THE NATIONAL CENTER FOR MEDICAL-LEGAL PARTNERSHIP

The mission of the National Center for Medical-Legal Partnership (NCMLP) is to improve the health and well-being of people and communities by leading health, public health, and legal sectors in an integrated, upstream approach to combating health-harming social conditions. Over the past several years, NCMLP has helped increase the number of medical-legal partnerships in the U.S. from 20 to 292. These partnerships serve children, chronically ill adults, the elderly, Native Americans, and veterans. NCMLP spearheads this work in four areas: (1) transforming policy and practice across sectors; (2) convening the field; (3) building the evidence base; and (4) catalyzing investment.

ACKNOWLEDGEMENTS

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Service members’ military experiences, both positive and negative, impact who they become after leaving the service. After bravely serving our country in the United States and abroad, service members who were in combat or experienced traumatic situations may have an array of mental and physical health concerns. Upon returning to civilian life, it is our turn to serve them.

Within the veteran population, at the intersection of mental health and poverty, we find thousands of individuals with complex needs. While these needs may manifest in different ways, many of them require help from a lawyer. Civil legal problems — from threatened evictions to other-than-honorable discharges from the military — are often the greatest obstacles to a veteran’s health, housing, stability, and productivity. Yet while civil legal needs among veterans are prevalent, they often remain invisible.

Medical-legal partnerships (MLPs) are poised to help address the unmet legal needs of veterans by integrating civil legal aid services into existing health care services for veterans. MLPs break down the silos between legal stakeholders and the health care team to address veteran access to: healthy housing, VA benefits, an honorable military discharge status, and employment. While many veterans still face invisible battlefields in their civilian lives and lack support for their complex legal needs, MLPs for veterans are growing in number and expertise — showing great promise for both confronting and preventing veterans’ legal barriers to health and well-being.
Due to the nature of military service, certain mental health conditions — like depression and post-traumatic stress disorder (PTSD) — affect veterans at a particularly high rate. Mental health issues are also closely linked to poverty, which exposes a veteran to extreme stressors, including housing and energy insecurity, unemployment, family instability, financial struggles, and unsafe communities. And veterans who live at this intersection of mental health needs and poverty often fall into the hazardous cycle of chronic homelessness, which is defined as individuals who are homeless for one or more consecutive years, or who experience four separate episodes of homelessness in a single three-year period.

To combat homelessness and promote health and well-being for veterans, some of the underlying social factors that are created and exacerbated by poverty must be addressed alongside quality mental health services.
Some of the more complex social factors that affect veterans’ housing, health, and well-being cannot be properly remedied without the assistance of an attorney to navigate the laws and overcome the complex systems that administer veteran benefits and programs. Some civil legal problems — like wrongfully denied VA benefits or workplace discrimination — directly affect income. Other civil legal problems — like threatened evictions and denial of housing subsidies — take direct aim at stable housing. And some civil legal problems — like a less-than-dishonorable discharge status from the military — prevent veterans from being able to access many of the critical benefits and services they need to address their physical and mental health.

Each year, the VA’s Project CHALENG (Community Homelessness Assessment, Local Education and Networking Groups) asks homeless veterans, VA staff, and community-based partners to rate veterans’ needs within local communities. The past 10 years of CHALENG data indicate that the VA provides many services that meet the complex mental and physical health care needs of veterans who are homeless. However, there are significant unmet needs that require innovations within the VA and partnerships outside of the VA. The results of the most recent survey show that five of the top ten unmet needs for male homeless veterans require civil legal assistance; similarly four of the top ten unmet needs for female homeless veterans require civil legal assistance.7

When these legal needs persist, it can prevent veterans from becoming housed and otherwise negatively affect their well-being. The table on page seven details the five most common legal needs reported by homeless veterans in the CHALENG survey, and how addressing them tangibly improves a veteran’s life.

