

VHWC Advisory Council Meeting Summary 8/2/24

1. Welcome

Kathleen Oberst welcomed participants to the meeting. Members were encouraged to introduce themselves through the chat due to time constraints. The full roster of current Advisory Council members is shared in Appendix A to facilitate determination of organizations not yet included. *Note that Advisory Council roster has been updated to reflect discussions subsequent to meeting date.*

2. Administrative Updates

- a. The VHWC <u>website</u> is continually being updated. The Advisory Council page is populated and contact emails will be included on future updates. No objections were noted to the suggestion to publish the Advisory Council meeting notes and these will be added to the Advisory Council tab on a forthcoming update. Participants were reminded the Resources tab is a vehicle to advertise upcoming events or opportunities for Council members.
 - i. Actions Requested:
 - 1. Report contact information edits or corrections to ihp.vhwc@msu.edu.
 - 2. Contact ihp.vhwc@msu.edu to request removal of email address to published contact information.
 - 3. Contact ihp.vhwc@msu.edu if you have something to disseminate through the Resources tab.
- b. The Michigan Health Endowment Fund (MHEF) invited the VHWC to submit a capacity building proposal for consideration. This opportunity had a very short turn-around time. Note feedback was received after the Advisory Council meeting. The proposal was not selected for funding this round. A subsequent meeting with the MHEF project officer is scheduled to discuss recommendations for a forthcoming funding cycle.
- c. Advisory Council members were asked about interest in having a statewide networking conference to support networking and information sharing. Members offered that joining existing conferences may be more productive at this stage of the VHWC. Suggestions included participating as a part of established agendas or through breakout session(s). A dedicated VHWC conference may be more impactful one or two years out. A planning committee would be needed for dedicated future events and individuals would be recruited to participate. Members were encouraged to share information on existing events with the group for future participation at the individual, organizational levels and for potential VHWC involvement.
- d. Ariel Hawthorne presented an opportunity to participate on a panel discussion at the upcoming Fall 2024 Michigan Health Policy Forum scheduled for October 7, 2024. The topic is "Social Isolation and Loneliness: Creating Connections that Improve Lives" and representation from various sectors is desired. The planning committee is interested in identifying a Veteran supporting organization to provide insights on innovative programming to combat the impacts of social isolation and loneliness on our Veteran population. Individuals interested in participating on this panel can reach Ms. Hawthorne at ihp.vhwc@msu.edu or at george51@msu.edu.

3. Collaborative Road Map Expansion to Project Identification

The operational framework for the VHWC continues to be established. The purpose statement evolved through discussion and was endorsed as follows:

a. Purpose: VHWC is an organization that supports organizations providing direct care and services to military service-connected individuals.



- i. VHWC is not a service provider. VHWC will support service delivery organizations with their mission and collaborate to identify gaps at local, regional, or statewide levels
- ii. Roles for the VHWC include information-sharing, facilitating connections and networking between programs, facilitating data analyses, advocating for service and research funding, analyzing policy between different levels, enhancing communication and dissemination, developing/implementing health care professional training, and working as an idea hub for participating organizations.

The next step suggested by Advisory Council members was to establish priority areas or *affinity groups* as a means of organizing stakeholder interest using the results of the Organizational Asset Inventory (OAI). These findings would help identify priority concerns and suggest relevant VHWC goals.

The OAI provided data on existing resources and gaps identified by survey participants. Approximately half of the organizations represented by members of the Advisory Council participated. A high level overview was presented due to time constraints. The summary report is available in Appendix B. Take-aways from this survey identified the following concerns despite the breadth of services being offered by Advisory Council members. These concerns could provide over-arching subject matter for the first 1 or 2 *affinity groups*. Additional dialogue would be needed to drill down to specific activity.

- Physical and behavioral health (mental health, suicide prevention, substance use treatment and prevention, pain and chronic condition management, harm reduction, oral health, and access to health care);
- Health-related social needs (housing insecurity, employment, and food insecurity);
- Connection to resources to support benefit navigation and maximization, support groups, and equity; and
- Raising awareness on issues such as moral injury and trauma management.

