



Veterans Affairs Media Summary and News Clips

28 August 2015

[1. Access to Benefits/Care](#)

1.1 - FOX News Channel: [VA insults veteran treated for PTSD with phony address](#) (27 August, 31.8M online visitors/mo; New York, NY)

This four-minute clip reports on a Veteran who, after waiting one year to receive his medication from the VA, learned that it never arrived because his address in the VA database had been changed to "Coo Coo Lane." This clip includes an extended interview with the affected Veteran.

[Hyperlink to Above](#)

1.2 - The Washington Times (AP): [Tomah VA Medical Center halting psychiatric services](#) (27 August, 3.7M online visitors/mo; Washington, DC)

The troubled Tomah Veterans Administration Medical Center says it will make several changes to address staffing shortages. The VA announced Wednesday that the hospital's 11-bed inpatient psychiatric unit had stopped admitting new patients and will temporarily close next week. VA spokesman Matthew Gowan said the two patients who are currently in the unit likely will be discharged before the Sept. 4 closure.

[Hyperlink to Above](#)

1.3 - The Arizona Republic: [Arizona veterans tell McCain that VA is better, but not cured at town hall](#) (27 August, Paul Giblyn, 3.2M online visitors/mo; Phoenix, AZ)

A town-hall meeting with U.S. Sen. John McCain about veterans issues started with a question Thursday. KFYI-AM (550) radio talk-show host Mike Broomhead asked for a show of hands among veterans who had waited for more than 60 days for care at a Department of Veterans Affairs facility. About a third of the roughly 200 people in attendance at the Burton Barr Central Library in central Phoenix raised their hands.

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1.4 - Pittsburgh Tribune-Review: [Fix for issues vowed at Pittsburgh VA](#) (27 August, Carl Pine, 1.5M online visitors/mo; Pittsburgh, PA)

Officials at the Veterans Affairs Pittsburgh Healthcare System are vowing to fix a list of problems uncovered by agency investigators — ranging from the way health care workers clear a patient's airway to the training pharmacists receive in dispensing some forms of medication.

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1.5 - Atlanta Journal-Constitution: [When big government can't get out of its own way](#) (27 August, 1.1M online visitors/mo; Atlanta, GA)

The shocking news came over a year ago: American veterans were dying by the dozens as they languished on lengthy waiting lists, while Veterans Administration staff falsified records to hide the problem. Almost as shocking, Congress acted within four months of the first news reports about deaths of veterans waiting for care from VA medical facilities in Phoenix.

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1.6 - Star-News: [Editorial - VA plumbing mess is hurting veterans](#) (27 August, 873k online visitors/mo; Wilmington, NC)

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There is no rational reason why an elderly veteran should have to go to Fayetteville to get a tooth filling replaced. The Veterans Access, Choice, Accountability Act of 2014 was supposed to have made sure veterans have timely access to health care by allowing them to get health care in the community if they live more than 40 miles from a Department of Veterans Affairs facility. They're given a Choice card for that, but must seek approval to use it.

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1.7 - Independent Journal Review (Video): [The Disturbing Thing That Happens Every Day at a VA Hospital That Treats Quadriplegic Veterans](#) (27 August, Parker Lee, 783k online visitors/mo; Alexandria, VA)

According to the Wounded Warrior Project, over 50,000 American servicemen and servicewomen have been injured in recent military conflicts. Tragically, not all veterans receive the care they deserve, which is reportedly the case at one Veterans Affairs hospital in Memphis, Tennessee. A series of videos recently posted to YouTube appear to show veterans from a spinal injury ward in the Memphis VA Medical Center being left entirely alone by hospital staff:...

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1.8 - KSMP-TV (NBC-6, Video): [Burnout issues at St. Cloud VA, corrections underway](#) (27 August, 756k online visitors/mo; Eden Prairie, MN)

The entrance to the St. Cloud VA medical center is lined with trees and its vast green space looks like a park. But if you ask staff what it's like inside medical center, the feedback can be ferocious. Union Vice President Jane Nygaard said the atmosphere is toxic. She is the only person who dared to speak on camera about the culture. "People are afraid," she told the Fox 9 Investigators.

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1.9 - KNXV-TV (ABC-15, Video): [Phoenix VA ordered to pay \\$3.2M in malpractice case; patient claimed shoulder surgery was botched](#) (27 August, Dave Biscobing and Shawn Martin, 701k online visitors/mo; Phoenix, AZ)

A former Army doctor who was permanently injured during a shoulder surgery at the Phoenix VA won a multi-million dollar judgment, records show. A federal judge awarded \$3.2 million in damages to Jacob Amrani. The total includes \$2.9 million in economic damages and \$300,000 in non-economic damages. "I feel absolute vindication," Amrani said. "They did more than deny my claim. They tried to blame me. They tried to make me the villain."

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1.10 - WOAI-AM (AM-1200): [Deputy VA Secretary Touts Improvements in Health Care, Examines Challenges](#) (27 August, 597k online visitors/mo; San Antonio, TX)

Deputy U.S. Veterans Affairs Secretary Sloan Gibson told a group in San Antonio that the VA has taken great steps to rectify problems with care at its hospitals and medical centers, and is prepared to continue expanding programs to help veterans, News Radio 1200 WOAI reports. Gibson spoke to the Air Force Sergeants Association.

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1.11 - KATV-TV (ABC-7, Video): [Little Rock VA boasts improvements](#) (27 August, Elicia Dover, 396k online visitors/mo; Little Rock, AR)

Little Rock VA officials are releasing new information about the kind of care veterans are receiving. In January of 2013 the backlog of benefits decisions at the Little Rock VA Regional Office was 5,682 claims waiting more than 125 days for a decision. Now new data shows that number had been reduced in July of 2015 to 777 backlogged claims.

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1.12 - WECT-TV (NBC-6, Video): [Tillis calls issues at Wilmington VA clinic "part of a failed system."](#) (27 August, Jon Evans, 313k online visitors/mo; Wilmington, NC)

Tillis, the state's junior senator who sits on the Armed Services Committee, discussed several of the issues he has seen in the Department of Veterans Affairs since taking office in January. When asked about the veterans having appointments cancelled, and procedures postponed because of continued contaminated water issues at the relatively new VA facility in Wilmington, Tillis called it "unacceptable", and an example of bad processes in place across the agency.

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1.13 - The Leaf-Chronicle: [Veterans Voice: How to adapt to latest VA changes](#) (27 August, Sandy Britt, 264k online visitors/mo; Clarksville, TN)

The Department of Veterans Affairs often changes eligibility requirements for various VA benefits. It also routinely changes the way claims are processed in order to streamline and expedite processing. Two recent changes involve annual clothing allowance eligibility and VA evidence intake centers.

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1.14 - The News-Review: [Veterans share VA experiences with state official](#) (27 August, Carisa Cegavske, 245k online visitors/mo; Roseburg, OR)

Marine veteran Fred Rhodes is fed up with the Roseburg Veterans Affairs Medical Center. Rhodes told the director of the state Department of Veterans' Affairs on Wednesday that it's tremendously difficult to get an appointment with a cardiologist. He said he has to go to the Portland VA to see a cardiologist, and they won't get him in there for three months.

