



VETERANS INTERGRATED SERVICE NETWORK 3

VETERANS ADVOCACY COUNCIL FOR MENTAL HEALTH

NEWSLETTER

Volume 7 Issue 2 Summer-Fall 2014

THE SECRETARY VISITS THE VA VISN3 BRONX CAMPUS



On Nov13, VA'S new Secretary, Robert "Bob" McDonald, visited the James J. Peters VA Medical Center.

(Continued on page 2)

VHA Healthcare Benefits and Services for Women Veterans –

Did You Know?

Women currently make up approximately 15% of all active duty military, and 18% of the Reserves and National Guard. Women Veterans are expected to be the fastest and most steadily growing subpopulation within VHA over the next decade.

In our VISN 3 network, almost 6% of our Veterans actively receiving care are Women, and

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(Continued from page 1)



Arriving at approximately 8am, the early rising former Army Paratrooper and West Point Graduate, met with senior staff for a briefing on Medical Center operations. Following the briefing, the Secretary took an extensive tour of the facility. The highlight of the visit was an open forum, during which he took questions and provided answers for a crowd of almost 100 Veterans and family members. The VACMH was represented by the Veterans Consumers Advocates Council, Co-Chair, Hector Class and acting secretary, Charles Witherspoon, both pictured above as the Secretary entered the forum. At the end of the forum, Secretary McDonald and his staff, left the facility for a tour of the Patriot House, a Bronx Single Room Occupancy for Veterans.

IN THIS ISSUE:

- * VA SECRETARY VISITS THE BRONX CAMPUS
- * SERVICES FOR WOMEN VETS
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- * HOMELESSNESS LINKS
- * MICHAEL SABO RETIRES
- * MARA DAVIS, ACTING DIRECTOR
- * MHV/ VA APS

THE VISN3-VACMH MISSION IS:

BUILD A WORKING ALLIANCE BETWEEN VETERANS AND ADMINISTRATION TO ENSURE THE DELIVERY OF THE HIGHEST QUALITY OF MENTAL HEALTH SERVICES.

FOSTER AND EXCHANGE VETERAN/ STAKEHOLDER ADVOCACY THROUGH THE EXCHANGE OF INFORMATION.

STRIVE TOWARD A WELL-INFORMED VETERAN POPULATION THROUGH EDUCATION ON CURRENT TREATMENT MODALITIES AND PROGRAM POLICIES.

ENSURE THAT "BEST PRACTICES" IN MENTAL HEALTH PROGRAMS IN VISN 3 ARE SHARED BETWEEN ALL FACILITIES OF VISN 3.

THIS WOULD INCLUDE USE OF A COMMON VETERAN SATISFACTION SURVEY FORMAT.

THE VISN3-VACMH PRIORITY TASKS:

- HOMELESSNESS
- WOMENS ISSUES
- PHARMACY
- COMPUTERS / MHV
- TRANSPORTATION
- OEF / OIF / OND
- EDU / INFO SERVICES
- VETERANS JUSTICE OUTREACH

VISN#3 VACMH

EXECUTIVE BOARD

REPORT

@The Veteran Advocacy Council for Mental Health was formed in 1996.

@Currently the VISN3 VAC is the oldest VISN Council in existence;

UPDATES:

•The next VISN VAC Face to Face meeting to be held 04.08.2015 at the Brooklyn VA Campus.

The VAC re-elected Howard Wunderlich for Co-Chair and newly elected Kat Hairston resigned.

NEWSLETTER:

• VISN3 VACMH's newsletter is now published on the (VISN3 MIRECC/ RECOVERY) webpage.

• VACMH newsletter volume 7 issue 2 highlights the The Together Strong, mobile App

• Would appreciate support from MHEB members on getting it distributed..

• MHEB and all mental health staff are welcome to write articles for the VISN 3 VAC newsletter.

• See the editor, Charles Witherspoon

VACMH 10.08.2014

FACE TO FACE

- Montrose, HV VA
- Newsletter
- By-laws

NEXT STEPS

- Following successful conference in Fall 2013, VAC members are reviewing next steps
- **Developing leadership cadre of VAC?**
- Members to engage further with not for profit organization focused on advancing leadership skills
- Discussion of future conference topics focused on specific leadership skills & techniques
- Better understanding of the use of emotional intelligence in leadership roles .

PROJECTS THAT THE VAC IS ACTIVELY WORKING ON:

- MyHealtheVet: All members are polled to see if they have signed up for MyHealtheVet.
- VERA: Veterans are working with their primary care providers to ensure that they are "vested" in the system.
- Women's health issues
- Site visits.
- V-Caring : Advocacy/ Leadership Cadre

SUPPORT FROM MHEB:

- Newsletter – please consider writing a story of your accomplishments in Recovery Transformation
- Encourage local mental health leadership to attend

local meetings

• Ann Feder commended facilities on their efforts to hire MH staff. Presented the new Together Strong App.

ACTION ITEMS FROM MHEB:

- Request from MHEB to help Veterans access Women Veteran Program Managers if there is a need
- It is requested that the MHEB receive a courtesy copy of annual reports before being submitted to Michelle Smith.
- A VISN Annual Report will be submitted once all local reports are due.

• Look for ways to increase membership at all VAC's.