Gaps in Current Efforts to Address Homelessness and Well-being

In 2010, the White House and the U.S. Department of Veterans Affairs resolved to end chronic homelessness among veterans in the United States by 2015.8 Since 2010, the U.S. has made progress toward that goal, and states like Virginia and Connecticut have ended chronic homelessness9, but there is still a long way to go before fully eradicating homelessness, and one of the biggest service gaps is around addressing civil legal problems.
The VA currently provides health services, mental health programs, housing assistance, and job training to at-risk and homeless veterans. The VA has also taken steps to address some of the most pervasive criminal legal challenges facing homeless veterans through establishment of the Veterans Justice Outreach (VJO) initiative. The aim of the VJO program is to avoid unnecessary criminalization of mental illness and incarceration among veterans by ensuring that eligible veterans who are involved in the criminal court system have timely access to Veterans Health Administration services, as clinically indicated. VJO specialists provide direct outreach, assessment, and case management for these veterans in local courts and jails, and liaison with local justice system partners.

Unfortunately, access to civil legal aid resources to address legal needs around benefits, housing, employment, discharge status, and personal safety, are often absent, insufficient, or poorly integrated, despite the pervasiveness of demand. The VA has sought to rectify discreet facets of this gap, most notably through the Supportive Services for Veterans Families program, which provides funds to community agencies to provide supportive services—including civil legal aid services—to veterans and their families who are homeless or at risk of homelessness. And over the past four years, the VA Office of General Counsel and the American Bar Association have done thoughtful policy work leading to nearly 80 informal projects between legal and health organizations serving veterans. But the magnitude of the need, coupled with the direct linkage between civil legal problems and veteran health and well-being, requires a more structured alignment with existing VA health resources, alongside a vision for how to shape veteran access to health and other services in the future.
<table>
<thead>
<tr>
<th>TOP NEED REPORTED BY HOMELESS VETERANS</th>
<th>CIVIL LEGAL AID INTERVENTIONS THAT HELP</th>
<th>IMPACT ON A VETERAN’S LIFE</th>
</tr>
</thead>
</table>
| LEGAL ASSISTANCE FOR CHILD SUPPORT ISSUES | Help modify child support agreements to be consistent with income and resources | • Stabilizes income  
    • Prevents arrests from unpaid child support, which reduces criminal convictions, incarceration, and criminal records |
| LEGAL ASSISTANCE FOR PREVENTION OF EVICTION AND FORECLOSURE | Secure housing subsidies to help pay rent; Negotiate with landlords and enforce legal protections to prevent unlawful evictions; Modify preforeclosure mortgage agreements | • Reduces homelessness  
    • Increases income and financial stability |
| LEGAL ASSISTANCE TO HELP RESTORE A DRIVER’S LICENSE | Secure proper identification; Clear driving record problems | • Simplifies transportation to work  
    • Promotes access to health care and other essential services  
    • Helps maintain familial relationships |
| LEGAL ASSISTANCE FOR OUTSTANDING WARRANTS AND FINES | Clear criminal/credit histories | • Improves employability by reducing criminal convictions, incarceration, and criminal records  
    • Increases income by reducing how much people have to pay toward legal fines |
| DISCHARGE UPGRADE | Appeal discharge status and help secure upgrade | • Provides access to veteran benefits including the GI bill, VA health care, disability compensation, and military medical retirement  
    • Improves employability |
WHAT IS A MILITARY DISCHARGE STATUS?
According to a 2015 report by the Congressional Research Service on the impact of discharges on veteran benefits, when a service member is released from their obligation to the military, their discharge generally falls into one of five categories:

→ **HONORABLE**
  When the quality of the service member’s service generally has met the standards of acceptable conduct and performance of duty for military personnel;

→ **GENERAL (UNDER HONORABLE CONDITIONS)**
  When the negative aspects of the service member’s conduct or performance of duty outweigh positive aspects of the service member’s conduct or performance of duty as documented in his or her service record;

→ **OTHER-THAN-HONORABLE (OTH)**
  When a service member has a pattern of behavior that constitutes a significant departure from the conduct expected;

→ **BAD CONDUCT**
  Indicating punishment for bad-conduct rather than a punishment for serious offenses of either a civilian or military nature; or

→ **DISHONORABLE**
  Reserved for those having been convicted of offenses usually recognized in civil jurisdictions as felonies, or of offenses of a military nature requiring severe punishment.

