



# VWWP Progress Report 2010





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**Purpose**

Ensure adequate and timely assessment, treatment, and support are available to veterans, service members, and affected family members....for stress-related injuries and traumatic brain injuries resulting from military service.

§2.2-2001.1 *Code of Virginia*

**Mission**

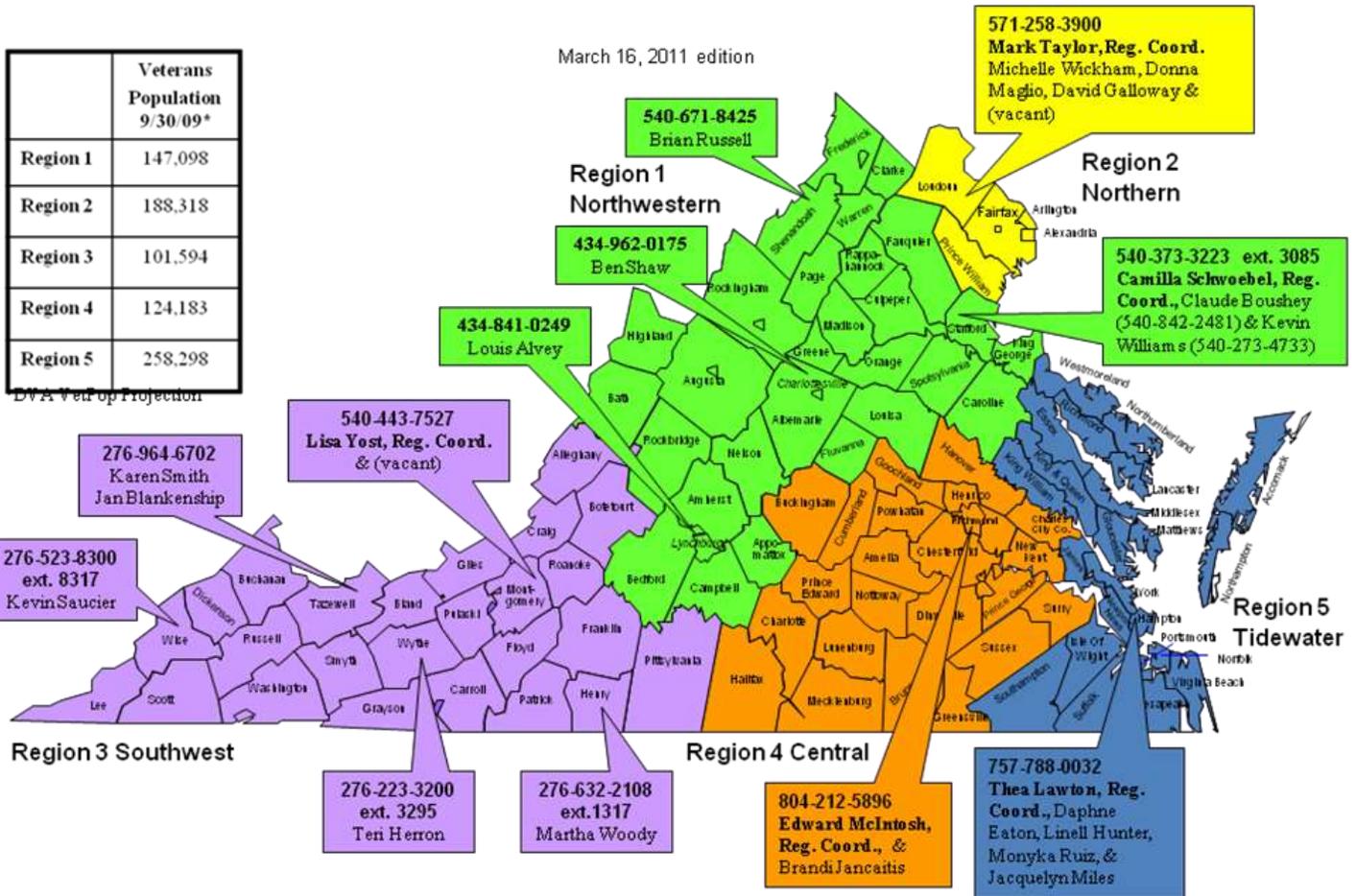
To establish an integrated, comprehensive and responsive system of services for veterans, Guardsmen and Reservists with Stress Related Conditions or Traumatic Brain Injury (TBI) resulting from military service and their families through a network of public and private partnerships





### VWWP Introduction

The fall of 2010 marks the second full year of operations for the Virginia Wounded Warrior Program (VWWP). Last year's Progress Report publicized the accomplishments of the program in establishing regional consortia across the state. Today, VWWP is an active program that provides a network of community-based services designed to help veterans and their families overcome the challenges of stress-related and traumatic brain injuries. Services are coordinated through local community providers, including community services boards, brain injury services providers, U.S. Department of Veterans Affairs Medical Centers (VAMCs) and other public and private providers. The following chart illustrates the current regional programs and the local VWWP staff available to help Virginia veterans and family members.