REPORT TO THE MHEB

- **BY-LAWS**
- Completed and invite the MHEB to review before they are published for their advice/ input
- Co-chairs elected
- VAC member participation in RAM conference 5/19/14 planning.
- **Howard Wunderlich commended for his invaluable service to the RAM.**

MIRECC Overview MHEB.pptx

VACMH EXECUTIVE BOARD

TBA

VISN VAC MEETING

December 10, 2014

1. Call to order: Dr. Green
2. Introduction of members and guests:
 - Hudson Valley
 - Bronx
 - Brooklyn:
 - Manhattan:
 - New Jersey Lyons.
3. Review of minutes:
 - Tabled
4. Resignation of Co-Chair:
 - Kat submitted her resignation to the council
 - Volunteers were asked for to fill the position and a suggestion was made to distribute a letter defining the position.
 - It was recommended that we move forward in getting a new Co-Chair in February at the face to face meeting.
5. Face to Face meeting:
 - Brooklyn is going to switch meeting location and date with the Bronx or look for an alternative date sometime in February on when the meeting will be held in Brooklyn.
 - A request was made to ask the VISN Director and the Chief of Finance to attend the meeting.
6. Administrative Coordinator Position:
 - It was suggested that the position be for two years and that it be rotated between Hospitals. One individual would have it for three months then share it for one month with the next person to have the position, then that person would have it for three months and so on. It would be a LRC and a Veteran. Further discussion will be held.
7. Veteran Choice Card:
 - All information regarding usage of the card will be contained with accompanying paperwork.
8. LRC Report:
 - The LRCs national group is putting together a product for training along with the Employee Educational Center, voiced by Charles with Ellison Terry presenting for the LRCs.
9. Site Reports:
 - Bronx:**
 - Every two weeks a table was set up for interaction between the VAC and the Veterans.
 - Mrs. Murray, women's program coordinator (suicide) spoke for female Veteran care projects and gave an overview of her position so that the Veterans would understand the services provided.
 - New travel policies have been enacted.
 - New computer lab is now operational.
 - Brooklyn:**
 - VAC meeting addressed homeless issues (5,000 counseled, 2,000 of which were in shelters).
 - Cameras do not work in the back parking lot.
 - ITP was recognized for their work.
 - Manhattan:**
 - Suicide prevention and housing information updated on their Facebook page.
 - Revised by-laws for Chair and Co-chair persons.
 - Recruiting Veterans for more interaction with (comps)
 - Hudson Valley:**
 - Recruitment and retention of membership was discussed.
 - More recreational activities on weekends and on off hours. This item to be revisited in 2015.
 - New Jersey:**

VETERANS ADVOCACY COUNCIL FOR MENTAL HEALTH NEWSLETTER VOLUME 7 ISSUE 2 SUMMER-FALL 2014

The Stand Down in Morristown took place.

Hallway of Heroes is currently a work in progress. Further information for the grand opening will be provided;

Holiday Express continued their tradition of having a major event for Veterans to celebrate the holidays. Approximately 200 Veterans attended,. Disco Santa as usual was the highlight of the show. Everyone had an wonderful time, some of the volunteers were Veterans who attended in the past.

10. Late Agenda Items: None

Meeting was adjourned at 2:00 p.m. John L was thanked for taking the minutes.

LEON GREEN, PH.D.
STAFF LAISION

HOWARD W.
CO-CHAIR

MICHELLE SMITH
ADMIN COORDINATOR

VISN 3 VETERAN ADVOCACY COUNCIL FOR MENTAL HEALTH

January 14, 2015

AGENDA

Call to order

Welcome to the Bronx

Bronx VA

Lunch

Acting Network Director

Ms. Mara Davis

Review of Minutes

Co-chair nominations

By-Law Review

Administrative coordinator Position

LRC Report

Newsletter Update

Local VAC Reports (3 minutes per site)

Late Agenda Items

Future Agenda Items

(Continued from page 1)

45% of them are age 44 or under. This age group of women is characterized as the childbearing years.

We have seen a significant increase in pregnant women Veterans in our VISN over the past 4 years. Although VHA does not offer their own OB service, maternity care is a covered benefit for women Veterans.

Women Veterans who are diagnosed as pregnant by their Primary care providers will have a Non-VA care consult placed by that provider. They are then referred to a Non-VA OB/GYN provider [through our Non-VA or fee care office] for their maternity (OB/GYN) care. The WVPM's at each facility will assist with coordinating their care, they are:

JJP: Angela Crafton-Murray, LCSW

NJ: Janine Decker, RN

HV: Lauren Incontrera, RN

NYH: Catherine Nadal, RN (Manhattan Campus)

Betsy Ruiz, RN (Brooklyn Campus)

NOP: Rose Williamson, LCSW

For more information, call your local VISN 3 facility and ask the operator to connect you with the Women Veteran Program Manager, or ask for them by name.

Additional services and treatments that are available to treatment eligible women Veterans include:

- Preconception counseling;
- Maternity care coordination,
- Emergency contraception,
- Birth control,
- Evaluation for infertility services,
- Consultations for genetic counseling,
- Nutritional counseling,
- Weight control counseling,
- Mental health services,
- Family caregiver support.

Women Veterans: you served, and as part of your VHA benefits you have designated Women's Health providers available at each VISN 3 location to provide you with comprehensive

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healthcare services. If you are interested in enrolling with a designated Women's Health provider for your outpatient primary care and annual women's health exams, the Women Veteran Program Manager at your facility can assist you with that as well.

[Manhattan facility, VA offer private place for female veterans ...](#)

VA Launches Hotline to Answer Questions on VA Health Care and Benefits for Women Veterans *1-855-VA-WOMEN (1-855-829-6636)*

WASHINGTON – The Department of Veterans Affairs has launched a new hotline — 1-855-VA-WOMEN — to receive and respond to questions from Veterans, their families and caregivers about the many VA services and resources available to women Veterans. The service began accepting calls on March 27, 2013.

“Some women Veterans may not know about high-quality VA care and services available to them,” said Secretary of Veterans Affairs Eric K. Shinseki. “The hotline will allow us to field their questions and provide critical information about the latest enhancements in VA services.”

The hotline is staffed by knowledgeable VA employees who can provide information about benefits including health care services for women. Callers can be linked to information on claims, education or health care appointments as well as information about VA cemeteries and memorial benefits. Staff can answer urgent questions and provide referrals to homeless and mental health services as well as provide Vet Center information.

Women make up nearly 15 percent of today's active duty military and 18 percent of National Guard and Reserve forces. The population of women Veterans using VA benefits including health care is growing rapidly. Since 2000, the number of women using VA health care more than doubled, from nearly 160,000 in 2000 to more than 354,000 in 2012. Based on the upward trend of women in all branches of service, the number of women Veterans—and female VA users—will keep climbing.