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1.15 - WCBD-TV (NBC-2, Video): [VA program helps veterans start new career](#) (27 August, Mayci McLeod, 221k online visitors/mo; Mount Pleasant, SC)

Getting struggling veterans back on their feet, that's the goal of a unique program at the Ralph H. Johnson VA Hospital. The first step is to help veterans find jobs, and then keep them. Thomas Gilliard says, "I had issues in my life that I'm not too proud of." Samuel Toomer says, "I kind of hit rock bottom." Both Thomas Gilliard and Samuel Toomer served in the Army, but then they left, battled substance abuse. Now, they are back on their feet.

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1.16 - WABE-FM (NPR-90.1, Audio): [Ga. Sen. Isakson Talks Candidly On Veterans' Health Care, More](#) (27 August, Shelby Lin Erdman, 213k online visitors/mo; Atlanta, GA)

Military veterans are still running into problems scheduling timely doctor's appointments, either with the Veterans Administration or a new alternative option called the Veteran's Choice Program. Basically, the new Choice Program allows eligible veterans who live more than 40 miles away from a VA health care facility or can't get an appointment scheduled within 30 days

to arrange an appointment with a Medicare-approved doctor, who can schedule an appointment earlier and is closer to the veteran's location.

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1.17 - WVVA-TV (NBC-6, Video): [VA Center eager for even more Veterans to access benefits](#) (27 August, Courtney Davis, 170k online visitors/mo; Bluefield, WV)

For many veterans in the area, using their VA benefits has not always been easy. Which is why veterans with the VA like Darin Dowdy spend their time talking to veterans to explain what the VA can offer. "We try to go out in the areas in the community and outreach to those veterans needing assistance in places they may never have even heard of the VA or what they could be eligible for," says Dowdy.

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1.18 - Manteca Bulletin: [Ripon Legion opens veterans' center](#) (27 August, Glenn Kahl, 65k online visitors/mo; Manteca, CA)

The Allen Bugbee Veterans' Center in downtown Ripon held a soft opening this week allowing Congressman Jeff Denham to be part of the festivities while he was on a session break. The facility is located at 201 South Stockton Avenue across from the Ripon Consolidated Fire Department. Denham presented the center with an American Flag that flew over the Pentagon on Veterans' Day in 2013.

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1.19 - WJHG-TV (NBC-7, Video): [Two New Military Health Clinics To Benefit Bay County](#) (27 August, Samantha Read, 61k online visitors/mo; Panama City, FL)

The Department Of Veteran Affairs is partnering with the Navy to bring two new medical clinics to Northwest Florida. Engineers say the clinics will benefit a lot of people. Stephanie Cantrell is retired from the Air Force, and said she's looking forward to not driving all the way to Pensacola for her doctor's appointments. The new clinics being built on Magnolia Beach Road in Panama City Beach are five times bigger than the current outpatient facility at Naval Support Activity.

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1.20 - California Healthline: [VA Faces Psychiatrist Shortage Despite Spending Billions, OIG Finds](#) (27 August, 57k online visitors/mo; United States)

The Department of Veterans Affairs does not employ enough full-time psychiatrists, and those on staff are not using their time effectively, according to a report released by VA's Office of Inspector General, the Wall Street Journal reports. The findings come despite VA's multibillion-dollar investment into improving mental health care.

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1.21 - WGXA-TV (FOX-24): [VA hospice center opens at Carl Vinson](#) (27 August, Kathryn Sheperd, 53k online visitors/mo; Macon, GA)

Veterans Affairs officials cut the ribbon on a brand new state-of-the-art hospice care unit at the Carl Vinson VA Medical Center on Thursday. The Medical Center's Director Mary Alice Morro said the new unit will provide a comfortable and peaceful environment for veterans and their families. Construction on the new building started in 2013 and cost \$4.5 million. Once veterans are admitted into the unit, staff members will be able to exclusively meet their needs.

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1.22 - WSAU-AM (AM-550, Wheeler News Service): [Psych unit at Tomah VA to temporarily close](#) (27 August, 29k online visitors/mo; Wausau, WI)

The Tomah Veterans Administration Medical Center is changing its psychiatric and emergency services. The changes will address staffing shortages. On Wednesday, the hospital's 11-bed in-patient psychiatric unit stopped admitting new patients, and will temporarily close as of next week. The two patients who are currently in the unit likely will be discharged before the September 4th closure, according to a spokesman.

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1.23 - The Exponent Telegram: [VAMC opens new community building](#) (27 August, Brittany Murray, 28k online visitors/mo; Clarksburg, WV)

A new community building at the Louis A. Johnson VA Medical Center celebrated its open house Thursday to better serve patients in residential rehabilitation program. "I think the building will serve as an area that's more conducive to therapy and people's accommodations," VAMC interim Director Dr. Glenn Snider said. "It gives them an environment that's not interrupted by other activities, and it gives them an area that they can have large meetings where all of the patients in one program can participate in an activity."

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1.24 - KUNM-FM (NPR 89.9, Native American Calling, Audio): [Thursday, August 27, 2015 – Access to Health Care for Veterans](#) (27 August, 12k online visitors/mo; Albuquerque, NM)

Last year, the U.S. Department Veterans Affairs was heavily criticized for inadequate medical care and falsifying documents about wait times for veterans who needed to see a doctor. Secretary of Veterans Affairs Eric Shinseki resigned amid the scandal. Congress later passed the Veterans Choice and Accountability Act of 2014. Are veterans getting the health care they need today? What has the VA done to improve care for Native veterans?

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[2. Ending Veterans' Homelessness](#)

2.1 - The Wall Street Journal: [Connecticut Ends Chronic Vet Homelessness, Federal officials say it's the first state to do so](#) (27 August, Joseph De Avila, 37.5M online visitors/mo; New York, NY)

The federal government designated Connecticut on Thursday as the first state in the U.S. to end chronic homelessness among veterans. In a statewide survey conducted this year by the Connecticut Coalition to End Homelessness counted only 41 veterans on the streets, a drop of 45% since the previous count, in 2013. Nearly 300 homeless veterans have been placed in permanent housing under a roughly two-year push by the state.

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2.2 - POLITICO New York: [Mark-Viverito unveils nearly \\$1 million in funding to curb veteran homelessness](#) (27 August, Gloria Pazmino, 7.5M online visitors/mo; Arlington, VA)

City Council Speaker Melissa Mark-Viverito announced a \$940,000 initiative on Thursday to support veteran homeless prevention, job placement, legal and mental health services. In an announcement at the Project Renewal homeless men shelter in Lower Manhattan, Mark-Viverito said the Veterans Services Initiative, which is included in the city's budget for Fiscal Year 2016, will fund nonprofits citywide that work with veterans and will help meet the administration's goal of ending veteran homelessness by the end of the year.

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2.3 - KPCC-FM (NPR-89.3, Audio): [VA housing vouchers fizzle in hot SoCal rental market](#)

(27 August, John Ismay, 4.1M online visitors/mo; Pasadena, CA)

The building manager's office was closed, but Veronica Schenkelberg and Adrian Carrillo decided to wait. All day, they'd been hitting buzzers and knocking on doors, looking for an apartment for Carrillo, and this building showed promise--it had an apartment available, and from what Carrillo could gather online, it took Section 8 housing vouchers.