## **VWWP, A Dynamic and Evolving Record of Service**

In State Fiscal Year 2010, the VWWP continued to build an extensive community network across the Commonwealth through the five regional VWWP consortia. The Executive Team provided guidance to the five VWWP Regional Coordinators and their staff for expanding outreach, referrals and direct services to veterans and their families.



*Executive Team*

VWWP is led by Catherine A. Wilson, U.S. Navy (ret.). Ms. Wilson is a tireless and tenacious advocate for veterans and their families, expanding veteran centered behavioral healthcare and rehabilitative services across the Commonwealth. Working with a powerful Executive Strategy Committee and an influential Advisory Committee composed of distinguished Virginia veterans, she has built the VWWP infrastructure that today serves as a model for other federal-state collaborative programs across the country.

Kendra Ellison, Executive Assistant, provides support to the entire Executive Team and state level committees as well as to staff in the Regions. She is responsible for assisting with the coordination of VWWP meetings and events as well as taking on special projects such as the Honor Flight program and redesign of the VWWP coin. VWWP partnered with Honor Flight Historic Triangle Virginia to transport twenty-two WWII veterans on a tour of Washington, D.C. The veterans and their guides visited the tomb of the Unknown Soldier at Arlington National Cemetery, the WWII and Iwo Jima Memorials and the Marine Museum at Quantico. All expenses and incidentals for the veterans were covered. The founders of the national Honor Flight Program, along with those involved in the 100 hubs around the country, feel that all WWII veterans should have the opportunity to see the memorial that was built in their honor. This is the first in what is expected to be a number of opportunities for veterans with VWWP working in tandem with local and non-profit veterans organizations.





In addition, Ms. Ellison, assisted by a VCU work study student, redesigned the official VWWP coin. The coin is a symbol of excellence shared with those whom the VWWP recognizes as exemplary of the purpose, mission and values of VWWP.

The three Regional Directors lead the development of new partnerships and offer direct assistance to veterans and their families on a daily basis. James Thur is Regional Director for Northern Virginia and works with VWWP Regions I and II. Mr. Thur has also fostered relationships with the VA hospitals, particularly those in the District of Columbia and West Virginia. He has focused on improving the ability of

VWWP to collect data about the services provided to veterans and families as well as developing expertise in addressing issues of veterans' homelessness and community practices for diverting veterans from involvement in the criminal justice system. Michael Rindorf, Regional Director, Western Virginia, works directly with Region III, Southwestern Virginia. Mr. Rindorf and his wife Holly have traveled throughout Southwest Virginia and the Commonwealth addressing the needs of veterans and families affected by combat stress, including post traumatic stress disorder (PTSD). Mr. Rindorf has been involved in promoting many special events for veterans and families, including the Ward Burton Wildlife Foundation's events to provide recreation and rehabilitation to veterans as well as many other outdoor sporting and hunting events. Penny Melvin, the newest member of the VWWP Executive Team, joined VWWP in July, replacing Kenneth Rich as Regional Director Southern. Ms. Melvin (and Mr. Rich previously) work with Regions IV and V, covering an extensive territory of Hampton Roads, Tidewater, Northern Neck, Eastern Shore, Richmond and the Tri Cities area as well as all of Southside and Central Virginia. Unfortunately, Ms. Melvin resigned in November and this position is currently vacant.

Martha Mead is the Special Projects Coordinator for VWWP. Ms. Mead has focused on program development and expansion through the pursuit of state and federal grants. She also works closely with the Executive Director on program planning, communications, training and overall management activities. Through her work with grant opportunities, Ms. Mead has focused on expanding services for veterans in rural areas and those involved in the criminal justice system. Grant funds will help the VWWP expand its services throughout Southwest Virginia and to develop training and interventions designed to divert veterans from incarceration.

The VWWP Executive Team has successfully fostered extensive partnerships at the federal, state and local levels to expand awareness of services for veterans and families and to generate additional resources for the regional consortia. One shining example is VWWP's partnership with the "Real Warriors" Campaign of the Defense Centers for Excellence in Psychological Health and Traumatic Brain Injury. News articles and links to the VWWP website are a regular feature of the DCOE website, <http://www.realwarriors.net>. In addition, VWWP's partnership with the Center for Deployment Psychology of the Uniformed Services University in Bethesda, MD, initiated discussions that led to professionals from the Center providing statewide training on PTSD across the Commonwealth. These are just two examples of how collaboration is expanding services to veterans and families in Virginia.





## Statewide Needs Assessment

VWWP commissioned the Virginia Tech Institute of Policy and Governance to conduct a statewide needs assessment to evaluate how to facilitate services to veterans and families affected by combat/operational stress and traumatic brain injuries. The final report, “*Assessing the Experiences, Supportive Service Needs and Service Gaps of Veterans in the Commonwealth of Virginia*”, reveals that Virginia veterans want more “coordinated information” on how to access benefits and healthcare services. Veterans, particularly those who live in rural areas, indicate that in addition to the services available from the VA, they would like to get their medical care from community providers who have been trained to understand how to treat the unique needs that are the result of military service, combat, multiple deployments, constant alert and the other demands of today’s active duty military. The Virginia Tech research supports the fact that the historically high rates of multiple deployments, particularly for members of the National Guard and Reserves, result in greater health, financial, employment and personal strain on these service members. This, in turn, generates greater stress on spouses, children and other family members who are struggling at home to keep the family together and well.