VA is committed to making improvements for the growing population of women Veterans, including the way it communicates with them. In 2010, VA established an outbound call center to contact women Veterans and encourage them to enroll in VA health care.

“In VA health care alone, women constitute only 6 percent of VA patients, but those Veterans have a high perception of the quality care they are receiving,” said Irene Trowell-Harris, director of VA's Center for Women Veterans.

“Many women who served don't self-identify as Veterans and therefore don't think they qualify for VA benefits. We need to correct existing misinformation and misperceptions so we can serve more women Veterans with the benefits they've earned.”

Women Veterans are entitled to apply for the same benefits as their male counterparts, which include health care and pharmacy benefits as well as education benefits, disability compensation, home loans, employment assistance and more.

The hotline (**1-855-VA-WOMEN**) joins numerous other VA hotlines that provide critical information and assistance to Veterans, such as those for Veterans in crisis and in danger of becoming homeless. Veterans can also receive information and apply for benefits online at VA's www.eBenefits.va.gov and manage their health care at MyHealthVet.va.gov.

TOGETHER STRONG



VISN3 has launched a new Free Mobile App you have to see! The Together Strong, mobile App (also available via the Internet), uses virtual humans and gaming technology to help veterans and service members learn what to say and do when a peer is struggling with the adjustment to civilian life. The App is available in the NY/NJ area indefinitely and elsewhere through the end of December. Once you download the App, it's yours to keep. You can download it to your personal mobile device using the following links:

Apple App Store: <https://itunes.apple.com/us/app/together-strong/id903930751?mt=8>

Google Play Store: <https://play.google.com/store/apps/details?id=com.kognito.v2v>

The program is available via the Internet at: www.jointogetherstrong.com

I can also tell you that it can be very meaningful to anyone who uses it – not just Vets. The first time I practiced with the various scenarios I made some very bad choices in selecting discussion points. The program helped me learn that saying the wrong thing, at the wrong time, will not help – and may actually have negative consequences. By trying other approaches, and with subtle coaching from the App, I changed the way I would approach a friend who was struggling with thoughts of suicide, or other emotional issues. It was designed for service members and Vets, but it offers suggestions that are totally applicable to anyone struggling with emotional issues.



Formally Announcing the

NEW Online VA Prescription Tracking Feature

on My HealthVet

On September 21, 2014, My HealthVet and the Consolidated Mail Outpatient Pharmacy (CMOP) executed a “soft launch” (meaning no public announcements, campaigns, etc.) for the new Online VA Prescription Tracking feature. Without any publicity, this “soft launched” feature was getting approximately 1,000 hits per day.

On October 25, 2014, the functionality was enhanced while we remained in a *soft launch*. Due to higher visibility of this feature, usage grew and we recorded between 3,000 and 5,000 hits daily.

Today, the My HealthVet and CMOP teams are proud to ***formally announce the successful implementation of this Presidential SAVE Award***, and begin marketing and communication of this feature to VA patients and staff. VA patients will receive postcards in their CMOP prescription packages between December 8, 2014 through January 23, 2015 informing them of this new feature.

Starting on December 13, 2014 with the My HealthVet 12.11 release, there will be a *new* icon on the My HealthVet Pharmacy landing page titled *Prescription Track Delivery*. This icon will take users to a new *Prescription Track Delivery* page. Also, the Track Delivery feature was enhanced to add a *View Image* hyperlink that will display an image/photo of the medication being tracked.

VA Apps

Newly Released Apps

<https://mobile.va.gov/>

MANHATTAN VETERANS
ADVOCACY COUNCIL



MVAC MINUTES 12-2-14

Members in attendance: Anthony J. Williams, Michael Sweeney, Domingo Vega,

Gregory Gardner, Harvell Ford, Anthony Stamatouras, Margarete Turner

Fletcher Conde, Raymond Wright, George Hicks, Fritz Fils-

Aime

Greg motioned to accept the minutes as read with the needed changes. George 2nd. It. Michael went to MOVA for information and was told to make an appointment. Chair indicated that a call will be made to the Mayors office to see why the information was not made available. Members read and approved the By-Laws changes with a 2/3rds vote. The By-Laws were signed and made official. The survey that was done before storm Sandy and George made a recommendation that the Council need to review the information. It was 2nd. By Michael. Veteran Margarete spoke on her experience dealing with other female veterans. Raymond thanked the council for their support during his health issues. He was unable to make a lot of meeting because of his health. Fritz talked about his organization (HAVA) and his experience trying to get health care and benefits for veterans living in Haiti and other parts of the world. The council then spoke on information needed for MVAC in the lobby for 2015. Travel for Margarete who lives in Staten Island came up so that she can get home safely after the next face to face.

Mike made a motion to adjourn. George 2nd it.

Chair Anthony J. Williams

MANHATTAN VETERANS
ADVOCACY COUNCIL



MVAC MINUTES 12-16-14

Members in attendance: Anthony J. Williams, Michael Sweeney, Mario Valle,
George W. Hicks, Harvell Ford, Anthony Stamatouras

Mike motioned to accept the minutes as read with the need changes. Domingo 2nd. It. Veterans benefits from New York State were review. George spoke on the medical lab material that was being transported on patient passenger vans. Tom made a recommendation that a special compartment be made to house the items. Members felt that the material is hazardous and not safe in coolers. There were conversations on recruiting new members to the council, including women veterans. Suggestions were made by Chair to invite members of Veteran Service Organizations and other organization for participation in the council. The Co-Chairperson Harvell Ford spoke on his activities in the hospital, including volunteer services. Anthony and Harvell spoke on the meeting that was held with the people from Washington on the Mental Health Services at New York Harbor. They answered questions including a survey that was done in the pharmacy area and the mental health clinic area. Anthony reported on that the next face to face would not be in Brooklyn. The mission statement and what would be the next steps for the council. The chairperson asked again for a volunteer to be the Secretary of the Council. There were no volunteers. Anthony indicated that the next meeting agenda for January 6, 2014 would be a review of the By-Laws especially Article III Membership.

George made a recommendation to Adjourn, second by Domingo.