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2.4 - The Washington Times (AP): [Feds: Connecticut ended chronic homelessness among veterans](#)

(27 August, Dave Collins, 3.7M online visitors/mo; Washington, DC)

The federal government has declared Connecticut the first state in the country to end chronic homelessness among veterans, officials announced Thursday. The declaration means that all known veterans experiencing chronic homelessness in the state either have housing or are on an immediate path to permanent housing, officials said. Chronic homelessness is defined as being homeless for at least one year or being homeless at least four times in the past three years.

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2.5 - The Hartford Courant: [Connecticut Says It Has Ended Chronic Homelessness for Veterans](#)

(27 August, Gregory B. Hladky, 1.4M online visitors/mo; Hartford, CT)

Earlier this year, advocates counted 41 chronically homeless veterans living on Connecticut's streets. On Thursday, state and federal officials proclaimed that housing has now been found for all those troubled vets, calling it a landmark in the effort to help veterans. "We are the first state in the nation to end chronic homelessness among our veterans," Gov. Dannel P. Malloy said during a ceremony at a veterans' housing complex.

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2.6 - WTNH-TV (ABC-8, Video): [Connecticut ends chronic homelessness among veterans](#)

(27 August, Mark Davis, 1M online visitors/mo; New Haven, CT)

Governor Malloy, the U.S. Secretary of Veterans Affairs, and members of the Congressional delegation visited with veterans at Victory Gardens veterans' housing complex near VA hospital in Newington on Thursday touting a major breakthrough. "We are the first state in the nation to end chronic homelessness among veterans," said Gov. Dannel Malloy, D-Conn.

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2.7 - The Fairfield Daily Voice: [Connecticut Honored As First State To End Chronic Homelessness Among Vets](#)

(27 August, 1M online visitors/mo; Norwalk, CT)

The State of Connecticut has been designated by the federal government as the first state in the nation to have ended chronic homelessness among veterans, Gov. Dannel P. Malloy announced Thursday. A count of chronically homeless veterans earlier this year found only 41 in Connecticut, a decrease of 45 percent. A report said that through Connecticut's efforts, nearly 300 veterans previously experiencing chronic homelessness have been permanently housed.

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2.8 - WVIT-TV (NBC-30, Video): [NBC Connecticut News at 5:30](#) (27 August, 416k online visitors/mo; West Hartford, CT)

This three-minute clip reports on the announcement that Connecticut may have become the first state to meet a White House goal of ending chronic Veteran Homelessness by year's end. The state claims that all known homeless Veterans had already been housed or are on their way to being housed. This clip includes remarks made by Secretary McDonald at a press conference.

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2.9 - Minnesota Public Radio (Audio): [Again this year, mayors aim to end vets' homelessness](#) (27 August, Josh Marcus, 412k online visitors/mo; Saint Paul, MN)

The mayors of Minneapolis and St. Paul fell short of their goal to end veterans' homelessness in the Twin Cities last year. But officials think they're on track to do it this year. When Mayors Betsy Hodges and Chris Coleman announced the goal in January 2014, federal data showed 204 homeless veterans in the metro area. Fifty-nine-year-old Jeff Pert joined that list last December. For 10 years he lived in a shed in Minneapolis.

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2.10 - The Hour: [Norwalk helps CT end chronic homelessness among veterans](#) (27 August, Robert Koch, 190k online visitors/mo; Norwalk, CT)

Connecticut has become the first state in the nation to end chronic homelessness among veterans and Norwalk lent a hand in the effort, according to officials. "There are no veterans in our shelter now. Because of the resources that have been invested in this important cause the veterans are rarely in our shelter long; we have moved them to homes very quickly," said Jeannette Archer-Simons, executive director of Open Door Shelter in Norwalk.

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2.11 - HamletHub – Wilton: [Gov. Malloy Announces CT is 1st State in America to End Chronic Veteran Homelessness](#) (27 August, Gov. Dannel Malloy, 147k online visitors/mo; Ridgefield, CT)

Governor Dannel P. Malloy today announced that the State of Connecticut has been designated by the federal government as being the first state in the nation to have ended chronic homelessness among veterans. Last year, Governor Malloy announced several initiatives aimed at combatting veteran homelessness with the goal of ending homelessness among veterans by the end of 2015. The state has since made major investments in housing, becoming a national leader for its work.

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[3. Ending the Claims Backlog](#)

3.1 - AL.com: [U.S. Rep. Bradley Byrne blasts VA data showing a reduction in claims backlog as 'self-serving propaganda'](#) (27 August, John Sharp, 5.5M online visitors/mo; Birmingham, AL)

U.S. Rep. Bradley Byrne blasted the Department of Veterans Affairs Wednesday for releasing what he says is "self-serving propoganda" about a reduction in disability claims older than four months. "I don't believe a bit of it," Byrne said. "They play games on how they get rid of their backlog. They will deal with a claim when, in essence, they just turned it down and it will go into their appeals process, which by the way, is really backed up."

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3.2 - KPCC-FM (NPR-89.3, Audio): [VA improving benefits system just as veterans flood Los Angeles](#) (27 August, John Ismay, 4.1M online visitors/mo; Pasadena, CA)

The Department of Veterans Affairs has made major headway getting benefits to former service members quickly, officials say. The news comes a time California is expecting an influx of thousands of new veterans. In L.A., the average wait time for disability claims has dropped from 14 months to three months since 2013. "It's definitely getting better," said Garry Augustine, of the Disabled Veterans of America, a group that helps veterans apply for benefits.

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3.3 - WHBQ-TV (FOX-13, Video): [VA employees accused of shredding documents](#) (27 August, 479k online visitors/mo; Memphis, TN)

Military veterans are waiting months for help to heal from injuries on the battlefield, but this week, the VA says they have the smallest backlog of outstanding claims ever. FOX13's Justin Gray found out congress isn't buying that theory. We've learned there were a series of surprise inspections at the Atlanta VA Medical Center and 9 other major VA hospitals across the country July 20th, after concerns about staff improperly shredding documents.

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3.4 - Health Data Management: [VA Says Disability Claims Backlog at Lowest Level Since 2007](#) (27 August, Greg Slabodkin, 79k online visitors/mo; Chicago IL)

The Department of Veterans Affairs has announced that its disability claims backlog is at the lowest level since it began tracking the data in 2007, due in part to replacing antiquated information systems. According to Allison Hickey, VA undersecretary for benefits, the current backlog of more than 98,000 claims older than 125 days represents an 84 percent decrease from a peak of more than 600,000 claims reported in March 2013.

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[4. Veteran Opportunities for Education/GI Bill](#)

4.1 - Las Vegas Review-Journal: [Bill would offer child care to student veterans](#) (27 August, Steve Tetreault, 857k online visitors/mo; Las Vegas, NV)

A new bill in Congress aims to help veterans obtain child care while they pursue an education. The measure would offer federal grants for colleges to establish or expand child care centers

that could assist students who have served in the military. Sponsor Rep. Dina Titus said the bill nods to changing demographics in the armed forces and among veterans.

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4.2 - WJCT-TV (PBS-7): [A Kinder, Gentler GI Bill Making College More Affordable For Vets](#) (27 August, Cyd Hoskinson, 313k online visitors/mo; Jacksonville, FL)

A change to state law is making it simpler for military veterans to attend college regardless of where they call home. In the past, veterans going to a public college or university were often considered non-residents. But since the GI Bill only paid for in-state tuition, veterans had to pay the difference between in-state and the higher out-of-state rate from their own pockets.

