Resources for Justice-Involved Veterans: A Guide for Tribal Justice Systems



The United States Department of Veterans Affairs
Office of Tribal Government Relations

Special Thanks to:

The John Marshall Law School Veterans Legal Support Center and Clinic in Chicago, IL for lending their expertise in Veterans Treatment Courts and Petty Offense Initiatives to the project, as well as their unique knowledge of the Veteran community, without which this project could not have progressed beyond merely an idea.

The United States Department of Justice, Office of Tribal Justice in Washington, DC for their valuable input regarding American Indian Law and Policy.

The Federal Bar Association, Veterans Law Section and Carol Scott for her encouragement, advocacy, and inspiration.

Navajo, Hopi, and Laguna Pueblo Tribal Governments for their hospitality and generosity.

National Congress of American Indians, Veterans Committee for their interest and encouragement.

Foreword

American Indian communities have historically high rates of military enlistment, leading to both communities' and Veterans' displays of pride in military service. Veterans are respected in ways similar to that of elders in tribal communities, where their experience, wisdom, and historical knowledge are honored both formally at ceremonies and pow wows and informally at gatherings and community events. Veterans are uniquely respected for assuming a role of protector, and for their personal sacrifices. Their role in the community is indicated by public acknowledgement and inclusion in special events. See Appendix C for an example of Veterans in Indian Country.

The U.S. Department of Veterans Affairs' (VA) Office of Tribal Government Relations (OTGR) recognizes the proud tradition of military service in American Indian communities. VA also continues to enhance its outreach to Veterans who become involved with the criminal justice system, to link them to appropriate treatment and other services that can help prevent homelessness or other negative outcomes. This Resource Guide reflects VA's commitment to ensuring that Veterans in both populations have access to the health care and other benefits earned through their military service.

How To Use This Guide

This Guide will describe several efforts currently underway to address the need for treatment and other services among Veterans in the criminal justice system. Veterans Treatment Courts (VTCs) are an example of one approach, although not the only one, and will receive particular attention. The Guide will discuss the components common to most VTCs, and suggest the steps a tribal government may take to implement a certain piece of the model. One purpose of this Guide is to provide interested tribal governments with a breakdown of how VTCs work, and identify the movable parts of various programs that would allow tribal governments to choose the parts it wants to explore using in its tribal justice system. No less importantly, the Guide is intended to identify resources available to justice-involved Veterans, regardless of whether their communities have adopted the VTC model.

Through their service in uniform, Veterans earn opportunities for access to resources that may include health care, education, job training, housing assistance, small business and other programs. Justice-involved Veterans are Veterans just the same, and often remain eligible for many of these benefits and services. For example, criminal charges or convictions do not make a Veteran ineligible for VA health care; only current incarceration does. For tribal justice systems interested in treatment-based alternatives to the standard criminal justice model, there are many Veteran-specific resources that can be useful when addressing the needs of that population. The Office of Tribal Government Relations (OTGR) intends this Guide to assist tribal justice systems as they do so. See Appendix D for more information on OTGR.

While using this Guide, the following icons will alert you to points that require particular attention:



More than one option: Indicates there is more than one option for a tribal government to choose from; or more than one way to design their program





The original photographer donated all photographs for use by the Office of Tribal Government Relations

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INTRODUCTION

This Resource Guide responds to the Tribal Law and Order Act's requirement that the U.S. Departments of Justice (DOJ) and Interior (DOI) assist tribal justice systems with the identification and development of alternatives to incarceration, among other tasks. While this mandate does not directly apply to the VA, the VA supports the Act and its goals. The Department of Justice and the Department of the Interior recently published a Long Term Plan to Build and Enhance Tribal Justice Systems (Long Term Plan). The Long Term Plan creates a framework for collaboration between the Federal government and tribal Nations intended to ensure that tribal justice systems have the information and resources necessary to "address incarceration and the alternatives to it in Indian country." Feedback received from tribal justice officials during the Long Term Plan's development indicated that alternatives to incarceration are a high priority for tribal justice systems. As a result, the Long Term Plan demonstrates a significant commitment to developing such alternatives.

The Long Term Plan does not, however, focus specifically on tribal justice systems' efforts to address the needs of justice-involved Veterans. This Guide is intended as an informative resource, supplemental to the Long Term Plan, for tribal justice officials working with this population. References to particular programs or approaches should be seen as informative source material, and not necessarily guides for outright replication. Each tribal justice system reflects its community's values and traditions, and is therefore unique; it follows that each tribal justice system will use the information presented here in a manner consistent with those values and traditions.

This Guide will present issues for consideration as tribal justice system officials consider Veteran-specific alternatives to incarceration, including but not limited to the VTC model, for use in their communities. The VTC model is one mechanism, although not necessarily the best or only one, that tribal justice systems could use to identify and link Indian Country's Veterans with resources available through the Department of Veterans Affairs (VA) and other providers as alternatives to incarceration.

This Guide will provide a brief overview of tribal courts in the United States, as well as detailing the general principles and structure of the VTC in state court systems. This latter section describes the various models as they currently function, but it should be remembered that significant variations exist, some of which are addressed in the Roles section.

HISTORY & BACKGROUND:

Indian Law & Tribal Justice Systems

Data Challenges

Significant challenges exist when gathering data on American Indian Veterans. Even though American Indians are commonly known to have the highest rates of service among all racial groups, exact statistics are difficult to obtain. For this reason, OTGR has made a commitment to "improve the availability and accessibility of data regarding American Indian and Alaska Native Veterans." OTGR is working now to develop regional snapshots that will capture relevant data on tribes across the country. See Appendix D for a complete description of OTGR's goals.

The Evolution of Indian Law and Tribal Justice Systems

As sovereigns, each federally recognized tribe has authority to establish a justice system that is distinct from federal and state court systems, as well as from other tribal justice systems.² Because each tribe's justice system is unique, this Guide does not attempt to summarize tribal courts in general, although it does refer to certain common traits in explaining how a tribal justice system may adapt concepts or practices described here to best fit the needs of its community. Additionally, a broad overview of how tribal justice systems evolved and the policy considerations in play provides context to the project.

1. Foundational Case Law

Johnson v. M'Intosh, decided in 1823, is the first landmark decision in American Indian law. M'Intosh set the legal standard for how the United States government would relate to Indian nations and provided the foundation for Indian law. The Supreme Court

in *M'Intosh* adopted the European "discovery doctrine" when it held that discovering nations had the exclusive right to purchase land from the aboriginal people on the discovered land. ³ Therefore, when the United States declared independence from England, it inherited the right of preemption over Indian lands in the United States. ⁴ Based on the "discovery doctrine," the Court concluded that American Indians held limited property rights to their lands, including only the right to occupancy, also known as "Indian" title. ⁵

The next milestone case in the development of Indian case law was *Cherokee Nation v. Georgia*. Although the Court refused to categorize the tribe as a "foreign nation" within the meaning of Article III § 2 of the Constitution, it recognized that the tribe was "a distinct political society, separated from others, capable of managing its own affairs and governing itself." The Court went on to label tribes as "domestic dependent nations," likening the relationship between tribes and the federal government to that between ward and guardian. In subsequent cases, the Court further developed the "ward-guardian" and "domestic dependent nation" principles. These holdings expanded the authority of the United States government to act on behalf of tribes as their literal guardian, premised on the idea that where a guardianship responsibility is present, so too must be the authority with which to carry it out.

In 1832, the Court held in *Worcester v Georgia*¹⁰ that Georgia's attempts to impose state law on Cherokee lands were unconstitutional because the federal government possessed the sole right to deal with Indian nations.¹¹ Additionally, the Court recognized that Indian tribes are "distinct political communities, having territorial

boundaries, within which their authority is exclusive."¹² Based on its findings, the Court concluded that the laws of Georgia could not be enforced on Cherokee lands.¹³

Around the same time as the Supreme Court made sweeping decisions that expanded federal authority, the federal government took other actions that effectively, if not explicitly, limited the sovereignty of tribal governments and the freedom of their peoples. One of the most poignant examples of such an action is the Indian Removal Act of 1830, under which American Indians living in the southeast were removed from their homelands to the Indian Territory, in what is now Oklahoma.¹⁴

U.S. presidents treated with Indian tribes as foreign nations until 1871, when Congress passed the Indian Appropriations Act, limiting Presidential treaty-making powers and effectively minimizing the avenues for dealing with tribes to Presidential Executive Orders and Acts of Congress. Immediately following the 1871 Act, Congress's intention to assimilate American Indians by limiting communities to smaller geographic areas and Christianizing tribes via missionaries and boarding schools persisted. Congress continues to further its policies toward American Indians through the passage of legislation.

2. The Tribal Justice System

a. "CFR Courts" and the Beginnings of the Tribal Justice System

In an effort to assimilate native people through federal tribal justice systems, the Bureau of Indian Affairs created Code of Federal Regulation (CFR) Courts, also known as Courts of Indian Offenses, which served the needs of more than one tribe at a time.

CFR Courts do not account for tribal traditions and customs in the execution of federal laws. Since the creation of CFR Courts, most tribes have developed their own tribal

justice systems and no longer rely on CFR courts, although some tribes still use CFR Courts to serve their judicial needs.

b. Limitations to American Indian Sovereignty

In 1883, the Supreme Court's decision in *Ex parte Crow Dog* sparked an especially aggressive period of diminishment of tribal sovereignty. In *Crow Dog*, one American Indian killed another tribal member on tribal land and the tribal council resolved the matter pursuant to Sioux tradition, which required the offender to pay restitution.¹⁷ Congress felt the tribal punishment was inadequate to address such a serious crime.¹⁸ To remedy this perceived disparity, Congress passed the Major Crimes Act, which created federal jurisdiction for seven crimes: Murder, manslaughter, rape, assault with intent to murder, arson, burglary, and larceny. The Major Crimes Act specifically applies to American Indians committing crimes against other American Indians on tribal land and has since been expanded to include several more offenses.¹⁹ The Act limited tribal sovereignty by removing tribal authority to prosecute major crimes committed on reservations.²⁰

The Dawes Act of 1887, generally referred to as the Allotment Act, further limited tribal sovereignty by allowing the President to survey and divide tribal land into allotments for individual American Indians. Allotment permitted the federal government to assimilate American Indians to American society, practices, and mores, while forcing tribal communities to abandon traditions and customs rooted in communal living. Allotment resulted in a significant loss of tribal land ownership and the influx of countless non-Indian people who obtained surplus lands from the federal government. Allotment also resulted in the dissipation of tribal communities, and a weakened sense

of tribal identity. It damaged tribal culture, including tribal language, traditions, and family ties. The Dawes Commission was created to follow the doctrine of the Act and to exclude tribes by registering American Indians on rolls, which affects modern-day tribes in two ways. First, many tribal members did not sign the rolls for fear of persecution, so their modern-day descendants struggle to obtain tribal membership without documentation. Second, because American Indians with heritage in more than one tribe were forced to choose a single tribe when they signed the rolls, sacrificing ties with other tribes to which they belonged, descendants of those members have lost touch with their former tribal roots.

Furthermore, the Indian Citizenship Act of 1924, rooted in the federal policy of assimilation, granted full United States citizenship to American Indians. In passing this Act, Congress disregarded the fact that tribes are independent sovereign nations, consisting of their own citizens, with which European nations and the United States once treated. Granting citizenship to Indians, while presented as a measure for granting equality, was in fact a means for assimilating tribal members into popular American culture, diminishing the relevance of tribal membership and encouraging tribal members to leave behind their native identities.²²

c. Expansion of American Indian Sovereignty

The Indian Reorganization Act (IRA) restored elements of tribal sovereignty in 1934 by ending new allotments and contributed to reversing the assimilation policy behind the Dawes Act.²³ In passing the IRA, Congress demonstrated its belief that American Indians could manage their own issues and govern their own people despite its prior objection to the notion following *Ex parte Crow Dog.*²⁴ Congress intended to

mitigate the damage caused to tribes by allotment, prevent more damage from occurring, and reestablish tribal communities. The IRA encouraged tribal governments to produce a written constitution.²⁵ Tribes were only given one year to write or adopt a model constitution to be accepted with approval of the Secretary of the Interior.²⁶ As a result, many tribes had, or still have, tribal constitutions that are not based on traditional tribal structures, but more on the tri-partite structure of the U.S. government. However, the current trend is for tribes to make constitutional revisions more reflective of their culture and traditional governance.²⁷ Consequently, many modern tribal courts are still working to find a balance in their justice systems between tribal traditions and the system of government more reflective of popular American justice, which was established in response to the IRA.²⁸

d. Period of Termination

In the 1950s, the rights of American Indian citizens were again under attack as the federal Indian policy known as the Termination Policy came into being. This policy was designed to eliminate United States' legal relationship with tribes. One aspect of the policy was formalized in legislation with passage of Public Law 83-280 commonly referred to as "Public Law 280." Congress terminated the existing relationship between the federal government and numerous tribes by refusing to recognize tribal sovereignty and tribal jurisdiction. Public Law 280 gave several named states complete civil and criminal jurisdiction over American Indians on tribal reservations.

e. Period of Self-Determination

Finally, a federal policy of Indian self-determination was adopted under President Nixon, as an attempt to mitigate the damage caused by the Indian Termination Policy.

As stated by President Nixon, "The time has come to break decisively with the past and to create the conditions for a new era in which the Indian future is determined by Indian acts and Indian decisions.³⁰ The self-determination policy produced significant amendments to Public Law 280, the most important of which, was preventing new states from adopting Public Law 280 without tribal consent. States that had already adopted Public Law 280, however, retained jurisdiction over American Indians on tribal land.³¹ Indian Self-Determination as the current federal policy continues to inform legislative efforts and to support tribal decision-making.

The Tribal Law and Order Act (TLOA), enacted on July 29, 2010, is an example of a modern federal effort that promotes self-determination.³² Some of the major provisions in the TLOA call for sharing prosecutorial declination information; required federal testimony; deputization of Special Assistant U.S. Attorneys; deputization of state officers; and federal recognition of training received by tribal police officers at state police academies.

The policy promoting government-to-government relations between the United States and each federally recognized tribe has been emphasized by recent administrations, as well as the current administration. The TLOA addresses many serious issues facing tribes, including violence against women and limitations on tribal sentencing authority. One TLOA provision allows for an expansion of tribal court authority to imprison Indian offenders for three years, instead of the previously imposed one-year limit.³³ However, the TLOA does not affect the types of crime punishable under the Major Crimes Act; instead it returns some previously denied inherent rights to

tribal governments, and seeks to enhance the functionality of federal-tribal prosecutorial cooperation.