Sign: Anthony J. Williams

MANHATTAN VETERANS ADVOCACY COUNCIL Oct. 2014



Staten Island resident and MVAC Member Margherite Turner WWII Veteran, and Korean War Veteran Ed Bergendahl participated in the 90 year old Brooklyn Cyclones First Pitch ceremony opening the August 22 evening ball game. Billed "From The Greatest to the Latest Generation of Veterans", the event involved Ms. Turner and Veterans from each of the more recent conflicts passing the ball from one to another, until it was pitched by an Afghanistan Marine Corps Veteran. Transportation for Ms. Turner to and from the game was provided by the United War Veterans Council.



On August 20, 2014 MVAC Co-Chairman Harvell Ford presented to Compensated Work Therapy Program (CWT) Coordinator

Carmen Nieves a certificate of appreciation. The CWT team came to the meeting to explain the different CWT programs at the VA.

Carmen Harvell Latoya



Harvell Greg Margherite Mike



During the month of September 2014, members of MVAC setup two tables setup in the lobby of the Manhattan campus for Suicide Prevention Month. On the table was information on the Veterans' Crisis Hotline, My Healthvet and ebenefits, housing, jobs, and information relating to Veterans' benefits and other health care services.

MVAC spent one day per week out of three weeks for the month of September 2014. There were between 200 and 300 Veterans, care givers and family members who stopped by for information, and conversation.

MVAC also received an invite from John Jay University to setup a table at the school.



Anthony Mario

SURVEY BY MARIO VALLE

During the MVAC Learning Center experience the Chairman sent out text messages to the membership. One text message was that MVAC needed a count of how many Veterans used the center. Out of count of 733 Veterans and family members using the computer system there were only two times when Veterans searched on inappropriate web sites. The Center ended up closing because the computers were not secure.



Anthony Stamatouras - Peer Support Specialist - Clubhouse 17North

THOUGHTS FOR THE MONTH OF OCTOBER 2014

- "Recovery is like a long distance run and an obstacle course. Veterans might fall off, but we need to get back on the truck.
- Hope, choice, empowerment, environment, religion or spirituality helps."

The important thing about this story is that when the Chairman asked for assistance, Mario was there. The official opening for the center is scheduled for October 15, 2014.

December 2014

VA Programs for Homeless Veterans

The United States (U.S.) Department of Veterans Affairs (VA) has made ending Veteran homelessness by the end of 2015 a top priority, undertaking an unprecedented campaign to dramatically increase successful outcomes for Veterans and their families who are homeless or at risk of becoming homeless.

<http://www.va.gov/homeless/dchv.asp>

<http://www.va.gov/homeless/reentry.asp>

http://www.va.gov/homeless/h_pact.asp

<http://www.va.gov/homeless/gpd.asp>

<http://www.va.gov/HOMELESS/dental.asp>

http://www.va.gov/homeless/employment_programs.asp

<http://www.va.gov/homeless/hud-vash.asp>

<http://www.va.gov/HOMELESS/challeng.asp>

<http://endveteranhomelessness.org/programs/safe-havens>

<http://www.va.gov/homeless/events.asp>

<http://www.va.gov/homeless/ssvf.asp>

<http://www.va.gov/homeless/vjo.asp>

Contact Us

To find the VA facility nearest to you, please visit: <http://www1.va.gov/directory/guide/home.asp>

More detailed information on all of VA's Programs for Homeless Veterans can be found on the internet at **<http://www.va.gov/homeless>**.

If you, or a Veteran you know, are at risk of homelessness contact VA's National Call Center for Homeless Veterans at **1-877-4AID-VET (1-877-424-3838)** to speak to a trained VA responder.

#

<http://www.veterantraining.va.gov/aims/>

This online course is based on training that was developed specifically for Veterans and has been successfully used by Veterans and Service Members around the world. This course offers a wide range of practical skills and tools to manage your anger and develop self-control over your thoughts and actions.



**J.J. Peters VAMC
Bronx, NY**



Jan. 1, 2014 to Dec. 31, 2014

2014 Annual Review Veterans Consumers Advocacy Council for Mental Health

Date Council Began: July 9, 2003

Facility information:

The council is based in Bronx, NY which is a borough of New York City.

According to the 2010 U.S. Census, there were **1,385,108** people residing in Bronx, an increase of 3.9% since 2000. The VAMC serves Veterans predominately from the Bronx, but also sees Veterans from other boroughs and nearby Westchester County.

Council Mission Statement:

To provide a forum at the J.J. Peters VA Medical Center for consumers to convey input and receive feedback from the administration about mental health and substance abuse services.

2014 Activities:

The council hosted speakers from within the medical center at the meetings. Speakers were from the Community Living Center, the Women's program, CWT (Compensated Work Therapy) and Suicide Prevention. A speaker from Medical Administration discussed the new Veterans health identification cards, the Affordable Health Care Act and the Vet Connect Kiosks. She returned at another meeting to clarify that means tests have been discontinued. The supervisor of the outpatient mental health clinic came to get suggestions from Veterans for upcoming programs.

Veterans from the Council gave out information about the council at a job information fair, at the hospital fair and at tables set up in the lobby for Mental Health Awareness Month, Mental Health Illness Week and in December. They attended the Family Informational Fair and the Mental Health Summit. One council member presented at the Mental Health Summit on the National Resource Directory. He also represents the council at the Mental Health Executive Board, at a housing coalition meeting and produces a newsletter for the Veterans councils in VISN 3. Two council members were present to hear the new Secretary of the VA speak when he came to the Bronx and attended a meeting of the hospital director.

The Council worked with the Police to ensure driver respect of a walkway leading through a driveway in front of the hospital.

One of the co-chairs and the Veterans Outreach Coordinator spoke to Community Board 5 in the Bronx about VA services and the work of the council.

The Council encouraged Pharmacy to have a program which consisted of booths on new medications, how to dispose of medications and sharps, diabetes, MyHealthVet and low vision equipment to help Veterans in taking their medication. Volunteer Services provided refreshments for Veterans and about 100 people attended.

A vote was taken in December for co-chairs and a secretary.

