

READINESS

#### OFFICE OF THE UNDER SECRETARY OF DEFENSE 4000 DEFENSE PENTAGON

WASHINGTON, D.C. 20301-4000

**ACTION MEMO** 

FOR: GAIL H. MCGINN, CHAIR, DOD MILITARY FAMILY READINESS COUNCIL

THROUGH: Tommy T. Thomas, DUSD(MC&FP) Jamy 2 Hours

FROM: CDR Quinn Skinner, USN, Designated Federal Officer, DoD Military Family

Readiness Council

SUBJECT: Minutes from the Military Family Readiness Council, 01 October 2009

To obtain your signature to certify the minutes of the Council meeting 01 October 2009.

Timeline:

- o The next Council meeting is 03 December 2009.
- Our goal is to publish read-aheads for this next meeting on or before 16 November 2009.
- We recommend publishing these minutes in advance of these read-aheads.
- Minutes for your signature, TAB A.
  - Enclosure (1) is a list of attendees.
  - Enclosure (2) is the contents of the briefing binder, consolidated to a folder to save space.

**RECOMMENDATION:** Sign certification of the minutes at TAB A on p. 24.

COORDINATION: None required.

ATTACHMENT: None

PREPARED BY: CDR Quinn Skinner, Office of the Deputy Under Secretary of Defense (Military Community & Family Policy), (703) 588-0564

# Department of Defense Military Family Readiness Council 01 October 2009 (2:00 – 4:00 PM) Pentagon Conference Center Room B6

The Department of Defense Military Family Readiness Council convened at 2:00 PM on 01 October 2009 at the Pentagon Library and Conference Center (Room B6). Members, advisors, and public present during the meeting are listed in Enclosure (1). Materials used during the meeting are provided at Enclosure (2).

#### Welcome and Introductions

Ms. Gail H. McGinn, DUSD (Plans), Performing the Duties of USD(P&R) welcomed the members of the Council and the public, thanking them for their support of military family readiness.

Each person at the Council's table introduced themselves:

CMSAF James Roy, USAF
General Carroll Chandler, USAF, VCSAF
SgtMajMC Carlton Kent, USMC
General James Amos, USMC, ACMC
RADM (Ret.) Gallo, National Executive Director, Armed Services YMCA
Mrs. Kelly Hruska, Deputy Director, Government Relations, NMFA
Mr. Tommy Thomas, Deputy Under Secretary of Defense (Military
Community and Family Policy)
Ms. Bonnie Carroll, Director of Survivor Programs, TAPS
ADM John Greenert, USN, VCNO
MCPON Rick West, USN
LTG Robert Wilson, USA, CG, IMCOM
SGM John Heinrichs, XO to the SMA

# Federal Advisory Committee Act Rules and Restrictions

CDR Quinn Skinner, USN, Designated Federal Officer: The Members are, by law, the Service Vice Chiefs of Staff, the Service Senior Enlisted Advisors, and 3 representatives from national military family organizations. Senior advisors can offer opinions and views if called upon, but should not participate freely in the Council's deliberations. As a federal advisory committee, the Council needs to be transparent. Minutes and other briefing materials will be posted in the Federal Register. CDR Skinner has to be present at any meetings you have. Any deliberations have to be made public. All email discussions regarding the Council's deliberations are part of public record, and CDR Skinner should be "cc'd."

#### Review of the Council's Charter

Mr. Tommy T. Thomas, DUSD(MC&FP) stated that the Council Charter was provided as a read-ahead and could be found in the briefing binder at TAB C. Mr. Thomas reviewed the missions and scope. Mr. Thomas referenced US Code Title 10 Section 1781a. Council is to submit their report to Congress NLT 1 Feb each year. Mr. Thomas discussed the 2009 Council timeline (Slide 7 of Enclosure 2). This meeting will capture initial recommendations and put together a draft Council report. In December this draft report will be vetted by the council members for content, then finalized in December-January.

Mr. Thomas displayed slides on the annual recurring timeline (Slides 8-9 of Enclosure 2). He stated that he envisions Council meetings every Spring and Fall, for the same purposes: to review of DoD's report and initial recommendations at the first meeting, and to amend and approve the substance of the Council's report at the second.

# Discussion of the DoD Report on Military Family Readiness Policy and Plans

**Mr. Thomas** began a review of the annual report to Congress on military family readiness policy and plans.

Major sections in the report (slide 11 of Enclosure 2):

- Goals and Metrics
- Summary of Access Policies
- Plans for the Support of Military Family Readiness

Mr. Thomas invited comments on each goal and metric:

#### Slide12 of Enclosure 2:

Child Care Availability And Quality (demand, accreditation, certification etc)

Personal Financial Readiness
Outreach Counseling
Health Care Satisfaction
Expansion of Unemployment Compensation

#### Slide 13 of Enclosure 2:

Minimizing disruption to School Age Children of Military Families Pupil-to-Teacher Ratio and Academic Performance in DoD Schools

**ADM Greenert** asked to confirm that DoDEA schools were using SAT scores as a performance metric.

Mr. Thomas confirmed this.

**ADM Greenert** stated that schools should be talking about SAT scores in addition to any standardized testing, due to the importance of the SAT.

Mr. Thomas continued on Slide 13 of Enclosure 2

New Parent Support Program
Promoting Enforcement of predatory lending regulations
Commissary Benefits
Military Exchange Benefits

**General Amos** asked whether the 30% savings at the commissaries included savings from taxes?

Mr. Thomas responded that a family of four saves roughly \$3400 a year, and that yes, calculated savings does include sales tax that the members would pay off-installation. You are not getting that level of tax at the commissary. Cost savings to military families is roughly 15%.