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4.3 - WDTV-TV (CBS-5, Video): [Student Veteran Not Getting Federal Funding](#) (27 August, Renata Di Gregorio, 9k online visitors/mo; Bridgeport, WV)

We know veterans face difficulties in everyday life, but what about in education? 5 News talked with a student veteran who says he hasn't gotten any of the federal funding he's supposed to have. Christopher Lujan spent 10 years in the Marine Core and qualifies for the Post-9/11 G.I. Bill and the Veterans Vocational Rehabilitation Program. The only problem? Lujan says he hasn't seen a penny of that money.

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[5. Women Veterans](#)

5.1 - FOX News Channel (Reuters): [2 in 5 military women endure sexual trauma during service](#) (27 August, 31.8M online visitors/mo; New York, NY)

In the U.S. military, women may be nearly 10 times more likely than men to experience sexual assault or harassment, a study of recent veterans suggests. Researchers from the Department of Veterans Affairs (VA) surveyed more than 20,000 men and women who served during the conflicts in Iraq and Afghanistan. About 41 percent of women and 4 percent of men reported suffering some form of sexual harassment during their time in the military.

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[6. Other](#)

6.1 - FOX News Channel (Video): [Mystery solved: Vet tombstones used for Missouri patio were discards](#) (27 August, 31.8M online visitors/mo; New York, NY)

The rural Missouri homeowner whose patio made from military headstones sparked anger among veterans "used poor judgment," but did nothing illegal -- or malicious -- when he scavenged discarded defective markers from a local landfill, authorities said. The patio, which was made up of about 150 headstones with veterans' names, made national news when a veteran posted photos of it to Facebook.

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6.2 - Daily News (Video): [Missouri man who built patio with gravestones of military veterans will not be charged: cops](#) (27 August, Deborah Hastings, 15.4M online visitors/mo; New York, NY)

A homeowner in rural Missouri will not be charged for using the gravestones of military veterans to build a patio, authorities said. Navy veteran Ed Harkreader took photos of the veranda and a staircase and posted them to Facebook last week, saying he was outraged. The stones carried the names of service members and their families.

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6.3 - The Baltimore Sun: [Ben Carson suggests doing away with Department of Veterans Affairs](#) (27 August, Ian Duncan, 4.2M online visitors/mo; Baltimore, MD)

Republican presidential hopeful Ben Carson suggested eliminating the Department of Veterans Affairs in a talk radio interview Wednesday, leading to swift condemnation from one veterans group. The former Johns Hopkins pediatric neurosurgeon said problems with the Veterans Affairs health system are discouraging people from joining the military in the first place and said there needed to be a single system to take care of active duty troops as well as those who are no longer serving.

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6.4 - Patch.com (Decatur-Avondale Estates Patch): [Former Decatur VA Worker's Appeal Denied, The former VA Police Services employee was sentenced to 13 months in prison for using a government purchasing card for personal expenses](#) (27 August, Justin Ove, 3.8M online visitors/mo; New York, NY)

A former secretary at the Atlanta VA Medical Center (VAMC) in Decatur who was sentenced to prison after pleading guilty to charges of theft of government funds and making false statements for misusing a government-issued credit card will remain behind bars after her latest appeal was struck down earlier this week.

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6.5 - The Washington Times (AP): [Louisiana holding summit to assist imprisoned veterans](#) (27 August, 3.7M online visitors/mo; Washington, DC)

Louisiana is holding a day-long summit to help connect imprisoned veterans with available services. The Thursday summit is the third year of the event, hosted by the state corrections and veterans affairs departments and the federal VA. The corrections department says about 220 veterans housed at state prisons are expected to attend the event at Rayburn Correctional Center in Angie.

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6.6 - The Hill: [GOP lawmaker plans VA reform bill](#) (27 August, Cristina Marcos, 1.8M online visitors/mo; Washington, DC)

Rep. John Kline is slated to introduce legislation next month to prevent the Department of Veterans Affairs from belatedly charging veterans for medical care received years ago. The Minnesota Republican, who chairs the House Education and the Workforce Committee, said in a Thursday statement that he will roll out a measure when the House returns from recess in September.

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6.7 - Pittsburgh Tribune-Review: [Items in drug stockpile to counter pandemic past prime at Pittsburgh VA](#) (27 August, Walter F. Roche Jr., 1.5M online visitors/mo; Pittsburgh, PA)

Veterans Affairs Pittsburgh Healthcare System has completed a review of hundreds of medical supplies stockpiled for large-scale emergencies because some of them expired, officials said. The inventory of more than 200 pallets of items, stored at the VA Pittsburgh's H.J. Heinz campus in O'Hara, was expected to determine which items can still be used, said Beth Miga, a VA Pittsburgh spokeswoman.

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6.8 - C-SPAN (C-SPAN 3, Video): [2015 White House Conference on Aging](#) (27 August, 1M online visitors/mo; Washington, DC)

This five minute clip records remarks made by Secretary McDonald as a member of a panel at the 2015 White House Conference on Aging. In the clip, Secretary McDonald describes the role that the VA Caregiver Support Program plays in the larger mission of VA in providing care to Veterans.

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6.9 - Idaho Press-Tribune: [Veterans: Have you completed my survey?](#) (27 August, Sen. Mike Crapo (R-ID), 158k online visitors/mo; Nampa, ID)

In the wake of last year's scandals involving the U.S. Department of Veterans Affairs, I created a veterans survey to learn more about the experiences and needs of Idaho's veterans community. The 2014 Veterans Survey was an invaluable tool. I read the comments that came in and heard loud and clear the voices of Idaho veterans. Their voices have shaped my actions on veterans policy and legislation.

[Hyperlink to Above](#)

1. Access to Benefits/Care

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[Back to Top](#)

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The VA announced Wednesday that the hospital's 11-bed inpatient psychiatric unit had stopped admitting new patients and will temporarily close next week. VA spokesman Matthew Gowan said the two patients who are currently in the unit likely will be discharged before the Sept. 4 closure.

The La Crosse Tribune (<http://bit.ly/1f10Mgz>) reports that any local veteran requiring psychiatric treatment will be transferred to VA facilities in Madison and Milwaukee, or to non-VA hospitals.

Tomah VA Medical Center also plans to suspend psychiatric admissions to its residential long-term care facility until additional staff are hired. Gowan says the nursing home will continue admitting veterans with non-psychiatric needs.

Additionally, hours for the Urgent Care clinic will be permanently reduced.

[Back to Top](#)

1.3 - The Arizona Republic: [Arizona veterans tell McCain that VA is better, but not cured at town hall](#) (27 August, Paul Giblyn, 3.2M online visitors/mo; Phoenix, AZ)

A town-hall meeting with U.S. Sen. John McCain about veterans issues started with a question Thursday.

KFYI-AM (550) radio talk-show host Mike Broomhead asked for a show of hands among veterans who had waited for more than 60 days for care at a Department of Veterans Affairs facility.

About a third of the roughly 200 people in attendance at the Burton Barr Central Library in central Phoenix raised their hands.

Broomhead asked them to keep their hands up if they had waited for 90 days, then 120 days, then six months.

“We still have a hand up. I have to tell you that the first time we did this a year and a half ago, the hands that went up were almost every hand in the room, and not many hands went down until we got to the one-year mark,” Broomhead said.

