REPORT TO THE SECRETARY OF DEFENSE AND THE CONGRESSIONAL DEFENSE COMMITTEES

Military Family Readiness Council Fiscal Year 2018 Annual Report

July 2018

Submitted by: Under Secretary of Defense for Personnel and Readiness

This report is provided in accordance with requirements set forth in section 1781a of title 10, U.S. Code (U.S.C.) which requires the Department of Defense Military Family Readiness Council to submit an annual report to the Secretary of Defense and to the congressional defense committees with assessments and recommendations regarding the adequacy and effectiveness of military family readiness programs and activities. The estimated cost of this report for the Department of Defense is approximately \$9,040 for the 2018 Fiscal Year. This includes \$6,000 in expenses and \$3,040 in DoD Labor. Generated on 2018Jul23. RefID: 9-12C1E00

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Military Family Readiness Council Fiscal Year 2018 Annual Report

Introduction

This report is provided in accordance with requirements set forth in section 1781a of title 10, United States Code, which requires the Department of Defense (DoD) Military Family Readiness Council (MFRC) (hereafter called "the Council") to submit an annual report to the Secretary of Defense and the four congressional defense committees with assessments and recommendations regarding military family readiness.

As established by law, the mission of the MFRC is to review, evaluate, and monitor military family readiness policies, programs, plans, and initiatives. Council members accomplish this task by: (1) receiving briefings and reviewing supplemental materials from subject matter experts within and outside the Department of Defense; (2) reviewing written submissions from the public; (3) attending other open federal advisory committee meetings when topics are related to MFRC areas of interest; and (4) deliberating and voting on topics considered by MFRC during the current fiscal year. At the conclusion of each year, Council members produce a list of recommended actions to be forwarded to the Secretary of Defense. They also recommend focus area topics to be reviewed by MFRC during the next fiscal year.

This FY2018 Annual Report is based on transcripts of MFRC meetings, Council deliberations, and voting by 18 congressionally-mandated MFRC members (see Appendix A). Membership is complex, balanced, and diverse. It represents the U.S. Armed Forces (active duty, Guard and Reserve), senior enlisted advisors, military spouses and parents, military support organizations, and the DoD Office of Military Family Readiness Policy.

SECTION ONE: Council Meetings

During FY2018, the Council held three two-hour meetings. Each meeting was preceded by a preparatory meeting. Preparatory meetings were used to pre-brief Council members on background information needed to facilitate Council deliberations at full Council meetings and MFRC voting procedures. In accordance with DoD Instruction 5105.04, "Department of Defense Federal Advisory Committee Management Program," preparatory meetings are not open to the public.

(1) Overview of Military Family Readiness Council Meetings

December 4, 2017: At the first meeting of FY2018, the Council received background briefings that helped them understand the needs of troops and families to include youth who are seeking military careers. Subsequently, they received focus area topic briefings from subject matter experts on issues related to Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI) as signature injuries of the current war and Community Partnerships and Collaboratives, which focus on disaster and emergency preparedness.

Detailed descriptions of these briefings can be found in Section Two of this report and in both the December 4, 2017 MFRC meeting minutes and the June 6, 2018 issue of the *MFRC Communique*, which are posted on the MFRC webpage: http://www.militaryonesource.mil/service-providers/mfrc.

Background Briefings

- Understanding America's Youth Who Are Seeking Military Careers
- What Troops and Families Are Searching for Online, Calling and Talking About
- How DoD Non-medical Counseling Program Is Meeting Military Community Needs
- Focus Area Topic #1: Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI) as Signature Injuries of Current War

Six panelists presented briefings on:

<u>Sub-Topic #1:</u> PTSD and TBI treatment progress and the need to reduce mental health stigma

<u>Sub-Topic #2:</u> Alternative PTSD and TBI treatments, connecting with mental health information and resources, and best practices for follow-up in cases of suicide

Sub-Topic #3: Addressing military cultural competence

<u>Sub-Topic #4:</u> Addressing the needs of family members experiencing compassion fatigue

<u>Sub-Topic #5:</u> Mental health needs of children impacted by Service member PTSD and TBI

Sub-Topic #6: TRICARE resources

• Focus Area Topic #2: Community Partnerships and Collaboratives

Seven panelists presented briefings on:

<u>Sub-Topic #1:</u> Disaster preparedness and response as implemented by DODEA schools in support of parents and children in Puerto Rico as impacted by two back-to-back catastrophic 2017 hurricanes

<u>Sub-Topic #2:</u> Emergency preparedness systems used by Army, Navy, Marine Corps, Air Force, National Guard and DODEA

March 6, 2018 Meeting: At the second meeting of the year, the Council received status update briefings on three topics related to special interest areas of the Council and panel presentations on the two remaining focus area topics selected for review during FY2018: Child and Youth Well-being and Spouse Licensure Portability. Brief summaries of these briefings can be found in Section Two of this report, the March 6, 2018 MFRC meeting minutes, and the March 6, 2018 issue of the *MFRC Communique* which is posted on the MFRC webpage: http://www.militaryonesource.mil/service-providers/mfrc.