Mr. Thomas continued with Slide 14 of Enclosure 2, regarding intended developments in goals and metrics. He stated that this slide constituted things that DoD needed to work on regarding measuring effectiveness of military family readiness programs. Mr. Thomas then asked if there were any other metrics DoD is missing.

Ms. McGinn stated that there should be a metric developed to measure compliance with implementation of Family Care Plans prior to deployment.

Ms. Kelly Hruska from NMFA stated that NMFA agrees with this recommendation, and that data from the Navy shows that custody issues are routinely resolved by Family Care Plans.

**ADM Greenert** said that the Navy is seeing this issue more and more among the families of individual augmentees, and therefore needs more emphasis.

MCPON West said that there is a trend of increasing concern about child custody among female Sailors.

LTG Wilson said the Army concurs with this recommendation, as the Army has had a lot of experience in this area after 7 years of combat operations. Commanders and Command Sergeant Majors are interseted.

Ms. McGinn closed the discussion on Family Care Plans by informing the Council that OSD is updating the DoD Instruction on Family Care Plans, incorporating many of the good practices required by the Navy Instruction on the same subject. She stated that OSD was coordinating the family care plan DoDI through the Services, etc and should be out soon.

Mr. Thomas then initiated discussion on DoD Program Access Policies (referencing pp. 16-18 of TAB E of Enclosure 2).

Mr. Thomas stated his confidence that Council members' staffs were able to digest this 2-3 weeks ago, and opened the floor to comments.

Ms. McGinn asked what was meant by "access," whether that implied who is eligible for child care, etc.

**CDR Skinner** confirmed this and provided information on how to read the table on pp. 17-18 of Enclosure 2, TAB E.

**ADM** Greenert stated that the table on pp. 17-18 was very impressive, and asked how this could be communicated to DoD constituency in a way that's coherent.

Mr. Thomas stated that he appreciated ADM Greenert's compliment and concerns, and that OSD would communicate it down to the Services.

Ms. Hruska stated that MilitaryHOMEFRONT is the better method for communication because it doesn't have the restricted access that the Military OneSource website has.

Ms. McGinn asked whether the matrix addressed the designated caregivers in family care plans and the privileges to which they're entitled.

**CDR Skinner** provided information that some of that data exist on the second page in the right half of the table.

ADM Greenert asked about caregiver access to commissaries.

**MCPON** West stated that caregivers for the wounded ill and injured appear to be in a separate category from those of general caregivers.

Ms. McGinn stated this was the case.

**ADM Greenert** referenced the table on pp. 17-18 of Enclosure 2, TAB E, and said it appeared that note #25 stated that caregivers of dependents also had access. [Editor's note: this impression is incorrect; note #25 refers to caregivers of the dependents of wounded, ill, and injured, not caregivers of "any" service members' dependents.]

Mr. Thomas then led the Council into discussions of the report's section on Plans for the Support of Military Family Readiness.

Mr. Thomas stated that DoD has spent a lot of time building a lot family readiness programs, and that it was time to look at and evaluate the current programs we have. He stated his office's intention to use the DoD final report as the vehicle for this evaluation. He referenced the recent focus groups and listening sessions which will feed into this report. OSD(MC&FP) hosted a Joint Family Readiness Conference in Chicago with 1500 personnel attending, from which tremendous feedback was received. Of note, Mr. Thomas continued, that was the first time the senior enlisted advisors presented together. Slides 16-19 of Enclosure 2 were displayed to show this graphically.

Mr. Thomas then opened the floor to discussions on the plans section of the report.

LTG Wilson asked whether those medically retired, particularly wounded warriors, had access to child care.

Mr. Thomas deferred this question to Ms. Barbara Thompson, Director, Office of Family Policy, Children and Youth.

**Ms. Thompson** replied that because of the eligibility currently outlined in the DoDI, it doesn't clarify whether medically retired are eligible for these services. A Directive-Type Memorandum (DTM) be will developed quickly to provide this clarity, pending revision of the DoDI.

Mr. Thomas closed his presentation and discussion of the report on military family readiness policy and plans, and returned the floor to Ms. McGinn.

Comments from Family Organizations on Top 2 DoD/Service Programs and Top 2 Concerns

Ms. McGinn initiated the sequence to go around the table to give each organization or Service the opportunity to speak for 3-5 minutes.

Ms. Kelly Hruska, NMFA [read-ahead, TAB G of Encl 2] thanked Ms. McGinn for the opportunity, stating that while NMFA submitted a read-ahead, it was difficult to compartmentalize family support programs. She stated that the programs are really responding to the needs of families, particularly the family support programs in Military OneSource and MilitaryHOMEFRONT. She noted a lot of improvement on the MOS (Military OneSource website). The communication piece to families is very important. MilitaryHOMEFRONT provides regulation and policy framework that families need. They need to be able to take these data to the service provider to show them what the regulations say.

Ms. Hruska emphasized that Family Readiness Groups should not be viewed just for spouses and children, but also parents, siblings, other extended family, and others who support the service member. NMFA appreciates the attention being paid to the Military Family Life Consultant program and it being made available. NMFA appreciates the TRICARE assistance program – a non-traditional form of non-medical counseling. NMFA is monitoring the implementation and usage of this new program.

NMFA's first top concern is access to health care, both health care and mental health care. Once families know the system, they fare well, but just accessing and getting through the "gate keeping" is difficult.

NMFA's second top concern is reintegration. NMFA strongly advocates discussing reintegration prior to deployment, not just during preparations to return from deployment. Families are concerned about how to process that information. Starting from day one ensures families are armed with the knowledge on what to do when they see warning signs; that is a missing piece.