HOW A VETERAN’S MILITARY DISCHARGE STATUS AFFECTS HER LIFE
A discharge of other-than-honorable, bad conduct, or dishonorable prevents an individual from receiving VA benefits, disability compensation, and the GI Bill. A poor discharge status also negatively impacts the veteran’s ability to obtain employment in civilian life, and prevents a veteran from participating in job assistance programs in the public and private sectors. All of these things affect income, housing, and health.

WHY MILITARY DISCHARGE STATUS IS NOT ALWAYS WHAT IT SEEMS
The experiences of a service member during their duty will follow them, affecting their ability to live productive, healthy civilian lives. The service member’s mental health status and the environment of war often determine the circumstances that led to an other-than-honorable discharge status.

Over the last ten years, more than 100,000 service members received other-than-honorable (OTH) discharges. OTH discharges cover a wide range of offenses, including a pattern of poor behavior, failure to follow military orders, and the misuse or abuse of drugs. Before committing the offense that led to a poor discharge status, many of these service members were deployed to combat, and had earned positive recognition for service. Bad behaviors that lead to an OTH discharge, regardless of past service, can taint a service member’s entire military record and future prospects.
The consequences of a poor discharge status affects veterans of all war periods. Dr. Laurie Harkness, Director of VA Connecticut Healthcare System’s Erre- ra Community Care Center says that a lot of Vietnam veterans received OTH discharges because of substances they were using secondary to PTSD. She notes that providing assistance to upgrade a discharge status is not a “free pass” from past discretions, but rather an acknowledgement that complex situations that lead to a poor discharge may not tell the whole story of the veteran’s service and worthiness of VA supports.

WHY A MILITARY DISCHARGE UPGRADE CAN BE LIFE CHANGING

In some instances, civil legal assistance can help petition the VA to upgrade a veteran to a positive discharge status. An upgraded status allows the veteran to receive a range of benefits from the U.S. Department of Veterans Affairs, all of which can positively contribute to their health and housing. These benefits include:13

- Service-connected disability compensation;
- Health care, including inpatient and outpatient services;
- Education assistance programs, including access to the GI Bill;
- Pension;
- Life insurance;
- Burial benefits;
- Housing loans; and
- Vocational rehabilitation and employment assistance.
**THE MEDICAL-LEGAL PARTNERSHIP APPROACH FOR VETERANS**

The Medical-Legal Partnership (MLP) approach integrates civil legal aid lawyers into interdisciplinary health care teams to screen and treat civil legal problems that affect health. Together, health care, legal, and social work staff address health and civil legal problems as interconnected issues that affect the whole picture of a person’s life, rather than as unrelated problems.

Medical-legal partnerships differ from referral programs in that lawyers are present onsite in health care settings and participate in clinical meetings. They also establish formal frameworks to standardize screening processes of patients’ civil legal needs, share data between health care and legal partners, and communicate about patient-clients. Medical-legal partnerships often move beyond services provided to individuals to detect patterns of systemic need that can be addressed through institutional policy changes or changes in public policy that health care and legal teams are uniquely qualified to address together.

Medical-legal partnerships are active in 292 health care institutions across the United States, including health centers, children’s hospitals, and safety net hospitals. Partnered with almost 200 civil legal aid programs and law schools, MLPs help health care teams address the root causes of poor health and poverty.

While medical-legal partnerships have been around for decades, they are relatively new to veteran health care settings. Eleven VA Medical Centers (VAMCs) — in Arkansas, California, Connecticut, Florida, Illinois, Maine, and New York — have developed onsite, integrated medical-legal partnerships that build essential civil legal aid capacity into VAMCs’ policy, culture, health quality strategy, and service delivery. By looking at social and legal needs both as part of health and as treatable conditions, medical-legal partnerships are providing catalytic change for the future of veteran care.
Medical-Legal Partnership in Practice: Dave’s Story

Dave Howard is a U.S. Marine Corps veteran who deployed to Vietnam for thirteen months beginning in November 1965, where he participated in numerous combat operations. In September 1966, Mr. Howard and his company were ambushed by the North Vietnamese while on patrol near the DMZ. They were cut off from all support for almost two days while subject to constant mortar and small arms fire.