Though Indian tribes, as sovereign nations, have historically maintained jurisdictional power over everything within their territorial area, over the years, many events have eroded and limited this jurisdiction. In more recent times, the United States Supreme Court has handed down several decisions that have had a substantial impact on tribal jurisdiction. For example, in 1978, the Supreme Court held in *Oliphant v. Suquamish Indian Tribe*, that tribal courts do not have criminal jurisdiction to try and to punish non-Indians, and they may not assume such jurisdiction unless specifically authorized by Congress to do so.³⁴

In *Duro v. Reina*, the Supreme Court held that a tribal court does not have criminal jurisdiction over non-member Indians.³⁵ However, in response to this decision, Congress passed the "Duro Fix," which essentially overturned the court's decision by recognizing and affirming the power of tribes to exercise criminal jurisdiction within their reservations *over all Indians*, including non-members. This congressional "Duro Fix" was later recognized and upheld by the Supreme Court in *U.S. v. Lara*.³⁶

In *U.S. v. Lara*, the Supreme Court held that both the United States and a tribe could prosecute an Indian for the same acts that constituted crimes in both jurisdictions. This decision was based on the court's acknowledgement that both the United States and the tribe were separate sovereigns, and therefore double jeopardy did not attach.

3. Tribal Healing to Wellness Courts in the Tribal Justice System

Tribal Healing to Wellness Courts are similar to Drug Courts in the United States court system, which allow defendants charged with nonviolent, substance abuse-related

crimes to enter voluntary drug treatment programs as a condition of his or her probation.³⁷ Drug Courts, like all treatment-based courts, emphasize treatment as opposed to punishment alone. A successful Drug Court depends on several parties working together: Judge, prosecutor, defense counsel, probation officer, drug treatment professionals, law enforcement, and social services.³⁸ Participants in Drug Courts are provided intensive treatment, held accountable to the Drug Court judge, regularly and randomly subjected to drug tests, required to report frequently to Court for progress checks, and rewarded or sanctioned depending on their progress.³⁹

While the Tribal Healing to Wellness Court is modeled after drug courts, it has ten unique key components:

- First, using a team approach to bring together communityhealing resources with the tribal justice system, benefiting the spiritual and physical health of the participant and community well-being.⁴⁰
- Second, participants enter the program with protection of their due process rights.⁴¹
- Third, potential participants are identified through legal and clinical screening processes and placed in the program early.⁴²
- Fourth, the program provides access to holistic, structured and phased treatment and rehabilitation services that incorporate culture and tradition.⁴³
- Fifth, participants are subject to intense supervision with frequent and random drug and alcohol testing.
- Sixth, participants are encouraged to comply with program requirements through the use of progressive consequences (sanctions) and rewards (incentives).
- Seventh, program success is based on the ongoing interaction between the judicial and treatment staffs.⁴⁶
- Eighth, the three main purposes of the program goals are: Providing information to improve the wellness process; overseeing participant progress; and gathering evaluative information for interested community groups and funding opportunities.⁴⁷

- Ninth, continuing interdisciplinary education promotes program planning, implementation, and operation. 48
- Finally, critical to program success is the ongoing development of communication between team members, the community, and relevant organizations.⁴⁹



Descriptions of established court models are presented as examples only. Please consider the flexibility of the Guide and design a program that suits the unique needs of your community.

HISTORY & BACKGROUND:

Veterans Treatment Courts

Veterans Treatment Courts

There are three elements needed to establish a tribal VTC program. First, an existing court's willingness to participate and support such a program. Second, a target population of Veterans in need of treatment courts as a diversionary program. Third, a treatment team, which includes the following participants from the justice system:

Judge, prosecutor, and public defender; and the following participants from outside the justice system: Veterans Justice Outreach (VJO) Specialist, Tribal Veteran

Representative, Tribal Veterans Service Officers, volunteer Veteran mentors, or other resource providers such as law school clinic representatives. However, it is important to note that although law school representatives and volunteer Veteran mentors may be involved in a VTC program, they are not involved with participants' treatment and do not attend confidential meetings discussing the Veteran's treatment. The law school in VTC fills the gap created when a Veteran has an ancillary legal issue that is not being addressed. Volunteer Veteran mentors fall into the same category, in that they provide non-clinical peer support to VTC participants.

VTCs are a hybrid of Drug Courts and Mental Health Courts, and operate according to the Drug Court model.⁵¹ VTCs treat Veteran defendants battling drug

addiction and/or mental health issues.⁵² The partnership they represent, between drug treatment and/or mental health care providers and Veteran-focused organizations like the VA health care system and Veterans Service Organizations or representatives, promotes sobriety, recovery and stability.⁵³ The goal of a VTC is two-fold: First, to identify Veterans in the criminal justice system, verify their Veteran status and eligibility; and second, to address the unique individual needs of Veterans, particularly those regarding addiction, homelessness, joblessness, and mental health issues.⁵⁴

VTCs provide a coordinated response by utilizing programs and services designed to overcome personal issues and use the collaborative efforts of all of the service providers from arrest through successful graduation from the program.⁵⁵ A Veteran participating in the program is assessed by a treatment team, which will design an individualized plan to serve the Veteran's unique needs.⁵⁶

1. Eligibility

Participation in VTCs, like participation in all treatment courts, is voluntary. If interested, Veterans must satisfy locally-established requirements to be eligible for VTC participation. These vary significantly between VTCs, but generally include eligibility for pretrial or probation supervision, verification of Veteran status, and a lack of disqualifying charges or convictions. Some VTCs limit eligibility to Veterans who have served in combat; others only accept Veterans who are eligible for VA health care. Each VTC's eligibility criteria reflect a variety of local considerations, and at this time there is no universally-accepted standard.

2. The Treatment Team

The treatment team meets prior to each VTC session and may include all or some of the following: The Judge, an attorney from the prosecutor's office, an attorney from the public defender's office, a Veterans Affairs representative, a Veterans Service Organization representative, probation officer, or mental health officer. The treatment team evaluates each Veteran's progress and maintains open lines of communication to determine whether the current plan needs modification. For example, if the treatment team determines the Veteran is in need of an additional mental health service, the team can reach out to the appropriate service and find help for the Veteran.

3. The Process

The first step in the VTC process is to identify Veterans within the court system by performing initial interviews. With a VTC in place, all detainees are interviewed in bond court and asked if he has ever served in the United States Armed Forces. If the detainee reports having served in the military, he or she is asked to fill out a Veteran's Court Referral Form, which is noted in the file.

Next, once the Veteran's status is verified and eligibility is determined, the file is forwarded to the VTC program coordinator, who begins the process of assembling a treatment team to assist the Veteran. When the Veteran appears at the preliminary hearing he or she will be informed of available services from VA. If the Veteran qualifies to participate in VTC, the court will explain how the VTC program works and give the Veteran an opportunity to meet with the treatment team. At that point, the treatment team evaluates the Veteran's eligibility to participate in treatment programs offered through VA. Finally, if the Veteran chooses to participate in the VTC program, he or she

either enters a plea of guilty (if required as a condition of VTC participation) or enters no plea (in "pre-plea" VTCs that effectively suspend the case during the Veteran's participation). In either case, this is the point at which the Veteran's court-supervised treatment can begin.

4. The Role of The Department of Veteran Affairs

The VA plays a crucial role in the VTC model. In a VTC, a VJO representative coordinates VA resources for the Veteran to receive the treatment needed. VJO Specialists are VA employees who are responsible for direct outreach, assessment, and case management for Veterans involved in the criminal justice system. They work regularly with local courts, jails and justice systems to coordinate Veterans' care. VJO Specialists are especially important to the VTC model's success, and the rise of the VJO program has coincided with the early success of VTCs. Without VA resources, the VTCs would be without a critical resource to effectively serve Veterans.

Interested tribal justice systems could adopt all or part of the VTC model to address the needs of the Veterans they see.

This section highlights five topics that merit special consideration by a tribal justice system considering adopting all or part of the VTC model: the role of the tribal government, as well as that of the court, prosecutor, and advocate/organizer, as well as available resources.

THE ROLE OF THE TRIBAL GOVERNMENT

The following variables are important to consider when determining whether and how to implement a VTC or VTC-like program in a tribal justice system:

1. Distance & Location

Is the population primarily urban or rural? Serving Veterans in rural communities may pose logistical challenges greater than serving those in an urban center with greater access to VA hospitals and clinics. Veterans in rural communities may need solutions like transportation vehicles to take them long distances between their home in tribal communities and VA health care facilities. The VA Office of Rural Health is one of many avenues to pursue when finding ways to serve the rural Veteran. Another option would be to utilize Veterans Transportation Services through the VA; this program is designed specifically to transport immobilized Veterans or those living in remote locations to VA health care facilities for treatment. The VTS program currently has programs in Muskogee, OK, and Salt Lake City, UT, and may expand soon to the Albuquerque, NM, Prescott, AZ, and Tucson, AZ VA medical centers as well. Program coordinators plan to have a VTS program in every medical center in the United States

by 2014. Other options include Indian Health Services (IHS), tribal providers, community foundations, Veteran Service Organizations not associated with Indian Country, faithbased organizations, or private industries like car dealerships.

2. Collaboration

Use of any transportation program furthers the goals set forth by the recent Memorandum of Understanding (MOU) between the VA and IHS, which seeks to enhance access to health care through interagency collaboration and the use of technology. ⁵⁹ Beyond transportation programs, the MOU endeavors to use tele-health services like tele-psychiatry and tele-pharmacy and mobile communication technologies, all of which would benefit American Indian Veterans living in remote locations and be financed under the payment and reimbursement policies established by the MOU. ⁶⁰

This kind of collaboration reinforces that, for a tribal government, sovereignty enables tribes to choose collaboration through partnerships with federal agencies. The IHS hospitals in Chinle and on Hopi are one example of partnerships between federal agencies to promote access to VA healthcare for Veterans in tribal communities.

The IHS hospital at Chinle is launching a VA clinic located *inside* the hospital.

The VA clinic will be staffed by four VA healthcare providers who will provide primary medical treatment for Veterans. If a veteran needs additional medical service, like PTSD counseling or diabetes treatment, he can receive that care at the IHS hospital too. The facility also has a traditional healing office that will be available to native Veterans who visit the VA clinic. This model gives Veterans full access to healthcare, not just what can be provided by the four-person VA staff, but all services housed within

the IHS facility. The IHS hospital on the Hopi reservation will provide integrated services through a VA tele-health clinic inside the IHS facility. The clinic will connect Veterans with VA physicians at the VA medical center in Prescott, Arizona. These integrated service models bring VA to Indian Country by providing a new pathway to health care. See Appendix C for more description and examples of collaboration in Indian Country.

3. Veteran Population

The number of American Indian Veterans living in a geographic area will help determine the potential utilization rate of a VTC program there. Other relevant questions include: How active are American Indian Veterans in the Veterans Benefits Administration process? Are they using VA resources? Answers to these questions will help tailor the VTC model to suit the unique needs of any American Indian Veteran population.

4. Culture & Tradition

Cultural considerations should be at the forefront of any discussion about the possibility of adopting the VTC model, or elements of it, in a tribal justice system. If a VTC, or VTC-informed practice, is consistent with the values espoused in tribal law and custom, its chance for success is far greater.

5. Mentor Relationship

The involvement of Veteran Mentors is a distinguishing feature of the VTC model. 61 Veteran Mentors serve in a voluntary capacity, and provide non-clinical peer support to Veterans in a VTC. In a mentor program, native Veterans participating in a

VTC would be assigned a tribal mentor to support him or her in both the criminal justice and rehabilitative aspects of the program. When Veterans in VTCs are assigned a mentor who is also a Veteran, they often appear more at ease and amenable to receive treatment because the Veteran is engaging with and finding support from someone with a similar background and a shared set of experiences. The mentor relationship allows the Veteran an opportunity to communicate with a peer, as opposed to an authority figure, a role already filled by the judge's presence. The VTC mentor's unique perspective as both a Veteran and American Indian furthers the goals of the MOU to increase cultural awareness and culturally competent care. It gives cultural issues the highest degree of importance in implementation of any program and would likely be very valuable to Veterans moving through the VTC. F4

Furthering the ultimate goal of any VTC model, the Veteran-mentor dynamic provides the VTC with the opportunity to make an even greater impact on the Veteran's life by connecting him or her with a peer who has the unique understanding of what the Veterans faces on a daily basis and the challenges of reintegrating to civilian life. ⁶⁵ A VTC mentor volunteers to act as "coach, a guide, a role model, an advocate, and a [source of] support" for the Veterans. ⁶⁶ Mentors attend the Veteran's court sessions, engage in mentoring sessions with the Veteran, support the Veteran in both treatment and the judicial process, and support his or her fellow mentors as they work with other Veterans. ⁶⁷

THE ROLE OF THE COURT:

Veterans Treatment Court Model

Implementation of the VTC model in any tribal justice system would likely be of nominal cost to the tribe, requiring only organization of the treatment team and an accurate and timely means of verifying Veteran status. Many communities with VTCs started by forming a stakeholders' committee to answer basic questions including the definition of the target population, the nature and means of collaboration with VA, and the conditions of defendants' participation. In addition, successful implementation of a VTC program requires approval and cooperation from the tribal court staff and prosecutor's office.

Other relevant questions include: Could Veterans in Tribal Healing to Wellness Courts be better served by a program that addresses the unique needs of the Veteran community? Could linking Tribal Healing to Wellness Courts to the VA VJOs be an effective option? Could the VTC be modeled and implemented in the Peacemaker Division, the Drug Court Program, Probation Services, Family Court, or specialized courts within tribal justice systems?

THE ROLE OF THE ADVOCATE & ORGANIZER:

Veterans Treatment Court Model



There is more than one way to fill the Role of Advocate & Organizer. The Role could be filled by a Tribal Veterans Representative or Tribal Veterans Service Officer, other tribal government representative or tribal member. Apply the same principles: Representative should attend court and facilitate VA resources.

Law school clinic representatives who participate in VTCs do not represent the Veteran; instead, they fill the gap by identifying and resolving any ancillary legal issues that no one else is addressing. Law clinic representatives could attend a VTC in the tribal justice system to identify and address any unmet legal needs. For example, if a Veteran has an ancillary legal issue, or a VA benefits issue, the law school clinic representative could help the Veteran find legal assistance.



See Appendix B for a list of law schools in your state that may be able to help with Role of Advocate & Organizer.

THE ROLE OF THE VA:

VTCs are defined by their ability to connect justice-involved Veterans with clinical needs to appropriate VA treatment, and then monitor their adherence to that treatment over time. The existing model relies on cooperation with the VA medical centers, of which there are 153 in the nation. With the help of a Veterans Justice Outreach Specialist, Veterans receive treatment at a VA facility. In the MOU, IHS and VA agree to actively collaborate and coordinate to increase access to the services and benefits of both agencies. The already successful Tribal Veterans Representative (TVR), or the Tribal Veterans Service Officer (TVSO) program, is an example of one way to increase access: VA accredits TVRs/TVSOs, who are tribal members, to facilitate other Veterans' access to VA services. Tribal justice systems may want to consider the role TVRs/TVSOs might play in any VTC or VTC-like program.

Many, but not all, Veterans are eligible for free or subsidized health care through VA. If VA cannot provide care to a Veteran because he or she does not qualify, including for reasons related to the Veteran's discharge status, VA can refer the Veteran to alternative providers. *See Appendix A: List of VA Resources.