While NMFA has not engaged on the issue of operational tempo (OPTEMPO) in the past, they are now, because families are not getting enough time at home to reintegrate and they are seeing long-term consequences.

Ms. Bonnie Carroll, TAPS [read-ahead, TAB H of Encl 2] thanked all present for their support for the wounded and families of the fallen, with special thanks to the casualty affairs offices. The care provided immediately following the death has improved. Casualty staffs have improved services at point of delivery.

TAPS has received very good feedback from families on the new policy for media access at the Dignified Transfers at Dover Air Force Base. The policy change has allowed grieving families to honor their loved ones if they choose to go. Dover mortuary services are providing emotional support on the ground. Chaplains have opened a center at the hotel where the families are staying.

The first concern of TAPS is empowering peer-based care. "Grief is not a mental illness. It requires a shoulder to lean on." TAPS has created a network of care of 350 peer mentors, certified through a day of training, who are able to walk beside and mentor a new grieving person. Peer-based care is such a strength. Empowering peer-based care is something to talk about further.

TAPS' other top concern is incorporating existing technology to allow the sharing of families' entitlements information across federal agencies. The technology exists to work across agencies with real-time data and give families a picture of what their entitlements are immediately.

RADM Gallo (Ret), ASYMCA [read-ahead, TAB F of Encl 2] highlighted 2 DoD programs based on feedback from ASYMCA constituents. First, FOCUS (Families Overcoming Under Stress) Program, a program primarily sponsored by the Navy and Marine Corps, but also includes a partnership with UCLA and the Navy Bureau of Medicine. The feedback ASYMCA is getting from Lejeune, Pendleton and Hawaii is very good. It is ASYMCA's understanding that the program may be extended to the Air Force and Army in 2010.

The other DoD program highlight is the Career Advancement Accounts. These are two good programs based on input from ASYMCA families.

ASYMCA concerns. Families do not have a path to travel, with the large number of programs. They have confusion on what path to take, especially if there's a possibility of a PTSD diagnosis. The second item is the lack of child care resources. School-aged child care continues to be a problem. Lots of extra school-aged child care has been made available. This should be expanded. Sixty-five percent of families live off base. Regarding preschool child care, many military child development centers (CDCs) have long waiting lists for people to get into the program. RADM Gallo recommended subsiding state licensed child care to get the price down so that the lower enlisted can afford it. Drop-in child care is non-existent. ASYMCA offers that at some hospitals.

ASYMCA has a contract to provide respite care to Guard and Reserve families. Drop-in care in YMCAs could be a model for what they can do for the other child care requirements. Family centers house the management for the housing. These could have rooms that can be used for drop in child care. Someone could find a way to use those family centers. RADM Gallo recommended that DoD bend the rules just to the point so that family centers can be used for drop in care.

**RADM Gallo** resumed his discussion of a "path to travel" for families: chaplains, medical care, TRI-West are there for families. Lot of services available, but families are confused about where to go, where to you go first and what they should do then.

**Sgt Maj Kent** stated that, "Leadership is where they need to go to figure out where to go." He continued that USMC leadership has told Marines it is OK to seek help, but that we still need to get rid of the stigma of asking for help. USMC tells Marines to come to the leadership for help. "It's working because we push it down to our unit level leaders."

General Chandler agreed with RADM Gallo. He stated that family services are there, but we offer so many services that we probably confuse young service members.

Comments from the Military Services on Top 2 DoD/Service Programs and Top 2 Concerns:

Ms. Kerry Lewis [read-ahead, TAB J of Encl 2] briefed on behalf of General Amos: The top program for the USMC is the transition of family readiness programs to a "wartime footing: child care, family readiness program, EFMP [exceptional family member programs], School Liaison Program and MCFTB [Marine Corps Family Team-Building] programs. They've all been expanded.

The USMC also has expanded behavioral health. They've emphasized the critical role of leaders at all levels, and have driven an approach of "no bystanders" – anyone who observes behavior indicating distress should get engaged. They've also made progress on integrating the various programs that affect behavioral health. They want to be able to leverage our values-based cultures; to establish a process for care of the Marines whether they are in the battlefield or at home.

The USMC's first top concern is community—based programming. OSD and the other Military Services are "moving out" on this as well. We have traditionally have thought about family-center based programming, but we need to address the needs of those living off of installations. We support initiatives that maximize Sister Service partnerships and other Federal and State service platforms.

TAP [Transition Assistance Program] is also an area of concern because of the elevated unemployment rates in areas of high concentrations. We want to do more types of segmented transition services – a tailored approach for each Marine, as "one size does not fit all."

General James Amos remarked that the USMC has doubled its family support budget from about \$100 million to \$200 million per year. Behavior Health has really become clear to the USMC as an area that probably needs to be pulled together. All of these programs affect the others, and we need to focus on horizontal integration across programs and get away from "stovepipes."

TAP—you see things pop up in the early bird, e.g. homelessness. This is programmed as a "one-size fits all." You show up for the TAP class and everyone gets the same thing. You could be the young man that wants to go to college, one that doesn't care, or one that wants to join a union, etc. We need a robust plan, understanding that one size does not fit all. How do we do that? There are ways to do that without cutting into the commanders time. We are working on that.

Mr. Thomas recommended calling on Ms. Roberts from TPCC.

Ms. McGinn concurred.

Ms. Susan Roberts stated that her office has been focusing on the TAP one-size fits all issue and will discuss at the TAP offsite meeting in the first week of November.

**General Amos** expressed interest in this initiative and stated that he looked forward to working with the TPCC office.

ADM Jonathan Greenert [read-ahead, TAB K of Encl 2] began by commending DoD efforts in curbing payday lending as a success.

