

TRANSITION ASSISTANCE ADVISOR PROGRAM

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JFSAP Training
September 15-17, 2008



History of Program

- Created 2005 –
 - VA requested inside access to NG.
 - Large numbers of Guard members deploying and redeploying and not knowledgeable about DVA.
- Contract developed by DVA/NGB leadership.
- MOA signed 5/05, 62 TAAs trained and hired, located in State Joint Forces HQ:
 - All states/territories have 1 TAA, contract grown to 2 in TX, CA, PA, GA, NY, MN.
 - Oversight on policy and procedures comes from Warrior Support Office at NGB.

History (cont.)

- TAAs facilitated MOUs:
 - 45 states/territories signed
 - 7 in progress
 - 2 N/A
 - MOU
 - Solidifies collaboration
 - Commits partners
 - Establishes lanes of responsibilities
 - Protects against changes in leadership

Role of TAA

- Build, develop, strengthen coalition in state – VA partners in VHA Med Centers and Vet Centers, VBA, CBOCs, State VA, VSOs.
- Establish strong working relationships inside DVA to provide personalized assistance to Guard and family members – don't send to 800 #s or websites.
- Other Coalition building:
 - Family Programs
 - JFSAP
 - CBHCO
 - ESGR
 - DOL
 - Community resources

Role of TAA (cont.)

- Educate Guard and family members on DVA
 - Complex bureaucracy, difficult to understand
 - Enrollment timeframes
 - Veterans Benefits Administration
 - Veterans Health Administration
 - National Cemetery Administration