Veterans Mental Health Council Information Sharing to the Medical Center:

The council experienced leadership issues which were shared with leadership in Mental Health, the Director's Office and the VISN 3 Veterans Advocacy and Executive Councils. They gave suggestions to the council and staff liaison. The council resolved some of the issues by voting. One of the co-chairs and another council member met with the hospital director.

Suggestions/Goals for Fiscal Year 2015:

Form a committee to make changes in the by-laws.

Distribute Robert's Rules of Order in Simplified Form to promote decorum at the meetings.

Work on recruiting and retaining Council members. Have tables in the lobby more frequently. Promote a council priority task on each occasion.

Create more awareness on issues concerning female Veterans.

Encourage the Pharmacy to have another program.

Develop a mentorship program for suicide prevention.

Have a speaker from Housing Court about how to prevent evictions.

Consider inviting the Metro Card bus which provides information on public transportation, Metro Cards and Access-A-Ride.

SUMMER 2014



VOL. 5, ISSUE 3



Mission Statement:

The Veterans Advocacy Council for Mental Health provides a forum for Veterans and Families to identify issues and concerns regarding patients care and treatment. To communicate recommendations to Mental Health Services and the Administration and to advocate for the delivery of the highest quality mental health care available.

'Recovery is a Journey – Not a Cure.'

FAMILY NIGHT @ BROOKLYN PRRC

On Wednesday April 2, the PRRC of Brooklyn had the first Family Night for 2014. This is the third time that they have done this. Tonight they had over 26 family members and Veterans in attendance.

Family Night is done to help the family members of the Veterans in our program meet with the different clinicians to get a better understanding of what their loved ones is suffering from or dealing with after coming home. It is very important that the family members of the Veterans fully understand how to live with Veterans who suffer from various types of Mental Illness. This is also done to show them that they are not alone with whatever issues they are dealing with at home.

This also gives the wives, girlfriends, and mothers or significant others to maybe get together and talk. We have found from having this night, some of the family members also form their own support group, and get together outside of the hospital.

Having such a support group outside of the hospital, they help each other to not only understand the Veterans, but support each other. The Veterans have their own support group amongst each other, so now the other family members have their own also.

Living with someone with a mental illness can cause a strain on one's

family, so having this sort of night helps them to meet others and with the clinicians to try and fully understand their loved ones.

Again this night keeps growing, and was a great success. We look forward for the next one in a couple of months.

Other family programs available are as follows: OEF/OIF Couples therapy, Care Givers Support program, Soldier's Project, NYU Family Program-855-698-4677, Give an Hour, North Shore LIJ's Rosen Family Wellness Center-516-562-3260 and also every Vet Center has a Family/couples therapist.

For more information on counseling, one may contact the Veterans Hospital. Also, remember that a psychiatrist is always available 24/7 in the emergency room of the hospital. If one is thinking of harming themselves, they may call the Veterans Crisis Line at 1-800-273-8255 PRESS 1.

By: Lecia A. Rodrigues-Whyte
Certified Peer Specialist @
The Brooklyn PRRC

JUNE IS PTSD AWARENESS MONTH

PTSD Myths

Posttraumatic stress disorder (PTSD) is a mental health disorder. Many people believe things about mental health disorders that aren't true. Here are some myths about PTSD:

Myth: PTSD is in your head. It does not exist.

PTSD does exist. It is a recognized mental health problem that has been studied for many years. You may get PTSD if you have lived through a traumatic event that caused you to fear for your life, see horrible things and feel helpless. Strong emotions caused by the event create changes in the brain that may result in PTSD.

PTSD has not always had the same name. It also has been called combat fatigue or shell shock.

Myth: Only soldiers or people in war zones get PTSD.

Anyone who sees or goes through a traumatic event can develop PTSD. A traumatic event is a horrible and scary experience. During this type of event, you think that your life or others' lives are in danger. You feel that you have no control over what is happening. These events include violent crimes, sexual assaults, childhood neglect or abuse, and natural disasters such as hurricanes or earthquakes. Your job also could expose you to traumatic events. First responders at a traumatic event, such as firefighters and police, can develop PTSD.

In men, PTSD is most likely after rape, combat, childhood neglect or childhood physical abuse. In women, it is most likely after rape, sexual molestation, physical attack, threats with a weapon, or childhood physical

Brooklyn Campus Veterans Advocacy Council

abuse.

Myth: You should be able to move on after a traumatic event.

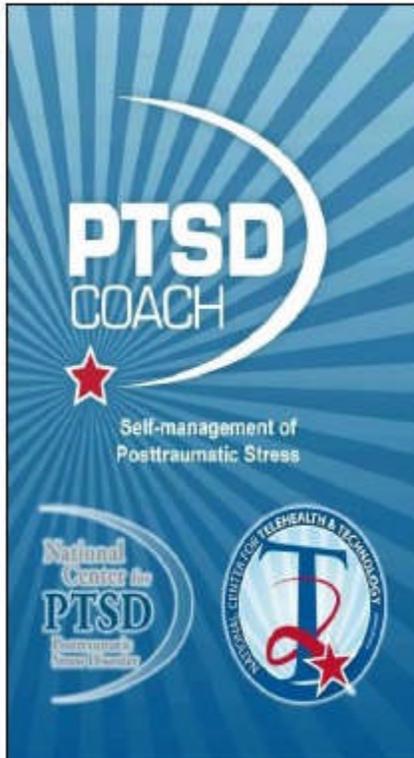
The strong emotions you may feel during the traumatic event can create changes in your brain that result in PTSD. You may not be able to "move on" because of this. It's important to remember that PTSD is a medical condition. People with other health conditions, such as cancer, deal with the condition as best they can. The same is true for PTSD.

Myth: PTSD always happens right after the traumatic event.

PTSD symptoms can develop at any time after a traumatic event. Your symptoms may start soon after the event, or you may not have them until months or years later. They may come and go over many years.

Myth: People with PTSD cannot function.

PTSD can cause severe symptoms, but counseling, medicines, and support all help people adjust. People with PTSD have jobs and relationships. They enjoy life and are active members of their communities.