The Navy's two top programs are spouse employment and child care availability. In spouse employment, the Navy desires to sustain its momentum. In their 2009 survey—nine out of ten spouses are a contributing (fiscally) member to the family. DoD's non-competitive hiring practices for military spouses is a great benefit.

For child care availability and flexibility, ADM Greenert cited that one in five spouses employed part-time would be full-time if child care were available. Six in ten feel there is enough child care; three in four are pleased with the quality. We need to keep the quality while expanding availability to a 24/7 operation with drop-in capacity.

ADM Greenert stated that the FOCUS is good. We have an operational stress program. It began with helping Sailors with PTSD, and we found a lot of people are experiencing stress. The good news is that families understand.

Supporting the Navy's individual augmentees is a top concern of the Navy. These Sailors deploy apart from a unit and the traditional support given to that unit. The Navy has instituted a Coordinator program for IA's to help build up support for these Sailors.

Another top Navy concern is reaching spouses and family members with information—we need to get into the web 2.0, Facebook, etc. Too many times we have people sitting in front of the counselor who are not aware of programs offered.

Utility bills for families who formerly lived in government housing that are now in PPV [public-private venture] housing have accrued to the tens of millions, in large part due to poor energy conservation practices by individual families. We need to educate families that one day they will own a house and they will have to pay the bills.

General Carrol Chandler [read-ahead, TAB L of Encl 2] stated that the Secretary of the Air Force and Air Force Chief of Staff designated 2009 as the year of the AF family. There are a huge number of things we try to do for families, but how to you package it?

**CMSAF Roy** began with reviewing the 4 pillars of USAF support: housing, health and wellness, education and support for families of those deployed and those with special needs.

He highlighted two areas. The first was the network of Airman and Family readiness centers with their various programs. These centers provide resource and referral for total force airmen—Personal Financial Management, reintegration support, etc. We like to point people in that direction as "the path" [referred to previously by RADM Gallo].

The second highlighted program was Child Development centers. Since FY05 the USAF has brought down a gap of 6,000 people on a waiting list to FY 12 to zero. Sustaining that will be something the USAF will continue to pursue.

The USAF has also provided Extended Duty Care—16,000 extended care hours provided to families each month. The program began supporting those manning missile bases—24 hours 4 or 5 days a week. The USAF provided free child care drop off to those families working in these conditions.

General Chandler summarized the USAF's top 2 concerns. The first is their exceptional family member (EFM) program. The USAF presently tracks 18,000 EFMs, of which 80% are in enlisted families. Airmen are not enrolling their families on the scale needed, because the program relies too heavily on self-referral. General Chandler emphasized the need to get better on this issue in the Air Force, stating he was not sure if the issue was of the same magnitude in other Services.

**ADM Greenert** – stated that it was not a top issue for the Navy.

LTG Wilson - stated that it was a concern for the Army.

General Chandler continued with the USAF's second concern: Child Education, particularly transition state-to-state and from overseas. The overseas link appears to be good; more work is required state-to-state. The Interstate Compact will help. The USAF

has had success overseas with School Liaison Officers and DoDEA, people that work with families. In CONUS we haven't probably done this quite as well; we need to work harder at the installations.

LTG Robert Wilson [read-ahead, TAB I of Encl 2] opened his remarks with an overview of the Army Family Covenant as the Army's "top program." The program has five pillars: 1) standardizing and funding existing Family programs and services; 2) increasing accessibility and quality of healthcare; 3) improving Soldier and family housing; 4) ensuring excellence in schools, youth services, and child care; and 5) expanding education and employment opportunities for family members.

LTG Wilson continued with the Army's top 2 concerns: the first is stress on soldiers and their families, especially on children, after 7 yrs war and multiple deployments. The Army is constantly looking for feedback from its 550 Family readiness group leaders. The Army commends the MFLC [Military Family Life Consultant] program, and appreciates their support. They [MFLC's] provide services to soldiers, families and children. The Army has them in the family centers and off post. They are helping us with families.

The Army's second concern is Army spouse employment. The Army is expanding its spouse employment program and looks forward to the results. The Army is pleased with the recent MyCAA [Career Advancement Accounts] program and encourages future funding in this area as well. Both are great programs.

LTG Wilson stated that joint basing is going very well, and that it is going to provide great capabilities for all Services. He closed his prepared remarks with another commendation of the MFLC program – it exposes families to mental health counseling and reduces the stigma of asking for help.

Ms. McGinn asked Mrs. Casey, special advisor to the Council, for her thoughts.

Mrs Casey stated her appreciation for being included in the Council meeting. She stated that what she is hearing right now is the issue of access to care and mental health care every single place I go. She also commended the MFLC program and added that unit commanders are starting to surge [increase] the number [of MFLC consultants on-site] as units come back [from deployment].

Mrs. Casey asserted that dwell time for returning Service members is insufficient: when the Service member comes home they know when they are leaving again very shortly, which exacerbates the stress on families. She mentioned her June testimony to Congress on this point. The concern is that we are ready when families start coming home from war as different phases of the war wind down. The Department can't wait for them to

return to get them what they need. I think we will start to see spikes in divorce, etc. We have to be ready.

Ms. McGinn mentioned that in the establishing legislation for the Council, Congress did not include any members to speak on behalf of Reserve Affairs and the National Guard Bureau, and invited Ms. Nancy Boyda, Deputy Assistant Secretary Defense for Reserve Affairs (Manpower and Personnel) to speak.

Ms. Nancy Boyda [read-ahead, TAB M of Encl 2] stated that everyone understands the role Reserves have played, including our country and Congress. More than 141,000 Reserve deployed, and 746 have died to date.

The Yellow Ribbon program needs to be formalized. By its nature we are dealing with dispersed families. Too many families are falling through the cracks—we need to begin reaching and preparing families prior to deployment.

