



February 23, 2017 Minutes

Jane S. McKimmon Conference Center, Raleigh

Present: Terry Allebaugh, Rom Alphin, James Alston, Laura Anders, David Bailey, Archie Barrow, Michelle Bates, Sara Battles, Mark Bilosz, Michael Bishop, Sharon Boyer, Fred Brason II, Kate Brett, Brenda Brubaker, Fain Buete, Dr. David Buyck, Jason Cain, Joshua Cain, Donald Carter, Saima Cardwell, Will Collins, Cajun Comeau, Gary Cunha, Lillian Davis, Hank Debnam, Laurie Dickerson, Paul Dillon, C Russell Ditzel, Max Dolan, Daniel Dore, Lynn Dothed, Nick Drake, Julie Dyer, Lane Dyer, Joe Edger, Mark Edmonds, Dr. Wei Li Fang, Mike Fenley, Moses Gloria, Emily Godfrey, Bob Goodale, Elizabeth Goolsby, Diana Graham, Chelsea Greenberg, Penny Greer-Link, Charles Gross, Secretary Larry Hall, Judy Harmon, David Hayden, Angela Harper King, Troy Hershberger, Genean Hill, Gordon Jears, Teresa Johnson, Terri Kane, Stan Kimer, Nana Knowles, Toby Loften, Neely Mahoney, Jerome Malloy, Jerry Mangum, Ronald Mangum, Ursula Mannix, Jessica Maples, Alice McCall, Megan Miller, JV Miller, Mark Mills, Dr. George Millsaps, Brenda Monforti, Sebastian Montayne, Michael Mullins, Tara Myers, Jeffrey Netznik, Frankie Oxendine, Roberto Pagan-Rodriguez, Raquel Painter, Ilario Pantano, Vincent Penn, Toni Pinkston, Kim Poff, Pam Poretti, Brandon Porter, Jim Prosser, Robert Ramos, John Rimer, Sandra Robinson, Dave Roddenberry, Alvin Scroggs, Jacob Shaheen, Austen Shearer, Dr. Mark Shelhorse, Betty Jo Sheppard, Robert Sherwood, Jeff Smith, Jeff Smith, Tenita Solanto, Belivia Spaulding, Flo Stein, Annette Stevenson, Dr. Samuel Strickland, Lea Strickland, Doug Taggart, Pamela Thomas, Dr. Joseph Threadcraft, Leah Turner, Terrick Vernon, Christian Versanto, Suzanne Walker, Stephen Wilkins, Kimberly Williams, Kelli Willoughby, Kyle Winder, Scott Wolford, Martin Woodard, and Alex Zachman

Mr. Gloria welcomed everyone, and attendees then introduced themselves. Mr. Prosser introduced Secretary Larry Hall. Secretary Hall expressed his desire for the Governor's Working Group to "go forward, do more, push to do more, and work smarter". He noted that critical issues such as suicide prevention and drug addiction demand our attention. In addition he was gratified at the turnout, to see so many folks who are concerned about the well-being of Veterans and their families.

Dr. Shelhorse, Acting Director for VISN 6, was the first presenter and also introduced the remaining presenters from the VA. He provided an overview of VISN 6 issues (VISN 6 of the US Department of Veterans Affairs consists of NC and VA. NC has four VA Medical Centers in Asheville, Salisbury, Durham, and Fayetteville). The VA's goal is to provide same day access to primary care and mental health (MH) care at the four VAMCs, with an eye toward accountability. Priorities include:

1. Access: *We pledge that any Veteran with the requirement for urgent care will receive care at the right time appropriate to his or her clinical needs.*
2. Employee engagement: *We will work to allow staff to have greater input into their work environment.*

3. High performance network: *We will build a high performance network of care to best serve Veterans.*
4. Best practices: *We seek to identify and disseminate best practices throughout VA (13 have been identified for dissemination).*
5. Trust in VA care: *We will share our results on the quality and timeliness of how we care for Veterans.*

In the past year, wait times for primary care, specialty care, and MH care in three of the four VAMCs have significantly decreased. Wait times at the Asheville VAMC increased from 10.68 to 17.97 days for specialty care and from 3.95 to 4.22 days for MH care. VISN 6 is expected to have nearly twice the number of enrollments than the rest of the country. This increase in the number of Veterans seeking VA care has led to an expansion in the number of health care centers and clinics. He noted that the VA is interested in hearing about innovative ideas, and an attendee asked whether the VA would consider collaborating with a Y to have a VA clinic onsite. She said that she can get much of the \$36M needed for facility in Onslow County.