• Special Interest Status Update Briefings:

- Interstate Compact for Educational Opportunity for Military Children
- Exceptional Family Member Program Standardization and Collaboration: Integration of Medical, Special Education and Family Support Services
- Blended Retirement System Implementation
- Focus Area Topic #3: Child and Youth Well-being

Seven panelists presented focus area briefings on:

<u>Sub-Topic #1:</u> Domains of Child and Youth Well-being
<u>Sub-Topic #2:</u> New Parent Support
<u>Sub-Topic #3:</u> DoD Child Care and Child and Youth Development
<u>Sub-Topic #4:</u> Joint Base Lewis-McChord Center for Autism Resources, Education and Services ("JBLM CARES")
<u>Sub-Topic #5:</u> TeleMedicine/TeleMental Health: Expanded Benefits and Access to Care
<u>Sub-Topic #6:</u> Serving Military Youth On and Off Base
<u>Sub-Topic #7:</u> Character Development: US Military Academy/West Point

• Focus Area Topic #4: Spouse Licensure Portability

Four panelists presented update briefings on:

<u>Sub-Topic #1:</u> Spouse Licensure Portability Status Update
 <u>Sub-Topic #2:</u> Processes and Progress Made for Military Spouse Educators
 <u>Sub-Topic #3:</u> Processes and Progress Made for Military Spouse Physical
 Therapists
 Sub-Topic #4: Perspectives, Processes, and Progress for State Legislators

June 6, 2018 Meeting: Prior to the final MFRC meeting of FY2018, Council members submitted draft FY2018 recommendations to the MFRC Designated Federal Officer (DFO) as well as suggested focus area topics for Council review during FY2019. These recommendations and focus area suggestions were integrated into a final meeting and voting agenda, which guided sponsor presentations and deliberations. After careful consideration, seven final recommendations were endorsed for FY2018, and two focus area topics were selected for review during FY2019.

An FY2018 MFRC Fact Sheet (Appendix B) was subsequently developed and posted on the MFRC webpage for Council member and public review. This fact sheet captures the FY2018 recommendations and FY2019 focus areas described in this report.

(2) Written Public Submissions

During FY2018, the Council received 30 written public submissions for review and consideration. Submissions were provided to Council members prior to the December 4, 2017 and March 6, 2018 MFRC meetings and were documented in executive summaries for each meeting. Three written submissions were received following the June 6, 2018 meeting. An integrated listing of these submissions can be found at Appendix C of this report.

(3) Military Family Readiness Issuances

There were 21 military family readiness-related issuances published by DoD, the military Services, and the National Guard between 1 June 2017 and 31 May 2018. A list of these issuances is available at Appendix D of this report. A brief description of each issuance was captured in June 6, 2018 MFRC meeting minutes which are posted on the MFRC webpage: http://www.militaryonesource.mil/service-providers/mfrc.

SECTION TWO: Fiscal Year 2018 Focus Areas

<u>Focus Area #1:</u> Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI) as Signature Injuries of Current War

The Department of Defense was asked to address the following:

- PTSD Treatment Progress
- Mental Health Stigma
- Ability to provide vicarious trauma treatment for spouses and children
- Complimentary alternative medicine treatment (e.g., Build Spiritual Support offered by VA for moral injury, equine therapy offered by VA and TRICARE)
- Standard of medical practice for veterans vs. active duty
- Removal of barriers that restrict ability for military medical services to provide flexible evidence-based care

During the December 4, 2017 MFRC meeting, a panel of subject matter experts briefed the Council on key initiatives that addressed the six topics listed above. Ms. Michelle Padgett, from the Office of the Assistant Secretary of the Air Force (Manpower and Reserve Affairs) (Warrior Wellness and Policy Integration), facilitated panel presentations and explained that Service member experiences shape military families. In the process, PTSD and TBI have become the signature injuries of the current war. This panel of researchers, medical clinicians, policy makers and service providers discussed how the DoD and VA health care systems are being integrated with military family support and K-12 schools in order to provide complementary and integrated support services. This evolving model is transforming direct services to troops and families and filling resource gaps that have been a challenge for years in military and civilian communities.

Sub-Topic Briefing Summaries:

- (1) <u>Reducing Mental Health Stigma:</u> Dr. Kate McGraw from the Defense Health Agency (Psychological Health Center of Excellence) explained that DoD significantly increased health care resources, nearly tripled mental health care provided, increased staff by 42 percent, and made PTSD research a top priority. New tools are now available to help families understand what their Service member may be feeling. The Real Warriors Campaign reminds troops and families that seeking help is a sign of strength, not weakness. To make seeking help easier, the DoD inTransition Program automatically assigns a coach to Service members who sought help in the last year. They must opt out if they choose not to be part of the program. In their "A Head for the Future" program, help is focused on prevention, recognition, recovery, and learning from Service members who have shared their traumatic injury stories.
- (2) <u>Alternative Mental Health Treatment Options, Connecting with Mental Health Resources, and Postvention Needed by Clinicians in Cases of Suicide</u>: Dr. Al Ozanian from the Department of Veterans Affairs (Office of Mental Health and Suicide Prevention) explained that the Veterans Health Administration is proactively offering complementary and integrated health (CIH) services to be used to complement conventional medicine but not to be used as an alternative to conventional medicine. The VA and DoD Clinical Practice Guidelines for PTSD state there is insufficient evidence to recommend any CIH practice as a primary treatment for PTSD. There is, however, value in improving wellness and promoting recovery. Ninety-three percent of VA medical centers offer at least one of the following CIH services: Stress Management and Relaxation Therapy (SMART), Mindfulness, Guided Imagery, Yoga, Progressive Muscle Relaxation Therapy (PMRT), Art Therapy, Acupuncture, Music Therapy, Biofeedback and Animal-Assisted Therapy.
- (3) <u>Military Cultural Awareness and Competence</u>: Dr. John Davison from the Defense Health Agency (Clinical Communities Support) explained that cultural competence honors and respects beliefs, interpersonal style, and behaviors of individuals within a culture. When people lack military cultural awareness and competence in the military health care system, veterans, Service members and family members: (1) may not seek the services they need; (2) cannot easily access treatment; (3) drop out of care; (4) are misdiagnosed; or (5) seek care only when their illness or injury is at an advanced stage. As a result, DoD has developed a "provider readiness designation," which indicates that providers of care throughout the military medical health care system have military cultural awareness and competence. A free, eight-hour training (with two CEU credits per module) is now available for providers. Additionally, a list of TRICARE providers with this new designation will be made publicly available through TRICARE T17 Managed Care Support Contractors (Humana and HealthNet Federal Services).
- (4) <u>Impacts of Compassion Fatigue</u>: Dr. Patricia Moseley from the Defense Health Agency (Military Child and Family Behavioral Health) explained that compassion fatigue is the emotional strain of exposure to working with those suffering from the consequences of traumatic events. It develops over time. It can result in emotional blunting as one's ability

to feel and care for others becomes eroded. Vicarious or secondary trauma can also occur when an individual learns about a trauma that has occurred to a close family member or friend or when an individual experiences repeated exposure to the adverse details of traumatic events.