CHALLENGES & PARTNERSHIP OPPORTUNITIES:

The Rural Veteran

There are potential problems in conditioning program participation on obtaining treatment at VA medical facilities. Because many American Indian Veterans live in rural communities, it may be difficult for Veterans to access VA medical centers. If Veteranss are unable to access these facilities, they may fail to follow through with their treatment plans and be disqualified. A possible solution to this problem is coordination of transport services and case management provided in partnership with the VA, tribal government, and other partners.⁷² While this method will be costly, the tribal government would not bear the expense.



There are many options available to transport the rural veteran to facilities where he can receive care. There are also technological options available like telehealth.

Jurisdiction

There may be jurisdictional concerns in establishing a VTC in an existing tribal court or in proposing the creation of a new court within the tribal justice system. At this time, those concerns fall outside the scope of this Guide but will need to be addressed in the future. Although outside the current scope of this Guide, it is advantageous to the planning stages to identify potential roadblocks for the future. Implementing any variation on the Petty Offense Initiative or VTC model in the tribal justice system will confront state and federal jurisdictions as well as tribal sovereignty. Navigating these

jurisdictional waters will require a close examination of the laws in each jurisdiction and the lines of supremacy and sovereignty, in particular, Public Law 280.⁷³

Communication

The success of the VTC model, applied in any combination of parts, depends on the communication skills of the parties involved. In a tribal court, communication is especially important. The judge and prosecutor should maintain open lines of communication so each can identify the Veterans that might qualify for VTC. All communication efforts serve a singular goal: Providing much needed care to tribal Veterans.



There are many options for notifying the Advocate and Organizer. Ideally, someone from the tribal justice system who is familiar with the Veteran's case can notify and brief the Advocate and Organizer so he or she can meet the veteran and begin facilitating treatment.

CONCLUSION

There are numerous possibilities for tribal justice systems interested in treatment alternatives for their justice-involved Veteran population. Any culturally-appropriate program can be successful with the participation of key stakeholders such as the judge, the prosecutor, and the VA. The cost to the tribal community would be nominal and the return to Indian Country's Veterans could be immense.

NOTE ON TRIBAL CONSULTATIONS

Secretary Eric K. Shinseki signed the following as VA's Tribal Consultation Policy:

(Policy cut for attachment purposes. See http://www.va.gov/TRIBALGOVERNMENT/docs/consultation_policy.pdf for copy of Policy)

APPENDIX A: LIST OF VA RESOURCES

Appendix only includes states with federally recognized tribes. Please visit www.va.gov for information regarding VA health care facilities in states outside of Indian Country



Contact information for **Veterans Justice Outreach (VJO) Specialists** and Health Care for Reentry Veterans (HCRV) Specialists is included for each state. VJO Specialists are responsible for direct outreach, assessment, and case management for justice-involved Veterans in local courts and jails, and liaison with local justice system partners. HCRV Specialists provide outreach to Veterans approaching release from state and federal prisons. Please contact the VJO or HCRV Specialist for your region.

ALABAMA:

VA Health Care Facilities

Outpatient Clinic

- Dothan: Dothan Mental Health Clinic 334-678-1933
- Selma: Selma Outpatient Clinic 334-418-4975

Community Based Outpatient Clinic (CBOC)

- Bessemer: Bessemer Clinic 205-428-3495
- Childersburg: Childersburg CBOC (256) 378-9026
- Dothan: Dothan CBOC 334-673-4166
- Fort Rucker: VA Wiregrass Clinic (334) 503-7831/7836
- Gadsden: Gadsden Clinic 256-413-7154
- Guntersville: Guntersville CBOC 256-582-4033
- Huntsville: Huntsville Clinic 256-535-3100
- Jasper: Jasper Clinic 205-221-7384
- Madison: Madison/Decatur Clinic 256-772-6220
- Mobile: Mobile Outpatient Clinic 251-219-3900
- Oxford: Anniston/Oxford Clinic 256-832-4141
- Sheffield: Shoals Area (Florence) Clinic 256-381-9055

Vet Centers

- Birmingham: Birmingham Vet Center 205-212-3122
- Huntsville: Huntsville Vet Center 256-539-5775
- Mobile: Mobile Vet Center 251-478-5906
- Montgomery: Montgomery Vet Center 334-273-7796

VA Medical Center

- Birmingham: Birmingham VA Medical Center 205-933-8101
- Montgomery: Central Alabama Vet. Health Care System West Campus 334-272-4670
- Tuscaloosa: Tuscaloosa VA Medical Center 205-554-2000
- Tuskegee: Central Alabama Veterans Health Care System East Campus 334-727-0550

Veterans Justice Outreach Specialists

- Birmingham: Ahmad Brewer 205-933-8101 ext 5701
- Tuscaloosa: Aaron Wade205-554-2000 ext. 4246

ALASKA:

VA Health Care Facilities

Outpatient Clinics

• Juneau: Juneau VA Outreach Clinic 907-796-4300

Independent Outpatient Clinics

• Anchorage : Alaska VA Healthcare System headquarters 907-257-4700

Community Based Outpatient Clinics

- Fort Wainwright: Fairbanks Community Based Outpatient Clinic 907-361-6370
- Kenai: Kenai Community Based Outpatient Clinic 907-395-4100
- Wasilla: Mat-Su Community Based Outpatient Clinic 907-376-4318

Vet Center

- Anchorage: Anchorage Vet Center 907-563-6966
- Fairbanks: Fairbanks Vet Center 907-456-4238
- Soldotna: Kenai Vet Center Outstation 907-260-7640
- Wasilla: Wasilla Vet Center 907-376-4318

Veterans Justice Outreach Specialists

• Anchorage: Jeremiah Newbold 907-273-4093

ARIZONA:

VA Health Care Facilities

VA Health Care Systems

- Phoenix: Phoenix VA Health Care System 602-277-5551
- Prescott: Northern Arizona VA Health Care System 928-445-4860
- Tucson: Southern Arizona VA Health Care System 520-792-1450

Community Based Outpatient Clinics (CBOC)

- Anthem: Anthem CBOC 623-551-6092
- Bellemont: Bellemont 928-226-1056
- Buckeye: Buckeye VA Health Care Clinic 623-386-6093
- Casa Grande: Casa Grande CBOC 520-836-2536
- Cottonwood: Cottonwood CBOC 928-649-1523
- Globe: Globe-Miami VA Health Care Clinic 928-425-0027
- Green Valley: Green Valley CBOC 520-792-1450
- Kingman: Kingman CBOC 928-445-4860 X 6830
- Lake Havasu City: Lake Havasu City Clinic 928-680-0090
- Mesa: Southeast VA Health Care Clinic 602-222-6568
- Payson: Payson VA Health Care Clinic 602-222-6533
- Phoenix: Thunderbird VA Health Care Clinic 602-633-6900
- Safford: Safford CBOC 928-428-8010
- Show Low: Show Low VA Health Care Clinic 928-532-1069
- Sierra Vista: Sierra Vista 520-459-1529
- Surprise: Northwest VA Health Care Clinic 623-251-2884
- Tucson: VA Northwest Tucson Clinic 520-219-2418
- Tucson: Southeast VA CBOC 520-664-1836
- Yuma: Yuma CBOC 928-317-9973

Vet Centers

- Chinle: Chinle Mobile Vet Center 928-674-3682
- Chinle: Chinle Vet Center Outstation 928-674-3682
- Hotevilla: Hopi Vet Center Outstation 928-734-5166
- Mesa: Mesa Vet Center 480-610-6727
- Peoria: West Valley Vet Center 623-398-8854
- Phoenix: Phoenix 602-640-2981
- Prescott: Prescott Mobile Vet Center 928-778-3469
- Prescott: Prescott Vet Center 928-778-3469
- Tucson: Tucson Vet Center 520-882-0333
- Yuma: Yuma Vet Center 928-271-8700

- Phoenix: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Prescott: George Lawson 928-205-3344
- Tucson: see http://www.va.gov/HOMELESS/VJO Contacts.asp

CALIFORNIA:

VA Health Care Facilities

VA Medical Center

- Fresno: Fresno VA Medical Center 559-225-6100
- Livermore: Livermore Division of VA Palo Alto Health Care System 953-373-4700
- Loma Linda: VA Loma Linda Healthcare System 909-825-7084
- Long Beach: VA Long Beach Healthcare System 562-826-8000
- Los Angeles: West Los Angeles Medical Center 310-478-3711
- Los Angeles: Sepulveda Ambulatory Care Center 818-891-7711
- Los Angeles: Los Angeles Ambulatory Care Center 213-253-2677
- Mather: Valley Division of the Sacramento VA Medical Center 916-843-7000
- Menlo Park: Menlo Park Division of VA Palo Alto Health Care System 650-614-9997
- Palo Alto: VA Palo Alto Health Care System 650-493-5000
- San Diego: VA San Diego Health Care System 858-552-8585
- San Francisco: San Francisco VA Medical Center 415-221-4810

Outpatient Clinic

- Auburn: Sierra Foothills Outpatient Clinic 530-889-0872
- Blythe: Blythe TeleHealth Clinic 760-619-4243
- Capitola: Capitola Clinic 831-464-5519
- Chico: Chico Outpatient Clinic 530-879-5000
- Fairfield: Fairfield Outpatient Clinic 707) 437-1800
- French Camp: Stockton Clinic 209-946-3400
- Martinez: Martinez Outpatient Clinic 925-372-2000
- Mather: Sacramento Mental Health Clinic 916-366-5420
- McClellan: McClellan Dental Clinic Sacramento 916-561-7800
- McClellan: McClellan Outpatient Clinic Sacramento 916-561-7400
- Merced: VA Merced Out Patient Clinic 559-225-6100
- Modesto: Modesto Clinic 209-557-6200
- North Hills: Sepulveda OPC and Nursing Home 818-891-7711
- Oakland: Oakland Behavioral Health Clinic 510-587-3400
- Oakland: Oakland Outpatient Clinic 510-267-7800
- Oakland: Oceanside 760-643-2000
- Redding: Redding Outpatient Clinic 530-226-7555
- San Diego: Mission Valley 619-400-5000
- San Jose: San Jose Clinic 408-363-3000
- Santa Barbara: Santa Barbara Community Based Outpatient Clinic 805-683-1491
- Seaside: Monterey Clinic 831-883-3800
- Sonora: Sonora Clinic 209-588-2600
- Tulare: VA South Valley Outpatient Clinic 559-684-8703
- Valejo: Mare Island Outpatient Clinic 707-562-8200

Community Based Outpatient Clinic (CBOC)

- Anaheim: Anaheim 714-780-5400
- Bakersfield: Bakersfield CBOC 661-632-1800
- Chula VIsta: Chula Vista 619-409-1600
- Clearlake: Clearlake VA Outpatient Clinic 707-995-7200
- Corona: Corona 951-817-8820
- El Centro: Imperial Valley 760-352-1506
- Escondido: Escondido 760-466-7020
- Fureka: Fureka VA Outnatient Clinic 707-442-5335

CALIFORNIA VA Health Care Facilities, continued

Community Based Outpatient Clinic (CBOC) continued

- Fremont: Fremont Clinic 510-791-4000
- Gardena: Gardena 310-851-4705
- Laguna Hills: Laguna Hills 949-269-0700
- Lancaster: Lancaster CBOC 661-729-8655 or 661-729-8655
- Long Beach: Villages At Cabrillo 562-388-8000
- Murrieta: Murrieta 951-290-6500
- Oakhurst: Oakhurst CBOC 559-683-5300
- Oxnard: Oxnard 805-604-6960
- Palm Desert: Palm Desert 760-341-5570
- Rancho Cucamonga: Rancho Cucamonga 909-946-5348
- San Bruno: San Bruno VA Outpatient Clinic 650-615-6000
- San Francisco: San Francisco VA Downtown Clinic 415-281-5100
- San Gabriel: Pasadena 626-296-9500
- San Luis Obispo: San Luis Obispo Pacific Medical Plaza 805-543-1233
- Santa Ana: Santa Ana Bristol Medical Center 714-825-3500
- Santa Fe Springs: Whittier/Santa Fe Springs Clinic 562-466-6080
- Santa Maria: Santa Maria CBOC 805-354-6000
- Santa Rosa: Santa Rosa VA Outpatient Clinic 707-569-2300
- Susanville: VA Diamond View Outpatient Clinic 530-251-4550
- Victorville: Victorville 760-951-2599

Vet Centers

- Bakersfield: Bakersfield Vet Center 661-323-8387
- Bonita: Chula Vista Vet Center 877-618-6534 or 858-618-6534
- Capitola: Santa Cruz County Mobile Vet Center 831-464-4575
- Capitola: Santa Cruz County Vet Center 831-464-4575
- Chico: Chico Vet Center 530-899-8549
- Citrus Heights: Citrus Heights Vet Center 916-535-0420
- Colton: San Bernardino Vet Center 909-801-5762
- Concord: Concord Vet Center 925-680-4526
- Corona: Corona Mobile Vet Center & Corona Vet Center 951-734-0525
- Eureka: Eureka Mobile Vet Center & Eureka Vet Center 707-444-8271
- Fresno: Fresno Mobile Vet Center & Fresno Vet Center 559-487-5660
- Garden Grove: North Orange County Vet Center 714-776-0161
- Gardena: Los Angeles Vet Center 310-767-1221
- Mission Viejo: South Orange County Vet Center 949-348-6700
- Modesto: Modesto Vet Center 209-569-0713
- Oakland: Oakland Vet Center 510-763-3904
- Palmdale: Antelope Valley Vet Center 661-267-1026
- Redwood City: Peninsula Vet Center 650-299-0672
- Rohnert Park: Northbay Vet Center 707-586-3295
- Sacramento: Sacramento Vet Center 916-566-7430
- San Diego: San Diego Vet Center 858-642-1500
- San Francisco: San Francisco Vet Center 415-441-5051
- San Jose: San Jose Vet Center 408-993-0729
- San Marcos: San Marcos Vet Center 760-744-6914
- Sepulveda: Sepulveda Vet Center 818-892-9227
- Temecula: Temecula Vet Center 951-302-4849
- Ventura: Ventura Vet Center 805-585-1860
- Victorville: High Desert Vet Center 760-261-5925

CALIFORNIA, continued:

Veterans Justice Outreach Specialists

- Long Beach: Andrea Serafin 562-826-5884
- Mather: Sue Cooper 916-843-9237
- Palo Alto: Kristi Woodard 650-493-5000 ext. 24720
- San Diego: Lezlie Neusteter 619-680-1717

COLORADO:

VA Health Care Facilities

VA Health Care System

Denver: VA Eastern Colorado Health Care System 888-336-8262

VA Medical Center

Grand Junction: Grand Junction VA Medical Center 970-242-0731

Outpatient Clinics

- Burlington: Burlington VA Outreach Clinic 719-346-5239
- Sterling: Sterling Mobile Telehealth Clinic 888-483-9127 X 3816

Community Based Outpatient Clinic (CBOC)