A question was asked about substance use treatment. Dr. Shelhorse responded that a Veteran can access acute services immediately. However, most appointments are rehabilitative and cannot be accomplished in a day. The key with substance abuse treatment is to ensure that detox is complete first.

Ms. Goolsby is the director of the Fayetteville VAMC, formed a task force with the mayor of Fayetteville during the spring of 2014. Comprised of community organizations, active duty, Veterans, and community members, goals of the Task Force were that (1) no one will be unhoused for greater than 30 days unless by choice and (2) to identify the holes in the safety net. The task force recognized that it is hard to get a job when a person has no housing and is worried about personal safety and the next meal. Strategies included housing first, case management, emergency housing, and funding resources. Holes in the safety net included the paucity of resources for intact families that were homeless and for women with children. For example, a male child over the age of 9 had to go to male shelter alone. While they were able to find housing, money for a security deposit and for utilities was not available. In October 2015, Fayetteville was the third city in the country to be declared, by the Secretary of Housing and Urban Development, to have achieved functional zero in homelessness for Veterans. This resulted from the city coming together to care for its citizens.

In the course of working with the Task Force, they found that opioid abuse was a consistent theme so she and the mayor decided to extend their work to this community challenge. Four goals were identified: (1) to reduce the number of opioid overdoses, (2) to educate providers who prescribe opioids and options, (3) to bring awareness to the general public on opioid addiction and treatment, and (4) to promote treatment and recovery resources. Six subcommittees were formed: (1) case management/ counseling options, (2) professional/public awareness, (3) diversion from the criminal justice system, (4) treatment resources, (5) emergency housing, and (6) funding resources. They are currently working with Attorney General Josh Stein to change NC law so only electronic prescriptions will be available. Since last summer,

law enforcement has saved 55 people using Naloxone. Ms. Goolsby also noted that two of the three Veterans Treatment Courts (VTCs) in the state are located in the counties of Cumberland and Harnett, which are in her region. The VTCs provide physical, psychological, and spiritual support; consequently, participating Veterans have turned their lives around. In addition, they have a LEAD program. What they lack are an adequate number of treatment beds and other resources. They are trying to expand and are proud of the work they have accomplished. They have presented their report to Governor Cooper and Attorney General Stein and will make it available to the GWG (see website for a copy of the report). Ms. Stein said that Fayetteville is one of the model communities in the state and includes education, housing, and treatment. What is different from other cities is VA participation.

Dr. Buyck discussed integrated care initiatives as they relate to behavioral health and chronic pain. He emphasized that chronic pain can affect every aspect of an individual's life and must be taken into account in the development of a treatment plan. He then discussed VA initiatives as they related to comprehensive drug safety; pain management; Hepatitis C; and MH services. People can get better if they have access to the right resources. The treatment plan should address bringing the Veteran back to autonomy, independence, and recovery, with clear targets for the Veteran to work toward. Treatment is one of the three prongs of VA, with research and training being the other two. Peer support specialists play a critical role in residential and intensive outpatient treatment programs.

Ms. Stein provided a brief overview of the Governor's Working Group. She recognized Dr. Mandy Cohen as the new Secretary of Health and Human Services (DHHS). She noted that DHHS plans to develop a comprehensive opioid plan that includes Veterans. In addition, she observed that the Governor's Working Group ([www.ncveteransworkinggroup.org](http://www.ncveteransworkinggroup.org)) meeting is supported by the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MHDDSAS) through a block grant from the US Substance Abuse and Mental Health Services Administration. Today's meeting was also supported by SAS, and NC Veterans Business Association. DHHS is very much interested in the wellness of Veterans and their families and has mandated that each managed care organization appoints a Veteran Point of Contact. She expressed her appreciation to all groups represented at the meeting.