Suggested goals for VHWC involvement and activities included:

- Supporting efforts to integrate physical and behavioral health services;
- Promoting cross-sector collaboration and coordination of Veteran-focused efforts;
- Supporting inclusion of a healthy aging framework and health equity into relevant research and services;
- Enhancing community-based efforts to raise awareness;
- Sharing policy updates and innovative programming; and
- Providing networking opportunities.

Members of the Advisory Council and their networks could self-select to participate with subgroups sharing their interests. The sub-groups would be the locus for activities and initiatives. Members stressed the importance of including local and regional voices to inform future activities and to avoid duplication of effort. It was also recommended that existing efforts and resources be highlighted to support dissemination and cooperation. A suggestion was made to start with 1 or 2 sub-groups then host separate calls to identify suggestions and ideas for discrete activity. The VHWC Core Team would be available to support these sub-groups with administrative help as requested.



4. Wrap up

With the general goal and role of VHWC identified, there is interest in identifying project(s) with which members can engage and participate. These experiences will further help refine the impact and scope of VHWC involvement.

- a. Action Requested:
 - i. Using the OAI findings as a basis, AC members are asked to rank the 4 major "concern" categories (1=most urgent need 4=least urgent need) and identify one specific topic example in each category that is of most critical attention based on their opinion. Click here to log your rating.

The next meeting to discuss the concern categories, topic ideas, and recommendations for next steps will be scheduled for the first 2 weeks of December. Stay tuned for a forthcoming doodle poll.



Appendix A: Roster – (effective 9/8/24)

Organization	FirstName	LastName	Email
54B District Court	Judge Molly	Hennessey Greenwalt, JD, MA	mgreenwalt@cityofeastlansing.com
Barry County Community Mental Health Authority	Summer	Robertson	surobertson@bccmha.org
Center for Health Research and Transformation (CHRT), UM	Melissa	Riba	ribameli@med.umich.edu
Community Mental Health Authority of Clinton, Eaton, Ingham Counties	Jonathan	Ferguson	Ferguson@ceicmh.org
Delta Dental Foundation	Holli	Seabury	hseabury@deltadentalmi.com
Food Bank Council of Michigan	Dawn S.	Opel, JD, PhD	dopel@fbcmich.org
Genesee Health System	Gregory	Allen	gallen2@genhs.org
Genesee Health System	Eduardo	Calzada	ecalzada@genhs.org
Genesee Health System	Shawn	Edwards	SEdwards@genhs.org
Health Management Associates	Farah	Hanley	fhanley@healthmanagement.com
Inter-Tribal Council of Michigan	Beth I.	Sieloff, MPH, E-RYT, CMSgt, USAF(Ret)*	bsieloff@itcmi.org
Lakeshore Regional PIHP	Autumn	Hartpence*	autumnh@lsre.org
Lansing Community Based Outpatient Clinic	Courtney	Seaman, OTRL, MSOT, MBA	courtney.seaman@va.gov
Lansing Community College	Will	Emerson, PhD*	emersow1@star.lcc.edu
Lapeer County CMH	Paul	Dery	PDery@lapeercmh.org
Lapeer County CMH	Tabitha	Welch	twelch@lapeercmh.org
MDHHS Bureau of Aging, Community Living & Supports	Arielle	Buckley	Buckleya3@michigan.gov
MDHHS Bureau of Aging, Community Living & Supports	Tammy	Lemmer	lemmert1@michigan.gov
MDHHS Bureau of Aging, Community Living & Supports	Kristina	Leonardi	Leonardik1@michigan.gov
MDHHS Bureau of Aging, Community Living & Supports	Kayla	Smith	smithk138@michigan.gov
MDHHS Bureau of Specialty Behavioral Health Services/Veteran Health Navigator Program	Brian	Webb, MDIV*	webbb3@michigan.gov
MDHHS Oral Health Program	Emily	Norrix	norrixe@michigan.gov
MDMVA Michigan Veteran Homes	Ryan	Engle*	EngleR3@michigan.gov
MDMVA Michigan Veterans Affairs Agency	Steve	McCartney*^	mccartneys2@michigan.gov
MDMVA Michigan Veterans Affairs Agency	Brandy	Walkington*	walkingtonb@michigan.gov
Melanie Brim Consulting/MSU COM Impart Alliance	Melanie	Brim	Melanie@melaniebrimconsulting.com
Michigan Association of Health Plans	Dominick	Pallone	dpallone@mahp.org