Signs of compassion fatigue include: (1) impacts on overall well-being; (2) sleep disturbances; (3) changes in emotional intensity; (4) impaired judgement and behavior; (5) loss of morale, self-worth, hope and meaning; (6) isolation; (7) depression; and (8) anger. Ways to manage compassion fatigue include: (1) finding someone to talk to; (2) understanding that your feelings and pain are normal; (3) getting enough sleep, exercise and eating properly; (4) taking some time off; (5) developing new interests; and (6) identifying what is important to you.

(5) <u>Impacts of Service Member PTSD and TBI on Children</u>: COL Christopher Ivany, an Army Child and Family Behavioral Health System and RAND Research Fellow, explained that Army's Child and Family Behavioral Health System (CAFBHS) is currently promoting: (1) access to care; (2) evidence-based clinical practices; (3) value-based outcomes; and (4) care delivered at a convenient location (including DoD school settings). It involves training primary care managers and behavioral health providers in evidence-based practices. It provides consultative support to primary care managers and implements school-based behavioral health. Through the "Partnering for Readiness" (P4R) Connector Program, family support resources are being integrated and shared with the military mental health care delivery system, which supports military children through Memoranda of Agreement with a growing number of federal agencies and support organizations, including Military OneSource, the Substance Abuse and Mental Health Services Administration (SAMHSA), Military Kids Connect (MKC), Defense Centers of Excellence (DCOE), and others.

<u>NOTE</u>: Resources referenced by presenters at Council meetings for Focus Area #1 are provided at Appendix E.

<u>Focus Area #2:</u> Community Partnerships and Collaboratives - Focus: Disaster Preparedness and Emergency Response

At its December 4, 2017 meeting, the MFRC received disaster preparedness and response briefings from Dr. Donato Cuadrado, Community Superintendent for DODEA Schools in Puerto Rico in the aftermath of two devastating hurricanes in the Fall of 2017, and from DODEA and the military Services, including the National Guard, regarding disaster preparedness plans, collaboration initiatives, and personnel accountability systems.

Sub-Topic Briefing Summaries:

(1) DODEA Schools Community Disaster Relief Efforts in Puerto Rico: Dr. Donato Cuadrado, Community Superintendent of DODEA Schools in Puerto Rico, explained that Hurricane Irma struck Puerto Rico first, quickly followed by Hurricane Maria. After Maria devastated the island, the airport closed for 11 days and relief organizations could not deliver supplies. Winds and flood waters damaged 472,000 homes and most cell phone towers fell, disrupting phone service for residents as well as for relief workers. Ft. Buchanan was fortunate to continue to have cell service. Employees could not get to work and all community commands and organizations had to collaborate to help each other. The power grid had to be repaired. It took two weeks to clear trees and other debris from around DoD schools. When schools reopened, leaders and counselors met with students and parents who worked together in a coordinated community response to launch and continue the recovery process which continues one year later.

Dr. Cuadrado noted that DODEA worked with many partners on and off base in the recovery effort, including: (1) Federal Emergency Management Agency (FEMA); (2) Puerto Rico National Guard; (3) U.S. Army Corps of Engineers; (4) US Coast Guard; and (5) parents. Based on lessons learned, Dr. Cuadrado suggested the following be included in emergency response checklists and kits: (1) chainsaws; (2) satellite phones; (3) maps identifying where people live so accountability assessments can be conducted; and (4) water for 7-10 days. He also suggested using resources for different purposes: (1) social media sites can become emergency contact providers; (2) diesel fuel for school buses can be used to fuel power generators; and (3) cafeteria food for children can also feed parents and emergency workers.

- (2) <u>Military Services and DODEA Disaster Preparedness and Response Systems</u>: All four military Services stated they have strong working relationships with FEMA and other emergency preparedness and disaster response agencies. They also stated they have personnel accountability systems that can track the status of troops and families experiencing emergency scenarios. These systems require on-going updates to remain effective.
 - Family Centers and Military OneSource were acknowledged as key responders who provide valuable information, support and assistance to victims and survivors.
 - The Marine Corps recently offered 137 courses and had 3,500 participants in online and face-to-face disaster preparedness courses that provide tangible ideas for how communities can improve emergency preparedness and response.
 - The National Guard reminded MFRC that when disaster strikes, Guardsmen from one state may be called to respond to man-made or natural disasters in another state, leaving their families behind. These families need status updates regarding their Guardsman and may need direct services and support as well.
 - DODEA reported they provide school-aged children with a helpful emergency checklist to take home to parents to improve family readiness for disasters. They stated DoD Non-medical Counselors (e.g., Military Family Life Counselors) who work in DoD schools are a valued community asset, especially during times of emergency relief operations.
 - DODEA and the Coast Guard set up special phone lines for families to use to provide status updates between troops and families who were evacuated or deployed during crisis scenarios.

Focus Area #3: Child and Youth Well-being

Child and youth well-being for those with parents serving in the active, Guard and Reserve forces is an on-going priority for DoD and the Military Family Readiness Council. At the March 6, 2018 MFRC meeting, Dr. Mary Keller, MFRC member and CEO of the Military Child Education Coalition (MCEC), facilitated presentations from a panel of subject matter experts from inside and outside DoD following an evidenced-based model of child well-being.