- Alamosa: Alamosa /San Luis Valley Clinic/Sierra Blanca Med. Ctr. 719-587-6800
- Aurora: Aurora Outpatient Clinic 303-398-6340
- Colorado Springs: Colorado Springs Clinic 719-327-5660
- Craig: Craig CBOC 970-824-6721
- Fort Collins: Fort Collins Outpatient Clinic 970-224-1550
- Greeley: Greeley Outpatient Clinic 970-313-0027
- La Junta: La Junta Outpatient Clinic 719-383-5195
- Lakewood: Lakewood Outpatient Clinic 303-914-2680
- Lamar: Lamar Outpatient Clinic 719-336-5972
- Montrose: Montrose Outpatient Clinic 970-249-7791
- Pueblo: Pueblo Outpatient Clinic 719-553-1000

Vet Center

- Boulder: Boulder Vet Center 303-440-7306
- Colorado Springs: Colorado Springs Mobile Vet Center & Colorado Springs Vet Center 719-471-9992
- Denver: Denver Vet Center 303-326-0645
- Fort Collins: Fort Collins Vet Center 970-221-5176
- Grand Junction: Grand Junction Vet Center 970-245-4156
- Pueblo: Pueblo Vet Center 719-583-4058

- Colorado Springs: Laura Sales 719-667-4387
- Denver: Todd Brossart 303-399-8020 ext. 5019
- Grand Junction: Rainy Reaman 970.263.2800 Ext 2562

CONNECTICUT:

VA Health Care Facilities

VA Medical Center

- Newington: VA Connecticut Healthcare System Newington Campus 860-666-6951
- West Haven: VA Connecticut Healthcare System West Haven Campus 203-932-5711

Community Based Outpatient Clinic (CBOC)

- Danbury: Danbury CBOC 203-798-8422
- New London: John J. McGuirk Outpatient Clinic New London 860-437-3611
- Stamford: Stamford Outpatient Clinic 203-325-0649
- Waterbury: Waterbury Outpatient Clinic 203-465-5292
- Willimantic: Windham Outpatient Clinic 860-450-7583
- Winsted: Winsted Outpatient Clinic 860-738-6985

Vet Center

- Danbury: Danbury Vet Center 203-790-4000
- Norwich: Norwich Vet Center 860-887-1755
- Rocky Hill: Hartford Vet Center 860-563-8800
- West Haven: New Haven Vet Center 203-932-9899

Veterans Justice Outreach Specialists

• West Haven: see http://www.va.gov/HOMELESS/VJO Contacts.asp

FLORIDA:

VA Health Care Facilities

VA Health Care System

- Bay Pines: Bay Pines VA Health Care System 727-398-6661
- Gainesville: Malcom Randall VA Medical Center 352-376-1611
- Miami: Bruce Carter VA Medical Center 305-575-7000

VA Medical Center

- Gainesville: Malcom Randall VA Medical Center 352-376-1611
- Lake City: Lake City VA Medical Center 386-755-Grand Junction: Grand Junction VA Medical Center 970-242-0731
- Orlando: Orlando VA Medical Center 407-629-1599
- Tampa: James A. Haley Veterans' Hospital 813-972-2000
- West Palm Beach: West Palm Beach VA Medical Center 561-422-8262

Outpatient Clinics

- Daytona Beach: William V. Chappell, Jr.VA Outpatient Clinic 386-323-7500
- Fort Meyers: VA Outpatient Clinic 239-939-3939
- Jacksonville: Jacksonville Outpatient Clinic 904-232-2751
- New Port Richey: New Port Richey Outpatient Clinic 727-869-4100
- Tallahassee: Tallahassee Outpatient Clinic 850-878-0191
- The Villages: The Villages Outpatient Clinic 352-674-5000
- Viera: Viera VA Outpatient Clinic 321-637-3788

Community Service Programs

- Port St. Lucie: St Lucie County PTSD Clinical Team (PCT) Outpatient Program 772-878-7876
 Community Based Outpatient Clinic (CBOC)
- Boca Raton: Boca Raton CBOC 561-416-8995
- Bradenton: VA Outpatient Clinic 941-721-0649
- Brooksville: Pine Brook Medical Complex Brooksville CBOC 352-597-8287
- Clermont : Clermont CBOC 352-536-8200
- Coral Springs: Coral Springs CBOC 954-575-4940
- Deerfield Beach: Deerfield Beach CBOC 954-570-5572
- Delray Beach: Delray Beach CBOC 561-495-1973
- Eglin AFB: Eglin CBOC 866-520-7359
- Fort Pierce: Fort Pierce CBOC 772-595-5150
- Hollywood: Hollywood CBOC 954-986-1811; Pembroke Pines CBOC 954-894-1668
- Homestead: Homestead CBOC 305-248-0874
- Key Largo: Key Largo CBOC 305-451-0164
- Key West: Key West CBOC 305-293-4863 or 305-293-4828
- Kissimmee: Kissimmee CBOC 407-518-5004
- Lakeland: Lakeland CBOC 863-701-2470
- Lecanto: Lecanto CBOC 352-746-8000
- Leesburg: Leesburg CBOC 352-435-4000
- Marianna: Marianna CBOC 850-718-5620
- Miami: Miami Healthcare for Homeless Veterans 305-541-5864
- Miami: Miami Outpatient Substance Abuse Clinic 305-541-8435
- Naples: Naples CBOC 239-659-9188
- Ocala: Ocala CBOC 352-369-3320
- Okeechobee: Okeechobee CBOC 863-824-3232
- Orange City: Orange City CBOC 386-456-2080

FLORIDA, continued:

VA Health Care Facilities

Community Based Outpatient Clinic (CBOC)

- Palatka: Palatka CBOC 386-329-8800
- Palm Harbor: Palm Harbor CBOC 727-734-5276
- Panama City: Panama City Outpatient Clinic 850-636-7000
- Pensacola: Joint Ambulatory Care Center 850-912-2000
- Port Charlotte: Port Charlotte CBOC 941-235-2710
- Sarasota: Sarasota CBOC 941-371-3349
- Sebring: Sebring CBOC 863-471-6227
- St. Augustine: St. Augustine CBOC 904-829-0814
- St. Petersburg: St. Petersburg CBOC 727-502-1700
- Stuart: Stuart CBOC 772-288-0304
- Sunrise: Broward County VA Clinic 954-475-5500
- Vero Beach: Vero Beach CBOC 772-299-4623
- Zephyrhills: Zephyrhills CBOC 813-780-2550

Vet Center

- Clearwater: Clearwater Vet Center 727-549-3600
- Coral Springs: Pompano Beach Vet Center 954-357-5555
- Daytona Beach: Daytona Beach Vet Center 321-366-6600
- Ft. Lauderdale: Fort Lauderdale Vet Center 954-356-7926
- Ft. Meyers: Fort Meyers Vet Center 239-479-4401
- Gainesville: Gainesville Vet Center 352-331-1408
- Greenacres: Palm Beach Vet Center 561-422-1201
- Jacksonville: Jacksonville Vet Center 904-232-3621
- Jupiter: Jupiter Vet Center 561-422-1220
- Key Largo: Key Largo Vet Center Outstation 305-451-0164
- Melbourne: Melbourne Vet Center 321-254-3410
- Miami: Miami Vet Center 305-718-3712
- Orlando: Orlando Mobile Vet Center & Vet Center 407-857-2800
- Pensacola: Pensacola Mobile Vet Center & Vet Center 850-456-5886
- Sarasota: Sarasota Vet Center 941-927-8285
- St. Petersburg: St. Petersburg Vet Center 727-549-3633
- Tallahassee: Tallahassee Mobile Vet Center & Vet Center 850-942-8810
- Tampa: Tampa Vet Center 813-228-2621

- Bay Pines: Daniel Ringhoff 727-398-6661 X2855
- Gainesville: Charlotte Matthews 352-548-1800
- Miami: Giovanna Delgado 786-348-8666
- Orlando: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Tampa: Jarred Miller 813-610-5316
- West Palm Beach: Carla-Paula Dasilva 561-422-8262 ext. 7101

HAWAII:

VA Health Care Facilities

VA Medical Center

• Honolulu: Spark M. Matsunaga VA Medical Center 808-433-0600 or 808-433-0852 Outpatient Clinic

• Honolulu: National Center for PTSD Pacific Islands Division 808-566-1546

Community Based Outpatient Clinic (CBOC)

Hilo: Hilo CBOC 808-935-3781

• Kahului: Maui CBOC 808-871-2454

Kahului-Kona: Kona CBOC 808-329-0774

• Lihue: Lihue Kuai CBOC 808-246-0497

Vet Center

• Hilo: Hilo Vet Center 808-969-3833

• Honolulu: Honolulu Vet Center 808-973-8387

Kailua-Kona: Kailua-Kona Vet Center 808-329-0574

• Lihue: Kauai Vet Center 808-246-1163

Wailuku: Maui Vet Center 808-242-8557

Veterans Justice Outreach Specialists

• Honolulu: see http://www.va.gov/HOMELESS/VJO_Contacts.asp

IDAHO:

VA Health Care Facilities

VA Medical Center

• Boise: Boise VA Medical Center 208-422-1000

Outpatient Clinic

- Mountain Home: Mountain Home Outpatient Clinic 208-580-2001
- Salmon: Salmon Behavioral Clinic 208-422-1016

Community Based Outpatient Clinic (CBOC)

- Caldwell: Caldwell Clinic 208-454-4820
- Coeur d'Alene: Coeur d 'Alene CBOC 208-665-1700
- Grangeville: Grangeville VA Outpatient Clinic 208-983-4671
- Idaho Falls: Idaho Falls Outreach Clinic 208-522-2922
- Lewiston: Lewiston CBOC 208-746-7784
- Pocatello: Pocatello CBOC 208-232-6214
- Twin Falls: Twin Falls Outpatient Clinic 208-732-0959

Vet Center

- Boise: Boise Mobile Vet Clinic & Vet Clinic 208-342-3612
- Pocatello: Pocatello Vet Center 208-232-0316

Veterans Justice Outreach Specialists

• Boise: see http://www.va.gov/HOMELESS/VJO Contacts.asp

INDIANA:

VA Health Care Facilities

VA Medical Center

- Fort Wayne: Northern Indiana Health Care System Fort Wayne Campus 260-426-5431
- Marion: Northern Indiana Health Care System Marion Campus 765-674-3321
- Indianapolis: Indianapolis VA Medical Center 317-554-0000

Outpatient Clinic

• Evansville: Evansville Outpatient Clinic 812-465-6202

Community Based Outpatient Clinic (CBOC)

- Bloomington: Bloomington CBOC 812-336-5723 or 877-683-0865
- Crown Point: Crown Point CBOC 219-662-5000
- Goshen: Goshen CBOC 888-683-3019
- Greendale: Lawrenceburg CBOC 812-539-2313
- Muncie: Muncie/Anderson CBOC 765-284-6822 or 765-284-6822
- New Albany: New Albany CBOC 502-287-4100
- Peru: Peru CBOC 765-472-8900
- Richmond: Richmond CBOC 765-973-6915
- Scottsburg: Scottsburg CBOC 877-690-1938
- South Bend: South Bend CBOC 574-299-4847 or 574-299-4847
- Terre Haute: Terre Haute CBOC 812-232-2890
- Vincennes: Vincennes CBOC 812-882-0894
- West Lafayette: West Lafayette CBOC 765-464-2280

Vet Center

- Evansville: Evansville Vet Clinic 812-473-5993
- Fort Wayne: Fort Wayne Vet Center 260-460-1456
- Indianapolis: Indianapolis Vet Center 317-988-1600
- Merrillville: Gary Area Vet Center 219-736-5633

- Indianapolis: Mark Mayhew 317-988-2551
- Fort Wayne: Eric Dungan 765-674-3321 ext 75270

IOWA:

VA Health Care Facilities

VA Health Care Center

- Des Moines: VA Central Iowa Health Care System 515-699-5999
- lowa City: Iowa City Health Care System 319-338-0581

Outpatient Clinic

• Coralville: Coralville Outpatient Clinic 319-358-2406

Community Based Outpatient Clinic (CBOC)

- Bettendorf: Bettendorf VA Clinic 563-332-8528
- Cedar Rapids: Cedar Rapids CBOC 319-369-4340
- Dubuque: Dubuque VA Clinic 563-588-5520
- Fort Dodge: Fort Dodge VA Clinic 515-576-2235
- Knoxville: Knoxville CBOC 641-842-3101
- Marshalltown: Marshalltown CBOC 641-754-6700
- Mason City: Mason City VA Clinic 800-351-4671
- Ottumwa: Ottumwa VA Clinic 641-683-4300
- Shenandoah: Shenandoah CBOC 712-246-0092
- Sioux City: Sioux City VA Clinic 712-258-4700
- Spirit Lake: Spirit Lake VA Clinic 712-336-6400
- Waterloo: Waterloo VA Clinic 319-235-1230

Vet Center

- Cedar Rapids: Cedar Rapids Vet Clinic 319-378-0016
- Des Moines: Des Moines Vet Center 515-284-4929
- Sioux City: Sioux City Vet Center 712-255-3808

- Des Moines: Jennifer Miner 515-699-4875 x4875
- lowa City: Sherri Koob 563-320-9887

KANSAS:

VA Health Care Facilities

VA Medical Center

- Leavenworth: VA Eastern Kansas Health Care System 913-682-2000
- Topeka: VA Eastern Kansas Health Care System 785-350-3111
- Wichita: Robert J. Dole VA Health Care System 316-685-2221

Outpatient Clinic

Overland Park: Johnson Count VA Clinic 816-922-2750

Community Based Outpatient Clinic (CBOC)

- Chanute: Chanute CBOC 800-574-8387 ext. 54453
- Emporia: Emporia CBOC 800-574-8387 ext. 54453
- Ft. Dodge: Ft. Dodge Clinic 888-878-6881 X 41040
- Ft. Scott: Ft. Scott CBOC 800-574-8387 ext.54453
- Garnett: Garnett CBOC 800-574-8387 ext. 54453
- Hays: Hays Clinic 888-878-6881 X 41000
- Holton: Holton Community Hospital 800-574-8387 X 54453
- Hutchinson: Hutchinson CBOC 888-878-6881 X 41100
- Junction City: Junction City Clinic 800-574-8387 X 54670
- Kansas City: Wyandotte CBOC 800-952-8387 X 56990
- Lawrence: Lawrence CBOC 800-574-8387 ext. 54650
- Liberal: Liberal Clinic 620-626-5574
- Paola: Louisburg-Paola Clinic 816-922-2160
- Parsons: Parsons Clinic 888-878-6881 X 41060
- Salina: Salina 888-878-6881 X 41020
- Seneca: Nemaha Valley Community Hospital 800-574-8387 X 54453

Vet Center

- Manhattan: Manhattan Vet Clinic 785-350-4920
- Wichita: Wichita Mobile Vet Center 316-265-2221 X 889; Vet Center 316-685-2221 X 41080

- Leavenworth and Topeka: Mitchell Flesher 913-682-2000 ext. 52397
- Wichita: Rita Snider 316-634-3047

LOUISIANA:

VA Health Care Facilities

VA Medical Center

- Alexandria: Alexandria VA Medical Center 318-473-0010
- New Orleans: Southeast Louisiana Health Care System 800-935-8387
- Shreveport: Overton Brooks VA Medical Center 318-221-8411

Community Based Outpatient Clinic (CBOC)