Specifically travel policies are a problem. The Joint Travel Regulation (JTR) and Joint Federal Travel Regulation (JFTR) restrict the military member as to which relatives or other designated representatives can be funded to attend Yellow Ribbon events. The limitations vary by Service, but often only the Service member's spouse and one child can be funded for travel. Parents, caregivers or other people important to the service member have to pay their own way for an event made mandatory for the service member by the unit commander. Even among those funded, e.g. spouses, significant incidental expenses must be paid out-of-pocket. This policy sends a mixed message to families – the Service members are required to come, the families are encouraged to come, but they are not provided the means to do so.

In similar fashion, Reserve Affairs has an issue the JTR and JFTR with regard to facilitating the travel of designated representatives to provide wounded warrior support. Many of the wounded warriors' caregivers are not dependent spouses or children.

Ms. Boyda also invited the Council's attention to the Reserve Affairs read-ahead, specifically, that Title 10 Section 12301(h) restricts Reserve members who have been wounded, ill, or injured from counting their recovery time toward reducing retirement age for non-regular retirement, and makes them ineligible for Transition Assistance programs.

Ms. Boyda made reference to RADM Gallo's remarks about TAP. She stated that a lot of families are "falling through the cracks."

Reserve Affairs has started talking with Services about how non-participation in reintegration events should be seen as an indication of signal of distress.

Aid societies often do not help Reserve Component members.

The junior enlisted, E1-E4s, are those who fall through cracks in programs at the greatest rate. We need special emphasis on reaching that group. We have to realize they are not getting information or that they are getting so much that they don't know what to do. The Reserve component has fought hard to connect the military back to communities.

General Amos remarked that the Yellow Ribbon feedback has been very positive. He asked Ms. Boyda to confirm that "we're really asking people to pay their own way to these events."

Ms. Boyda confirmed that. We have service members that have family members—spouse and children. Caregivers and parents or fiancés are not paid for and that is more of a problem for the Commanders. The Yellow Ribbon is about putting arms around them and making sure support is there, but the travel policy delivers a mixed message. Whoever that warrior designates should be able to travel.

Ms. McGinn asked Ms. Vee Penrod, Principal Director, Military Personnel Policy for comment.

Ms. Penrod stated that the issue has to do with the type of orders, whether you are eligible for invitational travel orders as a participant in the event, vice being only an "attendee." Ms. Penrod emphasized that legislative change would be necessary to adjust the regulations.

Ms. Boyda stated that Reserve Affairs would continue its work to get that legislative change into the NDAA. She stated that the Reserve Chiefs will collaborate to make the new provisions uniform throughout all of the Services.

Ms. McGinn asked Dr. Jack Smith Acting Deputy Assistant Secretary of Defense for Health Affairs (Clinical and Program Policy) for comment.

**Dr. Smith** stated that regarding access to care, Health Affairs began the TRICARE Assistance Program in August, a patient care/medical home initiative. Care is provided with a team. Health Affairs is investigating how best to get care that will allow some types of access to health care that doesn't necessarily require a visit.

Health Affairs has created a portal for mental health assessment. The portal, "Health Care Finder," can assist patients to find a TRICARE provider. The health care finder will provide them a three-way conversation with a potential provider or give them a list of network providers.

Ms. McGinn stated that mental health care is very frustrating. DoD has hired 2,000 more within medical treatment facilities and 10,000 or more hired in managed care. We are trying to increase the number of providers that we have.

Ms. McGinn closed the Service presentations and invited Mr. Thomas to recap the Council's concerns, and facilitate voting.

# Recap of Top Programs and Concerns for Potential Inclusion in the Council's Annual Report

**Mr. Thomas** referred the Council to their initial recommendations captured on-screen and facilitated voting thereafter.

Voting commenced.

Recommendation #1: Incorporate metrics on family care plans to help address child custody issues.

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #2: Consider using Military HOMEFRONT to communicate and clarify program access and eligibility to constituencies.

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #3: Addressing the needs of the medically retired severely injured service member as it relates to child care needs.

The Council unanimously agreed that this should be reworded to specifically target wounded warriors, i.e., those injured in combat or similar operations.

With this modification, the Council proceeded to vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #4: Address the needs and concerns related to access to health care.

The Council unanimously agreed that this was too broad to be included as a recommendation.

Recommendation #5: Begin reintegration programs pre-deployment.

Kelly Hruska stated that the intent of this recommendation was to address reintegration issues continuously, and not tied to the deployment cycle, and not only in preparations for return from deployment. Reintegration needs to be addressed from the very beginning, and through all stages of deployment—pre-deployment, during deployment, and post-deployment.

The Department needs a better approach to the "reintegration period." The family is constantly reintegrating. They start offloading, start training again and there's no time for the family to truly reintegrate. We all term to frame things in terms of deployments-families are concerned about the return time. We need to think of it in the entire cycle. Current reintegration programs fall short.

LTG Wilson commented that the Army ties its reintegration programs to its ARFORGEN [Army Force Generation] processes, not deployments.

**SgtMajMC** Kent stated that he didn't understand Ms. Hruska's comments, saying that it [discussion of reintegration issues] is happening at the unit level. The Commandant and the Assistant Commandant of the Marine Corp's policy is that we have that cycle [of discussions] constantly.

**ADM Greenert** stated that the Navy's reintegration problems are primarily with Individual Augmentees, and that the Navy had that issue for action.

SgtMajMC Kent stated that, "it's a continuum and not a cycle."

Ms. Hruska stated that many of the programs are based on the assumption that the Service members return to the same place from which they deployed, and that assumption is flawed. Many Service members change duty stations immediately after or even during deployment.