Sub-Topic Briefing Summaries:

- (1) <u>New Parent Support</u>: Ms. Tib Campise from the DoD Family Advocacy and New Parent Programs briefed MFRC members on how support is provided to new parents in their role as guardians and family members. The New Parent Support Program (NPSP) nurtures healthy relationships in early years, helping parents provide a strong foundation that results in long-term well-being for children and youth. Services include home visits by highly-trained and experienced staff, parent education and skill development, and opportunities to ask questions about topics such as breastfeeding, safe sleep, child development, discipline, family budgeting, and more.
- (2) <u>DoD Child Care and Child and Youth Development:</u> Ms. Carolyn Stevens, MFRC member and Director of the DoD Office of Military Family Readiness Policy, explained that the DoD Child Development system of care offers full-day, part-day, and hourly child care, part-day preschools, and before and after school programs for school-age children. Child care services are provided utilizing Child Development Centers (CDC), School-Age Care (SAC) Programs, and Family Child Care (FCC) homes. When care is unavailable on the installation, families may be eligible for community-based child care fee assistance. DoD's system of care provides approximately 160,000 child care spaces through CDC's, SAC Programs, FCC's and community-based care. DoD also supports Guard and Reserve component families.

<u>DoD Youth and Teen Centers</u> worldwide offer a variety of educational and recreational programs on an annual basis. The Youth Sponsorship Program facilitates the integration of youth when moving between military installations at the time of permanent change of station (PCS). The military Services and installations are affiliated with Boys and Girls Clubs of America (BGCA) and 4-H programs to expand child and youth programming on and off installations. Camp programs are also offered for Guard and Reserve youth and teens.

(3) JBLM CARES (Supportifor Autistic Children and Parents): COL Eric Flake, Developmental Pediatrician at Madigan Army Medical Center, stated that across the United States, one in every 68 children is diagnosed with autism spectrum disorder. In some military communities, that number is even greater - one in every 40 children - thus impacting approximately 5 percent of our military families. There is no single treatment for children with autism as cases are neurodevelopmental in nature and unique to each child. Autistic children need help developing skills ranging from communication and behavior to feeding, social relationships, and more. Parents of autistic children need support from each other, schools, medical practitioners, and the community at large. The Department of Defense stands ready to support parents with children diagnosed with autism spectrum disorder by providing assistance when relocating and connecting them to needed benefits and services. The new Joint Base Lewis-McChord Center for Autism, Resources, Education and Services (JBLM CARES) in Tacoma, Washington, aims to fill immediate gaps in services while families wait to access local community, state, and federal support services and benefits.

(4) <u>TRICARE / Defense Health Agency: Expanded Benefits, Resources and Recent Changes:</u> CAPT Ed Simmer, Chief Clinical Officer for TRICARE Health Plan, explained that TRICARE is working to ensure beneficiaries can easily receive high quality care. To that end, TRICARE has made a number of changes to the mental health benefit in the past year, including: (1) eliminating limits on treatment; (2) expanding access to substance abuse treatment; (3) covering medication-assisted treatment; (4) reducing certification requirements at treatment centers; and (5) expanding telehealth benefits.

TRICARE's overarching goal is to make sure there is one integrated system of care for Service members and family members no matter where they are serving. Recent changes in mental health benefits are helping TRICARE achieve this important goal.

CAPT Simmer highlighted two important policy changes in the TRICARE Policy Manual (Ch. 5, Sec 1, 1.3) (http://manuals.tricare.osd.mil):

- Telehealth modalities are covered services to the same extent as if provided in person
- To the extent practical, the contractor shall offer telemedicine to all TRICARE beneficiaries, regardless of location

CAPT Simmer pointed out what troops, families, and service providers need to know about recent changes and recommended they reach out to TRICARE navigators who can provide helpful information and referrals.

(5) Boys and Girls Clubs of America Better Together Partnership with DoD: Ms. Terrill McFarland, from Boys & Girls Clubs of America (BGCA), provided an overview of their partnership with the Department of Defense. She explained that BGCA helps military children thrive as vital members of their community. Thousands of BGCA youth development professionals serve as mentors and program facilitators, providing kids with important character development opportunities and caring relationships customized to their unique needs. In 2016, over 458,000 military-connected youth participated in BGCA programs at 484 on-base youth centers, with an additional 22,500 youth participating in programs at 1,437 clubs in local communities.

In 2016, BGCA launched the Better Together: Military Public-Private Partnership (MPPP), a groundbreaking, action-focused initiative bringing together government agencies, military-serving organizations, private sector corporations and foundations. This partnership is designed to improve the lives of military families in civilian

communities. Better Together provides solutions focused on resiliency, reintegration, and workforce readiness. It promotes healthy military families. Through Better Together, BGCA strives to provide resources and services to 250,000 military connected youth. Annually, BGCA provides grants and in-kind resources valued at \$2.5 million to military youth centers. The Military Services are working with BGCA programs worldwide to teach young people resilience skills and valuable character traits that allow them to reach their full potential.

(6) West Point (U.S. Military Academy) Character and Leadership Development for Cadets: <u>Project Aretes</u>: Dr. Kristin Callina, from Tufts University, pointed out that schools and youth-serving organizations have a key role to play in developing the character of our nation's youth. Programs such as scouting (Eagle Scouts, in particular) help instill core values, leadership, and decision-making skills that have a common moral purpose. As discussed in a recent National Academy of Sciences meeting on character, more work needs to be done to understand how character develops. Researchers at Tufts University are collaborating with the United States Military Academy on a first-of-its-kind, five-year longitudinal study of how West Point develops character and leadership in its cadets, a project that could help predict which practices produce successful officers and influence character and leadership education in schools, businesses, and other organizations. Dr. Callina offered to provide updates for MFRC on this research initiative.

<u>NOTE</u>: Resources referenced by presenters at Council meetings for Focus Area #3 are provided at Appendix E.

Focus Area #4: Spouse Licensure Portability

The final focus area reviewed by MFRC during FY2018 was Spouse Licensure Portability. Mr. Marcus Beauregard, Director of the Defense-State Liaison Office (DSLO), provided a status update report which highlighted what his office is doing to help expand spouse licensure portability options. He then turned his attention to three panel members who showcased actions they are taking to facilitate progress at the state and national level.