The Virginia Tech research also found that a major barrier to seeking help is the stigma and risk of pursuing care because of the fear of losing one’s job or being labeled as having a mental illness. The results of this research will be used by VWWP to expand outreach and accessibility of services and to inform decision-makers on the impact of service provision.

The Report has already proven invaluable in demonstrating the need for a federal grant from the Health Resources and Services Administration to expand the VWWP in Southwest Virginia. The data supported VWWP’s successful grant proposal garnering nearly \$300,000 per year for up to 3 years for the Southwest Region. The HRSA “*Flex Rural Veterans Health Access Program*” is discussed further in the Grants section of this report.

## Virginia is for Heroes 2010

In February, 2010 the Team, working with the Partnership for People with Disabilities of Virginia Commonwealth University (VCU/PPD), planned and executed a statewide conference attracting veterans, family members and professionals across the Commonwealth. *Virginia is for Heroes 2010* held in Richmond on February 18 attracted nearly 400 participants. Working in Regional break out groups, the participants developed broad priorities for VWWP and identified major service needs and priorities for each of the regional programs. The statewide priorities are:

- Goal 1: Ensure that communities welcome veterans and their families and support them with practical help.
- Goal 2: Deliver services to veterans and families who need them.
- Goal 3: Help veterans and families succeed in the civilian world.





Conference participants also developed means for achieving these goals. This work has been incorporated into the VWWP Strategic Plan and is being used by VWWP staff level Tiger Teams to plan and prioritize services and advocacy strategies for program outreach and expansion.

In addition to establishing statewide goals and objectives, conference participants worked in Regional break out groups to develop regional priorities. These priorities are set out in the following Table.

<p><b>Region I Northwestern</b></p> <ul style="list-style-type: none"> <li>▪ Improve access to local services, family services, children’s services – through one stop processing and agreed upon protocols</li> <li>▪ Expand education and training for civilian sector, law enforcement, families, professionals/service providers</li> <li>▪ Use mass media to communicate to many audiences (target communication to specific audiences) – hit them where they are</li> </ul>
<p><b>Region II Northern</b></p> <ul style="list-style-type: none"> <li>▪ Increase media (PSAs, “social networking” (Facebook), radio, TV) to decrease “stigma” of seeking help; encourage breakdown of barriers among military services in seeking help</li> <li>▪ Educate employers, caregivers, family and veterans on clashing cultural/transition issues impacting on veterans’ employment</li> <li>▪ Support single service members’ needs post deployment</li> </ul>
<p><b>Region III Southwestern</b></p> <ul style="list-style-type: none"> <li>▪ Increase, improve, integrate formal/informal community supports in rural communities</li> <li>▪ Eliminate barriers to accessing services for veterans and families</li> <li>▪ Increase community competence regarding military cultures</li> </ul>
<p><b>Region IV Central and Southside</b></p> <ul style="list-style-type: none"> <li>▪ Educate community about signs/symptoms and services to decrease stigma and increase services</li> <li>▪ Increase access/funding/hours of service for counseling for veterans/caregiver and families – Tricare</li> <li>▪ Hire veterans: job fairs, transition, employment service providers, skilled and professional, volunteer programs</li> </ul>
<p><b>Region V Tidewater</b></p> <ul style="list-style-type: none"> <li>▪ Create and find a pool of wounded veterans and family members for all available jobs (private, federal)</li> <li>▪ Establish and support community/faith-based support groups for families/significant others of veterans to include separatees, active duty and retired – for example, increase using 12 step model</li> <li>▪ Develop a networking and educational forum to discuss resources (public, private, faith-based)</li> </ul>





## **Strategic Planning**

Since inception of the program, VWWP has employed a multi-level strategic planning effort to ensure that the program is sustained and enhanced for the long term. Lisa Meunier, a retired Navy Captain and Human Resource professional, works with the VWWP team and the Regional Program staff to maintain an on-going strategic plan that tracks the original statutory mandate, purpose and mission of VWWP and helps the program to grow by incorporating priorities established in statewide meetings and in strategic planning sessions. Using the statewide goals and objectives established during *Virginia is for Heroes 2010*, the VWWP Executive Team and Regional Coordinators established goals and objectives for further research and development. These goals and objectives were then assigned to “Tiger Teams” comprising Regional Directors and Regional Program staff. The progress of each teams’ work is detailed later in this report.

## **Training**

Through a generous grant from the Commonwealth Neurotrauma Initiative, VWWP partnered with the VCU Partnership for People with Disabilities (VCU/PPD) to establish a three-year training program for VWWP staff and community providers. In FY 10, five regional training programs were held across the state. The all day trainings included presentations on: Understanding Military Culture; Navigating the VA; Virginia Department of Veterans Services Benefits and Services; and Traumatic Brain Injury. Working with the Regions, VWWP and VCU/PPD developed both statewide and regional training plans to guide the development of a “constant learning environment” for staff who work directly with VWWP and for community partners.

