

NORTH CAROLINA FOCUS ON SERVICEMEMBERS, VETERANS, AND THEIR FAMILIES



A PROJECT OF THE NORTH CAROLINA DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE ABUSE SERVICES

January 23, 2014
North Carolina National Guard

Present: Legrand Angelis, David Berrien, Houston Campbell, Derek Carter, Diane Coffill, Chaplain Melissa Culbreth, Eric Crawford, Debbie Dawes, Hank Debnam, Paul Dillon, Barbara Dorsett, Ed.D., Li Fang, Ph.D., Sandra Farmer, Sean Fucci, Bob Goodale, Diana Graham, Sarah Greene, Angela Harper, John Harris, Andrew Haswell, Laura Haygood, Andy Jackson, Jan Jacobson, Susan Johnson, Joan Kaye, Kenneth Kempf, Harold Kudler, MD, Bob Kurtz, Ph.D., Jennifer Lechner, Sharon Lee, Pat Lloyd, Leslie Maynard, Heather McAllister, Mike McMichael, Henry Moore, Patty Muehlberger, Stephanie Nissen, Meghan Norton, Sheryl Pacelli, Ilario Pantano, Melissa Payne, SEN Ron Rabin Joe Rapley, Jafar Rashed, Jean Reaves, Terri Reichert, Robert Sherwood, COL Vernon Simpson, Jeff Smith, Belivia Spaulding, Flo Stein, Nicole Stevens, Mark Anthony Taylor-El, Mark Teachey, Stewart Thibodeau, Jan White, GEN Cornell Wilson, Jr., Woody Woodward, and Diane Yelverton

Ilario Pantano awarded the Governor's Order of the Longleaf Pine to Dr. Kudler for his years of service to the State

Dr. Kudler gave a brief overview of the history of the Focus initiative. Since December 2005, the VA, North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, the Governor's Institute on Substance Abuse, and community leaders have been collaborating in North Carolina. It has resulted in projects such as the collaboration between the Citizen Soldier Support Program, the Area Health Education Centers, and the VA in the development of workshops and online courses and a directory of behavioral health and primary care providers by county and zip code. Focus has also worked with the NC National Guard, the Reserves, and the active duty component to identify potential problem areas and to strategize on solutions. What we have been trying to do is understand the bigger picture of our nation at war and what it means when it is over. The VA and DoD don't know either. The war will end officially this year; this is when the behavioral health and social burdens of the war will hit us in a new way. We need to invent a statewide perspective that will prepare us for this. Our job is just beginning.

Dr. Bob Kurtz, Debbie Dawes, Dr. Barbara Dorsett, and Sean Fucci, members of the Operation Recovery team, presented. Dr. Kurtz started with an overview of the SAMHSA-funded grant, where the pilot is situated in Mecklenburg County. The grant is currently in its fifth year, and they will apply for a no cost extension. The emphasis of the extension would be more communication with different advocates in criminal system throughout the State and to provide information and support and disseminate lessons learned of the project. One of their initiatives is the development of a trauma-informed training webinar for professionals. Operation Recovery is different from a veteran treatment court in that participants do not necessarily plead guilty but work with staff to develop a treatment plan. They want interception at all levels.

Ms. Dawes said that they have had a total of 581 potential diversions. Of the 581, 97 were screened, and 84 were diverted. Outcome data are available for only 21, but these preliminary results are promising, with significant improvement in daily functioning. Non-responders were more likely to

be unemployed, homeless, had less MH/SA treatment, had greater use of alcohol and illicit drugs, and had a greater history of trauma.

Dr. Dorsett emphasized the collaboration that had occurred with the VA and consumer-run agencies as a result of the project. About 300 professionals attended a November trauma-informed training. Two years ago, about 100 providers received Seeking Safety training, which was a joint initiative of the project and the VA. They are currently working with a Department of Social Services Committee and the TBI Project Star on a trauma training initiative.

Mr. Rapley said that his position as a peer support specialist for Operation Recovery was his most fulfilling job. He stated that many veterans didn't know they had benefits and didn't identify as veterans. What are needed are Veteran Services Officers or social workers or peer support specialists that can help veterans navigate through the system and get the help they need.