Sub-Topic Briefing Summaries:

(1) <u>DSLO Spouse Licensure Portability Status Update</u>: Marcus Beauregard, Director, DSLO, explained that from 2011 to 2016, his office worked with states to improve spouse licensure primarily through endorsement, temporary licensure, and expedited processes. Thirty nine states established laws to improve endorsement, 42 to allow temporary licensing, and 31 established policies to expedite license applications for military spouses (an aggregate total of 48 states). These results were validated through a study conducted by the University of Minnesota in 2017. This study showed that licensing boards within these states have not been consistent in implementing their laws and policies.

In FY2018, DSLO found that 23 states had existing or enacted policies that impacted military spouse teacher certification. Professional license compacts appeared to show great promise in many states for their positive impacts on four professions of particular

interest to military spouses: Physical Therapy Compacts, Enhanced Nurse Licensure Compacts, REPLICA -- Emergency Medical Services Compacts, and PSYPACT --Psychological Interjurisdictional Compacts.

Guest speakers on the Spouse Licensure Portability panel provided examples of actions they are taking to facilitate needed licensure change within their professions.

- (2) Processes and Progress Made for Military Spouse Educators: Kim Lopez, military spouse and educator, wants to allow military spouses to seamlessly transfer their teaching credentials from one state to another without any state obstacles. To reach that goal, she met with Utah decision-makers to work out-of-state licensing options. She organized State of Utah listening sessions and met with Senator Weiler to advocate for changes in legislation. She met with federal decision-makers at the White House and with the Chairman of the Federal Trade Commission. Finally, she partnered with the National Military Family Association Military Spouse Professional Teaching Network (1,300 members) and began developing podcasts, news articles, and blogs to educate the public and other military spouses on military spouse licensure issues.
- (3) Processes and Progress Made for Military Spouse Physical Therapists: Leslie Adrian, military spouse and Director of Professional Standards for the Federation of State Boards of Physical Therapy, is working to facilitate interstate practice of physical therapy with the goal of improving public access to physical therapy services. Her change management model connects mutual recognition of authorization to practice with notification to the new jurisdiction of intent to practice. By asking compact states to adopt this model, she points out these important compact benefits: (1) improved access to physical therapy providers; (2) improved mobility of licenses; (3) preservation of current state-based licensure systems; (4) improved public protection; (5) an eye to the future will work in new health care delivery models; and (6) improved portability for military spouses wanting to work in new states with a valid license in their home state.
- (4) Perspectives. Processes and Progress for State Legislators: Nebraska State Senator Carol Blood explained why legislators must step up to the plate as "families also serve." More than 1.3 million active Service members are working to keep America safe. Few states can deny the military's impact on local economies. DoD contributes billions of dollars each year to state economies through the operation of military installations. If states want to keep military installations in their states, they must support those who serve, including military family members. Senator Blood supports expedited licenses, temporary licenses, licenses by endorsement, and interstate compacts. But she says that licensure issues are not always about laws. She reminds state legislators that some licensure issues can be solved by changes to policies and processes. She also reminds legislators that licensure portability is not only helpful for military spouses. It is also helpful to others looking to work in another participating state. She stressed the need to not address scope of practice, whenever possible.

SECTION THREE: Council Recommendations

Each year, MFRC Council members are asked to develop and submit draft recommendations on topics for which they received information and educational briefings during the current fiscal year. These recommendations are then verbally presented by sponsoring Council members to the full Council for deliberation and voting at the final meeting of the year, which was June 6, 2018.

The following is a list of seven recommendations that were endorsed by the Council to be forwarded to the Secretary of Defense. Additional information regarding the intent of the Council with regard to each recommendation can be found in the June 6, 2018 MFRC meeting minutes. For final recommendations that were a combination of more than one initial draft recommendation, the Council's intent will be integrated and documented by the MFRC DFO and sponsoring Council members for subsequent tracking purposes.

Two focus area topics were also selected to guide the work of the Council in FY2019.

FY2018 Recommendations for the Secretary of Defense

(1) Increase awareness of and opportunities for spouse employment by supporting:

- Quality-weighted assessments of community and surrounding area support for spouse employment and K-12 public education to be used by military logistical planning functions in strategic basing/mission alignment decisions
- Continued efforts focused on spouse licensure portability, education benefits, and mobility support for military families
- DOL and other government and non-governmental agencies to continuously improve support for military spouses and children

(2) Enhance services for special needs military families by:

- Evaluating the resources for special needs families at the Joint Base Lewis-McChord Center for Autism Resources, Education and Services (JBLM CARES)
- Requiring the DoD Office of Special Needs (OSN) to report on EFMP/Assignment Coordination performance metrics
- Requiring OSN to continue to enhance and improve Exceptional Family Member Program (EFMP) standardization
- (3) Ensure military families have access to a broad range of resources, services, programs, and expertise through:
 - Expanded Community Collaboration and Coordination
 - Continuing the Boys and Girls Clubs of America (BGCA) Better Together Partnership
- (4) Report on accession and medical record policies and procedures and the impact on military children who received mental health behavioral health services

- (5) Revitalize childcare accessibility in military child and youth services programs and ensure funding
- (6) Modernize the definition of military family readiness from a "life course" perspective
- (7) Provide support for child and youth services staff dealing with increasing behavioral issues

Focus Area Topics to be reviewed during FY2019

- (1) Accession and medical records policies and procedures and the impact on military children who received mental and behavioral health services
- (2) Service and family member programs tailored to millennials

SECTION FOUR: Communication and Tracking Tools

During FY2018, MFRC made a commitment to strengthen communication efforts with those interested in military family readiness issues. It also began tracking progress made in implementing MFRC recommendations accepted by the Secretary of Defense.