In the late summer and fall of 2010, VCU/PPD organized a series of regional trainings focused on the clinical treatment and causes of PTSD. These 3 hour seminars were taught by staff of the Center for Deployment Psychology of the Uniformed Services University in Health Sciences in Bethesda, Maryland. The seminars familiarized participants with the types of traumatic exposure experienced by service members. Participants learned about the rates of PTSD in the general population and in the military population gaining an understanding of the unique needs and demographics of the population that they are serving. The presenters reviewed common co-morbid disorders and problems associated with PTSD, such as depression, anxiety and substance abuse. Several self-report measures and structured interviews were reviewed that are used by practitioners to assess for PTSD. Participants learned the many factors that can affect the success or failure of screening instruments used to detect PTSD in service members. Current evidence based practices that are proving effective were reviewed and sources for more information on these practices were shared. Anxiety management strategies that can be taught to service members diagnosed with PTSD were reviewed. A wealth of reference materials was provided for future learning and program development.

## **Direct Service Provision**

In FY 10, VWWP provided services to over 1650 veterans and family members, and presented at 573 community education and military outreach events reaching over 19,000 citizens. Working with



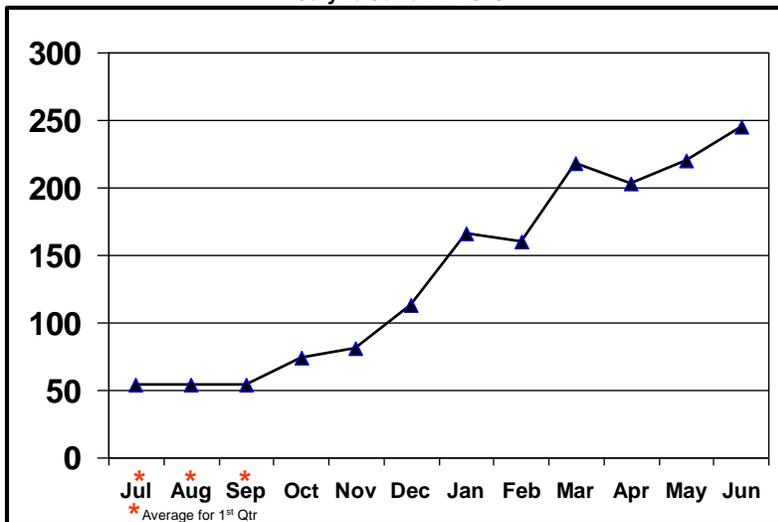


VWWP, Virginia's 40 Community Services Boards are now collecting data on the number of active duty, National Guard and Reserve, retired and discharged service members that are being served by local public behavioral health providers. In FY 2010, these numbers rose from approximately 1,000 the year before to over 3,000. The Department of Behavioral Health and Developmental Services (DBHDS) believes that these numbers may in fact be lower than the actual persons served because they are just beginning to track the numbers.

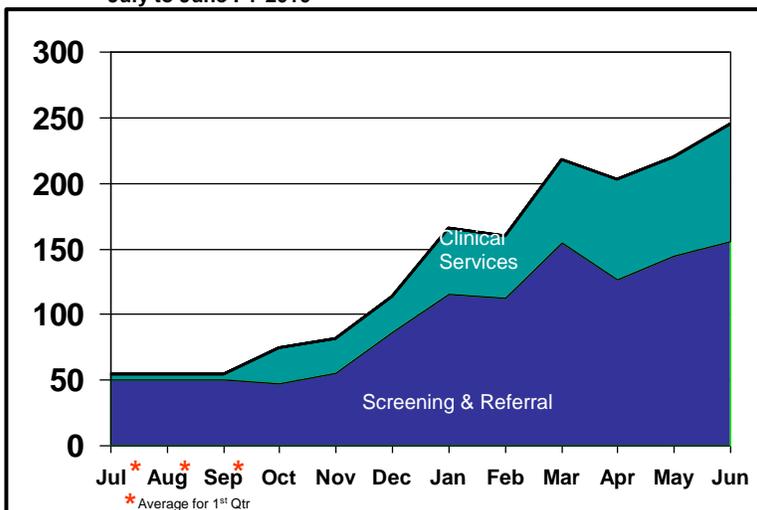
The graphics below show that direct services provided to veterans and family members by the VWWP Regional Programs are growing at a steady pace. The numbers will continue to rise as VWWP reaches out to veterans and families through social media, community events, training events, one to one contacts and expanding connections with the military, the VA and community based treatment providers and organizations.