Ms. McGinn said [to Ms. Hruska] that she understands what Ms. Hruska is talking about is making families aware of the difficulties of reintegration. She asked if the issue was better communication.

Ms. Hruska replied that the current reintegration programs are not reintegration programs. They're hearing about PTSD, TBI, and increased suicide and divorce rates. The Services wait for the units to come back to start talking about that. They need to talk about these issues all the time.

**SgtMajMC** Kent replied that USMC leadership visits Marines constantly. "We get face-to-face. Units are constantly speaking about these things." He stated that we can put all these programs in place but if the unit isn't putting it into place then there's nothing we can do about this; hence the USMC emphasis on leadership.

Ms. Hruska replied that in NMFA, they stayed away from focusing on dwell time because it was an operational issue and we didn't get involved. We changed this year because it has moved away from an operational decision to an issue affecting families. NMFA is hearing from a lot of families that reintegration is an issue. "If you [SgtMaj Kent] feel that your programs meet that need – then fine."

**Sgt Maj Kent** stated that the USMC is not perfect but we are constantly working on issues. He stated that he didn't see Ms. Hruska's point because the USMC discusses these issues with their Marines on a continuing basis.

MCPON West, addressing Ms. Hruska, said that what he understood her to be saying was that we just need to be proactive throughout the process. He said, "I agree, we have wonderful programs. The problems we have are educating the Service members on those programs."

Ms. McGinn asked the Council whether they could rephrase the recommendation and turn it into a study.

The Council discussed and agreed to change Recommendation #5 to read: "Review reintegration programs in light of today's operational tempo and dwell time realities." Vote on Recommendation #5 as reworded: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

General Chandler stated that there appeared to be a lot of similarities between Recommendations 5 and 6. There may be an opportunity to combine 5 and 6.

Mr. Thomas stated that if you look at #6, was actually redundant with #5: "Review reintegration programs in light of today's operational tempo and dwell time."

The Council agreed unanimously to remove Recommendation #6.

Recommendation #7: "Look at empowering peer-based care to address the needs of newly bereaved, capitalizing on existing strengths of military families."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #8 dealt with the use of technology across agencies for benefits for families of the fallen. Council members discussed briefly what this meant.

Ms. Carroll clarified what she meant by her recommendation: to remove stovepiping among Federal agencies. Technology exists to pull real-time data regarding benefits for families. The key is integration across agencies.

Recommendation #8 was reworded to read: "Look at empowering peer-based care to address the needs of newly bereaved, capitalizing on existing strengths of military families."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #9 dealt with the lack of "clear path" for families facing crises, particularly PTSD, as brought up by RADM Gallo during his prepared remarks.

General Amos stated that he understood this concern. There have been many programs developed – "blooming flowers" – some of them on the base, outside the gate etc. We have developed some tremendous programs. He stated it was his responsibility to understand what's going on at the base, where to send the Marines, the spouse etc. Every path is different. Some of it depends on stigma—on a whole host of things. He said he didn't know how we're going to get there [to a "clear path"].

Ms. Hruska stated that you [RADM Gallo] talk about the clear path with regard reintegration.

**RADM Gallo**, replying to General Amos, stated he agreed that there is no single path, it is a big smorgasbord.

General Amos suggested that this issue may be organization and marketing. How do we help the platoon Sergeant to direct a Lance Corporal or his new spouse

**RADM Gallo**, suggesting a rewording of Recommendation #9, offered, "Clarifying existing services available to explore the possible paths to follow."

**Mr. Thomas** asked Ms. Susan Roberts from the Transition Policy and Care Coordination Office for her recommendation.

Ms. Roberts stated that there is no distinction made between the service member that is wounded and one that is not. If the service member is in the wounded warrior program then they will have a path because they will have a Recovery Care Coordinator or a Federal Care Coordinator assigned.

**RADM Gallo** stated that dealing with the PTSD issue was not his central focus in this recommendation. For example, a Service member may have issues with his family and wife. There may be PTSD involved but this is not really the central issue—it was developing a clear path for all kinds of crises.

**Mr. Thomas** proposed adding Recommendation # 9 to reintegration [Recommendation #5] and called for a vote.

CMSAF Roy asked the vote be postponed. He stated that each Service is different. What if someone came up with a matrix—put it on Military OneSource—leaders will have it, families will have it. In June, a Congressman [during testimony] said that DoD has a lot of programs but we just need to advertise them.

General Chandler suggested that the Council capture the verbiage to develop the matrix immediately, as this was the Council's purpose.

LTG Wilson concurred.

General Chandler stated that, in terms of trying to get arms around everything that's available, the Air Force could build their part of the matrix easily enough.

MCPON West stated that we have to be careful when we develop the roadmap if we make it Service-specific.

Ms. McGinn pushed to vote or table Recommendation #9, in view of seven minutes remaining in scheduled time.

Revised Recommendation #5 (combined with discussion from Recommendation #9) read: "Review reintegration programs in light of today's operational tempo and dwell time realities. There is a lack of clear path of care for members and families who need help. There are a number of service providers available, but the member/family may not have enough direction about where to go first. Develop a matrix to help achieve this clarity."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #10 as originally phrased suggested expansion of school-aged child care.

**RADM Gallo** provided clarification that his intent with this recommendation is that DoD review the instructions and delivery of school-aged child care, preschool and drop-in child care.

LTG Wilson stated that the Army has these programs and that the quality and standards are regularly reviewed, so he was not sure what RADM Gallo was proposing for review.

**RADM Gallo** replied that the Army has good programs but the other Services don't have that. There are some Services that say they don't count on the ratio. They ought to review those instructions.