The unscientific survey underscored the overall impression of McCain and veterans in attendance: The VA has improved since last year’s national scandal broke in Phoenix. But it is not cured.

“My assessment is that the VA has made some progress,” McCain said. “But I also think, in all candor, that we’ve got a long way to go.”

Veterans from the Korean War to the post-9/11 conflicts ticked off several lingering issues. Among them: restrictions on the Veterans Choice Card, which allows some veterans to go outside the VA system for certain types of care; bureaucracy within the agency, which makes it difficult for patients to get immediate care; and an overreliance by VA personnel on narcotics to treat pain.

McCain, R-Ariz., noted a few issues of his own, saying the agency is guilty of wasteful spending. He also noted that just one VA administrator has been fired in relation to last year’s scandal, and there is still an unacceptable number of suicides by former military members.

Addressing limits on the Choice Card is his top priority, McCain said.

The program was rolled out last year in the wake of the scandal. It allows veterans to get health care from non-VA doctors. Veterans are eligible to use it if they have waited for more than 30 days for VA care and they live more than 40 miles from a VA medical facility.

The issue for many veterans in rural Arizona is that they live within 40 miles of VA outpatient clinics, but the clinics near them do not provide the full spectrum of services veterans need, said state Rep. Sonny Borrelli, R-Lake Havasu City.

There are other problems, he said. For example, often veterans in Lake Havasu City are told to access VA-affiliated dentists in Prescott, which is three hours and more than 200 miles away.

“To get your teeth cleaned, it’s only \$70 if you did it local on the fee base, but if they make you go all the way to Prescott, it’s free, but they give you \$154 in travel pay. So, I mean, it’s ridiculous,” Borrelli said.

McCain said his top priority for veterans is to improve the Choice Card program, to revise the 40-mile limitation and make it available to all veterans on a permanent basis.

“A veteran should be able to have Choice Card, and if they don’t want to go to the VA, then they should be able to get the provider of their choice. And frankly, that would save the taxpayers dollars, rather than increase it,” McCain said.

Throughout the meeting, McCain referred veterans with issues to members of his staff, who logged their information into laptop computers. Staff members met with 42 veterans during the event, said Gina Gormley, McCain's state director.

McCain said his staff has advocated for 3,500 veterans from across the country so far this year, an increase from previous years.

[Back to Top](#)

1.4 - Pittsburgh Tribune-Review: [Fix for issues vowed at Pittsburgh VA](#) (27 August, Carl Pine, 1.5M online visitors/mo; Pittsburgh, PA)

Officials at the Veterans Affairs Pittsburgh Healthcare System are vowing to fix a list of problems uncovered by agency investigators — ranging from the way health care workers clear a patient's airway to the training pharmacists receive in dispensing some forms of medication.

A review by the agency's Office of Inspector General, conducted in mid-June and published on Wednesday, found that the VA Pittsburgh must ensure that its licensed independent practitioners know how to open a pathway between a patient's lungs and a supply of oxygen if a tongue or other obstacle causes a blockage.

According to the report, 10 of a dozen practitioners surveyed lacked the appropriate skills and training to do such life-saving intubations.

In a written response to the report, Pittsburgh VA vowed to get them trained and certified in the procedures by Jan. 31.

VA Pittsburgh spokesman Michael C. Marcus added in an email to the Tribune-Review that the 12 critical care physicians “meet or exceed community standards” for emergency airway management and were fully competent to render the care before the inspectors arrived.

Last year, Pittsburgh VA physicians performed 179 emergency intubations outside of the operating room, and the hospital recorded no problems with any of them, Marcus said.

In VA's critical and intensive care units, investigators reported that the files of 30 nurses lacked documentation showing that they were competent in post-anesthesia treatment of patients. VA promised to fix that by the end of September, according to the audit.

Investigators also dinged VA Pittsburgh's pharmacy for incomplete policies and training on the safe use of automated dispensing machines. These robots distribute medications throughout a hospital, often saving time and trimming costs while cutting errors, but workers can introduce mistakes into the system by stocking mislabeled drugs or failing to monitor the effects of the doses after they've been administered.

Marcus said Pittsburgh VA was in the process of updating the policies when the auditors arrived, noting that 20 nurses tied to the program were found by the investigators to be competent at their tasks.

Pittsburgh VA also has shored up problems involving how employees are trained to respond to fires, according to officials' responses attached to the report.

Inspectors found VA Pittsburgh met requirements in three of eight key areas reviewed and also pointed to numerous things the Pittsburgh VA does very well. For example, the report cited national awards the health system earned recently for stellar joint replacement surgery and its dedication to fighting strokes and other forms of heart disease.

The Pittsburgh VA hospital network serves nearly 61,000 former military members in a region that stretches from far eastern Ohio across Southwestern Pennsylvania to Uniontown.

[Back to Top](#)

1.5 - Atlanta Journal-Constitution: [When big government can't get out of its own way](#) (27 August, 1.1M online visitors/mo; Atlanta, GA)

The shocking news came over a year ago: American veterans were dying by the dozens as they languished on lengthy waiting lists, while Veterans Administration staff falsified records to hide the problem. Almost as shocking, Congress acted within four months of the first news reports about deaths of veterans waiting for care from VA medical facilities in Phoenix.

The result, the Veterans Access, Choice and Accountability Act of 2014, is a classic example of both the need for, and the limitations of, a vast bureaucracy to give people a measure of freedom.

Each point was painfully evident last week during a field hearing of the Senate Veterans Affairs Committee, chaired by Georgia's Johnny Isakson. Those who spoke at the hearing in Gainesville on Friday demonstrated both how much pent-up demand there was for veterans' health care beyond the VA's capacity to deliver it, and how the VA itself has often gotten in the way of meeting that demand.

Central to the 2014 law its requirement that the VA arrange for private care for any veterans who would have to travel at least 40 miles or wait at least 30 days to get care at a VA facility. VA Secretary Robert McDonald, the West Point grad and former Procter & Gamble CEO who took office 13 months ago to right the ship, reported Friday that veterans' appointments are up by 7 million this year — 4.5 million of them outside the VA system. By that measure, the law is working.

But to hear the litany of problems veterans have had in getting appointments even under the new system is to wonder how many more might have been served, if the bureaucracy were better at letting people out of its grip.

Many veterans eligible for choice programs are unaware of them. Conversely, many veterans who received mailings about the programs aren't eligible.

Some private physicians are reluctant to sign on with the choice program, a couple of witnesses testified, because the VA has taken up to a year to reimburse them for care in the past. As a result, it sometimes takes veterans more than 30 days to see a private doctor.

When veterans do get an appointment, they don't always know about it. One veteran who testified Friday, Carlos Chacha, said he missed two appointments with a rheumatologist because he was never told about them. Not surprisingly, no-shows are another reason some providers avoid the program.

Perhaps the most ludicrous exchange came between U.S. Rep. Doug Collins, R-Gainesville, and Donna Hoffmeier, a program manager with a contractor hired to arrange the private appointments, Health Net Federal Services.

Even if the VA has sent Health Net a veteran's file for use in making the appointment, Hoffmeier said, the firm must first wait for a separate file confirming the veteran's eligibility.

Collins: "Can VA just send Health Net ... any veteran's file?"

