Mabe: Veterans Upward Bound Program, Carolina Community College. He provides academic and career counseling to student veterans in five surrounding counties.
- Ms. McAllister: Governor's Institute on Substance Abuse staffs Focus and produces the biweekly newsletter.
- Ms. Galloway: LME/MCO Systems Performance Team, DMHDDSAS. She monitors the ECBH catchment area and volunteers with the state emergency response team.
- Ms. McGlothlen: LME/MCO Systems Performance Team Leader, DMHDDSAS
- Mr. Barnes: DoD Suicide Prevention Office – standing up program in resiliency & heading up initiative “Partner in Care” (religious community & installations) – foster care for military families – congregations work with branches – Tier 1 & Tier 2 will start with Reserves
- Ms. Graham is an OIF army veteran who currently serves as an advocate.
- Mr. Moore: NC Troops to Teachers
- Mr. Taggart: NC Troops to Teachers
- Mr. Goodale: Citizen Soldier Support Program (CSSP): CSSP's website houses data on deployed active and reserve components in each county in NC. It also partnered with the AHEC and VA to develop and provide face-to-face and online courses on military-connected issues. Over 1200 licensed providers in NC have signed up on www.warwithin.org to serve veterans through TRICARE.
- Mr. Swain: NC Division of Vocational Rehabilitation helps get people jobs. They are currently developing a MOA with the VA, has a network of contractors that work with the BIANC, and is interested in collaborating with the NCDVA.
- Mr. Harris, Military and Veteran Program Manager, DMHDDSAS
- Ms. Reaves: military liaison for Senator Kay Hagan. She encouraged the NCDVA to work with the NCNG Education and Employment Center and to review legislation to help veterans get their state licenses based on their military careers. It appears that the problem lies with the state licensing agencies and with the community colleges. In addition she recommended that county Veteran Service Officers (VSOs) receive continuous and consistent training on changes that have occurred as they relate to VA benefits.
- Mr. Pantano said that historically the NCDVA hasn't had a mission other than *Serving Those Who Serve*. He would like to make NC the most veteran friendly state in the US. His liaison relationship with the Guard is already underway. He professed his interest in receiving input from all stakeholders.
- Ms. Goetz: *Welcome Back, Veterans!*, Duke University. They provide training and dissemination on military culture and work with the VA on system redesign projects.
- Dr. Fang: Governor's Institute on Substance Abuse. She staffs Focus.
- Ms. Pacelli retired from the SE AHEC and has been working on a HRSA-funded national AHEC training project on *Painting a Moving Train*, which focuses on culturally appropriate mental health services. While the funding has ended, HRSA is allowing them to continue collecting data until the end of 2014.
- Ms. Yelverton: Wake AHEC. The recently received a grant from Americorps to conduct Mental Health First Aid (MHFA) training.

Mr. Philpott presented on his work with student veterans. He assists students with their challenges and helps them experience educational successes. Educational benefits can be problematic as veterans are often worried that they will lose their benefits. The Education Improvement Act of 2011 included policy that prevents the payment of out-of-state tuition rates for servicemembers and veterans; this has caused financial burdens for those

who thought they had in-state residency. While some states have fixed this problem, NC has not. Dr. Kudler noted that they are trying to create a statewide network of peers who could assist all veterans, including student veterans, about eligibility related to benefits. The VA also offers the Veterans Retraining Assistance Program (VRAP), a yearlong training program at community colleges or technical schools for unemployed Veterans between the ages of 35 and 60. The suicide rate among middle aged men is higher than for younger men.

Dr. Fang administered a survey to the 58 community colleges this past summer. She reported on the results of the 38 community colleges that were self-identified by respondents. A matrix of services and supports for student veterans is on the Focus website.