Mr. Howard returned from the frontlines profoundly affected by the horrors he had witnessed. He was hospitalized for “anxiety reaction” while still overseas, but was later sent back into combat. As Mr. Howard’s tour was coming to a close, he also learned that the military had been investigating him for an alleged single incident of homosexual conduct during his deployment.

After his tour was over — and just months from the end of his term of service — Mr. Howard was discharged under other-than-honorable conditions from the Marine Corps, and found himself back in the civilian world disgraced and disillusioned by his time in the military, and unable to adapt back to civilian life.

For decades, Mr. Howard struggled with severe symptoms of undiagnosed post-traumatic stress. He was unable to sleep and had persistent flashbacks to his time on the front lines in Vietnam. He started a family in Los Angeles and did his best to lead a normal life, but he turned to drugs as a means to cope with his symptoms. He cycled in and out of prison until his most recent release in December 2013, when he enrolled in a VA transitional housing program and started receiving wraparound health care and case management through the VA West Los Angeles Medical Center’s Homeless Patient Aligned Care Team (H-PACT).

It was through the H-PACT that Mr. Howard first met the medical-legal partnership attorney from Inner City Law Center. Though initially hesitant to discuss his service at all, with the support of the health care team, Mr. Howard opened up to the MLP attorney about his traumatic experiences in Vietnam and some of the post-traumatic stress symptoms he was still experiencing. The MLP attorney explained the VA disability benefits application process, and encouraged him to meet with the H-PACT psychologist. While Mr. Howard began treatment with his psychologist, MLP attorneys reviewed his records and built cases in support of claims to both VA disability benefits and a military discharge upgrade.

In March 2015, Mr. Howard was granted service-connected disability benefits at nearly $3,000 per month due to the severity of his post-traumatic stress. He also received over $40,000 in retroactive benefits. He plans to use a portion of these retroactive benefits to move into an independent living senior facility near his daughters and his grandchildren.

Despite his honorable combat service in Vietnam, the Board of Corrections for Naval Records denied Mr. Howard’s application for a discharge upgrade. MLP attorneys are preparing an appeal to the federal district court to correct the injustice still reflected in Mr. Howard’s military record.

Mr. Howard said that he is finally starting to feel at peace for the first time since before he joined the Marines. He continues to see his psychologist at the VA, and is excited that his disability benefits will allow him to finally spend the time with his family that he has missed out on for so many years.

"As a physician who treats veterans, I’ve seen up close that many of the factors contributing to homelessness can’t be fixed without a lawyer’s help. To fully address health, we have to address the social conditions that affect it. Working with lawyers in our clinic every day is one of the best upstream solutions to some of these intractable problems our veterans face."

DR. RISHI MANCHANDA
Former Lead Physician
VA Greater Los Angeles Healthcare System
An evaluation of VA-based medical-legal partnerships’ impact on well-being is currently underway. As part of a two-year, multi-site evaluation, VA researchers Drs. Robert Rosenheck and Jack Tsai, with support from the Bristol-Myers Squibb Foundation, are evaluating the effect of free civil legal assistance on the mental health and quality of life for veterans. The study looks at veterans who sought mental health and other health care services at the Errera Community Care Center in West Haven, Connecticut, and at the Bronx and Manhattan VA Medical Centers. The study is the first of its kind to look at outcomes in veteran-specific medical-legal partnerships. Full results from the study are expected in fall 2016, but preliminary results indicate that veterans who receive MLP services show statistically significant improvements in standardized measures of well-being.