PTSD Coach was designed for Veterans and military Service Members who have, or may have, Posttraumatic Stress Disorder (PTSD). This app provides users with education about PTSD, information about professional

care, a self-assessment for PTSD, opportunities to find support, and tools that can help users manage the stresses of daily life with PTSD. Tools range from relaxation skills and positive self-talk to anger management and other common self-help strategies. Users can customize tools based on their preferences and can integrate their own contacts, photos, and music. This app can be used by people who are in treatment as well as those who are not. PTSD Coach was created by VA's National Center for PTSD and DoD's National Center for Telehealth & Technology.

Available for Android and iPhone.



VAC members Mario Mannino, Lecia Whyte-Rodriques and Richard Chan present Anne Erikson with a Certificate of Appreciation for her service to the Brooklyn VAC



VAC members Lecia Whyte-Rodriques, Richard Chan and Bertram Hirsch present Elaine Petro with a Certificate of Appreciation for her computer education service to our Veterans at the Brooklyn VAMC for the past nine years.

Brooklyn Campus Veterans Advocacy Council

My HealtheVet

VA offers Veterans, Servicemembers, their dependents and caregivers their own personal health record through My HealtheVet, found at www.myhealth.va.gov.

My HealtheVet's free, online Personal Health Record is available 24/7 with Internet access. Those with an upgraded account (obtained by completing the one-time in-person authentication* process) can:

- Participate in secure messaging with VA health care team members
- View key portions of DoD military service information
- Get VA wellness reminders
- View VA appointments
- View VA lab results
- View VA allergies, adverse reactions and other key portions of their VA electronic health record.
- View their VA Comprehensive Care Document (CCD)

With My HealtheVet, Veterans can access trusted health information to better manage personal health care and learn about other VA benefits and services.

My HealtheVet helps Veterans partner with VA health care teams by providing tools to make shared, informed decisions. Simply follow the directions on the Website to register. VA patients registered on My HealtheVet can begin to refill VA medications online. Veterans can also use the VA Blue Button to view, print, or download the health data currently in their My HealtheVet account. Veterans can share this information with family, caregivers or others such as non-VA health care providers. It puts the Veteran in control of information stored in My HealtheVet. Accessible through My HealtheVet, VA Blue Button also provides Veterans who were discharged from military service after 1979 access to DoD Military Service Information.

This information may include Military



VAC members Lecia Whyte-Rodriques, Bertram Hirsch, Richard Chan with Melanie Zaribi, Coordinator Clubhouse Programs present VAC member Mario Mannino with a Certificate of Appreciation for his unselfish dedication and service to the Brooklyn VAMC Clubhouse.

Occupational Specialty (MOS) codes, pay details, service dates, deployment, and retirement periods.

*To access the advanced My HealtheVet features, Veterans will need to get an upgraded account by completing a one-time process at their VA facility called in-person authentication. Visit My HealtheVet at www.myhealth.va.gov, register and learn more about in-person authentication plus the many features and tools available with Internet access. Veterans with questions should contact the My HealtheVet Coordinator at their VA facility.



The National Center for PTSD invites you to participate in our PTSD Awareness campaign during the month of June to help more Veterans, their families, and community members understand what PTSD is and its effective treatments.

Check out these 6 Ways to Raise PTSD Awareness:
<http://www.ptsd.va.gov/about/ptsd-awareness/index.asp>

We encourage everyone to learn, connect, and share with others. We've made it easy to share the list as a downloadable handout. Please pass it on to everyone you know because working together as a community is how we can truly make a difference.

Brooklyn Campus Veterans Advocacy Council

"Medications for PTSD"

Getting better" means different things for different people, and not everyone who gets evidence-based PTSD treatment will be "cured." But they will likely do better than people with PTSD who were not treated, or who received other kinds of treatment.



Certain medications are considered evidence-based treatment for PTSD. Medications can be used alone or in combination with psychotherapy.

FDA Approved Medications
Two FDA approved drugs for PTSD are sertraline (Zoloft) and paroxetine (Paxil). These are known as selective serotonin reuptake inhibitors (SSRIs) and are often used for depression. SSRIs raise the level of serotonin in your brain, which can make you feel better.

Answers to Questions about Meds

Talk to your doctor about which medications are right for you. Learn about options, what you need to know before taking medications, and potential side effects in Understanding PTSD Treatment. Dealing with trauma-related nightmares? Prazosin is a medication that you can discuss with your doctor. It is a relatively safe medication that can rapidly improve sleep.

To learn more about medications, check out our library of PTSD treatment videos on YouTube.

Be Cautious About the Use of Benzodiazepines
Anti-anxiety medications known as "Benzos" (such as Valium, Xanax, Ativan and Klonopin) should generally be avoided for PTSD treatment. Although they can produce a calming effect, they do not treat core PTSD symptoms and can have harmful side effects.

6 Ways to Raise PTSD Awareness Spread the word!

June is PTSD Awareness Month. We encourage you to spread the word about PTSD and effective PTSD treatment. Here's how.

LEARN PTSD Treatment Can Help

1. Discover the facts. Start with PTSD Basics, key information about trauma, PTSD and treatment options. For a more advanced overview, watch our PTSD 101 Course: PTSD Overview. <http://www.ptsd.va.gov/public/PTSD-overview/basics/index.asp>. We offer many free, in-depth Continuing Education Courses for Professionals as well.

TBI App Now Available: Traumatic Brain Injuries extend far beyond combat veterans, and to meet the needs of Veterans and others who have suffered mild to moderate concussions, the VA has developed "Concussion Coach," a mobile application that provides tools to assess symptoms and facilitate the use of coping strategies. The app is intended to support, not replace professional treatment or rehabilitation therapies.

The app is available for Apple mobile devices and will be made available for Google Play later this year.

6 Ways to Raise PTSD Awareness Spread the word!

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1. Discover the facts. Start with PTSD Basics, key information about trauma, PTSD and treatment options. For a more advanced overview, watch our PTSD 101 Course: PTSD Overview. <http://www.ptsd.va.gov/public/PTSD-overview/basics/index.asp>. We offer many free, in-depth Continuing Education Courses for Professionals as well.