Total Persons Served by VWWP Regional Consortia July to June FY 2010



Total Persons Served by VWWP Regional Consortia July to June FY 2010

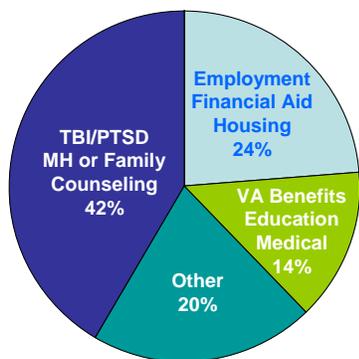




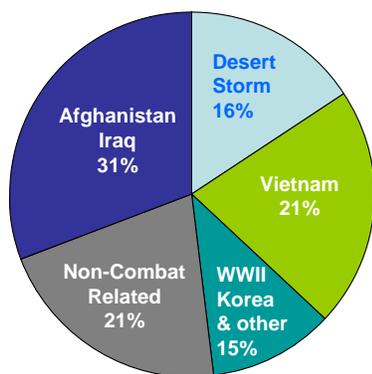
The following charts using data from a typical month of VWWP services, June 2010, show that the majority of contacts to VWWP are from veterans, Guardsmen and Reservists or their family members seeking help for PTSD and TBI. The consequences of these disorders however complicate many other areas of the individual and family’s lives, including their financial well-being and their housing and community support needs. VWWP Coordinators and Resource Specialists also facilitate the critical connections to DVS Benefits Services Specialists (claims agents) for veterans’ compensation benefits and for their educational benefits. Although VWWP is authorized to serve veterans and family members from any era of military operations, a snapshot of the veterans served in June of 2010 reveals that the highest percentages are from the Iraq and Afghanistan conflicts.



**Primary Nature of Requests for Assistance from Regional Consortia – June 2010**



**Era of Service for Veterans Served by Regional Consortia – June 2010**





## **Regional Accomplishments**

The VWWP Regional Consortia have expanded access to services and informational resources for veterans and families affected by the stress of combat, multiple deployments and service connected injuries. Local partnerships have been formed with Wounded Warrior Transition programs on local military bases and with the National Guard Yellow Ribbon Reintegration Events and Joint Family Support and Assistance Programs. Numerous outreach, fundraising and educational events have been organized with local veterans services organizations, including the VFW, American Legion, Vietnam Veterans of America, DAV posts and MOAA chapters. The regions have also coordinated events and outreach with local colleges and universities and with numerous state agencies, including local Departments of Social Services, Virginia Department of Rehabilitative Services and Virginia Employment Commission offices. In every region, VWWP Coordinators have worked with the Community Services Boards to establish staff liaisons for referral of veterans and family members to behavioral healthcare and to develop protocols for referral and crisis intervention.

Although each of the five VWWP Regions are programmatically unique based on the veterans service needs and funding available, all of the programs provide comprehensive and timely assessment, care coordination, outreach activities, referrals to outpatient and inpatient treatment, rehabilitative services, peer and family support, and linkages to benefits services, housing, employment and educational programs. Veteran and Family Support Groups meet regularly in locally accessible facilities. Regional staff sponsor public awareness picnics, dinners and recreational events to engage veterans and families in discussions about their healthcare needs and to enhance the community support that strengthens their resilience. Each Region has also established an Advisory Board composed of local veterans services organizations, community providers, faith based organizations, colleges and universities and other community members interested in expanding outreach and services to veterans and families. These Boards are invaluable sources of information and referral, as well as providing direct and timely feedback on the services being provided in the region.

### **VWWP Region I (Northwestern)**

Region I peer specialists have been involved in numerous newspaper and television interviews, including coverage of the “Hometown Heroes Event, co-sponsored with the Fredericksburg VFW and American Legion, and a touching Christmas story about the laying of wreaths by the Veterans Support Group. Claude Boushey, Peer Specialist, was featured in an



*VWWP Region I Team, Camilla Schwoebel, Coordinator, Steve Heitmeyer, King George American Legion Riders, Claude Boushey and Kevin Williams, Peer Specialists*

article in the Wounded Warrior Project *After Action Magazine*. These communication efforts have garnered the attention of veterans and families, resulting in increasing requests for information and assistance across the Commonwealth. All of the regional staff have taken advantage of opportunities to work with local Veterans Affairs Medical Centers, Vet Centers and Veterans Services Organizations to participate in and co-sponsor health fairs, rides for recovery, 5K and 10K Run/Walks, etc.





**VWWP Region II (Northern)**

Region II began operations with a clinically based model, including behavioral healthcare and brain injury specialists. Specific protocols and triage procedures have been established by the clinical VWWP-Northern team to ensure timely access to appropriate services for veterans who are most in need of services. A procedure was also established with each of the five CSBs in the region to connect callers to the VWWP-Northern phone line with the appropriate Emergency Services clinicians 24/7 if they are having a mental health or substance use emergency. While there are no VA Medical Centers in Northern Virginia, the VWWP-Northern team has established a great working relationship with both VAMCs in Martinsburg, West Virginia and Washington, D.C. Regular referrals are made to and from the Martinsburg VAMC Domiciliary programs which incorporate the inpatient PTSD and substance abuse treatment programs. The Washington, D.C. VAMC Polytrauma Unit routinely refers veterans to VWWP-Northern clinicians for individual and family counseling, and group substance abuse therapy. This team has facilitated five region-wide trainings that have