Research from medical-legal partnerships in other health care settings show promising findings that could apply to veterans as well. Studies have shown that when civil legal problems are addressed alongside health care:

1. People with chronic illnesses are admitted to the hospital less frequently. One New York City-based study that showed legal assistance targeted at improving housing conditions reduced emergency room visits and hospitalizations among asthma patients;¹⁶

2. Patients better comply with health care treatments; ¹⁷

3. Less money is spent on health care services for the people who would otherwise frequently go to the hospital. A pilot study in Lancaster, Pennsylvania, showed that when civil legal problems were addressed for high-need, high-cost individuals, inpatient and Emergency Department use dropped upward of 50 percent, and overall costs (as defined by charges) fell by 45 percent;¹⁸ and

4. Health care staff satisfaction is increased.¹⁹
Medical-legal partnerships provide direct financial return to veterans through the recovery of denied VA and housing benefits.

## MLP’s Financial Return for Veterans at Three VA-Based Programs in 2015: Data from the Legal Perspective

<table>
<thead>
<tr>
<th>MLP Partner Institutions</th>
<th># of Veterans Whose Legal Problems Were Treated</th>
<th>$ Recovered for Veterans</th>
<th>Staffing and Expenses for the MLP Legal Team</th>
<th>Unique MLP Components</th>
</tr>
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<tbody>
<tr>
<td>Inner City Law Center, VA West Los Angeles Medical Center</td>
<td>126 veterans</td>
<td>$948,005 recovered in ongoing and retroactive benefits; Avg yield of $7,523 in increased income per veteran</td>
<td>1 full-time attorney, .25 FTE administrative support and .25 additional attorney support, $115,000 budget</td>
<td>Works with the Homeless Patient Aligned Care Team to identify and provide wraparound health care, case management, and legal services to chronically homeless veterans who are high-cost, high-users of emergency services.</td>
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<tr>
<td>Connecticut Veterans Legal Center, VA’s Errera Community Care Center</td>
<td>552 cases</td>
<td>$700,000 of reduced debt and increased financial stability, Stabilized housing for 82 veterans returning $66,207 in reduced housing costs</td>
<td>9 staff, including 5 full-time attorneys, $550,000 budget</td>
<td>Focus on pro bono engagement resulted in over $800,000 leveraged in time donated to veterans by volunteer attorneys in FY 14-15.</td>
</tr>
<tr>
<td>LegalHealth (project of the New York Legal Assistance Group), James J. Peters VA Medical Center, Northport VA Medical Center, and VA New York Harbor Healthcare System</td>
<td>1,500 matters for 1,177 veterans at the three VA sites</td>
<td>$468,294 in one-time benefits, and $16,863 in monthly benefits ($202,356 annualized) for a total of $670,650</td>
<td>4 staff, including 3 full-time attorneys, $420,000 budget</td>
<td>Leads “Legal Stand Down” events designed to teach homeless or at-risk veterans about their legal rights, help them avoid legal problems, and deal with simple legal problems before they result in homelessness or loss of income.</td>
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FOUR WAYS
MEDICAL-LEGAL
PARTNERSHIP IS CHANGING
CARE FOR VETERANS

A Connecticut Case Study

On the frontlines of veteran care in Connecticut is a medical-legal partnership that exemplifies the effective policies and public-private partnerships that have transformed the standards of care and engagement for veterans in the state. Connecticut Veterans Legal Center (CVLC) is a specialized civil legal aid non-profit that is fully integrated and co-located at the VA Connecticut Healthcare System’s Errera Community Care Center. This MLP focuses on seven areas of civil legal problems for veterans: (1) Family law matters, including divorce, child support, alimony and custody issues; (2) Applications and appeals of VA benefits, including medical and educational benefits, disability compensations and pensions; (3) Housing needs, including tenant disputes, evictions, foreclosures and preforclosure mortgage modifications; (4) Bankruptcy and consumer debt relief; (5) Military discharge upgrades; (6) Estate planning, including will preparation and completion of health care proxies and advanced directives; and (7) Employment matters, including unemployment issues, unpaid wage recovery, and resolution of unfair labor practices. Interviews with staff at the MLP reveal four significant ways that bringing health care and legal services together changes care for veterans.