2. **Watch and learn.** Take the mystery out of PTSD treatment. Hear from Veterans and their clinicians at AboutFace, <http://www.ptsd.va.gov/apps/AboutFace/>. Or, take advantage of technology with PTSD Coach Online or mobile apps to help you manage PTSD symptoms.

CONNECT Reach Out to Someone

CONNECT

Reach Out to Someone

3. **Work together.** Promote PTSD Awareness Month with us! We have promotional materials to help you organize event or pass along information on PTSD and effective treatments.
4. **Help someone. Help yourself.** Do you want to find out if you have PTSD or talk about treatment options? Take action for yourself or someone you care about. Learn where to get help for PTSD.

SHARE Spread the Word!

5. **Give support. Get Support.** It can be hard to reach out for help. Read tips on how to overcome barriers to care, and know that there is support for family and friends too.
6. **Share what you learn.** Stay up-to-date and ask us questions about PTSD on Facebook or Twitter. If you prefer email, subscribe to any of our publications: PTSD Monthly Update, Clinician's Trauma Update-Online or PTSD Research Quarterly.

JUNE IS PTSD AWARENESS MONTH

VA HUDSON VALLEY HEALTH CARE SYSTEM



Montrose VAC Unit

Department of Veterans Affairs

VA Medical Centers

Castle Point & Montrose, NY

For the past year, Veterans have been approaching the VACA complaining that there is a lack of activities on the weekends for people in the Substance Abuse, Psycho Social and PTSD Domiciliary. There have also been complaint about a contract housing service on the grounds, called Common Ground lacking activities too. (Common Ground is an private agency so we have more limited ability to influence their activities. Due to the ongoing meeting with Dr Stabinsky, the past few long holidays weekends have had a better schedule of activities. It also ended up having a positive impact on the inpatient units. The challenge is not over, but we are moving forward.

Approved by: George and Steve

Northport VAMC

On Sept. 12, 2014 Howard Wunderlich attended the retirement party for Michael Sabo the VISN 3 Network director which was held at F&J Pine restaurant in Bronx. At the party Howard presented Mr. Sabo a framed certificate of appreciation on behalf of all the Veterans in VISN 3 for Mr. Sabo's efforts in promoting Recovery in all VISN 3 mental health programs and his vision in inspiring other VISNs to do the same. While his presence will surely be missed, Ms. Mara Davis appointment as the temporary VISN 3 Network director will provide a seamless transition and insure that the voice of the Veteran will be continued to be heard in all the programs in VISN 3.



Mental Health Updates – Ann Feder

Development of the Administrative Service Organization (ASO), which is a combined effort between the VA, Robin Hood and Other Service Organizations. The ASO will serve as a “Broker” to coordinate services based on the veterans needs with agencies throughout the city to meet the need. Services for the Underserved (SUS) are the current ASO. This initiative should be up and running by the 2nd week of November.

Together Strong- an interactive web-based peer to peer training which was made in partnership with Kognito Interactive. The training is also available as an app to be used on Android devices such as I-Phones and iPads. It will eventually be available via web on the VA Internet Explorer. So far, the feedback on this training has been very positive.

Facility Updates

Bronx VAMC: Allison Restak has accepted a position as the Bronx Employee Assistance Program (EAP) Coordinator.

Eden and Webster GPD sites are currently out of service. Both sites failed the fire and safety inspection. Volunteers of America (VOA) are in the process of trying to remedy the situation. These issues were sited previously and they were given an interim time line, but they didn't rectify the concerns. These concerns should be rectified by 10/31/2014.

A Daily News Article was recently released about environmental concerns at the E 119th Veterans Residence which is where one of our GPD programs resides. Heather Frey, Julie Irwin and Morjorie White-Ezimoha, Richard Joao (Bronx- Occupational and Safety Manager) along with the VOA leadership visited the site to investigate the allegations.

NY Harbor HCS: Planning for the National OMHO Survey.

Opening of the Utica Place Project Based Voucher site which has 8 units assigned to it.

Financial Audit for GPD is ongoing and is being completed by the Austin Financial Services.

VJO/Police training is currently in progress.

An MOU was developed with Porter Avenue to offer flu shots and give flu training.

Hudson Valley HCS: Robin Bell is the new Mental Health Administrative Officer at Hudson Valley HCS. Paul Stolz is the current acting HUD VASH Coordinator.

Sullivan County and Community Partnerships meeting is scheduled for 10/28/2014 to discuss their homeless proposal.

New Jersey HCS: Nicola Burnett has been selected as the Outreach Program Coordinator for the New Jersey HCS.

Northport VAMC: The VA will be meeting with the NY Legal Advisory Group (NYLAG) and Touro Law School to coordinate legal services that will be provided to the veterans to prevent duplicate of services.

Next Meeting: Monday, Nov. 24th, 2014 at 10:00 a.m.

Morjorie White-Ezimoha, MPH

Web links to Veterans Affairs and Department of Defense Resources

<https://visn3.kognito.com/foh/> *Family of Heroes*, web-based interactive resiliency and PTSD training simulation for families of Veterans in our geographic area. The goal is to assist adult family members support their Veterans' transition to post-deployment life. This includes how to recognize signs of post-deployment stress and to connect them with health services at one of our medical centers.

<http://www.mirecc.va.gov/coaching/>. The Coaching into Care program has unlimited, free coaching with family members or friends to help Veterans address problems and support them in making decisions about care. Callers can reach VA's Coaching into Care program at the toll-free number 1-888-823-7458, 8 a.m. – 8 p.m., Mondays through Fridays.

<http://www.MakeTheConnection.net> features Veterans sharing their challenges and triumphs in working through a variety of common life experiences and mental health problems.

<http://www.eBenefits.va.gov> eBenefits is your one-stop shop for online benefits- Veterans, Service Members, their families, and their caregivers. We invite you to explore eBenefits and become a registered user.