- (1) <u>MFRC Fact Sheets</u>: Following the final meeting of each fiscal year, MFRC publishes an updated fact sheet, which provides an overview of the MFRC mission, scope, membership, meetings, recommendations, and focus areas reviewed by the Council.
- (2) <u>MFRC Communique</u>: In order to better support the work of the Council, MFRC publishes an electronic newsletter called the *MFRC Communique*. This communication tool documents and shares key information, resources, and recommendations made by subject matter experts and guest speakers, inside and outside of DoD, who made presentations at MFRC meetings. Council members, policy makers, program managers, and meeting attendees are encouraged to promote and distribute this document to their command leaders and community members.
- (3) <u>MFRC Status Update Report</u>: Beginning this year, MFRC will develop an MFRC Status Update Report that tracks progress made on recommendations and focus area topics accepted by the Secretary of Defense.
- (4) <u>MFRC Webpage and eMailbox</u>: During FY2018, the MFRC webpage was expanded to include a Resources section, which provides easy access to information related to Council work, including meeting minutes, annual reports, fact sheets, and the *MFRC Communique*. It also holds an MFRC Orientation Slide Deck that explains who serves on the Council, how the Council works, and how the public can engage with the Council on issues that fall within its scope. Written public submissions can be sent to the Council's eMailbox. Email: osd.pentagon.ousd-p-r.mbx.family-readiness-council@mail.mil Webpage: https://www.mititaryonesource.mit/web/mos/mititary-famity-readiness-counsit.output/web/mos/mititary-famity-readiness-counsit

Conclusion

The Department of Defense recognizes the value of the Military Family Readiness Council as an effective forum through which important military family readiness issues and requirements can be discussed and improved. A diverse Council membership ensures that the perspectives of troops and families, commanders, and community partners are solicited and heard, and that information is shared often and effectively. Through their collective efforts, all community members will be able to gain a greater understanding of how change can be made in an organization as large as the Department of Defense. As a facilitating forum, the DoD MFRC recognizes and thanks all participants.

APPENDIX A:

Members of the Military Family Readiness Council (FY2018)

MFRC Chair: Under Secretary of Defense for Personnel and Readiness

The Honorable Robert L. Wilkie Alternate Chair: Ms. Stephanie Barna, Acting Assistant Secretary of Defense (Manpower and Reserve Affairs)

Department of Defense Office of Military Family Readiness Policy

Ms. Carolyn Stevens, Director

Service Member Representatives for Army, Navy, Air Force and Marine Corps

Lieutenant General Gwendolyn Bingham, Assistant Chief of Staff for Installation Management, U.S. Army Rear Admiral (Lower Half) Karl Thomas, Director, Twenty-first Century Sailor Office, U.S. Navy; rotated to Rear Admiral (Lower Half) Philip Sobeck Brigadier General Kathleen Cook, Director, Air Force Services, U.S. Air Force Brigadier General Kurt Stein, Director, Marine and Family Programs, U.S. Marine Corps; Relieved by Marie Balocki, SES

Representative of the Army National Guard or the Air National Guard

Major General Kevin McNeely, Director, Manpower and Personnel (J1), Army National Guard; rotated to Brigadier General Jessica Meyeraan, Vice Director J1, Air National Guard

Senior Enlisted Advisors of Army, Navy, Air Force and Marine Corps

Sergeant Major of the Army Daniel Dailey Ms. Elka Franco-Giordano, Spouse of the Master Chief Petty Officer of the Navy Chief Master Sergeant of the Air Force Kaleth Wright Ms. Andrea Smith-Green, Spouse of the Sergeant Major of the Marine Corps

Spouses or Parents of Members of Army, Navy, Air Force and Marine Corps

Ms. Laura Conley, U. S. Army National Guard Spouse Ms. Jennifer Luscher, U.S. Navy Reserve Spouse Ms. Michelle Padgett, U.S. Air Force Active Duty Spouse Ms. Julie Margolis, U.S. Marine Corps Active Duty Spouse

Representatives of Military Serving Organizations

Dr. Mary Keller, Military Child Education Coalition Dr. David Rubin, Children's Hospital of Philadelphia Ms. Karen Ruedisueli, National Military Family Association

APPENDIX B:

FY2018 MFRC Fact Sheet (June 6, 2018) (Attached)

APPENDIX C:

MFRC FY2018 Integrated Written Public Submissions

- PTSD and TBI Resources:
 - Invest Protect Card with Civilian and Flight Suit Invisible Wounds, Visible Care: A Road to Care and Recovery Commander's Call Talking Points: Invisible Wounds Initiative
- TRICARE for Kids Coalition Letter
- URLs to Articles:
 - Board Report Sparks Push to Improve Military Kidsi Healthcare Teacher License Reciprocity (Sponsored by the Education Commission of the States) More States Are Making It Easier to Transfer Your Teaching License Blog for Education Week Teacher
- 2014 Quick Compass of TRICARE Child Beneficiaries: Utilization of Medicaid Waivered Services
- Medicaid's Role in Treating Children in Military Families
- Medicaid and Military Families with Children with Special Health Care Needs: Accessing Medicaid and Waivered Services
- The Dangers of Living in Base Housing (Slide Deck Presentation)
- Lincoln Military Housing (Camp Pendleton)
- Spouse Letters (11) About Military Housing
- Letter regarding difficulties experienced by a special needs child at the time of relocation
- Pediatric Advocacy Forum Briefing Slides
- Article from the Journal of Character Education, Vol 13(1), 2017 -- "Approaches to the Development of Character in Organized Out-of-School Settings"
- Identifying Opportunities to Address Child Abuse and Neglect in U.S. Army Families
- Military Family Learning Network (MFLN) online archived resources: 2017 Personal Finance Year in Review Webinar The Blended Retirement System Launch: Q&A Webinar and Briefing Slides Income Tax Tips for PFMs Working with Military Families Webinar
- Military Resources for Families with Special Needs Information Paper
- JBLM CARES: Center for Autism Resources, Education and Services Tri-Fold
- Military Kids Connect (MKC): An Online Resource for Your Patients
- Military Kids Connect Information Cards
- Navy Family Framework (Strategic Plan: Version 1.0, November 2017)
- Presidential Document: Executive Order 13822 of January 9, 2018, "Supporting Our Veterans During Their Transition from Uniformed Service to Civilian Life"
- Fact Sheet/Article: President Donald J. Trump Takes Care of Veterans from the Battlefield to the Home Front
- Improving Child Abuse Reporting and Treatment for Military Families
- Military Child Education Coalition (MCEC) 2018 Calendar created by US Army Children in Germany