Mr. Mabe said that they offer assessment with counseling for student veterans. They try to connect dots for individuals. They are trying to assist them in succeeding in higher education and working with the UNC system and other stakeholders. One of the issues is how to give credit for veterans' experience in the military and at other schools. Some student veterans do have mental health concerns so they provide a referral network to ensure that student veterans get services and supports they need in order to succeed. Dr. Kudler complimented Mr. Mabe on their strength-based approach. Ms. Stein mentioned that September is National Recovery Month and speaks to the issue of meeting individuals meeting their potential.

Mr. Lloyd advocated for working with employers to give veterans jobs. He noted that behavioral healthcare is a critical need. Dr. Kudler said that the VA has hosted a total of 148 MH summits as of yesterday. His office has volunteered to analyze the data and expects to present preliminary data to Secretary Shinseki next month. Consensus was reached that these summits must keep happening. Community providers need to become more aware of what resources are available. The Association of American Medical Colleges is hosting special events on Veterans Day. They are emphasizing that physicians routinely ask whether the patient had military experience, understand the importance of asking this question, and know what to do with this information. Cheryl Sullivan, MD, American Academy of Nursing, is encouraging nurses to integrate the question, *Have you served in the military?* in their work. Barbara Van Dahlen, Community Blueprint, is providing training around Guard and Reserve issues. It would be great if all groups would ask the same question and become part of Joining Forces. What is needed is to negotiate a national unified policy in terms of training and issues to be addressed.

Mr. Doyle presented on the State homeless summit that occurred on September 16. It is part of the 2015 initiative to end veteran homelessness. This year's summit linked VAMCs with the 9 local HUD Continuums of Care (CoC). Using the Point in Time (PIT) and numbers of homeless veterans, they looked at housing needs, resources, and potential partners. They set a 100-day target for each group, which will meet regularly and track progress. One of the consequences of this initiative is integrate veterans into the HUD system.

MAJ Pickett said that NCNG are interested not only in higher education but in jobs. By leveraging their benefits, Veterans have access to different programs and careers. He promotes two-day workshops in lieu of job fairs and has been placing about 30 people per month in jobs. The first day of the workshop features a panel of employer HR representatives who tell the audience tips on what to include on resumes and what to say in job interviews. Companies conduct job interviews on the second day (he placed 18 during the last workshop).

Ms. White announced that the annual TBI conference, *The Myth Behind Mild Brain Injury*, will be held in Concord on October 18. Wesley Cole, Ph.D. will speak about mTBI in the military.

Ms. McAllister said that training the LME/MCO veteran point of contact is one of the mandates of SB 597. On September 23, Worth Bolton provided training on military cultural competence and substance use disorders. Another training is planned in 3 months.

Mr. Goodale said that the CSSP is partnering with Blue Cross Blue Shield to produce training on veteran-centered motivational interviewing that will be offered to their clinician physicians. Participants will receive free CEUs and access to CSSP/AHEC courses. Providers will also learn about community resources and asking the right questions.

Mr. Taggart said that HB 767 was passed and will go into effect in middle of the school year. It helps veterans transition into teaching careers. For every 2 years of military experience and/or leadership, the veteran will receive 1 year of teaching salary career. They are currently figuring out how to do this across the military branches and the types of documents needed for proof. Mr. Taggart is looking into offering tax credit for retired military who volunteer in public school as mentors. Mr. Pantano mentioned he is engaged in a similar project of translating MOS.

Dr. Fang provided a summary of the Focus survey. She emphasized that additional information is needed to assist in the development of the strategic plan. Focus groups and town halls are potential venues to gather data. Dr. Kudler noted that Dr. Eric Crawford has access to data from a variety of sources (e.g., CSSP, CARELINE).

Mr. Woodward's nonprofit is offering spousal outward bound courses. He has been in touch with Marshele Waddell.

Ms. Spaulding from NC DSS provided the most recent call center data for the Careline.

Roy Stein, MD will be presenting on substance use disorders at the next Focus meeting on October 24 from 2 to 4 pm at the NC Institute of Medicine. Mr. Pantano plans to speak further with the group about potential legislative initiatives. Ronnie Sadoski, Wags 4 Tags, and Thomas Brennan (www.fogofwarinc.com) will present on December 5.