NGB/VA INTEGRATED SERVICES

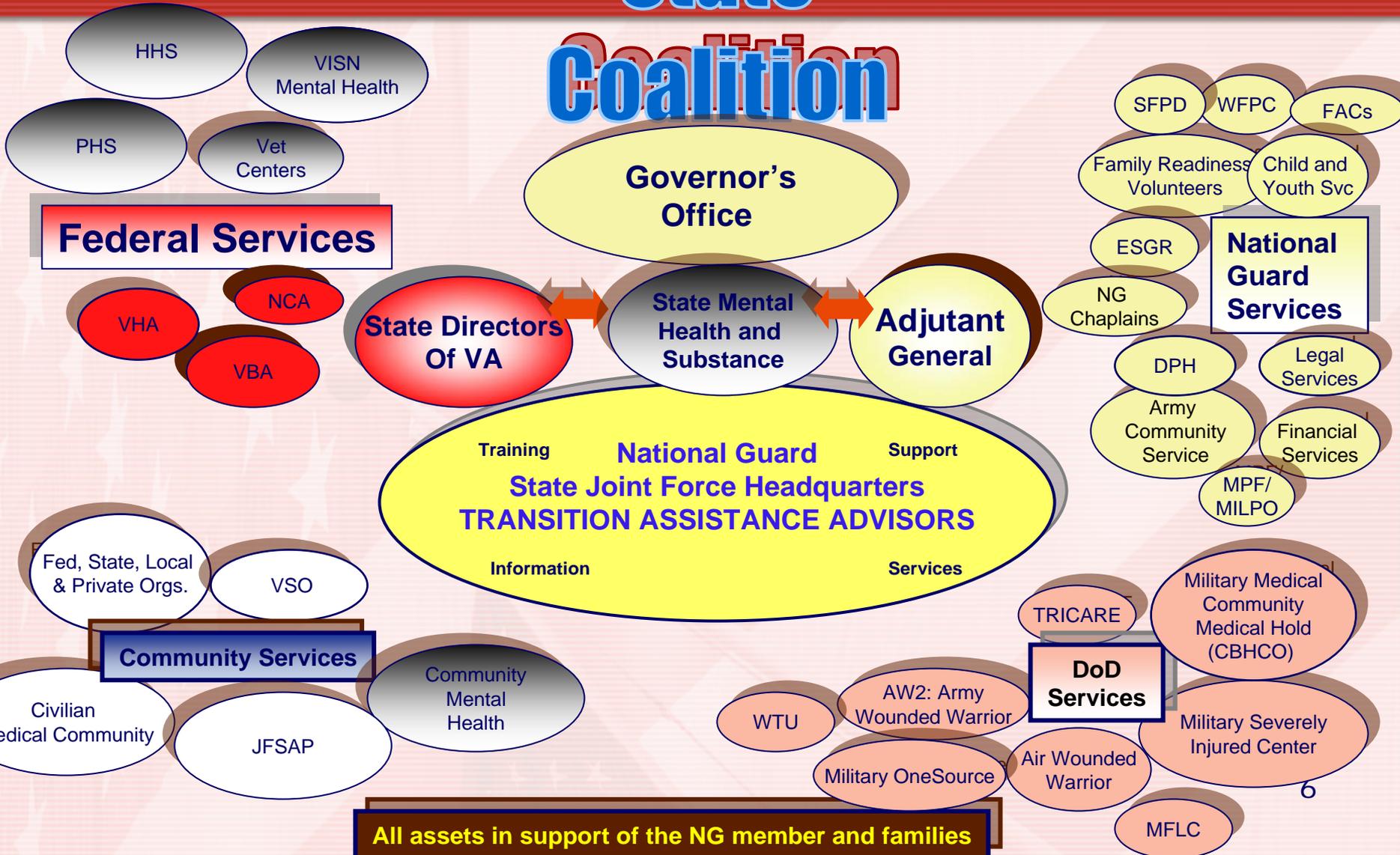
DELIVERY MODEL

**VA/NGB
Liaison**

**NGB/VA
Liaison**

State

Coalition



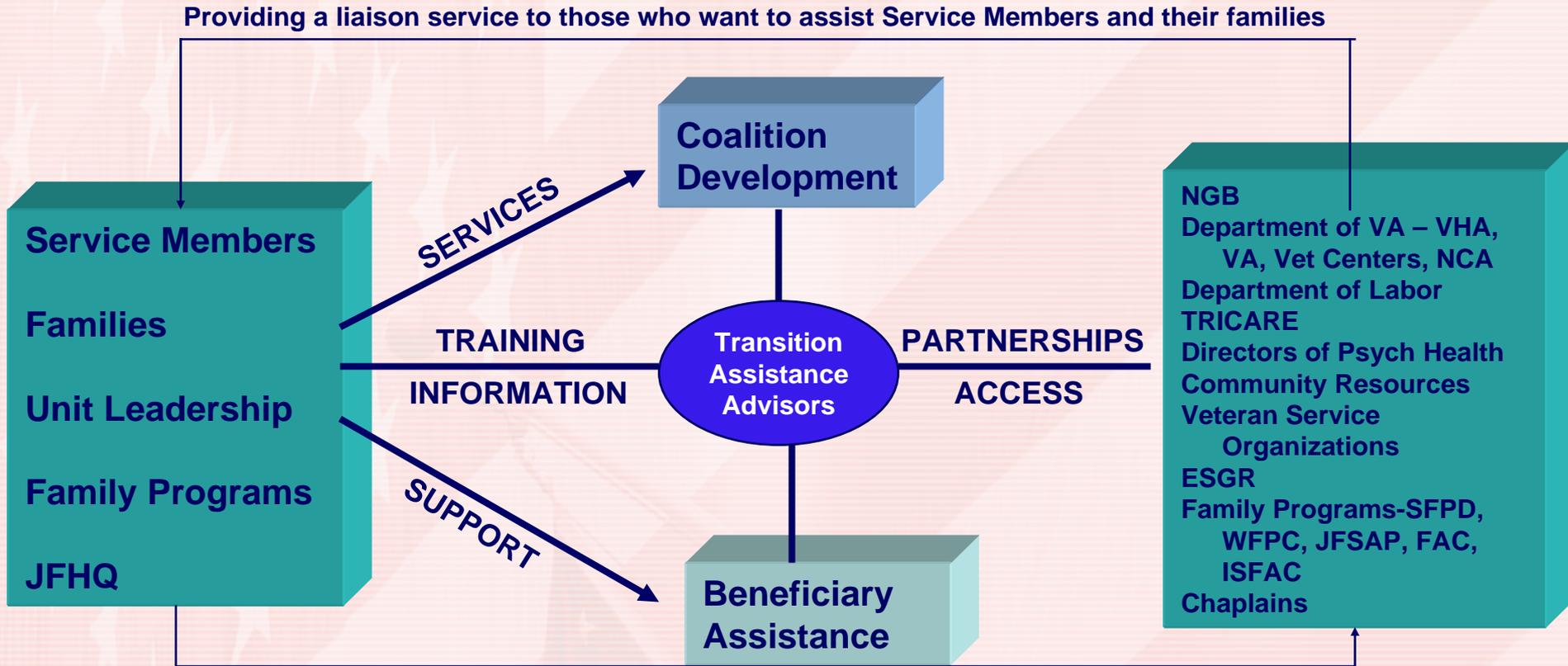
Role of TAA (cont.)

- Track wounded Guard from Landstuhl.
- Know where our veterans are.
- Air and Army Guard – different deployment cycles.
- Transition Guard members back to their home states/territories.
 - Reintegrate back into the Guard.
 - Transition to civilian life – family, home, work.

Full spectrum care is about taking care of our people and maintaining readiness of NG.

Role of the TAA (cont.)

Transition Assistance Advisors act as facilitators



Matching individuals with needs to those who can support them

Issues Worked by TAAs

- Readjustment issues/stigma of accessing mental health services
- Substance abuse
- PTSD and TBI
- Incidents with legal authorities/Alternate incarceration facilities
- Suicides
- TRICARE – access and resolution
- Involved with improving or creating legislation
- Employment
- Wide variety of other issues – e.g., cremains, DD214s, transporting from WRAMC

Why are TAAs successful?

- Provide personalized services/proactive approach.
- Not a referral service or call center, but partner.
- Joint annual training with VA partners.
- Incorporated into all sectors of VA.
- Part of CBHCO Team – brought in VA partners.
- Ongoing training - monthly conference calls, two different newsletters.
- Promote awareness of TAA Program.
- Attend national conferences.
- Open communication; eagerness to share information and help each other - email network.
- Mentorship for new TAAs.

QUESTIONS ???

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