Hoffmeier: "No."

Collins: "OK. So the reason they would send somebody's file to Health Net ... is because (they) are eligible for the choice program!"

Hoffmeier: "I absolutely agree with you ... (but) the contract requires us to wait for that eligibility file."

They're both probably correct. And that's a problem.

It's not a problem solved by ending the choice program to simplify matters. It's one solved by continuing to make clear that the VA's job is to ensure the service is provided, regardless of who does it.

Come to think of it, that's a lesson a lot of bureaucrats outside the VA could stand to learn, too.

[Back to Top](#)

1.6 - Star-News: [Editorial - VA plumbing mess is hurting veterans](#) (27 August, 873k online visitors/mo; Wilmington, NC)

There is no rational reason why an elderly veteran should have to go to Fayetteville to get a tooth filling replaced.

The Veterans Access, Choice, Accountability Act of 2014 was supposed to have made sure veterans have timely access to health care by allowing them to get health care in the community if they live more than 40 miles from a Department of Veterans Affairs facility. They're given a Choice card for that, but must seek approval to use it.

We have a VA Health Care Center right here in Wilmington, but it can't do dental, gastrointestinal and urology procedures because there's something wrong with the water there.

The Cape Fear Public Utility Authority issued a "do not use" notice March 23 after it found that the water inside the building had elevated levels of several heavy metals. The water had a turquoise tint.

That order was reinforced by the New Hanover County Health Department in July after an attorney for Summit Smith Healthcare Facilities, the Wisconsin-based company that leases the building to the VA, disputed that CFPUA had the authority to issue the “do not use” order.

"Samples of water collected from this facility show the presence of copper and lead at levels that present a potential health risk if consumed, used for any processes involving the preparation of food and/or beverages including the making of ice OR health care and dental procedures including the cleaning of instruments and equipment," according to the notice issued by the county health department.

As of Aug. 17, the Health Department said copper levels in the water still exceeded safe levels, although the lead content was below federal limits.

The VA is leasing the building for \$280,000 a month, which seems like a lot.

WECT, which reported the figure at \$300,000 a month, says that’s about twice the going rate for prime medical office space in Wilmington, according to local commercial real estate brokers.

The VA has refused to provide WECT with rental information for nine other VA clinics, the station reported.

The \$25 million building was funded by federal dollars earmarked by Congress.

It formally opened in April 2013. The 85,000-square-foot facility was a considerable improvement over the VA clinic on Medical Center Drive that it replaced.

The water issues emerged less than two years later.

James Hammond is 73 and has no car. He thought he could use his Choice card, which should allow veterans to access care from non-VA doctors, to get that tooth filled.

Instead, he got a voicemail run-around.

The VA hosted a “virtual roundtable” in Fayetteville. It said in describing that meeting that 300 people have chosen to seek care in the community and 75 people have opted to travel to the VA Medical Center in Fayetteville for dental, gastrointestinal and urological care.

So maybe the Choice card is working for some people.

The building’s owner has contended that the water is safe to drink, but CFPUA and the Health Department say the water needs to pass three consecutive weekly tests before they lift the “do not use” order.

We hope the origin of the water issues can be tracked down and fixed soon.

Meanwhile, the VA needs to bend over backward to make it easy for veterans to access the care they need without undue strain.

These people put their lives on the line for our country. We owe them much.

[Back to Top](#)

1.7 - Independent Journal Review (Video): [The Disturbing Thing That Happens Every Day at a VA Hospital That Treats Quadriplegic Veterans](#) (27 August, Parker Lee, 783k online visitors/mo; Alexandria, VA)

According to the Wounded Warrior Project, over 50,000 American servicemen and servicewomen have been injured in recent military conflicts.

Tragically, not all veterans receive the care they deserve, which is reportedly the case at one Veterans Affairs hospital in Memphis, Tennessee.

A series of videos recently posted to YouTube appear to show veterans from a spinal injury ward in the Memphis VA Medical Center being left entirely alone by hospital staff:

The man shooting the video, an unidentified patient, says:

“Saturday, July 11 around 7:40. Once again, we’re left to the wolves...

This happens for about 30 minutes every day.”

The man moves through the hospital wing in the video, showing it to be completely abandoned. A former employee of the Memphis VA told Fox News that this happens each evening in the hospital during a “meeting attended by all hospital staff.”

A second video appears to back up this claim:

This time, the patient says:

“This happens every day around this time. No one’s here at the front desk.

If there’s an emergency, we’re screwed.”

But this is not the first time the Memphis VA Medical Center has come under fire.

As Pete Hegseth, CEO of Concerned Veterans for America, told Fox News:

“The hospital here has been cited for longest wait times, poor care, and yet administrators have continued to receive bonuses.

These are government-run hospitals. This is government-run care. These veterans are treated like numbers, like widgets, not human beings.

[Back to Top](#)

1.8 - KSMP-TV (NBC-6, Video): [Burnout issues at St. Cloud VA, corrections underway](#) (27 August, 756k online visitors/mo; Eden Prairie, MN)

The entrance to the St. Cloud VA medical center is lined with trees and its vast green space looks like a park. But if you ask staff what it's like inside medical center, the feedback can be ferocious.

Union Vice President Jane Nygaard said the atmosphere is toxic. She is the only person who dared to speak on camera about the culture. "People are afraid," she told the Fox 9 Investigators. "If things don't get better or get turned around a bit, at some point it could impact patient care and we certainly don't want that to happen."

Privately, some doctors and nurses tell the Fox 9 Investigators it's an "incredibly abusive" atmosphere where a fear of reprisal from management runs deep. In fact, federal records obtained by Fox 9 show 26 physicians resigned from the center between 2011 and 2013.

Impact on Patient

What does this mean for the 37,000 veterans who come to the St. Cloud VA for their health care? Consider the case of Doug Larson, a legally blind vet, who served in the Marines. "I almost died," he said. "It was the worst pain I've ever had in my life."

On a Sunday night this summer, Larson was rushed to Centra Care hospital in St. Cloud. The VA doesn't have an emergency room. Doctors weren't sure if he was having a heart attack. They wanted to keep him overnight and run some follow up tests.

But Larson says he was concerned he would get stuck with an enormous bill. So he insisted on going the next morning to the St. Cloud VA where he knew he was covered.

"You look back now, I should've stayed but I thought the VA would take care of me the next day, especially with those kinds of symptoms," said Larson. But that did not happen. Larson couldn't get an appointment at the VA until Tuesday. I thought there was a lack of urgency on their part," he recalled.

The veteran's Tuesday afternoon appointment ended up being with a nurse practitioner, instead of a doctor. Medical records show no follow up tests were done to see if the severe pain Larson had experienced was related to a heart attack. An independent expert who reviewed the case for the Fox 9 Investigators, says an EKG and a blood test should have been ordered. Instead, Larson was given a prescription of Nitroglycerin to help with any future pain and he said he was in the exam room less than 10 minutes.

That same evening the pain came roaring back. His girlfriend called 911 and he was taken by ambulance to Centra Care. Doctors discovered a blocked artery and he underwent surgery to have a stent installed. The VA won't discuss the case, even though Larson has offered to sign a release authorizing them to do so. "I don't care how many veterans you talk to out there, they'll tell you the VA's cure for everything is a pill," said Larson.