- Baton Rouge: Baton Rouge CBOC 225-761-3400
- Bogalusa: Bogalusa CBOC 225-930-2860
- Franklin: Franklin CBOC 337-828-9092
- Hammond: Hammond CBOC 985-902-5026
- Houma: Houma CBOC 985-851-0188
- Jennings: Jennings Clinic 337-824-1000
- Lafayette: Lafayette Clinic 337-261-0734
- Monroe: Monroe CBOC 318-343-6100
- New Orleans: New Orleans Outpatient Clinic 800-935-8387
- Reserve: St. John VA Outpatient Clinic 504-565-4705
- Slidell: Slidell CBOC 985-690-2635

Vet Center

- Alexandria: Rapides Parish Vet Clinic 318-466-4327
- Baton Rouge: Baton Rouge Vet Clinic 225-761-3440
- New Orleans: Kenner Mobile Vet Center 504-565-4977; Vet Center 504-565-4977
- Shreveport: Shreveport Vet Clinic 318-861-1776

- Alexandria/Pineville: Bradley Allison 318-466-4067
- New Orleans: Lilia Valdez-Lindsley 504-571-8279
- Shreveport: Michael Sullivan-Tibbs 318.990.4409

MAINE

VA Health Care Facilities

VA Medical Center

Augusta: Maine VA Medical Center 207-623-8411

Outpatient Clinic

- Houlton: Houlton Access Pointe Clinic 877-421-8263 ext. 2000
- Portland: Portland CBOC 207-771-3500

Community Based Outpatient Clinic (CBOC)

- Bangor: Bangor CBOC 207-561-3600
- Calais: Calais CBOC 207-904-3700
- Caribou: Caribou CBOC 207-493-3800
- Lincoln: Lincoln CBOC 207-403-2000
- Rumford: Rumford CBOC 207-369-3200
- Saco: Saco CBOC 207-294-3100

Vet Center

- Bangor: Bangor Vet Center 207-947-3391
- Caribou: Caribou Mobile Vet Center & Vet Center 207-496-3900
- Lewiston: Lewiston Mobile Vet Center & Vet Center 207-783-0068
- Portland: Portand Vet Center 207-780-3584
- Springvale: Sanford Vet Center 207-490-1513

Veterans Justice Outreach Specialists

Augusta: Bradley Allison 318-466-4067

MASSACHUSETTS

VA Health Care Facilities

VA Medical Center

- Bedford: Bedford VA Medical Center 781-687-2000
- Brockton: Boston VA Medical Center Brockton Division 508-583-4500
- Jamaica Plain: Boston VA Medical Center Jamaica Plain Division 617-232-9500
- Leeds: Northampton VA Medical Center 413-584-4040
- West Roxbury: Boston VA Medical Center West Roxbury Division 617-323-7700

Community Based Outpatient Clinic (CBOC)

- Boston: Boston CBOC 617-248-1000 or 617-248-1470
- Fitchburg: Fitchburg CBOC 1-800-VET-MED1
- Framingham: Framingham CBOC 508-628-0205
- Gloucester: Gloucester CBOC 1-800-VET-MED1
- Greenfield: Greenfield CBOC 413-773-8428
- Haverhill: Haverhill CBOC 413-773-8428
- Hyannis: Hyannis CBOC 508-771-3190
- Lowell: Lowell CBOC 978-671-9000
- Lynn: Lynn CBOC 1-800-VET-MED1
- Martha's Vineyard: Martha's Vineyard CBOC 508-693-0410
- Nantucket: Nantucket CBOC 508-825-8195
- New Bedford: New Bedford CBOC 508-994-0217
- Pittsfield: Pittsfield CBOC 413-499-2672
- Quincy: Quincy CBOC 617-376-2010
- Springfield: Springfield CBOC 413-731-6000
- Worcester: Worcester CBOC 508-856-0104

Vet Center

- Boston: Boston Vet Center 617-424-0665
- Brockton: Brockton Vet Center 508-580-2730
- Fair Haven: New Bedford Vet Center 508-999-6920
- Hyannis: Hyannis Vet Center 508-778-0124
- Lowell: Lowell Vet Center 978-453-1151
- Springfield: Springfield Mobile Vet Center & Vet Center 413-737-5167
- Worcester: Worcester Vet Center 508-753-7902

- Bedford: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Jamaica Plain: see http://www.va.gov/HOMELESS/VJO_Contacts.asp
- Leeds: see http://www.va.gov/HOMELESS/VJO Contacts.asp

MICHIGAN

VA Health Care Facilities

VA Medical Centers

- Ann Arbor: VA Ann Arbor Healthcare System 734-769-7100
- Battle Creek: Battle Creek VA Medical Center 269-966-5600 Or 888-214-1247

Outpatient Clinic

- Hancock: Hancock Clinic 906-482-7762
- Ironwood: Ironwood Clinic 906-932-0032
- Manistique: Manistique Outreach Clinic 906-341-3420
- Menominee: Menominee Clinic 906-863-1286
- Sault Ste. Marie: Sault Ste. Marie Clinic 906-253-9383

Community Based Outpatient Clinic

- Alpena: Clement C. Van Wagoner Outpatient Clinic 989-356-8720
- Bad Axe: Bad Axe Community Based Outpatient Clinic
- Benton Harbor: Benton Harbor Community Based Outpatient Clinic 269-934-9123
- Cadillac: Cadillac Community Based Outpatient Clinic
- Clare: Clare Community Outpatient Clinic 989-386-8113
 Flint: Flint VA Outpatient Clinic 810-720-2913
- Gaylord: Gaylord VA Outpatient Clinic 989-732-7525
- Grand Rapids: Grand Rapids VA Outpatient Clinic 616-365-9575
- Lansing: Lansing VA Outpatient Clinic 517-267-3925
- Michigan Center: Jackson VA Outpatient Clinic 517-764-3609
- Muskegon: Muskegon VA Outpatient Clinic 231-725-4105
- Oscoda: Oscoda VA Outpatient Clinic 989-747-0026
- Pontiac: Pontiac VA Outpatient Clinic 248-332-4540
- Traverse City: Traverse City VA Outpatient Clinic 231-9720
- Yale: Yale VA Outpatient Clinic

Vet Center

- Clinton Township: Macomb County Vet Center
- Dearborn: Dearborn Vet Center 313-277-1428
- Detroit: Detroit Vet Center 313-831-6509
- Escanaba: Escanaba Mobile Vet Center
- Escanaba: Escanaba Vet Center
- Grand Rapids: Grand Rapids Vet Center 616-365-9575
- Pontiac: Pontiac Vet Center 248-874-1015
- Saginaw: Saginaw City Vet Center 989-321-4650
- Traverse: Traverse City Vet Center 231-935-0051
- Traverse City: Traverse City Vet Center

- Ann Arbor: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Battle Creek: see http://www.va.gov/HOMELESS/VJO_Contacts.asp
- Detroit: Nanette Colling 313-576-1000
- Iron Mountain: Michael Matwyuk 906-774-3300
- Saginaw: Terry Troxell 989-497-2500 ext. 11916

MINNESOTA

VA Health Care Facilities

VA Health Care System

- Minneapolis: Minneapolis VA Health Care System 612-725-2000
- St. Cloud: St. Cloud VA Health Care System 320-252-1670

Community Based Outpatient Clinic

- Alexandria: Alexandria Community Based Outpatient Clinic 320-759-2640
- Bemidji: Bemidji VA Community Based Outpatient Clinic 218-755-6360
- Brainerd: Brainerd VA Clinic 218-855-1115
- Fergus Falls: Fergus Falls VA Community Based Outpatient Clinic 218-739-1400
- Hibbing: Hibbing VA Clinic 218-263-9698
- Mankato: Mankato CBOC 507-387-2939
- Maplewood: Maplewood VA Clinic 651-290-3040
- Montevideo: Montevideo VA Clinic 320-269-2222
- Rochester: Rochester VA Clinic 507-252-0885
- St. James: South Central VA Clinic (St. James) 507-375-9670

Vet Center

- Brooklyn Park: Brooklyn Park Mobile Vet Center 763-503-2220
- Brooklyn Park: Brooklyn Park Vet Center 763-503-2220
- Duluth: Duluth Vet Center 218-722-8654
- New Brighton: St. Paul Vet Center 651-644-4022

- Minneapolis: David Holewinski 612-467-1771
- St. Cloud: Michael Mathies 320-255-6480; Connie Selden 320-252-1670

MISSISSIPPI

VA Health Care Facilities

VA Medical Center

- Biloxi: VA Gulf Coast Veterans Health Care System 2280523-5000 Or 800-296-8872
- Jackson: G.V. (Sonny) Montgomery VA Medical Center 601-362-4471

Community Based Outpatient Clinic

- Byhalia: Byhalia, Mississippi CBOC 662-838-2098
- Columbus: Columbus Clinic 662-244-0391
- Greenville: Greenville CBOC 662-332-9872
- Hattiesburg: Hattiesburg CBOC 601-296-3530
- Kosciusko: Kosciusko CBOC 662-289-1800
- McComb: McComb 601-250-0965
- Meridian: Meridian 601-482-7154
- Natchez: Natchez CBOC 601-442-7141
- Smithville: Smithville, Mississippi CBOC 662-651-4637

Vet Center

- Biloxi: Biloxi Vet Center 228-388-9938
- Jackson: Jackson Vet Center 601-965-5727

- Biloxi: Kelly Estle 251-219-3971; Kathy Monson 850-912-2085
- Jackson: see http://www.va.gov/HOMELESS/VJO Contacts.asp

MONTANA

VA Health Care Facilities

VA Health Care System

• Fort Harrison: VA Montana Health Care System 406-442-6410 Or 877-468-8387

Outpatient Clinic

- Hamilton: Hamilton Primary Care Telehealth Outreach Clinic 406-363-3352
- Havre: Havre VA Community Based Outreach Clinic 406-265-4304
- Plentywood: Plentywood Primary Care Telehealth Outreach Clinic 406-765-3718

Community Based Outpatient Clinic

- Anaconda: Anaconda VA Community Based Outpatient Clinic 406-563-6090
- Billings: Billings VA Community Based Outpatient Clinic 406-373-3500
- Bozeman: Bozeman VA Community Based Outpatient Clinic 406-522-8923
- Cut Bank: Cut Bank VA Community Based Outpatient Clinic 406-873-9047
- Glasgow: Glasgow VA Community Based Outpatient Clinic 406-228-4101
- Glendive: Glendive VA Community Based Outpatient Clinic 406-377-4755
- Great Falls: Great Falls VA Community Based Outpatient Clinic 406-454-8070
- Kalispell: Kalispell VA Community Based Outpatient Clinic 406-751-5980
- Lewistown: Lewistown VA Community Based Outpatient Clinic 406-535-4790
- Libby: Libby CBOC
- Miles City: Miles City VA Community Based Outreach Clinic/Nursing Home 406-874-5600
- Missoula: Missoula VA Community Based Outpatient Clinic 877-468-8387

Vet Center

- Billings: Billings Mobile Vet Center 406-657-6071
- Billings: Billings Vet Center 406-657-6071
- Great Falls: Great Falls Vet Center 406-452-9048
- Kalispell: Kalispell Vet Center 406-721-4918
- Missoula: Missoula Mobile Vet Center 406-721-4918
- Missoula: Missoula Vet Center 406-721-4918

Veterans Justice Outreach Specialists

• Fort Harrison: Paul Harmon 406-447-6021

NEBRASKA

Nebraska

VA Medical Centers

• Omaha: Omaha-VA Nebraska-Western Iowa Health Care System 402-346-8800

Community Based Outpatient Clinic

- Alliance: Alliance VA Clinic
- Bellevue: Bellevue CBOC 402-591-4500
- Gordon: Gordon VA Clinic 308-282-1442
- Holdrege: Holdrege CBOC 308-995-3760
- Lincoln: Lincoln CBOC 402-489-3802
- Norfolk: Norfolk CBOC 402-370-4570
- North Platte: North Platte CBOC 308-532-6906
- Rushville: Rushville VA Clinic 605-745-2000 x2474
- Scottsbluff: Scottsbluff CBOC 308-220-3930
- Sidney: Sidney VA Outpatient Clinic 307-778-7526

Vet Center

- Lincoln: Lincoln Mobile Vet Center 402-476-9736
- Lincoln: Lincoln Vet Center 402-476-9736
- Omaha: Omaha Vet Center 402-346-6735

- Lincoln: Kenneth Mausbach 402-486-7875
- Omaha: Tami Osburn 402-599-2183

NEVADA

VA Health Care Facilities

VA Medical Center

- Las Vegas: VA Southern Nevada Healthcare System (VASNHS) 702-636-3000
- Reno: VA Sierra Nevada Health Care System 775-786-7200 Or 888-838-6256

Community Based Outpatient Clinic

- Elko: Elko Outreach Clinic 775-753-2014
- Ely: Ely CBOC 775-289-3612 x131
- Fallon: VA Lahontan Valley Outpatient Clinic 775-428-6161
- Las Vegas: East Clinic/Las Vegas 702-636-6360
- Las Vegas: Healthcare for the Homeless Vets 702-636-4077
- Las Vegas: Northwest Clinic 702-636-6320
- Las Vegas: Southwest Clinic 702-636-6390
- Las Vegas: West Clinic 702-636-6355
- Minden: VA Carson Valley Outpatient Clinic 775-782-5265
- Pahrump: Pahrump Community Based Outpatient Clinic 775-727-7535

Vet Center

- Henderson: Henderson Vet Center 702-791-9100
- Las Vegas: Las Vegas Vet Center 702-251-7873
- Reno: Reno Vet Center 775-323-1294
- Henderson: Readjustment Counseling Services (Vet Center-Henderson) 702-791-9100
- Las Vegas: Readjustment Counseling Services (Vet Center-Las Vegas) 702-251-7873
- Nellis AFB: Mike O'Callaghan Federal Hospital 702-653-2260

- Las Vegas: Peter Quigley 702-363-3000 ext. 6062
- Reno: Mary Ann Moss 775-324-6600

NEW MEXICO

VA Health Care Facilities

VA Health Care System

• Albuquerque: New Mexico VA Health Care System 505-265-1711 Or 800-465-8262

Community Based Outpatient Clinic

- Alamogordo: Alamogordo CCBOC 575-437-9195
- Artesia: Artesia Clinic 575-746-3531
- Clovis: Clovis CBOC 575-763-4335
- Espanola: Espanola CBOC 505-367-4213
- Farmington: Farmington CBOC 505-326-4383
- Gallup: Gallup CBOC 505-722-7234
- Hobbs: Hobbs CBOC 575-391-0354
- Las Cruces: Las Cruces CBOC 575-522-1241
- Las Vegas: Las Vegas CCBOC 505-425-1910
- Raton: Raton CBOC 575-445-2391
- Santa Fe: Santa Fe CBOC 505-986-8645
- Silver City: Silver City Clinic 575-538-2921
- Truth or Consequences: Truth or Consequences CCBOC 575-894-7662