*VWWP Region II Team Initiating Equine Assisted Therapy Program for Veterans: Mark Taylor, Regional Coordinator, Donna Maglio, Clinician and Equine Assisted Therapy Program Therapist, Dr. Michelle Wickman, Clinician, Jeanie Furnai, Loudoun County Mental Health Outpatient Manager, and Roger Biraben, Loudoun County Mental Health and Substance Abuse Services Director.*

added to the clinical knowledge base of many CSB, private and non-profit providers who work with veterans and their family members. The team is expanding their capabilities by hiring a peer support/ outreach specialist in order to facilitate peer support groups and aid in community outreach efforts throughout the region. The region has also established an Equine Assisted Therapy Program for treatment of veterans and families. This is an experiential treatment model using horses within the therapeutic process. The modality has been shown to reduce symptoms of depression, anxiety and PTSD more quickly than traditional psychotherapy and is less stigmatizing and more acceptable to veterans.

**VWWP Region III (Southwestern)**

The Resource Specialists in Region III have organized and facilitated weekly Veterans and Family Support Groups providing valuable resources and peer mentoring for attendees. The regional staff conducted two community outreach events during the summer with attendance of over 70 veterans and family members per event. The most recent event in early December drew 154 veterans and family members, including children. Santa even made an appearance bearing gifts for the children.





These outreach events provide the opportunity for numerous community organizations to support “Our Community, Our Strength” outreach and increase participation of veterans and family members. The regional staff has participated in Regional Crisis Intervention Training (CIT) as panel members and guest speakers providing expertise on addressing the stigma of PTSD. The CIT training provided the opportunity for local Law Enforcement personnel to discuss the proper response to dealing with a veteran in crisis and addressing the stigma those Law Enforcement personnel who are veterans deal with. This provided the opportunity to break through barriers associated with mental health issues.

Region III has built a strong relationship with the local VAMCs and Community Based Out-patient Clinics (CBOC) within the region. The team has participated in several outreach events with the VA Rural Health teams. The VWWP Region III Team participates in regular briefings with the Salem VAMC Social Workers during their monthly staff training. This collaboration has resulted in numerous referrals for services. The region has established direct referral ability with the Salem VAMC Homeless Integration Team which resulted in rapid placement of a veteran in transitional housing despite no previous enrollment with the VAMC.

The Region has participated in several “Wounded Warrior Events” supporting VWWP including NASCAR Veteran, Ward Burton and the Ward Burton Wildlife Foundation. This event provided veterans a day of fishing and hunting on a wildlife preserve in Southside Virginia. This relationship opens up the opportunity for future efforts with NASCAR and Outdoor Sporting Events. The Resource Specialists’ have created Public Service Announcements that continually air on local radio stations within the New River Valley. Professional relationships with DVS Benefits Services Specialists and the Staff of the Virginia Veterans Care Center (VVCC) in Salem have provided the completion and awarding of numerous initial claims for PTSD compensation and the placement of 3 veterans for long term care at the VVCC. Veteran Employment networking has established numerous job



*Terri Herron, VWWP Resource Specialist, Region III and Mount Rogers Community Services VWWP Combat Veterans Networking Group Bedford DDay Memorial Trip, Sept. 2010.*



*Lisa Yost, VWWP Resource Specialist, Region III at Veterans and Families Outreach Picnic.*





opportunities for veterans enrolled in the Regional VWWP including job opportunities with the Mount Rogers Industrial Development Center (IDC). The IDC currently holds major Department of Defense contracts and employs individuals with disabilities including those suffering from the effects of PTSD and TBI. The region has seen a steady increase of services provided for family members of veterans, including school age children.

### **VWWP Region IV (Central and Southside)**

Region IV working with the School of Social Work at Virginia Commonwealth University co-facilitated couples retreat workshops for veterans and spouses coping with the effects of PTSD and/or TBI. Veterans and their spouses provided extraordinary feedback about the usefulness of these retreats for strengthening their marriages and for understanding how to manage the symptoms manifested because of the stress of combat, repeated deployments and family separation. Additional retreats are being planned to determine rates of success for veteran and family member relationships. This evaluation will also provide data for determining sustainment of this program. Building on this strong relationship with VCU, the Region IV program partnered to create a student veterans center at VCU, called "USS RAMS—University Support to Returning Armed Forces Military Students." Another valuable partnership with the national Wounded Warrior Project brought Peer Mentoring Training to McGuire VAMC in September. To expand community outreach, a VWWP Facebook page was created as an additional means of reaching out to veterans.

The Director of Region IV, and the Executive Director of the VWWP met with Dr. Leticia Flores to discuss collaboration with the Center of Psychology Services and Development to provide evaluation for veterans in regard to PTSD/TBI.