According to insiders, it's not uncommon for providers to work 60 to 80 hours a week. Documents obtained by the Fox 9 Investigators show in 2013 each doctor saw a large increase in their number of patients. A survey last year of VA Centers in the region revealed St. Cloud's employees experience high burn out rates.

St. Cloud VA Response

VA management declined to be interviewed. In a prepared statement, they said during the period when 26 doctors resigned "patient safety was not compromised."

As for the turnover and burnout issues: "We have taken the review findings seriously and have instituted numerous actions to correct the deficiencies noted." Management also says patient loads for doctors are decreasing. Efforts are underway to recruit more physicians and improve the work environment.

[Back to Top](#)

1.9 - KNXV-TV (ABC-15, Video): [Phoenix VA ordered to pay \\$3.2M in malpractice case; patient claimed shoulder surgery was botched](#) (27 August, Dave Biscobing and Shawn Martin, 701k online visitors/mo; Phoenix, AZ)

A former Army doctor who was permanently injured during a shoulder surgery at the Phoenix VA won a multi-million dollar judgment, records show.

A federal judge awarded \$3.2 million in damages to Jacob Amrani. The total includes \$2.9 million in economic damages and \$300,000 in non-economic damages.

"I feel absolute vindication," Amrani said. "They did more than deny my claim. They tried to blame me. They tried to make me the villain."

The judge's order ends Amrani's three-year legal battle against the Phoenix VA Health Care System. The judgement appears to be one of the highest in recent history .

After the surgery, the VA repeatedly denied it had done anything wrong.

In a letter, VA officials wrote, "we regret that Dr. Amrani suffered complications after surgery. However, our investigation found that VA providers did not negligently injure your client."

But after a two-week trial, the judge ruled the VA's surgeon was below the standard of care in six different areas.

A VA spokesperson released the following statement: "As with any large healthcare organization, courts sometimes find that VA patients deserve compensation for medical injuries. When these legal judgments occur, VA reviews its procedures and the Court's findings to seek improvements to the health care VA delivers to Veterans."

The ABC15 Investigators profiled Amrani's case last year.

At the time, it was one of more than 200 claims filed against the Phoenix VA for wrongful death or injury since 2004.

Amrani is a former Army doctor who says a routine shoulder surgery at the Phoenix's Carl T. Hayden VA Medical Center left him without full use of his arm. It's now impossible to do most of the operations he practiced as a spine surgeon for the past 20 years, he said.

During surgery to fix Amrani's rotator cuff, a VA doctor discovered an unexpected tumor, records show.

"(The surgeon) should have stopped," Amrani said in an interview last year. "He should have absolutely stopped, and he should have either closed and sewed me up or he should have sent a small piece of the tumor for a biopsy."

That's not what happened.

"He shelled out the entire (tumor) in one piece," Amrani said.

When asked what he meant by "shelled," he said, "That means he dug it out with his fingers and it's kind of like trying to shell out an orange from its rind in one piece."

The ABC15 Investigators reviewed a consent form that was signed by both Amrani and the operating doctor before the surgery. Nowhere on the 6-page form does it discuss what to do in the event that a tumor is discovered.

The tumor ended up being benign, record show.

The doctor who performed Armani's surgery is Dr. Christopher Crandford. At the time, he was employed part-time by the VA.

He is now a full-time surgeon, records show.

His 2014 salary was nearly \$356,000, making him one of the highest paid employees in the Phoenix VA.

Last year, Amrani also filed an official complaint with the Department of Justice accusing the assistant U.S. attorney handling his case of abuse, misconduct and waste.

Before a deposition, the complaint claimed that when the attorney was asked about 40 patients who died waiting for appointments at the Phoenix VA, she responded that was "just job security" for her.

[Back to Top](#)

1.10 - WOAI-AM (AM-1200): [Deputy VA Secretary Touts Improvements in Health Care, Examines Challenges](#) (27 August, 597k online visitors/mo; San Antonio, TX)

Deputy U.S. Veterans Affairs Secretary Sloan Gibson told a group in San Antonio that the VA has taken great steps to rectify problems with care at its hospitals and medical centers, and is prepared to continue expanding programs to help veterans, News Radio 1200 WOAI reports.

Gibson spoke to the Air Force Sergeants Association.

Gibson laid out the progress that has been made in the past year, ever since a scandal showed that veterans were unable to get appointments, and appointments were often being delayed or cancelled due to hospital mismanagement.

He said today, 98% of appointments are held at the date and time scheduled.

"Average wait times almost as good," he said. "Five days for specialty care, four days for primary care, and three days for mental health care."

He said now physicians, nurses, and other medical professionals at hospitals, as well as the new 'Care in the Community' program, which extended VA medical services to small towns and rural areas, have helped drive the improvement, as has a new cooperation with Department of Defense hospitals to allow DoD doctors and facilities to care for veterans.

But he says the down side of the improvement has been the fact that more veterans are now utilizing VA care. He says when the system was in disarray, many veterans were choosing to get care at other facilities, but now that the VA system is working well again, he says outpatient visits in San Antonio, for example, are up 16%.

Gibson says there are plans in the works to improve care for veterans, especially in the veteran-rich Rio Grande Valley, largely by expanding its telemedicine and tele-mental health services.

That is one of two challenges facing the VA in the coming year, Gibson said, dealing with what is expected to be a surge in veterans from the Iraq and Afghan wars presenting with Post Traumatic Stress Disorder. Gibson says the VA takes PTSD very seriously. He says a new system has been implemented which he believes will vastly increase care, by incorporating mental health care into the traditional course of treatment.

"Often times what gets in the way of a veteran or a service member getting care is the stigma," he said. "They don't want to go to a mental health clinic."

The other challenge is to deal with the increase in female veterans. The Iraq and Afghan Wars were the first where women suffered combat injuries in large numbers, and now that the Pentagon is welcoming women into elite units like the Army Rangers, and is expected to soon open almost all combat roles to women, the number of female veterans will vastly expand.

"Part of our challenge is, the vast majority of our VA facilities, in fact the average age, is about 60 years," he said. "Back then we weren't working with women hardly at all."

He says the VA currently has no obstetrics/gynecology programs, and also must ramp up its programs to treat conditions like breast cancer.

[Back to Top](#)

1.11 - KATV-TV (ABC-7, Video): [Little Rock VA boasts improvements](#) (27 August, Elicia Dover, 396k online visitors/mo; Little Rock, AR)

Little Rock VA officials are releasing new information about the kind of care veterans are receiving.

In January of 2013 the backlog of benefits decisions at the Little Rock VA Regional Office was 5,682 claims waiting more than 125 days for a decision.

Now new data shows that number had been reduced in July of 2015 to 777 backlogged claims.

“We're thrilled. I think the biggest change was moving to a paperless system. That has cut down on the time it takes to physically move paper files from one part of the office to another, from one hospital to another,” said Lisa Breun, the Little Rock VARO Director.

Over on the healthcare side, last year the time it took to complete a specialty consultation visit was 19 days. Now they've reduced it to 7 days.

Veterans Channel 7 News spoke with Thursday say they've noticed a change in care.

“Oh yea, that's the case. It's gotten a lot better than what it was before. I don't know if it's the addition of the primary care units, but it has gotten better,” said veteran Richard Defreitas.

“They're coming along. They've still got a long way to go, but they're trying to improve everywhere,” said veteran Raymond Moore.