APPENDIX D:

Military Family Readiness Issuances June 1, 2017 – May 31, 2018

DoD

- DoD Instruction (DoDI) 6400.01 (Family Advocacy), February 13, 2015 Incorporating Change 2, effective 16 Mar 2018
- DoD Manual 6400.01, Volume 1 (Family Advocacy), March 3, 2015, Incorporating Change 2, effective 16 March 2018
- DoD Instruction (DoDI) 6400.06 (Family Advocacy), March 31, 2017 (Ch. 3)), Incorporating Change 4, effective 4 May 2017

Army

- Child Development Services AR 608-10; 11 May 2017
- Renewal Charter for the Army Family Action Plan (AFAP) General Officer Steering Committee (GSOC); 17 Jul 2017
- Army Community Service (ACS) AR 608-1; 19 Oct 2017
- FRAGO 2 to Total Army Sponsorshipi– AR 600-8-8; 9 Nov 2017

Navy

- NAVADMIN 133/17 6 Jun 17: Notification of Availability of the Blended Retirement System Opt-In Comparison Calculator
- NAVADMIN 194/17 8 Aug 17: Family Readiness Groups and IRS Tax Law Changes
- NAVADMIN 294/17 15 Dec 17: Final Reminder to Complete Blended Retirement System Opt-In Training
- NAVADMIN 302/17 20 Dec 17: Notification of the Start of the Blended Retirement System Enrollment Period and Enrollment Instructions for Opt-In Eligible Service Members
- NAVADMIN 046/18 26 Feb 18: Command Ombudsman and Family Readiness Group Emergency Readiness and Response
- OPNAVINST 1740.4E: U.S. Navy Family Care Policy; 5 Oct 17
- OPNAVINST 1740.5D: United States Navy Personal Financial Management Program; 24 Oct 17
- OPNAVINST 1754.2F: Exceptional Family Member Program (EFMP); 15 Nov 2017
- OPNAVINST 1720.3G: Navy Retired Activities Program; 3 Jan 18
- OPNAVINST 1754.5C: Family Readiness Groups; 25 Jan 18

Air Force

• Air Force Guidance Memorandum 2017-36-05, Relocation Assistance Program; 17 Nov 17

Marine Corps

• MCO 5512.11E 04 Aug 2017: Identification Cards for Members of the Uniformed Services, their Eligible Family Members, and Other Eligible Personnel

National Guard

- Memorandum of Understanding (National Guard Bureau Employment Support Program and FASTPORT); 30 Oct 2017
- Safe Haven Memo 2 Apr 2018

Appendix E

Resources Referenced by Presenters at MFRC Meetings

<u>Focus Area #1:</u> Post-Traumatic Stress Disorder and Traumatic Brain Injury as Signature Injuries of Current War

A Family's Guide to Posttraumatic Stress Disorder

https://www.pdhealth.mil or https://www.healthquality.va.gov Includes information on symptoms, treatment options, coping strategies and helpful resources.

Resources Supporting: Reducing Mental Health Stigma

- RealWarriors.net https://www.realwarriors.net/
- Psychological Health Resource Center https://www/pdhealth.mil/resource-center/call-centers/psychological-health-resource-center
- **inTransition Program** https://www.pdhealth.mil/resource-center/intransition
- A Head for the Future Program http://dvbic.dcoe.mil/aheadforthefuture

Resources Supporting: <u>Alternative Mental Health Treatment Options, Connecting with Mental</u> Health Resources, and Postvention Needed by Clinicians in Cases of Suicide

- Veterans Crisis Line: 800-273-8255, Press 1; Texti- 838255; Live Chat www.veteranscrisisline.net
- Vet Centers: 877-WAR-VETS (927-8387)
- Coaching into Care: 888-823-7458 https://www.mirecc.va.gov/coaching
- Veteran Training www.veterantraining.va.gov
- AboutFace https://www.ptsd.va.gov/apps/aboutface/
- Inpatient/Outpatient Mental Health Services and Community Programs www.mentalhealth.va.gov
- MaketheConnection.net www.maketheconnection.net
- Suicide Postvention http://www.sprc.org

Resources Supporting: Military Cultural Awareness and Competence

• Center for Deployment Psychology http://deploymentpsych.org/psychological-training

- **Community Provider Toolkit** www.mentalhealth.va.gov/communityproviders
- VA Employee Education System https://www.vacareers.va.gov/why-choose-va/education-support.asp

Resources Supporting: Impacts of Compassion Fatigue

- Chaplain Support -- Seek local command and community chaplain care to address moral injury. Ask for spiritual counseling and family support groups. Use the link to Military INSTALLATIONS at the bottom of the front page of Military OneSource: https://www.MilitaryOneSource.mil to find local chaplain support.
- Military Treatment Facilities and TRICARE Providers
 <u>Humana Military and TRICARE East</u>
 https://www.humanamilitary.com/east/
 <u>Health Net Federal Services (HNFS) and TRICARE West</u>
 https://www.tricare-west.com/
- Morale, Welfare and Recreation Activities http://www.militaryinstallations.dod.mil/MOS/f?p=MI:ENTRY:0
- **Department of Defense Non-medical Counseling: 800-342-9647** https://www.militaryonesource.mil/non-medical-counseling
- **Respite Care** https://www.militaryonesource.mil/wounded-warrior
- **Caregiver Support: 800-342-9647** https://www.militaryonesource.mil/caregiver-support-services
- National Resource Directory https://www.nrd.gov
- **TRICARE Extended Care Health Option (ECHO)**i– For special needs families https://tricare.mil/echo
- Veterans Affairs (VA) Medical Centers: 855-260-3274 https://www.caregiver.va.gov/support/support_services.asp https://www.va.gov/geriatrics/Guide/LongTermCare/Respite_Care.asp