Revised Recommendation #10 read: "Review instruction for and delivery of school-age, pre-school and hourly child care, looking at opportunities off the installation."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #11 originally read – "Review child care subsidy rates across the Services."

LTG Wilson stated that the Army is doing that now and also with the joint-basing process.

RADM Gallo suggested eliminating this recommendation.

General Chandler stated that we may well suffer some quality issues on subsidizing. This will come up as we get into rates between existing Services. It might help us get across the disconnect between rates across the Services.

LTG Wilson stated that if the Army wants to deliver something to the Army family Covenant, then the Army pays the difference, and stated that the joint basing process has taken on this issue.

General Chandler stated that he thought that MOUs might be different across the Joint Bases.

LTG Wilson stated that he represents the Army on the Joint Basing issues. They [the Joint Bases] all agree to what the lead Service has and that the Army will pay the difference.

General Chandler suggested that if this is not an issue that will come up in the joint basing reviews then perhaps we should delete it.

LTG Wilson stated that he didn't want to risk families being told to pay more because of this.

Ms. McGinn suggested that the Council table Recommendation #11 for the next meeting until we see where the joint basing process is going with this issue.

Revised Recommendation #11 read: "Review child care subsidy rates across the Services. Review joint basing MOUs for standardization."

The Council voted unanimously to revisit this recommendation at the next Council meeting.

LTG Wilson stated that his concern is when the term "review" is used, then what will be done with the recommendation? It means it will come back to the Council.

General Amos replied to LTG Wilson that he couldn't tell him if there's a problem, and that this was a good opportunity to jointly look at the issue.

General Chandler concurred that the issue should be investigated.

Recommendation #12 suggested that the ASYMCA contract with OSD be used as a model to provide additional child care off installations.

**RADM Gallo** stated that right now in the OSD contract between the ASYMCA, if you're covered by the contract, you can get so many hours a month and there's a price on it and its' state-licensed only. It is worth looking at maybe when this contract ends.

MCPON West pointed out the redundancy with Recommendation #10.

# RADM Gallo agreed.

The Council agreed unanimously to delete Recommendation #12.

Recommendation #13 was generated based on the USMC presentation, but was not intended as a recommendation. This recommendation was removed at the request of General Amos, without objection from the Council.

Recommendation #14: Ensure adequate transition services in light of unemployment rates and diverse needs of separating service members, including those of wounded warriors.

General Amos stated this came from the USMC, based on their assessment that the USMC has missed the mark on transition assistance and that there is a lot more work that needs to be done. "We're going to get a lot of help and assistance from OSD on this. You can vote however you want. If you don't think it's a holistic problem then we don't have to vote on this."

General Amos continued that the rates of veterans and homeless rates (15% of veterans were alarming enough, and that he had heard enough anecdotes this week.

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

The Council voted unanimously to delete Recommendations #15 and #16 without significant discussion.

Recommendation #17 dealt with using technology to better communicate with families.

**ADM Greenert** suggested rewording as "Leverage current technology and social networks to improve communication with families."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #18 suggested a review of Exceptional Family Member (EFM) Programs.

General Chandler stated that this may be an internal Air Force issue. As such, the other Services may not have this problem.

General Amos stated that he needed to research the USMC EFM issues.

LTG Wilson stated that the Army has challenges with EFM programs.

The Council voted to take this as an action item to review Service EFM programs prior to the next meeting.

Recommendation #19 read: "Child education, especially in relationship to schools in CONUS."

**General Chandler** suggested tabling this recommendation, pending a briefing on the Interstate Compact at the next Council meeting.

The Council unanimously concurred.

Recommendation #20 originally read: "Encourage funding of MyCAA program."

LTG Wilson stated that we have funding. We want to continue funding.

**ADM Greenert** stated, suggesting new wording, "that in view of the current economic situation, we should sustain current spouse employment programs and initiatives etc."

General Amos stated his concern that "there's a bill here."

**ADM Greenert** stated his concern is that in view of the pressure of unemployment that we will lose the spouses.

General Amos stated his understanding that we have \$6k per spouse.

Ms. Hruska stated that right now, it is for 2 years.

General Amos asked if the MyCAA program meant money towards a bachelor's degree.

Ms. Hruska replied that it's fees for bar exams, re-certifications etc. [Editor's note: MyCAA is for licensure/certifications supporting employment; not necessarily tied to a degree program.]

Revised Recommendation #20 read: "Sustain current spouse employment programs and initiatives, including continued funding of MyCAA program."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Recommendation #21 originally read: "Travel policy for Yellow Ribbon (revise to include extended family members and caregivers)."

Ms. Boyda stated that the policy has already been reviewed extensively, and that legislative change was the next step; support is needed from Congress.

General Amos asked Ms. Boyda: "I get to participate in Omaha Yellow Ribbon. So, I go, and my wife goes, but my wife doesn't get paid?"

Ms. Boyda replied that the nuclear family is no longer representative of families; that's the problem. It's the neighbor that's the caregiver. It's the designated representative that we want to receive benefits.

Ms. Penrod asked whether this be a part of the unified legislative process.

Ms. Boyda replied that it would be, and that the Services will be able to accommodate a designated representative.

Ms. Penrod suggested that Ms. Boyda recommend that it be a part of the ULB process.

Ms. Boyda stated that for legal reasons we need to find a way to advertise, that Reserve Affairs was trying to find a way to get around the advertising because you can't advertise Military OneSource.

Ms. Boyda continued that she recommends that there be advertising and education. The Department needs to work around the roadblocks. She suggested that perhaps some way could be found to get around not being able to advertise MOS [Military OneSource].

Revised Recommendation #21 reads: "Submit as a Unified Legislative Budget (ULB) proposal: adjust travel policy and regulations to better accommodate participation of non-dependent family members and designated representatives at Yellow Ribbon Reintegration Program events."