Mr. Collins highlighted the work of NC for Military Employment (NC4ME) (<http://www.nc4me.org>), a project of the Division of Workforce Solutions, NC Department of Commerce. One of their activities is to educate employers about the value of bringing Veterans onto their teams. In the first 18 months, they have reached 2000 employers. Another project is the offering of apprenticeships for those living in the Camp Lejeune and Fort Bragg areas. In the past 20 years, they have certified over 4000 Veterans. They are also working to transfer Military Occupation Specialty (MOS) credits into higher education and the civilian workforce.

Mr. Bilosz discussed VBA-sponsored events where Veterans could file claims for benefits. While Veterans can visit the Winston-Salem office or file online and through phone calls, it is the outreach events that are so effective. It is harder for a claim processor to deny someone in person. At a recent 1.5 day event in Roanoke Rapids, over 550 Veterans were seen, not just from NC but from other States as well. Wilmington will host an outreach event on

March 30-April 1 at the American Legion Post 10. It is recommended that folks get there early (people were there as early as 4AM in Roanoke Rapids). It will be a first come first serve event. The VBA has reopened offices in Cumberland and Wake counties.

Mr. Prosser expressed his appreciation for VetBiz, NC4ME, and NC Serves. He also mentioned the opening of a tribal office for the Lumbee tribe in Lumberton and Veteran Coffees hosted by the Hospice & Palliative Care Center and Rowan Hospice & Palliative Care and the Hospice & Palliative Care Center of Alamance-Caswell. On March 29, there will be a special luncheon for Veterans in Salisbury. He also noted that the NC Department of Military and Veteran Affairs (DMVA) is responsible for four nursing homes for Veterans (they are on the list to get two more nursing homes) and four cemeteries. The DMVA has also published the NC4VETS resource guides with the assistance of the Division of MHDDSAS.

Mr. Smith of the DMVA needs text for the NC4VETS annual resource guide no later than April 15. To publicize Veteran events, folks can enter the events by going to <http://nc4vets.com/events>. These events will be automatically listed on the GWG website. He also noted that the other Jeff Smith of UNC-TV hosts a Veterans coffee in RTP on the 4<sup>th</sup> Saturday of the month. This is also an opportunity for Veterans to record an oral history. He pointed out that the Governor's Working Group has been a good vehicle for collaboration and stressed the importance of working together.

Mr. Dillon said that he is a representative of the Kennedy Forum (<http://kennedyforum.org>), which has tools and guides for erasing the stigma of mental illness and apps and tools for ensuring parity. Veterans need to know their rights. The website offers excellent information for the Veteran community.

Mr. Barrow said that the Department of Commerce is starting to host Stand Downs throughout the State. The first one was held in Jacksonville on February 7. On March 14, a Stand Down targeting female Veterans will be held at the NCWorks Center in Fayetteville. Two days later, a Stand Down will be held in Laurinburg. A Disabled Veteran Outreach Program (DVOP) specialist will be placed with the Lumbees in Lumberton soon. The DVOP must be a Lumbee Veteran. There are plans to put a DVOP in Cherokee next year.

Ms. Pinkston is an attorney with Legal Aid and involved with appeals for disability denials. She welcomed anyone to contact them.

The next meeting will be on Veterans Treatment Courts on March 23, from 2:00 to 4:00 pm in the Situation Room of Emergency Management, Joint Force Headquarters, 1636 Gold Star Drive, Raleigh, NC 27607. For those joining remotely, please call 919/212-5747. Copies of agendas, minutes, and PowerPoint presentations may be downloaded from <http://ncveteransworkinggroup.org/minutes-and-group-updates/>.