Vet Center

- Albuquerque: Albuquerque Vet Center 505-346-6562
- Farmington: Farmington Vet Center 505-327-9684
- Las Cruces: Las Cruces Mobile Vet Center 575-523-9826
- Las Cruces: Las Cruces Vet Center 575-523-9826
- Santa Fe: Santa Fe Mobile Vet Center 505-988-6562
- Raleigh: Santa Fe Vet Center 505-988-6562

Veterans Justice Outreach Specialists

Albuquerque: Bentoya Curry 505-270-7691

NEW YORK

VA Health Care Facilities

VA Medical Center

- Albany: Albany VA Medical Center: Samuel S. Stratton 518-626-5000 Or 800-223-4810
- Batavia: VA Western New York Healthcare System at Batavia 585-297-1000 Or 585-297-1000
- Bath: Bath VA Medical Center 607-664-4000 Or 877-845-3247
- Bronx: James J. Peters VA Medical Center (Bronx, NY) 718-584-9000
- Brooklyn: Brooklyn Campus of the VA NY Harbor Healthcare System 718-836-6600
- Buffalo: VA Western New York Healthcare System at Buffalo 716-834-9200 Or 800-532-8387
- Canandaigua: Canandaigua VA Medical Center 585-394-2000 Or 800-204-9917
- Castle Point: Castle Point Campus of the VA Hudson Valley Health Care System 845-831-2000
- Montrose: Franklin Delano Roosevelt Campus of the VA Hudson Valley Health Care System 914-737-4400
- New York: Manhattan Campus of the VA NY Harbor Healthcare System 212-686-7500
- Northport: Northport VA Medical Center 631-261-4400
- Syracuse: Syracuse VA Medical Center 315-425-4400 Or 800-792-4334

Community Based Outpatient Clinic

- Auburn: Auburn VA Outpatient Clinic 315-255-7002
- Bainbridge: Bainbridge VA Outpatient Clinic 607-967-8590
- Binghamton: Binghamton VA Outpatient Clinic 607-772-9100
- Brooklyn: Chapel Street Veterans Healthcare Center 718-439-4300
- Brooklyn: Opiate Replacement Treatment Program (ORTP), VA NY Harbor Healthcare
 System Brooklyn Campus 646-273-8100 Or 212-462-4401
- Carmel: Carmel Community Clinic/Putnam County 845-228-5291
- Catskill: Catskill VA Outpatient Clinic 518-943-7515
- Clifton Park: Clifton Park VA Outpatient Clinic 518-383-8506
- Cortland: Cortland VA Outpatient 607-662-1517
- Dunkirk: Dunkirk VA Outpatient Clinic 800-310-5001
- East Meadow: East Meadow Clinic 631-754-7978
- Elizabethtown: Elizabethtown VA Outpatient Clinic 518-873-6377
- Elmira: Elmira VA Outpatient Clinic 877-845-3247
- Fonda: Fonda VA Outpatient Clinic 518-853-1247
- Glens Falls: Glens Falls VA Outpatient Clinic 518-798-6066
- Goshen: Goshen Community Clinic 845-294-6927
- Ithaca: Ithaca VA Outpatient Clinic 607-274-4680
- Jamestown: Jamestown VA Outpatient Clinic 716-338-1511
- Kingston: Kingston VA Outpatient 845-331-8322
- Lackawanna: Lackawanna VA Outpatient Clinic 716-822-5944
- Lockport: Lockport VA Outpatient Clinic 716-438-3890
- Malone: Malone VA Outpatient Clinic 518-483-1529
- Massena: Massena VA Outnatient Clinic 315-769-4253

NEW YORK continued

- New City: New City Community Clinic 845-634-8942
- New York: Harlem Community Clinic 646-273-8125
- New York: Opiate Replacement Treatment Program (ORTP), VA NY Harbor Healthcare System Manhattan Campus 646-273-8100 Or 212-462-4401
- Niagara Falls: Niagara Falls VA Outpatient Clinic 800-223-4810 x65295
- Rome: Rome-Donald J. Mitchell VA Outpatient Clinic 315-334-7100
- Schenectady: Schenectady VA Outpatient Clinic 518-346-3334
- Staten Island: Staten Island Community Clinic 718-761-2973
- Sunnyside: Queens Community Clinic 718-741-4800
- Troy: Troy VA Outpatient Clinic 518-274-7707
- Warsaw: Warsaw Community Based Outpatient Clinic 585-786-2233
- Watertown: Watertown VA Outpatient Clinic 315-221-7026
- Wellsville: Wellsville Plains Community Clinic 877-845-3247
- White Plains: White Plains Community Clinic 914-682-6250
- Yonkers: Yonkers Community Clinic 914-375-8055

Vet Center

- Albany: Albany Vet Center 518-626-5130
- Babylon: Babylon Vet Center 631-661-3930
- Binghamton: Binghamton Vet Center 607-722-2393
- Bronx: Bronx Vet Center 718-367-3500
- Brooklyn: Brooklyn Vet Center 718-630-2830
- Buffalo: Buffalo Vet Center 716-862-7350
- Hicksville: Nassau Vet Center 516-348-0088
- Middletown: Middletown Vet Center 845-342-9917
- New York: Harlem Vet Center 646-273-8125
- New York: Manhattan Vet Center 212-742-9591
- Rochester: Rochester Vet Center 585-463-2600
- Staten Island: Staten Island Vet Center 718-761-2973
- Syracuse: Syracuse Vet Center 315-478-7127
- Watertown: Watertown Mobile Vet Center 315-782-5479
- Watertown: Watertown Vet Center 315-782-5479
- White Plains: White Plains Vet Center 914-682-6250
- Woodhaven: Queens Vet Center 718-296-2871

- Albany: Courtney Slade 518-626-5368
- Bath: Ann Smith-Howles 607-664-4372
- Bronx: Osvaldo Rios 718-584-9000 ext. 5843
- Buffalo: John Lahood 716-881-5855
- Canandaigua: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Montrose: Jamila Miah 914-737-4400 ext. 3185
- New York City: Denise Lukowski 718-526-1000 ext. 2457
- Northport: Eric Bruno 631-261-4400 ext. 7167
- Syracuse: Kynna Murphy 315-412-9485

NORTH CAROLINA

VA Health Care Facilities

VA Medical Centers

- Asheville: Asheville VA Medical Center 828-298-7911
- Durham: Durham VA Medical Center 919-286-0411

Outpatient Clinic

• Hickory: Hickory CBOC 828-431-5600

Community Based Outpatient Clinic

- Charlotte: Charlotte CBOC 704-597-3500
- Durham: Durham Clinic 919-383-6107
- Franklin: Franklin CBOC 828-369-1781
- Greenville: Greenville Clinic CBOC 252-830-2149
- Hamlet: Hamlet CBOC 910-582-3536
- Midway Park: Jacksonville CBOC 910-353-6406
- Morehead City: Morehead City CBOC 252-240-2349
- Pembroke: Robeson County CBOC 910-272-3220
- Raleigh: Raleigh II CBOC 919-899-6259
- Rutherfordton: Rutherford County CBOC 828-288-2780
- Wilmington: Wilmington CBOC 910-763-5979
- Winston-Salem: Winston-Salem CBOC 336-761-5300

Vet Center

- Charlotte: Charlotte Vet Center 704-549-8025
- Fayetteville: Fayetteville Vet Center 910-488-6252
- Greensboro: Greensboro Vet Center 336-333-5366
- Greenville: Greenville Mobile Vet Center 252-355-7920
- Greenville: Greenville, NC Vet Center 252-355-7920
- Raleigh: Raleigh Vet Center 919-856-4616

- Asheville: Katharine Stewart 828-298-9711 ext. 5335
- Durham: Timothy Virgilio 919-286-0411 ext. 5186
- Fayetteville: Curtis Morrow 910-488-2120 ext. 7225
- Salisbury: Carolyn Cardwell 704-638-9000 ext. 4129

NORTH DAKOTA

VA Health Care Facilities

VA Health Care System

• Fargo: Fargo VA Healthcare System 701-232-3241 Or 701-232-3241

Outpatient Clinic

- Dickinson: Dickinson VA Community Based Outpatient Clinic 701-483-1850
- Jamestown: Jamestown VA Community Based Outpatient 701-952-4787

Community Based Outpatient Clinic

- Bismarck: Bismarck VA Community Based Outpatient Clinic 701-221-9169
- Grafton: Grafton VA Community Cased Outpatient Clinic 701-352-4059
- Grand Forks: Grand Forks VA Community Outpatient Clinic 701-335-4380
- Minot: Minot VA Community Based Outpatient Clinic 701-727-9800
- Williston: Williston VA Community Based Outpatient Clinic 701-572-2470

Vet Center

- Bismarck: Bismarck Vet Center 701-224-9751
- Bismarck: Bismarck Mobile Vet Center 701-224-9751
- Fargo: Fargo Mobile Vet Center 701-237-0942
- Fargo: Fargo Vet Center 701-237-0942
- Minot: Minot Vet Center 701-852-0177

Veterans Justice Outreach Specialists

• Fargo: Nathan Viton 701-200-2723

OKLAHOMA

VA Health Care Facilities

VA Medical Centers

- Muskogee: Jack C. Montgomery VAMC 918-577-3000
- Oklahoma City: Oklahoma City VA Medical Center 405-456-1000

Community Based Outpatient Clinic

- Ada: Ada CBOC 580-436-2262
- Altus: Altus CBOC 580-482-9020
- Ardmore: Ardmore CBOC 580-226-4580 Or 580-226-4580
- Blackwell: Blackwell CBOC 5800-363-0052
- Enid: Enid CBOC 580-242-5100
- Ft Sill: Lawton/Ft Sill CBOC 580-585-5600
- Hartshorne: Hartshorne VA Outpatient Clinic 888-878-1598
- Jay: Jay CBOC 918-253-1900
- Konawa: Konawa CBOC 580-925-3286
- Oklahoma City: North May CBOC 405-752-6500
- Stillwater: Stillwater CBOC 405-624-0334
- Tulsa: Ernest Childers VA Outpatient Clinic (Tulsa) 918-628-2500
- Vinita: Vinita Outpatient Clinic 918-713-5400

Vet Center

- Lawton: Lawton Vet Center 580-585-5880
- Oklahoma City: Oklahoma City Vet Center 405-456-5184
- Tulsa: Tulsa Vet Center 918-628-2760

- Muskogee: Paula Wilcox 918-557-3448
- Oklahoma City: Joseph Dudley 405-456-1761

OREGON

VA Health Care Facilities

VA Health Care System

Roseburg: VA Roseburg Healthcare System 541-440-1000 Or 541-440-1000

VA Medical Center

Portland: Portland VA Medical Center 503-220-8262 Or 503-220-8262

Outpatient Clinic

- Burns: Burns OPC (Extension Clinic) 541-573-3339
- The Dalles: The Dalles OPC
- West Linn: West Linn Clinic 503-210-4900

Community Based Outpatient Clinics

- Bend: Bend CBOC 541-647-5200
- Brookings: Brookings CBOC 541-412-1152
- Eugene: Eugene CBOC 541-607-0897
- Hillsboro: Hillsboro CBOC 503-220-8262
- Klamath Falls: Klamath Falls CBOC 541-273-6206
- La Grande: La Grande Community Based Outpatient Clinic 541-963-0627
- North Bend: North Bend CBOC 541-756-8002
- Portland: East Portland CBOC 503-273-5142
- Salem: Salem CBOC 503-220-8262 x51499
- Warrenton: North Coast CBOC 503-220-8262 x52593

Vet Center

- Bend: Central Oregon Vet Center 541-749-2112
- Eugene: Eugene Vet Center 541-465-6918
- Grants Pass: Grants Pass Vet Center 541-479-6912
- Portland: Portland Vet Center 503-688-5361
- Salem: Salem Mobile Vet Center 503-362-9911
- Salem: Salem Vet Center 503-362-9911
- Ontario: Ontario Oregon CBOC 208-422-1303

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- Portland: Belinda Maddy 503-220-8262 ext. 32716
- Roseburg: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- White City: Paul Skinner 541-826-2111 ext. 3305

RHODE ISLAND

VA Health Care Facilities

VA Medical Centers

• Providence: Providence VA Medical Center 401-273-7100

Community Based Outpatient Clinics

• Middletown: Middletown Outpatient Clinic 401-847-6239

Vet Center

• Warwick: Providence Vet Center 401-739-0167

Veterans Justice Outreach Specialists

• Providence: see http://www.va.gov/HOMELESS/VJO_Contacts.asp

SOUTH CAROLINA

South Carolina

VA Medical Centers

- Charleston: Ralph H. Johnson VA Medical Center 843-577-5011
- Columbia: Wm. Jennings Bryan Dorn VA Medical Center 803-776-4000

Community Based Outpatient Clinics

- Aiken: Aiken Community Based Outpatient Clinic 803-643-9016
- Anderson: Anderson County Clinic 864-224-5450
- Beaufort: Beaufort Clinic 843-770-0444
- Florence: Florence CBOC 843-292-8383
- Goose Creek: Goose Creek CBOC 843-577-5011
- Greenville: Greenville Clinic 864-299-1600
- Myrtle Beach: Myrtle Beach CBOC 843-477-0177
- Orangeburg: Orangeburg County Clinic 803-533-1335
- Rock Hill: Rock Hill Clinic 803-366-4848
- Spartanburg: Spartanburg CBOC 864-582-7025
- Sumter: Sumter County Clinic 803-938-9901

Vet Center

- Columbia: Columbia Mobile Vet Center 803-765-9944
- Columbia: Columbia Vet Center 803-765-9944
- Greenville: Greenville, SC 864-271-2711

- Charleston: Meredith Miller 843-789-6657
- Columbia: see http://www.va.gov/HOMELESS/VJO Contacts.asp

SOUTH DAKOTA

VA Health Care Facilities

VA Health Care System

• Sioux Falls: Sioux Falls VA Health Care System 605-336-3230

VA Medical Center

- Fort Meade: VA Black Hills Health Care System-Fort Meade Campus 605-347-2511 Or 605-347-2511
- Hot Springs: VA Black Hills Health Care System-Hot Springs Campus 605-745-2000 Or 605-745-2000

Community Based Outpatient Clinics

- Aberdeen: Aberdeen VA Clinic 605-229-3500
- Eagle Butte: Eagle Butte VA Clinic 605-964-8000
- Eagle Butte: Faith VA Clinic 605-967-2644
- Eagle Butte: Isabel Community Based Outpatient Clinic 605-466-2120
- McLaughlin: McLaughlin VA Clinic 605-347-2511 x7161
- Mission: Mission CBOC 605-856-2295
- Pierre: Pierre VA Clinic 605-945-1710
- Pine Ridge: Pine Ridge VA Clinic 605-867-2393 x4033
- Rapid City: Rapid City VA Clinic 605-718-1095
- Wagner: Wagner CBOC 605-384-2340
- Watertown: Watertown CBOC 605-884-2420
- Winner: Winner VA Clinic 605-842-2443

Vet Center

- Martin: Pine Ridge Vet Center Outstation 605-685-1300
- Rapid City: Rapid City Mobile Vet Center 605-348-0077
- Rapid City: Rapid City Vet Center 605-348-0077
- Ciary Falls Siary Falls Vet Conter COF 220 4FF2