GEN Wilson was appointed as Military Affairs Advisor for the Governor in October 2013. He stated that 8000 veterans come off the rolls every year. The draw down will see even more living in the State. We need to address the challenges that these veterans face, and having a job can make all the difference. He is heading up employment initiatives for veterans.

Ms. Nissen reported that NC is the only state with an embedded team of behavioral health providers or Integrated Behavioral Health Services (IBHS) in the National Guard. In the three years since the initiation of a 24/7/365 toll-free call line (return call within 5 minutes), they have received 2800 calls, conducted 1200 assessments, provided 1500 consultations, and had 228 immediate crisis interventions. The seven staff are strategically located so they can see callers quickly. They have also received 1400 referrals; 24% of all referrals required bridging support from IBHS. Staff clinically re-engage individuals with the VA, TRICARE providers, Vet Centers, and MCOs. Callers also have non-clinical issues related to employment, finances, and legal assistance services. They have found that commanders and line leaders are calling as frequently as the service members. In addition, they have discovered that if they could find jobs for everyone, there would not nearly as many behavioral health issues. As a result of this finding, they have established the Education and Employment Center.

Dr. Kudler stated that the Old North State Society is conducting a Stand Down for veterans on March 29, in conjunction with a meeting of the professionals. They plan to sign up physicians on the <http://warwithin.org> provider database and request that they participate in the AHEC trainings. Blue Cross/Blue Shield of North Carolina has launched the Red, White, and Blue program, where they will incentivize physicians taking a military history. If physicians take 3 out of 7 online training modules and confirm that will take a military history, the provider will get paid more through BC/BS. This incentivizing program does not exist anywhere else in country. Dr. Kudler is attending a meeting in Phoenix in February, where there is a plan to change the CPT code so that military status is included. It is expected to be passed. The VA National Center for PTSD has announced that they are expanding the availability of PTSD mentors to public sector providers starting in October 2014. NC was thanked for leading this effort.

Ms. Stein noted that the Division of MH/DD/SAS is working with the NCNG on a substance abuse initiative. She also stated that the managed care organizations each have a military point of contact, with live handoffs to the IBHS. They are building a bridge between the service and civilian communities.

Mr. Harris works to connect servicemembers and their families to public services. He is also involved in an initiative to get peer support specialists certified; 65 NC Warriors have been certified to date. In addition he is working with Fayetteville State University on their grant. Blue Cross/Blue Shield

has agreed to provide funding for an additional year. Currently, all services—social work services, psychological counseling services, nursing services, deep tissue massage, acupuncture, and limited child care—are free to military, veterans, and their families.

Ms. Kaye gave an update on SB 597. As a result of the legislation, the Division of MH/DD/SAS sponsors quarterly training events for VPOCs. She and Ms. White manage the State TBI program, and they are about to conduct a needs assessment. The last service gap analysis was completed a few years ago so it is time for another one.

Mr. Pantano said his goal for the NC Division of Veterans Affairs is to be more transparent, effective, and a good steward of the budget. He is embarking on a series of initiatives in 2014, which will include an annual report. His office currently funds 58 Veteran Services Officers (VSOs), which support 93 counties. He would like to work more closely with the volunteer organizations (e.g., VFW, DAV, VVA, BVA, etc.) and wants to include them in future meetings. He would like to place the VSOs in the VAMCs, Vet Centers, and CBOCs. He would also like to move their offices to the NCNG and host a 24/7 call center (844-NC4-VETS, NC4VETS.com). He viewed the Focus meeting as important for its networking value as well as educational aspects.

Mr. Moore reported that the NC Department of Public Instruction is working on an interstate compact for military children. Currently, military youth are not usually eligible for high school honors and valedictorian honors since they are expected to have four years of attendance. The kindergarten entrance age has also been a problematic area.

The next Focus meeting will be held in the Command Conference Room of the NC National Guard Headquarters in Raleigh on February 27.