Organization	FirstName	LastName	Email
Michigan Dental Association	April	Stopczynski	astop@michigandental.org
Michigan Health Council	Craig	Donahue	Craig.Donahue@mhc.org
Michigan Oral Health Coalition	Holli	Seabury, EdD	hseabury@deltadentalmi.com
Michigan Public Health Institute	Mathew J.	Edick, PhD	mjedick@mphi.org
Molina Healthcare	Shaun	Raleigh, MBA	shaun.raleigh@molinahealthcare.com
MSU CHM Department of Family Medicine & Institute for Health Policy	Joan	llardo, PhD, LMSW^	ilardo@msu.edu
MSU College of Human Medicine	Erica	Farr^	farreric@msu.edu
MSU College of Law	Frank	Aiello, JD	frank.aiello@law.msu.edu
MSU College of Nursing	Ann	Annis, PhD, RN [^]	annisann@msu.edu
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MSU Extension	Christopher	Imler*	imlerchr@msu.edu
MSU Extension	Kai N.	Gritter, MSHE	grittern@msu.edu
MSU Institute for Health Policy	Ariel	Hawthorne, MPH^	george51@msu.edu
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MSU Institute for Health Policy	Dean	Sienko, MD, MS*^	mjsienko@prodigy.net
MSU School of Social Work	Tina	Thompson, LMSW	blaschke@msu.edu
MSU Student Veterans Resource Center	Patrick	Forystek*	foryste3@msu.edu
National Guard Bureau - Michigan	Adam	LaVigne*	adam.p.lavigne.mil@army.mil
National Guard Bureau - Michigan	Heather	Nystrom, LMSW, MBA*	heather.l.nystrom2.mil@army.mil
NovaCare Rehabilitation, Lansing Area Veterans Coalition (Region 7)	Inetta	Smith, MSA	lansingareaveteranscoaliton@gmail.com
Priority Health	Jon	Shiflett, JD*	Jonathan.shiflett@priorityhealth.com
Region 10: Motor City Veteran Community Action Team	Kara	Fields	fieldsk61@macomb.edu
Region 5 Veteran Community Action Team: Great Lakes Bay Veterans Coalition	Brad	Blanchard	bpblanchard@outlook.com
SVSU College of Health and Human Services	Marcia	Ditmyer, PhD, MBA, MS	mditmyer@svsu.edu
The Law Office of Ellen Sugrue Hyman PLLC	Ellen	Sugrue-Hyman	loellenhymanpllc@gmail.com
The University of Texas at El Paso (UTEP)	Emre	Umucu, PhD	eumucu@utep.edu
Trinity Health Michigan, MI Air National Guard	Kevin	Bohnsack, MD*	Kevin.Bohnsack@trinity-health.org



Organization	FirstName	LastName	Email
UM Center for Clinical Management Research, VA Ann Arbor Healthcare System	Jeff	Kullgren, MS, MDMPH	jkullgre@med.umich.edu
UM Chronic Pain and Fatigue Research Center	Rachel	Bergmans	rbergs@med.umich.edu
UM Chronic Pain and Fatigue Research Center	Mia	Railing	mrail@med.umich.edu
UM College of Literature, Science, and the Arts	Michelle	Kees, PhD	mkees@med.umich.edu
UM School of Dentistry (Victors for Veterans)	Sarah	Tomaka, DDS, MPH	satomaka@umich.edu
Upper Peninsula Commission for Area Progress, Region 1 VCAT	Frank	Lombard*, BSW, MSW, US Army Infantry	lombardf@upcap.org
VA Battle Creek Medical Center	Brian	Pegouske*	brian.pegouske@va.gov
VA Battle Creek Medical Center	Gayle	Witham, LMSW, ACM, BCD	Gayle.Witham@va.gov
Veterans Community Action Team, Region 9, UM College of Literature, Science, and the Arts	Eric B.	Fretz, PhD*	ebfretz@umich.edu

^{*}Active/Retired/Veteran Status

[^]Administrative Core Team



Appendix B: Organizational Asset Inventory Report