- Hot Springs: Joe Casarez 605-718-1095 ext. 3061
- Sioux Falls: Rebecca Hess 605-336-3230 ext. 7762

TEXAS

Texas

VA Health Care System

- Amarillo: Amarillo VA Health Care System 806-355-9703 Or 806-355-9703
- Big Spring: West Texas VA Health Care System 432-263-7361
- Dallas: VA North Texas Health Care System: Dallas VA Medical Center 214-742-8387 Or 800-849-3597
- El Paso: El Paso VA Health Care System 915-564-6100
- Harlingen: VA Texas Valley Coastal Bend Health Care System 956-430-9325 Or 877-752-0650
- San Antonio: South Texas Veterans Health Care System 210-617-5300 Or 877-469-5300
- Temple: Central Texas Veterans Health Care System 254-778-4811 Or 800-423-2111

VA Medical Center

- Bonham: VA North Texas Health Care System: Sam Rayburn Memorial Veterans Center 903-583-2111 Or 800-924-8387
- Houston: Michael E. DeBakey VA Medical Center 713-791-1414 Or 800-553-2278
- Kerrville: Kerrville VA Medical Center 830-896-2020 Or 866-487-1653
- Temple: Central Texas Veterans Health Care System-Olin E. Teague Veterans' Center 254-778-4811 Or 800-423-2111
- Waco: Central Texas Veterans Health Care System-Waco VA Medical Center 254-752-6581 Or 800-423-2111

Outpatient Clinic

- Austin: Central Texas Veterans Health Care System-Austin Outpatient Clinic 512-389-1010
- Corpus Christi: Corpus Christi OPC 361-806-5600
- Fort Worth: VA North Texas Health Care System: Fort Worth Outpatient Clinic 800-443-9672
 Or 817-335-2202
- Harlingen: Harlingen VA Outpatient Clinic 956-366-4500
- Laredo: Laredo Outpatient Clinic 956-523-7850
- Lubbock: Lubbock Clinic 806-472-3400
- McAllen: McAllen Outpatient Clinic 956-618-7100
- San Antonio: Frank M. Tejeda VA Outpatient Clinic 210-699-2100
- San Antonio: North Central Federal OPC 210-483-2900
- San Antonio: San Antonio Dental Clinic 210-949-8900
- Victoria: Victoria OPC 361-582-7700

Community Based Outpatient Clinic

- Abilene: Abilene CBOC 325-695-3252
- Beaumont: Beaumont VA Outpatient Clinic 409-981-8550 Or 409-981-8550
- Beeville: Beeville CBOC 361-358-9912
- Bridgeport: Bridgeport Family Clinic 940-683-2538
- Brownwood: Brownwood CBOC 325-641-0568 Or 800-423-2111
- Cedar Park: Cedar Park CBOC 512-260-1368 Or 800-423-2111
- College Station: Bryan/College Station CBOC 979-680-0361 Or 800-423-2111
- Conroe: Conroe VA Outpatient Clinic 936-522-4000 Or 800-553-2278 x1949
- Del Rio: Del Rio CBOC 830-774-4094
- Denton: Denton CBOC 940-891-6350
- El Paso: Eastside El Paso CBOC

- Fort Stockton: Fort Stockton Clinic 432-336-0700
- Galveston: Galveston VA Outpatient Clinic 409-761-3200 Or 800-553-2278 x12600
- Granbury: Lake Granbury Primary Care 817-326-3902
- Greenville: Sandknop Family Practice 903-450-4788
- Kingsville: Kingsville CBOC 361-592-3237
- LaGrange: LaGrange OutReach Clinic 979-968-5878
- Longview: Longview CBOC 903-247-8262 Or 903-247-8262
- Lufkin: Charles Wilson VA Outpatient Clinic 936-671-4300 Or 936-671-4300
- New Braunfels: New Braunfels CBOC
- Odessa: Odessa Clinic 432-550-0149
- Palestine: Palestine CBOC 903-723-9006 Or 800-423-2111
- San Angelo: San Angelo Clinic 325-658-6138
- Paris: Northeast Texas Primary Care 903-785-9900
- Richmond: Richmond VA Outpatient Clinic 832-595-7700 Or 800-553-2278 x12800
- San Antonio: General McMullen/San Antonio Clinic 210-431-4742
- San Antonio: Northeast 410/San Antonio Clinic 210-590-0247
- San Antonio: Northwest 410/San Antonio Clinic 210-736-4051
- San Antonio: Pecan Valley
- San Antonio: South Bexer/San Antonio Clinic 210-648-1491
- Seguin: Seguin CBOC 830-629-3614
- Sherman: Sherman Clinic 903-487-0477
- Stamford: Stamford Clinic 325-695-3252
- Texas City: Texas City VA Outpatient Clinic 409-986-2900 Or 800-553-2278 x12900
- Uvalde: Uvalde CBOC 830-278-1166
- Wichita Falls: Wichita Falls CBOC 940-723-2373

Vet Center

- Abilene: Taylor County Mobile Vet Center 325-674-1328
- Abilene: Taylor County Vet Center 325-674-1328
- Amarillo: Amarillo Mobile Vet Center 806-354-9779
- Amarillo: Amarillo Vet Center 806-354-9779
- Austin: Austin Vet Center 512-416-1314
- Corpus Christi: Corpus Christi Vet Center 361-806-5600
- Dallas: 3B RCS South Central Regional Office 214-857-1254
- Dallas: Dallas Vet Center 214-361-5896
- El Paso: El Paso Vet Center 915-772-0013
- Ft. Worth: Fort Worth Vet Center 817-921-9095
- Harker Heights: Killeen Heights Vet Center 254-953-7100
- Houston: Harris County Vet Center 713-578-4002
- Houston: Houston Vet Center 713-523-0884
- Houston: Houston West Vet Center 713-682-2288
- Laredo: Laredo Vet Center 956-723-4680
- Lubbock: Lubbock Vet Center 806-792-9782
- McAllen: McAllen Vet Center 956-631-2147
- Mesquite: Dallas County Vet Center 972-288-8030
- Midland: Midland Vet Center 806-792-9782
- Pantego: Tarrant County Vet Center 817-274-0981
- San Antonio: San Antonio NE Mobile Vet Center 210-472-4025

TEXAS continued

Veterans Justice Outreach Specialists

- Amarillo: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Austin: Karen Janda 512-433-2017
- Big Spring: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Bonham/Dallas: Kathy Finch 214-857-0805
- El Paso: Joel Arrigucci
- Harlingen: Chad Henderson 361-806-5600 ext. 62295
- Houston: Loretta Coonan 713-791-1414 ext. 6475
- San Antonio: Treva Neiss 210-616-9915; Desi Vasquez 210-616-9915
- Temple/Waco: Rekita Justice Logan 254-743-0711

UTAH

VA Health Care Facilities

VA Health Care System

• Salt Lake City: VA Salt Lake City Health Care System 801-582-1565

Outpatient Clinics

• Fountain Green: Fountain Green Clinic 435-445-3301

Community Based Outpatient Clinics

- Nephi: Nephi CBOC 435-623-3129
- Orem: Orem CBOC 801-235-0953
- Roosevelt: Roosevelt CBOC 435-725-1050
- South Ogden: Ogden CBOC 801-479-4105
- St. George: St. George CBOC 435-634-7608 x6000
- West Valley City: Western Salt Lake CBOC 801-417-5734

Vet Center

- Provo: Provo Vet Center 801-377-1117
- Salt Lake: Salt Lake Mobile Vet Center 801-584-1294
- Calt Laker Calt Lake Vet Center 201_521_1201

Veterans Justice Outreach Specialists

• Salt Lake City: Amy Earle 801-746-5561 ext. 6327

WASHINGTON

VA Health Care Facilities

VA Health Care System

- Lakewood: VA Puget Sound Health Care System-American Lake Division 253-582-8440 Or 800-329-8387
- Seattle: VA Puget Sound Health Care System-Seattle Division 206-762-1010 Or 800-329-8387

VA Medical Center

- Spokane: Spokane VA Medical Center 509-434-7000
- Vancouver: Portland VA Medical Center-Vancouver Campus 360-696-4061 Or 360-696-4061
- Walla Walla: Jonathan M. Wainwright VA Medical Center 509-525-5200 Or 360-696-4061

Integrated Clinical Facility

Yakima: Yakima Valley Vet Center 509-457-2736

Community Based Outpatient Clinic

- Bellevue: Valor CBOC Bellevue 425-214-1055 Or 800-329-8387
- Bremerton: Bremerton CBOC 360-782-0129
- Chehalis: South Sound CBOC 360-748-3049
- Federal Way: Valor CBOC Federal Way 253-336-4142
- Mount Vernon: Mount Vernon CBOC 360-848-8500
- Port Angeles: Port Angeles 360-565-9330
- Richland: Richland Community Based Outpatient Clinic 509-946-1020
- Seattle: Valor CBOC North Seattle 206-384-4382
- Wenatchee: Wenatchee CBOC 509-663-7615 Or 800-325-7940
- Yakima: Yakima Community Based Outpatient Clinic (CBOC) 509-966-0199

Vet Center

- Bellingham: Bellingham Vet Center 360-733-9226
- Everett: Everett Vet Center 425-252-9701
- Federal Way: Federal Way Vet Center 253-838-3090
- Seattle: Seattle Vet Center 206-553-2706
- Spokane: Spokane Mobile Vet Center 509-444-8387
- Spokane: Spokane Vet Center 509-444-8387
- Tacoma: Tacoma Mobile Vet Center 253-565-7038
- Tacoma: Tacoma Vet Center 509-457-2736
- Yakima: Yakima Valley Vet Center 509-4572736

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- Seattle: Kevin Devine 206-277-4369
- Spokane: Paul Nicolai
- Walla Walla: Rhonda Strother 509-525-5200 ext. 26450

WISCONSIN

VA Health Care Facilities

VA Medical Centers

- Madison: William S. Middleton Memorial Veterans Hospital 608-256-1701 Or 888-478-8321
- Milwaukee: Clement J. Zablocki Veterans Affairs Medical Center 414-384-2000 Or 414-384-2000
- Tomah: Tomah VA Medical Center 608-372-3971

Outpatient Clinics

- Appleton: Appleton Clinic (John H. Bradley) 920-831-0070
- Baraboo: Baraboo Clinic 608-356-9318
- Beaver Dam: Beaver Dam Clinic 920-356-9415
- Cleveland: Cleveland Clinic 920-693-5600
- Green Bay: Green Bay Clinic (Milo C. Huempfner) 920-497-3156
- Janesville: Janesville Clinic 608-758-9300
- Kenosha: Kenosha Clinic 262-653-9286
- La Crosse: River Valley Clinic 608-784-3886
- Loyal: Loyal Clinic 715-255-9799
- Rhinelander: Rhinelander Clinic 715-362-4080
- Union Grove: Union Grove Clinic 262-878-7000
- Wausau: Wausau Clinic 715-842-2834
- Wisconsin Rapids: Wisconsin Rapids Clinic 715-424-4682

Community Based Outpatient Clinics

- Chippewa Falls: Chippewa Valley VA Clinic 715-720-3780
- Hayward: Hayward VA Clinic 715-934-5454
- La Crosse: VA River Valley Integrated Health Center 608-787-6411
- Rice Lake: Rice Lake VA Clinic 715-236-3355
- Superior: Twin Ports VA Clinic 715-392-9711

Vet Center

- Green Bay: Green Bay Vet Center 920-435-5650
- La Crosse: La Crosse Vet Center 608-782-4403
- Madison: Madison Vet Center 608-264-5342
- Milwaukee: Milwaukee Vet Center 414-536-1301

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- Madison: Ed Zapala 608-320-2095
- Milwaukee: Abigail Crevier 414-882-3375
- Tomah: Gary Hebel 608-372-7706

WYOMING

VA Health Care Facilities

VA Medical Centers

- Cheyenne: Cheyenne VA Medical 307-778-755 Or 888-483-9127
- Sheridan: Sheridan VA Medical Center 307-672-3473 Or 866-822-6714

Outpatient Clinics

- Afton: Afton Outreach Clinic 307-886-5266
- Evanston: Evanston Primary Care Telehealth Outreach Clinic 877-733-6128
- Laramie: Laramie Mobile Telehealth Clinic 888-483-9127 x3816
- Rawlins: Rawlins PCTOC 307-324-5578
- Torrington: Torrington Mobile Telehealth Clinic 888-483-9127 x3816
- Wheatland: Wheatland Mobile Telehealth Clinic 888-483-9127 x3816
- Worland: Worland Primary Care Telehealth Outreach Clinic 877-483-0370

Community Based Outpatient Clinics

- Capser: Casper Outpatient Clinic 307-235-4143
- Gillette: Gillette Outpatient Clinic 307-685-0676
- Newcastle: Newcastle VA Clinic 307-746-3221
- Powell: Powell Outpatient Clinic 307-754-7257
- Riverton: Riverton Outpatient Clinic 307-857-1211
- Rock Springs: Rock Springs Outpatient Clinic 307-362-6641 Or 307-362-6641

Vet Center

- <u>Casper</u>: Casper Mobile Vet Center 307-261-5355
- Casper: Casper Vet Center 307-261-5355
- <u>Cheyenne</u>: Cheyenne Vet Center 307-778-7370

Veterans Justice Outreach Specialists

- Cheyenne: see http://www.va.gov/HOMELESS/VJO Contacts.asp
- Sheridan: see http://www.va.gov/HOMELESS/VJO Contacts.asp

APPENDIX B: LIST OF LAW SCHOOLS WITH LEGAL CLINICS

The following list includes law schools in Indian Country with clinical programs that focus on American Indian law or Veterans and Military law. If you want to incorporate a law school into your VTC program and there is no law school listed in your area, please contact the Office of Tribal Government Relations or visit http://stu.findlaw.com/schools/usaschools/california.html to see a comprehensive list of law schools in your state.

CALIFRONIA

Chapman University School of Law

Veterans Clinic

Contact: Professor Kyndra Rotunda 714-628-2692

Loyola Marymount University School of Law Los Angeles

Veterans Clinic

Contact: Professor Barbara Blanco 213-736-1104

CONNECTICUT

Yale University Law School

Veterans Clinic

Contact: Professor Mike Wishnie michael.wishnie@yale.edu

KANSAS

University of Kansas Law School
Tribal Law and Government Center

Contact: 785-864-3925

MICHIGAN

University of Detroit Mercy School of Law

Veterans Clinic: Project SALUTE

Contact: Professor Tammy M. Kudalis 313-596-9409

MINNESOTA

William Mitchell College of Law

Center for Indian Law

Contact: Professor Sarah Deer 651-290-6309; Professor Colette Routel 651-290-6327

CONTINUED:

MONTANA

University of Montana School of Law

Indian Law Clinic

Contact: Professor Maylinn Smith 406-243-2544

NEW MEXICO

University of New Mexico School of Law

Southwest Indian Law Clinic

Contact: Professor Christine Zuni Cruz or Professor Barbara Creel 505-277-5265

NORTH DAKOTA

University of North Dakota School of Law

Indian Legal Clinic

Contact: Professor B.J. Jones bj.jones@law.und.edu

OREGON

Lewis & Clark College Northwestern School of Law

Indian Law Program

Contact: Professor Robert Miller 503-768-6821

TEXAS

Texas Tech University School of Law

Center for Military Law and Policy

Contact: Professor Richard Rosen 806-742-3990 ext. 303

WASHINGTON

Seattle University School of Law

Center for Indian Law and Policy

Contact: Professor Doug Nash 206-298-4284

VIRGINIA

William and Mary Law School

Veterans Benefits Clinic

Contact: Professor Stacy Rae Simcox srsimc@wm.edu

APPENDIX C: VISITING INDIAN COUNTRY

Navajo, Hopi, and Laguna Reservations

The Office of Tribal Government Relations (OTGR) builds relationships with tribal governments in many ways, like visiting their communities and talking to tribal members, similar to informal tribal consultation or listening sessions. One OTGR staff member recently visited Navajo, Hopi and Laguna reservations to meet with the tribal justice systems, Veterans services, and medical facilities. She was greeted with enthusiasm, support and sincere encouragement both for the work that will be done through OTGR and the prospect of a VTC in a tribal justice system.