#1: CREATING TRUST & ENGAGEMENT WITH VETERANS

ERRERA COMMUNITY CARE CENTER (ECCC) IS A COMMUNITY BASED CLINIC FOR VETERANS STRUGGLING WITH MENTAL ILLNESS, SUBSTANCE ABUSE DISORDERS, HOMELESSNESS, AND/OR AGING.

ECCC serves a high number of veterans who are often ineligible for VA health care because of their discharge status. That gap, according to Maryellen Leigh, clinical social worker at ECCC, provides an opportunity for the Connecticut Veterans Legal Center to help veterans access previously denied VA health care benefits, which in turn provides an opportunity to build trust. She says, “It’s hard to engage a veteran, particularly those that have been denied services from the VA.”

When the medical-legal partnership paves the way toward VA benefit eligibility through integrated access to civil legal aid services at ECCC, a foundation for trust and engagement is built with hard to reach veterans. Dr. Laurie Harkness, former Director of ECCC and a driving force behind the establishment of its MLP, explains that the health care facility, “Sees more people come off the street looking for legal services who then realize the other services offered here, such as mental health, primary care, or job training, fit their needs.”
Access to civil legal aid services thus provides a gateway to other services at ECCC, and draws new, underserved veterans into the Errera community. For veterans that are at ECCC for health services, the close partnership between clinicians and lawyers helps veterans feel comfortable engaging with the legal team. “The veteran sees the legal team as part of our team, which makes the trust much easier to establish,” says Dr. Harkness. “The reason why it works is that there’s this built-in and ongoing trust.”

Lawyers from the Connecticut Veterans Legal Center attend ECCC events, eat with veterans in the dining hall, and build rapport by staying engaged with veteran clients throughout their legal journeys, supporting veterans to take the necessary steps to take care of their legal problems with the help of the MLP legal team.

#2: RECOGNIZING AND TREATING THE WHOLE LIFE OF A VETERAN

The Connecticut medical-legal partnership takes a 360-degree approach to treating a veteran, uncovering both the medical and non-medical factors that affect a person’s health. The interdisciplinary team of people in health care, social work, and legal fields better understand veterans and their needs because they treat health and legal problems as interconnected issues that affect a person’s life, and communicate about how they are related, rather than treating issues in silos.

According to Dr. David Rosenthal, Medical Director of the Homeless Patient Aligned Care Team (H-PACT) at the Errera Center, “Care is not defined to a specific organ or disease; care is caring for the individual as a whole. As physicians, if we are not identifying the social factors and the legal issues as part of the whole patient, we’re missing a tremendous amount.”

Legal issues take a significant mental and emotional toll on individuals and are often intertwined with health. Dr. Harkness explained, “We never really thought of the impact of legal issues on all of these other domains of somebody’s life — the relief that somebody feels when they can pay their back child support, the relief that somebody feels when they can have a criminal record expunged.”
Through the interdisciplinary approach of MLP, clinicians and social workers at the Errera Center recognize and respond to the legal and social factors that play a role in mental and physical health. “In order to get them, one, feeling better about themselves, two, access to housing, and, three, jobs, we needed to clear these legal issues,” says Dr. Harkness. “As we saw these legal issues get resolved, we saw people moving on with their lives.”

**#3: EXPANDING THE CAPACITY AND EFFECTIVENESS OF THE HEALTH CARE AND LEGAL TEAMS**

Co-located legal and health care services create an environment that promotes interdisciplinary work. Legal staff, nurses, physicians, psychiatrists, psychologists, and social workers combine their expertise for the veteran’s benefit. This team-based approach also allows each member to work at the top of their ability and contribute their specialized knowledge to solve complex problems. “Having legal services at the Errera Center expands the capacity for medical intervention,” says Dr. Rosenthal. “In the same vein of social workers being an important and critical aspect of medical care, I would argue that the legal assistance, having legal representation for real world legal problems, plays a tremendous role in my ability to care for vulnerable patients.”