Vote: 10 of 10 voting members present voted in favor, 2 of 2 non-voting representatives (LTG Wilson and SGM Heinrichs) concurred.

Mr. Thomas said that his office would review and take under advisement Ms. Boyda's recommendations regarding advertising Military OneSource.

Recommendation #22 suggested that non-participation in reintegration events be taken as a sign of disress.

Ms. Boyda expounded that we see examples of non-participation as a significant distress signal, and that we should be looking at it as a way to help these individuals.

MCPON West replied that there are some people that do not want to participate and that is their right.

Ms. Boyda replied that for Yellow Ribbon events, the concern is for those who don't respond at all.

The Council voted unanimously to delete Recommendation #22.

# Intentions for the Second 2009 Meeting

Mr. Thomas presented intentions of the next meeting, to 1) amend and approve the substance of the Council's first report due 01 Feb 2010; 2) discuss feedback from the

Joint Family Readiness Conference, nationwide "Listening Sessions," and panel recommendations from the upcoming Summit on Military Families.

#### **Closing Remarks**

Ms. McGinn thanked the Council members for coming and staying late to discuss the recommendations. She also reminded the members that if they exchange any emails regarding the Council's recommendations among themselves, they need to cc herself and CDR Skinner, as these become part of the Council's deliberations for the public record.

Meeting adjourned at 4:24 PM.

Report Submitted by:

CDR Quinn Skinner, USN

DFO, Military Family Readiness Council

Report Certified by:

Ms. Gail H. McGinn

Chair, Military Family Readiness Council

#### **Members Present:**

Ms. Gail H. McGinn, Deputy Under Secretary of Defense (Plans), Performing the Duties of the Under Secretary of Defense (Personnel and Readiness), Chairwoman Ms. Kelly Hruska, Deputy Director of Government Relations, National Military Family Association (NMFA)

Ms. Bonnie Carroll, Director of Survivor Programs, Tragedy Assistance Program for Survivors

RADM S. Frank Gallo (Ret.), National Executive Director, Armed Services YMCA General James Amos, USMC, Assistant Commandant, U.S. Marine Corps ADM John Greenert, USN, Vice Chief of Naval Operations General Carrol H. Chandler, USAF, Vice Chief of Staff, U. S. Air Force SgtMajMC Carlton Kent, USMC MCPON Rick West, USN CMSAF James Roy, USAF

#### **Members Excused:**

GEN Peter Chiarelli, USA, Vice Chief of Staff, U. S. Army SMA Kenneth Preston, USA

#### Present in Lieu of Members (non-voting):

<u>For GEN Chiarelli</u>: LTG Robert Wilson, USA, Commanding General, U. S. Army Installations Command

For SMA Preston: SGM John Heinrichs, Executive Officer to the Sergeant Major of the Army

# **Advisors Present:**

Mrs. Sheila Casey

Mr. Tommy T. Thomas, Deputy Under Secretary of Defense for Military Community & Family Policy (MC&FP)

Ms. Nancy Boyda, Deputy Assistant Secretary of Defense for Reserve Affairs (Manpower and Personnel)

Dr. Jack Smith, Acting Deputy Assistant Secretary of Defense for Health Affairs (Clinical and Program Policy)

Mr. Arthur J. Myers, Principal Director for Military Community & Family Policy (MC&FP)

Ms. Vee Penrod, Office of the Deputy Under Secretary of Defense (Military Personnel Policy)

Ms. Valerie Ratliff-Thompson, Chief of Staff, Office of the Deputy Under Secretary of Defense (Civilian Personnel Policy)

Ms. Susan Roberts, Office of the Deputy Under Secretary of Defense (Transition Policy and Care Coordination)

Colonel Emerson Bascomb, USAF, Office of the Chairman of the Joint Chiefs of Staff (J1)

Mr. Alex Baird, Chief of Family Programs, National Guard Bureau

Ms. Kerry Lewis, Deputy Director, Manpower and Reserves, Headquarters, USMC Colonel Cory Lyman, USAF, Office of the Assistant Secretary of Defense (Reserve Affairs)

Ms. Barbara Thompson, Director, Office of Family Policy / Children & Youth, Office of the Deputy Under Secretary of Defense for Military Community & Family Policy (MC&FP)

CDR Quinn Skinner, Designated Federal Officer, DoD Military Family Readiness Council

#### Others Present:

Ms. Annie Fowler, Office of the Deputy Assistant Secretary of the Navy (M&RA), Personnel Readiness & Community Support

Ms. Evonne Carawan, Office of the Deputy Assistant Secretary of the Navy (M&RA), Personnel Readiness & Community Support

Ms. Delores Johnson, Office of the Deputy Assistant Secretary of the Navy (M&RA), Personnel Readiness & Community Support

Ms. Julia Springs, Health Services, Headquarters Marine Corps

Ms. Linda Stephens-Jones, USAF

Ms. Kathy Facon, Headquarters, Department of Defense Education Activity

Ms. Robin Scheper, United States Coast Guard

Ms. Joy Dunlap, Military Officers Association of America

Ms. Sue Hoppin, Military Officers Association of America

COL Dori Hash, USA Chairman of the Joint Chiefs of Staff (J1)

Ms. Kathleen Marin, Office of the Assistant Chief of Staff for Installation and Management

Ms. P.K. Tomlinson, Office of the Assistant Chief of Staff for Installation and Managerment

Mr. Thomas Yavorski, Office of the Chief of Naval Operations (N1)

Ms. Cathy Flynn, Military Community & Family Policy

Ms. Hallie Johnson, Office of the Chief of Staff of the Army, Reserve Affairs