*VWWP Region IV Team, Ed McIntosh, Regional Coordinator and Brandi Jancaitis, Case Worker/Outreach Coordinator*



*VWWP Region IV Team working with colleagues, Rashad Webb and Jackie Baker, Mental Health Supports Team Case Workers, Richmond Behavioral Health Authority.*





### VWWP Region V (Tidewater)

Region V partnered with a company called Didlake, Inc., for employment counseling services for veterans. This relationship really paid off in assisting veterans to obtain employment and also to understand their treatment needs. The Region V Team has built a strong and supportive relationship with the Hampton VAMC OEF/OIF clinic, the VA Rural Health Team, the VET Center and the Community Based Outpatient Clinics. Recently, the Team partnered with the DVS Benefits Services staff on the Eastern Shore to hold a very successful outreach event for veterans in that area. Region V's partnership with the William and Mary Legal Resources clinic led to a collaboration on another outreach event held at the college, called *Warrior Connect*. This team seeks opportunities to get the word out about VWWP by working with the local media. Recently the VWWP Region V (Tidewater) Coordinator participated in a



*Resource Specialists, Daphne Eaton, Jackey Miles and VWWP Regional Coordinator, Thea Lawton, on outreach visit in Courtland, VA.*

live on-line chat sponsored by the Daily Press in the Hampton Roads area. The team also briefs the Navy Fleet and Family Transition Assistance Program on a monthly basis, reaching over 200 service members per month. Initiatives are in place to begin providing information during the Army Career Alumni Program week that each soldier attends prior to exiting the military. This region is also fostering strong faith-based connections and has worked closely with the local Crisis Intervention Teams. Region V will be joining the local Reentry Council to work with veterans who are transitioning from the criminal justice system. Currently a request to conduct "Operation Military Kids-Ready, Set, Go" training is being reviewed.





## **Tiger Teams**

VWWP Tiger Teams comprising Regional Directors, Regional Coordinators, Resource Specialists and Peer Specialists were formed in the early summer to work on the priority issues identified at the 2010 Virginia is for Heroes Conference and to push the VWWP toward services expansion and program evolution. The priority projects are each tied back to a specific VWWP Goal and Objective. Three teams are currently functioning:

- Rural Health Outreach
- Improving Access to Assessment and Treatment
- Developing Community Resources through Education and Outreach

Regional Directors serve as Team Champions. Each team has a Team Leader who is one of the Regional Coordinators. Team members volunteer to serve because of their particular interest or expertise in the subject. The teams communicate regularly by e-mail and conference call. Their progress is reported at each VWWP Quarterly Team meeting.

### **Rural Health Outreach**

**Team Leader: Camilla Schwoebel, VWWP Region I Regional Coordinator**

The Rural Health Outreach Team's charge is to address the VWWP Goal: Ensure that all Veterans and their families have access to screening and treatment. Their objectives are to eliminate logistics barriers such as transportation and child care and to create access that is available when needed. Early on in its work, this Team determined that it would like to produce the following three short range products: (1) Evaluate and catalog the existing gaps in mental health and traumatic brain injury services in the rural areas of Virginia, (2) develop a comprehensive directory of existing resource and programs, and (3) provide suggestions for ways to overcome service gaps and barriers.

Among the challenges to goal achievement are the lack of public transportation, costs of either public or private transportation and time involved in travel to medical or treatment services. In addition, a major barrier identified by the Team is the lack of knowledge of existing services and resources for both veterans and providers. The Team believes that a comprehensive veterans resource guide is needed.

The Rural Health Outreach team has met with the VA Rural Health Initiative staff from Richmond, Salem and Hampton VAMCs and has made progress in evaluating existing gaps and barriers to services in rural Virginia. Their initial recommendations are to develop a transportation information data base modeled after the data base already in use by the VWWP in Southwestern Virginia. Once developed, the transportation data base could be added to the VWWP website. This effort will require the recruitment of volunteer labor in each region. In addition, the Team is working on improving the veterans data available in the Virginia 211 System. Other areas of focus include continuing to evaluate and make recommendations on addressing the limited numbers of mental health professionals in rural areas, the limitations of the VA Community Based Outpatient Clinics and the lack of computer and internet access by Virginia veterans and their families who live in rural areas.





### **Improving Access to Assessment and Treatment**

**Team Leader: Ed McIntosh, VWWP Region IV Regional Coordinator**

This team is focusing on the VWWP Goal: Ensuring that all veterans and their families have access to screening and treatment. Their objectives are: (1) to establish a streamlined qualification mechanism for access to local services, family services and children's services that incorporates one stop processing and agreed upon protocols and (2) to create access that is available when needed. The team has discussed the following issues: (1) How to incorporate "one stop processing", (2) What is the best role for VWWP to play, and (3) Which agencies currently perform "one stop processing" in some form? The team has identified system partners at the federal, state and local levels. Policies affecting outcomes have been reviewed as well as current best practices across the country. Human resources, financial resources and material resources to implement desired outcomes have been identified. The team recommends that the way ahead is to measure the in-kind community-based services currently being contributed to the VWWP effort, incorporate outcome measures into the mental health interventions being provided directly by VWWP, continue to work with community partners to identify barriers to appropriate mental health assessments and treatment, and to design interventions that are family focused. Suggested projects for future implementation include additional peer mentoring, more peer-led support groups, more couples' workshops, continued outreach and service delivery with college/university partners and development of a network of pro bono legal service providers similar to the William and Mary disability law clinic.