<http://www.ptsd.va.gov> National Center for PTSD

http://www.ptsd.va.gov/public/reintegration/returning_from_the_war_zone/guides.asp Guide for families and a guide for service members returning from the war

<http://www.afterdeployment.org> Wellness resources for the military community: you can click on post traumatic stress, depression, anger, sleep, anxiety, alcohol & drugs, tobacco, physical injury, mild traumatic brain injury, life stress, stigma, resilience, military sexual trauma, health and wellness, families with kids, spirituality and work adjustment

<http://www.militaryonesource.com> Education, relocation, parenting, stress: Military OneSource helps with just about any need. Free service for active-duty, Guard, and Reserve service members and families. Offer translators and translation of materials. Telephone: 1 800 342-9647

<http://www.woundedwarriorresourcecenter.com> 1 800 342-9647 Connecting Wounded Warriors, Service Members, Veterans, Their Families and Caregivers with Those Who Support Them: provides access to services and resources at the national, state and local levels to support recovery, rehabilitation and community reintegration. Visitors can find information on a variety of topics including [benefits & compensation](#), [education & training](#), [employment](#), [family & caregiver support](#), [health](#), [homeless assistance](#), [housing](#), [transportation & travel](#), [volunteer opportunities](#) and [other services & resources](#). For help on how to find resources on the site, visit the [How to Use this Site](#) section of the NRD.

<http://www.VeteransCrisisLine.net> or 1 800 273-TALK (8255): 24/7 crisis line and online chat. In crisis, text 83-8255 free of charge to receive confidential, personal and immediate support.

Evidence-Based Practices: <http://www.mentalhealth.va.gov/> <http://www.ncptsd.va.gov/ncmain/veterans>

www.sesamestreetfamilyconnections.org This interactive Web site, similar to the social networking site Face book, will allow soldiers, sailors, airmen, Marines and their families to stay connected in a safe and nurturing environment surrounded by their favorite Sesame Street friends.

Whether the distance between military members and their loved ones is due to deployment or the recovery from an injury sustained while deployed, the "Family Connections" Web site offers young children an online environment to stay connected, while offering tools for the entire family to aid in the recovery of the visible and invisible wounds of combat.

For DD214 (military discharge): <http://www.archives.gov/veterans/military-service-records/get-service-records.html>

www.myhealth.va.gov Access VA health care, renew meds., journal health info.

<http://t2health.org/apps> Mobile apps:

Breathe2Relax: A breathing exercise built on the iPhone mobile app platform. It decreases the body's stress response, and helps with mood stabilization, anger control, and anxiety management.

A user can record his stress level by swiping a small bar to the left or to the right. Breathe2Relax uses state-of-the-art graphics, animation, narration, and videos to deliver a sophisticated, immersive experience for the user.

(Continued from page 24)

Web links to Veterans Affairs and Department of Defense Resources

PTSD Coach: **Self-Assessment** of symptoms with individualized feedback, and ability to track changes. **Coping skills** with relaxation and self-help techniques. **Support:** Identify personal sources of emotional support, add phone numbers, and link to treatment programs. **Emergency link** to the Veterans Crisis Line.

T2 Mood Tracker: Monitor over time your emotional experiences associated stress, brain injury, depression & anxiety. With each rating, notes can be added.

Tactical Breather Gain control over your responses to stress. Many of the techniques were provided by Lt. Col. Dave Grossman, author of [On Combat: The Psychology and Physiology of Deadly Conflict in War and in Peace](#).

Talk to another warrior or combat Veteran: 1-800 WAR VETS or 1 877-927-8387

Useful book for clinicians: [Combat and Behavioral Health](#) free download:

http://www.bordeninstitute.army.mil/published_volumes/combat_operational/combat.html

www.dtic.mil/doctrine/dod_dictionary Department of Defense Dictionary of Military Terms

www.defense.gov/specials/insignias Officer and Enlisted Ranks

Social Security Announces New Online Service for Replacement SSA-1099s

Available to Recipients with a my Social Security Account

Carolyn W. Colvin, Acting Commissioner of Social Security, today announced the agency is expanding the online services available at www.socialsecurity.gov. Social Security beneficiaries are now able to quickly and easily obtain a replacement SSA-1099 from the agency's website with a my Social Security account.

"I am proud of our continued efforts to make it even easier for people to do business with us in a way that's convenient for them, from the comfort of their home, office, or a library," Acting Commissioner Colvin said. "Beginning this tax season, any my Social Security account holder who misplaces their original SSA-1099 will be able to request an instant replacement from our menu of online services."

Social Security sends SSA-1099s each January to everyone who receives Social Security benefits. It shows the total amount of benefits paid in the previous year and is used for tax purposes. Previously, people who lost their SSA-1099 had to call or visit a Social Security office to get a replacement or request one be mailed to them. With this new online service, people now only need to create a my Social Security account, or log into their existing one. Once there, they can view and print their SSA-1099 or request to have a new one mailed to them—all online.

my Social Security is a secure, online account people use beginning in their working years and continuing throughout the time they receive Social Security benefits. Once the account is created, it is used by people who are working to keep track of their earnings and to get estimates of future benefits. People already receiving benefits manage them with their account—changing their address, starting or changing direct deposit, getting a benefit verification letter, and more. In addition to those existing services, beneficiaries will now be able to immediately get their SSA-1099 replaced without needing to call or visit an office and often wait for a replacement form in the mail.

"Setting up a my Social Security account is quick, easy, and secure; plus it's a great way to do business with Social Security," Acting Commissioner Colvin said. "That's why more than 16 million people have already taken advantage of our award-winning online services and experienced the new features available with their own accounts."

In fact, a new my Social Security account is created every six seconds. For more information, please go to www.socialsecurity.gov/myaccount.

VACMH



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PS: A HAIL AND HEARTY THANKS TO OUR CONTRIBUTORS AND A HAPPY 2015 TO US ALL!!!

Disclaimer: The opinions in the editorials and articles are the opinions of the writers. The VISN3 VACMH does not necessarily agree or disagree with the opinions within but as Veterans, we do support the right of each person to have his or her own opinion.