First, OTGR staff member met with the Chief Justice and Attorney General from the Navajo Department of Justice, the Department of Navajo Veterans Affairs Director, the CEO of the IHS Hospital on the Reservation, and VA staff at a local on-Reservation Vet Center. She next visited the Hopi Indian reservation to meet with VA and Hopi Veterans Services staff, CEO of the IHS hospital on Hopi, and their court administration staff. Finally, our OTGR staff member visited with the Laguna tribe's Governor and several Veterans living on the reservation seeking VA health and benefits services. In addition to warm responses and hospitality, our staff member got a firsthand look at the unique issues facing American Indian Veteranss living in tribal communities.

The primary issues affecting the degree of VA services available to American Indian Veterans are distance and *extreme* remoteness. Challenges that are common to the rural Veterans are amplified for Veterans living on Indian reservations. For Navajo and Hopi Veterans, there are vast distances between their homes and VA hospitals or regional offices. The Navajo reservation spans sixteen million acres, while Hopi covers

over two million. Many homes exist without running water, electricity, internet, or phone access, making communication between Veterans and providers its own challenge. Combining these factors with the high rates of poverty and unemployment creates a region where Veterans are isolated from the VA services they are entitled to receive: Veterans cannot travel the distance to VA hospitals and clinics located hundreds of miles from their homes.

These issues can be partially addressed by implementation of the IHS-VA MOU at IHS hospitals in Indian Country providing integrated services. For example, there are two pilot sites that are in the process of securing a contract between VA and IHS to put a VA clinic in an IHS facility. The first pilot program is the IHS hospital in Chinle on the Navajo reservation, which is launching a clinic located inside the hospital. The VA clinic will be staffed by VA healthcare providers who will provide medical treatment for Veterans. If a Veteran needs an ancillary medical service, like PTSD counseling or diabetes treatment, he can receive that care at the IHS hospital too. The second program is at the IHS hospital on the Hopi reservation, where IHS and VA will provide integrated services through a tele-med VA clinic inside the IHS facility. The clinic will connect Veterans with VA physicians at a VA hospital in Prescott, Arizona.

At every point of the recent visit to Navajo, Hopi and Laguna reservations, OTGR received overwhelming support and enthusiasm for the prospect of the VTC project.

The Office looks forward to its implementation and any steps we can take to help further the goal of bringing VA to Indian Country.

APPENDIX D: OFFICE OF TRIBAL GOVERNMENT RELATIONS

The Mission of OTGR

The VA consults with American Indian and Alaska Native tribal governments to develop partnerships that enhance access to services and benefits by Veterans and their families.

We fulfill this mission by:

- Enhancing government-to-government relationships with American Indian and Alaska Native tribal governments
- Engaging in communication, collaboration and outreach with all of our stakeholders
- Serving as a clearinghouse for information regarding Veterans
- Educating our internal and external stakeholders, and
- Advising on, assisting with the development of, and advocating for policy and legislative issues affecting American Indian and Alaska Native tribal governments

The Vision of OTGR

The VA has positive relationships with American Indian and Alaska Native tribal governments and is part of the landscape of Indian Country. Every Veteran receives excellent services that are holistic in nature and that lead to optimal health. American Indian and Alaska Native tribal governments view the VA as an organization of integrity that advocates for their needs. The VA demonstrates its commitment to Veterans by being culturally competent, respecting the unique sovereign status of Tribes, and reaching Veterans in Indian Country. Veterans know how to access all VA services and benefits and are woven into the fabric of the VA.

The Goals of OTGR

- Increase the percentage of American Indian and Alaska Native Veterans enrolled in VA services
- Increase the number of American Indian and Alaska Native tribal governments with which the VA has frequent contact
- Increase the number of consultations that the VA conducts with American Indian and Alaska Native tribal governments (0-5)
- Increase the number of government-to-government partnerships (MOU, MOA, sharing agreements, etc.) between the VA and American Indian and Alaska Native tribal governments

- Increase the number of partnerships (MOU, MOA, sharing agreements, etc.)
 between the VA and other stakeholders
- Increase the number of VA employees trained in working with American Indian and Alaska Native tribal governments
- Raise the profile of American Indian and Alaska Native issues within the VA through collaboration with Public and Intergovernmental Affairs
- Improve the availability and accessibility of data regarding American Indian and Alaska Native Veterans
- Increase collaboration with other Federal, state, tribal, non-profit and service organizations that work with American Indian and Alaska Native tribal governments
- Reduce poverty among American Indian and Alaska Native Veterans living in Indian Country

GLOSSARY

Felony: Considered a "serious" crime punishable by one year or more in prison.

Misdemeanor: Considered "lesser" crimes punishable by one year or less in jail. Every state is different, the higher the letter the greater the punishment. For example, a Class B Misdemeanor is more severely punished than a Class C Misdemeanor.

Violent Crime: A crime committed in which the offender uses or threatens to use force upon his victim; including the use of weapons. Most commonly refers to crimes like murder, rape, or assault.

Non-violent Crime: A crime committed in which the offender does not use force to commit the crime. Most commonly refers to crimes like drug or weapons possession.

Federal District Court: Refers to the lower court of the United States federal court system. Offenses committed on federal property, like VA hospitals or clinics, are federal jurisdiction.

County Circuit Court: Refers to the lower court of a state court system.

Law School Legal Clinic: Legal Clinics established by law schools to fill a specific legal role and staffed by law students. The Resource Guide often refers to legal clinics in terms of Veterans Legal Clinics throughout the United States that deal with VA benefits issues, criminal, or civil issues.

Veterans Treatment Court: A diversion program intended to serve Veterans in the criminal justice system and provide treatment in lieu of incarceration for Veterans who qualify.

Petty Offense Initiative: A program modeled after the Veterans Treatment Court program that endeavors to treat Veterans at Petty Offense Day in federal district courts. Petty Offense Day is a docket in federal district courts that hears tickets issued on federal property.

Honorable Discharge: A service member discharged with a rating from good to excellent will likely receive an honorable discharge.

Medical Discharge: A service member discharged because he or she is no longer medically able to perform his or her duties in the military; considered an honorable discharge.

General Discharge: A service member discharged with performance marked by a considerable departure in duty and conduct expected of military members will likely receive a general discharge.

Probational Offense: An offense that qualifies for probation under the laws of the specific justice system.

¹ DEPARTMENT OF HEALTH AND HUMAN SERVICES, A GUIDE TO BUILD CULTURAL AWARENESS (2009).

² Williams v. Lee, 358 U.S. 217 (1959); See http://uanews.org/node/30111 (identifying *Williams* as the landmark case that declared tribal courts have authority over reservation-based claims, promoting self-governance).

³ Johnson v. McIntosh, 21 U.S. 543, 571 (1823).

⁴ *Id.* at 574.

⁵ *Id.* at 587.

⁶ U.S. CONST. art. III, § 2; Cherokee Nation v. Georgia, 30 U.S. 1, 10 (1831).

⁷ *Id.*

⁸ United States v. Kagama, 118 U.S. 375 (1886) (Major Crimes Act was constitutional); Lone Wolf v. Hitchcock, 187 U.S. 553 (1903) (plenary power held by the United States Congress gave it authority to unilaterally abrogate treaty obligations).

⁹ Kagama at 379-80 (1886).

¹⁰ Worcester v. State of Ga., 31 U.S. 515 (1832).

¹¹ *Id*.

¹² *Id.* at 557.

¹³ Id. at 562-63.

¹⁴Indian Removal Act of 1830, 25 U.S.C. § 174 (1830). The Act resulted in the historic "Trail of Tears' and forcible removal of tribal groups. Ethan Davis, <u>AN ADMINISTRATIVE TRAIL OF TEARS: INDIAN REMOVAL</u>, 50 Am. J. Legal Hist. 49, 52 (2010).

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out U.S. citizenship, which was remedied by later special legislation. Thus, the impetus for U.S. citizenship of all natives was through the sacrifices of native Veterans.

¹⁵ Codified at 25 U.S.C. §71.

¹⁶ Court of Indian Offenses Rules 25 C.F.R. § 11.

¹⁷ Ex parte Crow Dog, 109 U.S. 556 (1883)

¹⁸ *Id*.

¹⁹ 18 U.S.C. 1153

²¹ Dawes Act of 1887, 25 U.S.C. § 348 (1887).

²³ Indian Reorganization Act, 25 U.S.C. § 461 (1934).

²⁴ *Id*.

²⁵ *Id.*

²⁶ *Id.*

²⁷ ERIC D. LEMONT, AMERICAN INDIAN CONSTITUTIONAL REFORM AND THE REBUILDING OF NATIVE NATIONS (2006).

²⁸ *Gardner v. Littlejohn*, Ho-Chunk Nation Trial Court, CV 10-47 (2011) (veteran defendants were protected from defamation suit by a "Veteran privilege" to voice the concerns of the people).

²⁹ Codified at 28 U.S.C.A. § 1360; 18 U.S.C.A. § 1162.

³⁰ President Nixon, Special Message on Indian Affairs, July 8, 1970.

note 28.

³²Tribal Law and Order Act of 2010, (Public Law 111-211).. Turtle Talk: Tribal Law and Order Act Details, http://turtletalk.wordpress.com/2010/07/19/tribal-law-and-order-act-details/ (last visited April 16, 2011).

³³The Tribal Law and Order Act states, "A tribal court may subject a defendant to a term of imprisonment greater than 1 year but not to exceed 3 years for any 1 offense, or a fine greater than \$5,000 but not to exceed \$15,000, or both, if the defendant is a person accused of a criminal offense" 25 U.S.C. 1302(7).

³⁴ Oliphant v. Suquamish Indian Tribe, 435 U.S. 191 (1978).

³⁷ Tribal Healing to Wellness Courts: The Key Components, http://www.ncjrs.gov/pdffiles1/bja/188154.pdf (last visited April 17, 2011). *See id.* at vii (introducing the Tribal Healing to Wellness Courts structure).

³⁸ *Id.*

³⁹ National Association of Drug Court Professionals: What are Drug Courts?, http://www.nadcp.org/learn/what-are-drug-courts (last visited April 17, 2011).

⁴⁰ Tribal Healing to Wellness Courts: The Key Components at 1.

⁴¹ *Id.* at 3.

⁴² *Id.* at 7.

⁴³ *Id.* at 9.

⁴⁴ *Id.* at 11.

⁴⁵ *Id.* at 13.

⁴⁶ *Id.* at 15.

⁴⁷ *Id.* at 17.

⁴⁸ *Id.* at 21.

⁴⁹ *Id.* at 23.

⁵⁰ The use of "Tribal Veterans Representatives" (TVR) or "Tribal Veterans Service Officers" (TVSO) differs regionally. However, regardless of what term is used, the mission remains the same: Provide assistance to native Veterans filing claims for VA benefits.

Clearinghouse for Veterans Treatment Courts, http://www.nadcp.org/learn/veterans-treatment-court-clearinghouse (last visited April 17, 2011). There are ten key components for a Veterans Treatment Court: 1) Veterans Treatment Court integrate alcohol, drug treatment, and mental health services with justice system case processing; 2) Using a nonadversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights; 3) Eligible participants are identified early and promptly placed in the Veterans Treatment Court program; 4) Veterans Treatment Court provide access to a continuum of alcohol, drug, mental health and other related treatment and rehabilitation services; 5) Abstinence is monitored by frequent alcohol and other drug testing; 6) A coordinated strategy governs Veterans Treatment Court responses to participants' compliance; 7) Ongoing judicial

interaction with each Veteran is essential; 8) Monitoring and evaluation measure the achievement of program goals and gauge effectiveness; 9) Continuing interdisciplinary education promotes effective Veterans Treatment Court planning, implementation, and operations; and 10) Forging partnerships among Veterans Treatment Court, Veterans Administration, public agencies, and community-based organizations generates local support and enhances Veteran Treatment Court effectiveness. Buffalo Veteran's Court: Mentoring and Veteran's Hospital Program Policy and Procedure Manual, http://www.nadcp.org/sites/default/files/nadcp/Buffalo%20policy%20and%20procedure %20manual.pdf, 3-5 (last visited April 17, 2011).

- ⁵² *Id*.
- ⁵³ *Id.*
- ⁵⁴ STATE OF ILLINOIS CIRCUIT COURT OF COOK COUNTY, COOK COUNTY VETERAN'S COURT PUBLICATION 6 (2011).
 - ⁵⁵ *Id.* at 2.
 - ⁵⁶ *Id.* at 2.
 - ⁵⁷ *Id.* at 7.
 - ⁵⁸ *Id.* at 8.
- ⁵⁹ DEPARTMENT OF VETERANS AFFAIRS AND INDIAN HEALTH SERVICES,

 MEMORANDUM OF UNDERSTANDING BETWEEN THE DEPARTMENT OF VETERANS AFFAIRS

 AND INDIAN HEALTH SERVICES 3 (2010).

⁶⁰ *Id*.

⁶¹ Buffalo Veteran's Court and Veteran's Mentor Handbook,

http://www.nadcp.org/sites/default/files/nadcp/Buffalo%20Mentor%20Handbook_0.pdf (last visited October 27, 2011).

- 62 *Id*.
- ⁶³ *Id*.
- ⁶⁴ *Id.* at 4.

Veteran's Mentoring Program is to make certain to the best of our abilities that no one is left behind. We will find them, offer them assistance, assess their needs, and help them solve their problems. We will support the Veteran through their readjustment to civilian life, assist the Veteran navigate through the court, treatment, and VA systems, and act as a mentor, advocate and ally." *Id.* at 8.

- ⁶⁶ *Id.* at 9.
- ⁶⁷ *Id*.

⁶⁸The Department of VA Veterans Health Administration,

http://www2.va.gov/directory/guide/division_flsh.asp?dnum=1 (last visited June 8, 2011).

- ⁶⁹Supra note 61 at 2.
- ⁷⁰ *Id.*
- ⁷¹ Supra note 54.
- ⁷² Supra note 40.
- ⁷³ Supra note 25.