### **Developing Community Resources through Education and Outreach.**

**Team Leader: Thea Lawton, VWWP Region V Regional Coordinator**

This teams' charge is the VWWP Goal: Ensure veterans and their families understand the symptoms and signs of PTSD and TBI so that they will seek help and treatment when needed. Their objective is to create a marketing, outreach and public education program geared toward communities. Their desired outcomes and products are to (1) engage veterans services organizations in the marketing to and education of the veteran and their families, (2) use YouTube videos, electronic media and social media as well as military newspapers to provide region-specific information, (3) hold events that attract participants with food and provide information on PTSD (4) produce quarterly updates about VWWP with a PTSD fact/information tidbit, and (5) develop a pocket guide with symptoms of PTSD and where to go for help. Partners at the federal, state and local levels have been identified as well as a thorough review of federal, state and local policies affecting the outcomes. Current best practices have been reviewed as well as federal, state and local initiatives. The team has identified necessary human, financial and material resources to achieve the desired outcomes and see the way ahead as focusing on some achievable, short-term projects. Suggested projects include: (1) developing a veterans' resource card with PTSD information, (2) increasing VWWP presence on social networking sites, (3) developing a speakers bureau, (4) contacting editors/publishers of military newspapers proposing articles and guest columnists, and (5) developing a VWWP virtual newsletter.





## Grants

VWWP, in partnership with DBHDS was awarded a federal grant of \$71,250 from the Virginia Department of Criminal Justice Services to fund a targeted educational program for judges, court personnel, and other criminal justice partners across the Commonwealth. This project will train relevant personnel about the unique characteristics, symptoms and options for addressing the needs of active duty military personnel, Guardsmen, Reservists, and veterans affected by the spectrum of combat stress, PTSD, and TBI and those at risk for involvement or involved in the criminal justice system. The grant can be renewed for up to 4 years.

Partnering with the Virginia Department of Health, Office of Rural Health, VWWP was awarded a federal grant of \$296,667 from Health Resources and Services Administration (HRSA) for *The Flex Rural Veterans Health Access Program*. The three-year grant will provide approximately \$300,000 per year to expand VWWP throughout Southwestern Virginia, in partnership with the rural health networks and primary care partners. These grants were targeted to states with significant veterans' populations and focus on coordinating mental health and primary care through innovative technologies such as telemedicine and telepsychiatry. Virginia is one of only three states funded.

In addition, VWWP and DVS have supported numerous grant proposals for services expansion. Leveraging this support, the Roanoke Office for Total Action Against Poverty was awarded \$200,000 by the U.S. Department of Labor to provide employment services to homeless veterans. In addition, DBHDS was awarded a two year Justice and Mental Health Collaboration Program competitive grant from the Department of Justice to expand the Cross Systems Mapping Initiative. Cross Systems Mapping is a collaborative effort, under the Commonwealth Consortium for Mental Health and Criminal Justice Transformation, led by the Department of Criminal Justice Services and the DBHDS. Participants in Cross Systems Mapping workshops identify services available in a locality, referral sources and referral patterns and the community resources needed to expand the effectiveness of services delivery. These workshops have been focused on services for persons with serious mental illness. Partnership with VWWP has resulted in the behavioral health needs of veterans and families being added as a critical element of the local analysis. The grant will increase the number and frequency of Cross Systems Mapping Workshops and expand their focus on issues impacting veterans, women, the homeless and reentering offenders with behavioral health disorders in the criminal justice system.

VWWP in partnership with the Office on Volunteerism and Community Service within the Virginia Department of Social Services is developing a grant proposal that will be submitted to the Corporation for National and Community Service in January, 2011. If funded, the AmeriCorps grant would fund a Virginia Veterans Corp Program. This program would place a full time AmeriCorps Director and either full time or part time AmeriCorps members within VWWP and partner organizations for expanding services to veterans and their families. The plan is to establish a pool of "navigators", who would help veterans and families access services for healthcare, behavioral health care, social services or other individual and family needs. The navigator would be a trusted friend who has knowledge of community resources and the ability to help the veteran and family access whatever services are needed to maintain a good quality of





life and to participate actively in their communities. The Veterans Corp program will be designed to begin operations in the VWWP Region V, Tidewater area, but plans are to expand the program statewide in subsequent years.

### Expanded Outreach

In order to improve access to services, VWWP launched a statewide public information campaign entitled, "We Are Virginia Veterans." The campaign outreach includes an interactive website, <http://www.WeAreVirginiaVeterans.org>, printed brochures and display boards, public service announcements and other contemporary communications tools. VWWP is also working collaboratively with operators of numerous resource databases – including 2-1-1 Virginia – to ensure that veterans and service providers have access to information that is accurate and current.





## **Conclusion**

VWVP has made great strides since its inception in 2008. The past year has been one of expansion and programmatic growth. 2011 holds great promise for continued expansion, particularly in Southwestern Virginia, increased public awareness and outreach, and continued development of public and private partnerships to foster the expansion of services and community support for veterans and their families. The VWVP team across the Commonwealth is honored to continue to build a community of strength for military service members, veterans and their families.

