

Executive Summary

The American Legion, Department of North Carolina

14 December 2009

Reference: Annual Department Commander visits to North Carolina VA Medical Centers

Background: The Commander, Department Service Officer, and Auxiliary President have completed their evaluative tours of the four major VA Medical Centers (VAMC) in the state. The issues listed below are the leading concerns as set forth by the Department Commander. The summarized responses are a conglomeration of the information provided by the hospital representatives at each respective location.

Issues Presented to Hospital Administrative Staff:

- 1. The availability of VA healthcare for all veterans.** While it is desirable to provide all veterans with healthcare the current Veteran's Healthcare Administration policy does not provide for cost free health care to all veterans. If the veteran is not service connected at a certain percentage, is not on pension, does not meet the means income threshold test or does not meet certain other criteria the veteran will be required to pay co payments/ deductibles for care and medications at the VAMC. U.S. Government law changes are needed to reform this issue.
- 2. Transportation to and from the VAMC for veterans.** The various VAMC directors and staffs are currently looking into ways to improve the current transportation system including a larger scope of cooperation with the DAV transportation system. Several VAMC directors are looking into gaining a larger fleet of vehicles which will be assigned to the medical center and will provide directed transportation support to veterans in need. It should also be noted that most counties within NC have a county transportation system which will transport veterans to various VAMC in the geographical proximity. Call your County Veteran Service Office for details.
- 3. Improved quality of life for in-patient VAMC customers.** Strides are being made within the respective VAMC to gain funding and approval for initiatives aimed at improving care and quality of life for in-patient veterans. Projects such as repainting, adding home cooking facilities and non-institutional dining areas are taking place with goal of making veterans feel more at home while receiving care at the facility.
- 4. Women's healthcare availability and advancements.** Each facility in NC has a women's clinic however there are some variances in staff level, facilities and focus in these special treatment sections. The Commander vigorously delivered the message that this nation's veterans, which include many females, are entitled to the highest level and standard of medical care. Each facility administrator agreed vehemently and briefed responded by briefing their respective plans to improve and expand the treatment clinic at their location in support of female veterans.

5. The frustrating VAMC phone systems. The Commander proposed that the lengthy administrator introduction and overdeveloped phone menu at the VAMC in the state be examined and pared down to allow veterans a smaller number of options when selecting services. The current system has been shown to be frustrating to veterans that simply want to call and speak to someone regarding their medical treatment and situation. Some VAMC directors stated that they planned to increase phone team personnel or use outside resources such as volunteers to answer calls and provide personal service to veterans.

6. Elderly care quality within the VAMC. The VAMC within NC are pursuing many avenues to improve their care facilities for the elderly veterans of our state. During the walkthrough there were numerous ongoing construction and renovation projects in these areas. The veterans that the Commander and DSO interviewed seemed genuinely happy with their living conditions and with the care they were receiving. The initiative to convert dual living spaces to single spaces has contributed to the allotment of more space per veteran thereby allowing veterans to stock their area with home-style items such as recliners and larger televisions. The staff in these facilities has facilitated programs such as volunteer home cooking groups to make food for the residents.

7. The eradication of homelessness among veterans in North Carolina. The respective VAMC are in the beginning stages of planning for the eradication of homelessness as outlined by Secretary Shinseki however there is a high level of energy and manpower being directed at this problem. The VAMC directors are examining the development of partnerships with community organizations and are also allocating more resources to aggressively attack this core issue as defined by VA leadership.

8. Timely Claims processing in VHA system. The volume of requests for medical care, clothing allowances and other VHA benefits are at an all time high due to the influx of OEF/OIF veterans into the system. The VHA is exploring ways to target manpower in the hope of decreasing wait time for claims development and decision. Some of the VAMC directors communicated their intention to open on weekends and extend weekday hours to service the increased clientele, complete backlogged Compensation and Pension examinations and improve care operations at the facility.

9. Appellate Process for Denial of Clothing allowance payments to eligible veteran. The Commander expressed concern that eligible veterans are not given the proper duty to assist and rights to appeal information after denial of benefits. Each director said that they would look into the issue and report back with findings and recommendations for improvement in the program.

10. Child care availability for single parents with appointments. The VA directors expressed concern about the accident liability regarding providing in-house child care for veterans. The Commander recommended developing partnerships with community agencies and pursuing low cost means of service while also ensuring qualified personnel are providing care to the children of veteran patients receiving out patient and clinical care.