Lawyers from the Connecticut Veterans Legal Center help the health care team address the social and legal factors that impact health, and the health care partners contribute their medical expertise to help with legal cases. “For this population, in order for the legal issues to be addressed in the appropriate way, the involvement of clinicians was essential, whether it was writing letters to the courts, whether it was clarifying certain behaviors,” says Dr. Harkness.

Dr. Rosenthal concurs, saying that having civil legal services available absolutely changed his practice. He now asks about legal issues when taking his patients’ social history, which he explains is not something medical school or residencies taught him to ask. But by asking these questions, he allows patients to discuss issues, and can refer them for civil legal services.

**#4: INTERVENING UPSTREAM**

An upstream intervention is one that aims to detect a problem sooner, and to intervene, and sometimes even prevent a problem, before it becomes a crisis. On average, low-income people in the United States have two to three unmet civil legal needs, and only one in five low-income people receives the civil legal assistance they need. Often, people do not know they have a legal concern until the issue has progressed to a crisis — like when they receive an eviction notice. Because of a lack of resources, this is the point at which lawyers in traditional civil legal aid settings typically get involved.

Locating civil legal aid resources within a VA health care setting allows for upstream interventions, resource-sharing, and care coordination. At the Errera Center, providers and social workers are trained and given the resources to screen for early signs of legal problems, and to refer patients to civil legal services available right at ECCC. “They’re so great on educating us. As staff at the VA, we’re not trained in all of the benefits that are provided to veterans,” says Maryellen Leigh, clinical social worker. “If veterans are confused, so are we.”

Through staff education, routine legal screening of patients, and the presence of lawyers onsite, ECCC often recognizes and handles legal concerns before they become crises. When legal problems are screened and resolved earlier, fewer resources are needed to address them, and most important, the veteran experiences less stress and upheaval. “We now offer a legal service that is integrated in our services, and it makes recovery possible. Without it I don’t think we’d have as many people permanently housed and sustaining that housing. I don’t think we’d have as many people working. We wouldn’t have as many people in healthy relationships in the community and certainly with access to care,” says Dr. Laurie Harkness.
The National Center for Medical-Legal Partnership is working closely with the VA Center for Innovation to explore strategies for change in VA policy and practice to ensure access to health-promoting civil legal resources. Working in tandem with the American Bar Association and other longstanding veteran community allies, the opportunity exists to shift from a loosely coordinated cadre of community legal resources toward high quality, integrated civil legal resources as a standard of care in all VA health care settings. As highlighted by the CHALENG Survey, veterans need civil legal support to maintain their health and wellbeing. By using an upstream, interdisciplinary approach to care that includes legal expertise, medical-legal partnerships can change the way VA health care settings interact with and care for veterans. To spearhead this effort, the VA formed a Medical-Legal Partnership Taskforce comprised of leaders in the Veterans Health Administration and the Office of General Counsel, to support the expansion of medical-legal partnerships in VA facilities.

President Obama recently recognized the impact of civil legal aid services on health, housing, and education. Through a Presidential Memorandum in September of 2015, the White House Legal Aid Interagency Roundtable was formalized, and federal programs are now encouraged to incorporate civil legal aid into their services.

In that vein, the National Center for Medical-Legal Partnership and government entities have already formed successful partnerships. In July 2014, the National Center for Medical-Legal Partnership was awarded a National Cooperative Agreement from the U.S. Health Resources and Services Administration (HRSA) to help health centers cultivate and sustain medical-legal partnerships. HRSA supports the use of civil legal aid as an “enabling service” for all HRSA-funded health centers to help meet the health care needs of patients. The success of medical-legal partnerships in HRSA-funded health centers shows a bright future for collaboration between the non-profit and public sectors in serving vulnerable populations.

In looking toward the future of veteran health care, addressing civil legal needs and leveraging community resources will be vital in serving those who have served.

More information about medical-legal partnership in veteran health care settings, including academic research and tools for developing a partnership, can be found on the National Center for Medical-Legal Partnership’s website at: www.medical-legal-partnership.org/veterans.
REFERENCES