Resources Supporting: Impacts of Service Member PTSD and TBI on Children

• Army Child and Family Behavioral Health System (examples):

Blanchfield Army Community Hospital:

http://blanchfield.amedd.army.mil/HealthcareServices/SitePages/CAFBHS%20-%20Child%20and%20Adolescent%20BH.aspx

Carl R. Damall Army Medical Center:

https://www.crdamc.amedd.army.mil/behav-health/hap-capes.aspx

Focus Area #3: Child and Youth Well-being

Resources Supporting: <u>TRICARE / Defense Health Agency: Expanded Benefits, Resources and</u> <u>Recent Changes</u>

- Humana Military and TRICARE East https://www.humanamilitary.com/east/
- <u>Health Net Federal Services (HNFS) and TRICARE West</u> https://www.tricare-west.com/



Military Family Readiness Council

June 6, 2018

http://www.militaryonesource.mil/military-family-readiness-council

MEMBERSHIP

MFRC has 18 members who represent specific constituents. They serve two or three year terms, with annual renewals.

Chair: USD(P&R) Alternate Chair: ASD(M&RA)

- Director of the Office of Community Support for Military Families with Special Needs
- I Representative from each of the Military Services (Flag and General Officers responsible for Family Readiness)
- I Representative from the Army National Guard or Air National Guard (rotates)
- I Spouse or Parent of Service Members from each of the Military Services (2 from Active and 2 from Reserve Components)
- 3 Representatives from Military Family Organizations
- Senior Enlisted Advisors from all four Military Services, two of which can be their Spouses (rotates)

See "Meet the Members" on the MFRC webpage for MFRC member biographies. **MISSION:** The MFRC is a legally mandated advisory committee that reviews, evaluates and monitors military family readiness policies, programs, plans and initiatives. It provides independent advice to the Secretary of Defense and the four congressional defense committees. The MFRC charter, relevant legislation, DoD policies, MFRC meeting minutes and annual reports, and resources such as the MFRC Communique (an electronic newsletter that shares guest speaker information, resources and recommendations) are posted on the MFRC webpage.

SCOPE: Established in 2008, the MFRC has addressed topics such as:

- Blended Retirement System & Financial Literacy
- Child & Youth Well-Being, Child Care & Family Care Plans
- Children of Deployed Service Members
- Community Partnerships & Collaboratives (including Disaster Preparedness)
- Defense State Liaison Office Top Ten Issues
- Deployment & Reintegration Programs for Active & Reserve Components
- Exceptional Family Member & Family Advocacy Programs
- Force of the Future and Educational Benefits for Service & Family Members
- Gold Star Family Support
- Integration of Family Support & Health Care Support Systems
- Interstate Compact on Educational Opportunities for Military Children
- Military OneSource, Community Outreach and Engagement
- Needs Assessments, Program Evaluations, Funding and Budget Constraints
- Non-Medical Counseling and Skills for Living Education
- PTSD and TBI as they Impact Military Family Readiness
- Relocation Assistance, Transition Assistance & Mapping Initiatives
- Spouse Education and Career Opportunities (including Spouse Licensure)
- Veterans Online Shopping Benefit

MEETINGS: Three MFRC meetings are held each year. Meetings are open to the public. The public, including troops, families, members of the community, key staff and advisors, observes meeting proceedings but does not participate unless called upon by the MFRC Chair. Members of the public are invited to submit written statements for consideration by the Council prior to each meeting. During the final meeting of the year, Council members vote on recommendations to be submitted to the Secretary of Defense. They also make focus area suggestions for review by MFRC the following fiscal year. Progress on recommendations and accomplishments are tracked and provided for the record.

GUEST SPEAKERS AND PANELISTS: Subject matter experts from organizations inside and outside the Department of Defense are invited to make presentations on selected focus area topics. They present data which address questions posed by Council members. Military Service leaders may also be invited to make verbal and written presentations.

The MFRC is a Federal Advisory Committee that provides independent advice to the Secretary of Defense, and is sponsored by USD(P&R) and supported by ASD(M&RA).



http://www.militaryonesource.mil/military-family-readiness-council

Additional background and educational materials are provided prior to and following MFRC meetings for purposes of clarification, corrections for the record and in response to Council member requests for additional information. Family readiness advisors from across the Department of Defense are present to answer questions that may arise during MFRC meetings.

FY18 MFRC RECOMMENDATIONS forwarded to the Secretary of Defense:

- (#1) Increase awareness of and opportunities for spouse employment by supporting:
 - a. Quality-weighted assessments of community and surrounding area support for spouse employment and K-12 public education
 - b. Continued efforts focused on spouse licensure portability, education benefits and mobility support
- (#2) Enhance services for special needs military families by:
 - a. Evaluating the resources for special needs families at the Joint Base Lewis McChord Center for Autism Resources, Education and Services (JBLM CARES)
 - b. Requiring the DoD Office of Special Needs (OSN) to report on EFMP/ assignment coordination performance metrics
 - c. Requiring OSN to continue to enhance and improve Exceptional Family Member Program standardization
- (#3) Ensure military families have access to a broad range of resources, services, programs and expertise through:
 - a. Community Collaboration and Coordination
 - b. Continuing the Boys & Girls Clubs of America (BGCA) Better Together Partnership
- (#4) Report on accession and medical record policies and procedures and the impact on military children who received mental and behavioral health services
- (#5) Revitalize childcare accessibility in military child and youth services programs and ensure funding
- (#6) Modernize the definition of military family readiness from a "life course" perspective
- (#7) Provide support for child and youth services staff dealing with increasing behavioral issues

FY19 FOCUS AREAS (Topics for Review by MFRC During FY19):

- (#1) Accession and medical record policies and procedures and impact on military children who received mental and behavioral health services
- (#2) Service and family member programs tailored to millennials

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