[Back to Top](#)

1.12 - WECT-TV (NBC-6, Video): [Tillis calls issues at Wilmington VA clinic "part of a failed system.."](#) (27 August, Jon Evans, 313k online visitors/mo; Wilmington, NC)

Senator Thom Tillis (R-NC) calls the issues with the VA medical clinic in Wilmington “part of a failed system that needs to be reformed”.

Tillis, the state's junior senator who sits on the Armed Services Committee, discussed several of the issues he has seen in the Department of Veterans Affairs since taking office in January. When asked about the veterans having appointments cancelled, and procedures postponed because of continued contaminated water issues at the relatively new VA facility in Wilmington, Tillis called it “unacceptable”, and an example of bad processes in place across the agency.

“We've got a bloated organization at the bureaucratic level, we've got bloated policies, procedures and organizations that are the reasons why we have unacceptable wait times and outcomes for veterans,” Tillis said. “That's what I'm trying to focus on. We have a lot of problems we have to fix in the VA for the benefit of the veterans.

WECT informed lawmakers what we uncovered regarding the Wilmington clinic's finances, that the VA is locked into a 20-year contract for the clinic, and will spend \$68 million in rent over that time period. The 80,000-square-foot clinic at the Wilmington Airport is only 2-years-old, but an internal plumbing issue has made the water unsafe for drinking according to local health officials. That forced the closure of the dental, urology and GI departments for 5 months and counting.

“We've got a VA facility in Denver that was supposed to cost \$700 million, that now with overruns is over a billion dollars and is not complete,” Tillis said. “There are dozens and dozens of examples where contracting and procurement are not working. Every dollar we waste is one dollar I could be spending helping a vet and that is inexcusable.”

When told the VA redacted rent amounts and square footage information from the other leases we requested for the surrounding clinics. Tillis offered to help find out why WECT did not receive the information. "I think anytime we spend taxpayer dollars, unless it is some highly classified homeland security or defense issue where I may be able to see it only in a classified setting, we need to be able to see that," he said.

Tillis also made a promise to veterans who do not get the help they need and deserve from any VA facility.

"If you're a veteran and you need help with the VA and your first phone call doesn't satisfy you that you're headed in the right direction, call my office in Greenville," Tillis said. "We have staff there that love opening up cases and knocking down barriers for our veterans." According to Tillis' staff, the number for his office is 252-329-0371, and the contact form is tillis.senate.gov/public/index.cfm/email-me.

[Back to Top](#)

1.13 - The Leaf-Chronicle: [Veterans Voice: How to adapt to latest VA changes](#) (27 August, Sandy Britt, 264k online visitors/mo; Clarksville, TN)

The Department of Veterans Affairs often changes eligibility requirements for various VA benefits. It also routinely changes the way claims are processed in order to streamline and expedite processing. Two recent changes involve annual clothing allowance eligibility and VA evidence intake centers.

Clothing allowance

VA Prosthetic and Sensory Aids Service (PSAS) provides an array of prosthetic devices, sensory aids and other special benefits to eligible veterans. One such benefit is the annual clothing allowance for veterans who are service-connected for a disability "for which they use prosthetic or orthopedic appliances or whose service-connected skin condition requires prescribed medication that irreparably damages outer garments."

This year, however, many veterans who previously were awarded clothing allowance for certain knee or spine braces are receiving denial letters. That's because the Veterans Health Administration updated its handbook in May 2015. Before this change, any "rigid" spine or knee brace qualified for the annual allowance whether or not it was covered in fabric. Under the new guidelines, any brace that has hinges, plastic or metal that stays covered in fabric no longer qualifies.

"Examples of items that do not tend to tear and wear out clothing include: soft orthotics, transcutaneous electrical nerve stimulation (TENS) units, shoes, shoe inserts, non-specialized wheelchairs (sedentary/sitting purposes), scooters, canes, Rollator walkers, elastic/flexible braces, items with Velcro stays, hinged braces covered in fabric (metal stays covered), braces with plastic stays covered in fabric."

When a veteran applies for the annual clothing allowance, the application is sent to PSAS, which in turn submits it to the VA regional office. The regional office has an updated list of all the prosthetic products that meet the requirements for the clothing allowance. It's important for

veterans to make sure their VA medical records are kept updated as to current prosthetics or skin ointments prescribed or, if obtained from an outside provider, that current prescribed appliances or ointments are submitted with their application.

Evidence intake centers

Over the years, VA has revamped its website (va.gov) and created various tools such as eBenefits, where a veteran can create an account to have access to an array of VA information, applications and services.

Recently, in an effort to further streamline and expedite claims, VA now processes claims through two evidence intake centers, one in Newnan, Georgia (which generally covers the eastern U.S.) and the other in Janesville, Wisconsin (western U.S.). Previously, veterans' claims were sent to the VA regional office in their home state. VA has been transitioning to a paperless claims system, where all applications and medical evidence are scanned at the intake centers and sent electronically to the VA regional offices, which process and decide claims. Previously, each VA regional office processed mounds of paper, which took far longer.

However, as with any newly implemented system, there can be glitches. For example, some evidence may be missed in the scanning process and therefore could result in a denied claim. If this happens, it's often best to resubmit missing evidence, along with a statement of clarification, rather than send a Notice of Disagreement, which starts a more lengthy appeals process.

Though veterans can now file claims on their own through eBenefits, or mail or fax their own evidence to the intake center, for many it's better to work with an accredited service officer who understands the complex workings of the VA claims process and who can properly submit the claim for you and explain everything you need to know to be successful.

Sandy Britt is a Montgomery County veterans service officer.

[Back to Top](#)

1.14 - The News-Review: [Veterans share VA experiences with state official](#) (27 August, Carisa Cegavske, 245k online visitors/mo; Roseburg, OR)

Marine veteran Fred Rhodes is fed up with the Roseburg Veterans Affairs Medical Center.

Rhodes told the director of the state Department of Veterans' Affairs on Wednesday that it's tremendously difficult to get an appointment with a cardiologist.

He said he has to go to the Portland VA to see a cardiologist, and they won't get him in there for three months.

"What I want to know is how long are we going to have to put up with this crap over here at the VA?" Rhodes said. "We're going to die before we get to see a cardiologist."

On Wednesday, Oregon Department of Veterans' Affairs Director Cameron Smith held a town hall meeting at the Veterans of Foreign Wars Post 2468 in Roseburg that drew about 40

veterans. While the department Smith heads has no control over the federal VA, it does advocate for veterans at the local, state and federal levels.

Smith responded warmly to Rhodes.

“We need to bottle you up, take you to Salem, take you to D.C. ... It’s the stories like this that help move the system forward,” Smith said.

Veterans complained about doctor shortages, waits for care and bureaucracy at the Roseburg VA. One veteran said he had to wait five months for an appointment. Diana Kelley, who works at the Umpqua Community College veteran center, said she knew a veteran there who was in pain but had been waiting eight weeks to see a doctor. She said she called former Douglas County Veterans Forum President Jim Little, who called the VA director, and only then did the man receive help.

Johnny Farmer of Roseburg, a National Guard Charlie Company veteran, said he tried for 10 years to get help for post-traumatic stress disorder and didn’t get it until he reached rock bottom and called a crisis line.

“Why does it take a soldier having to call the crisis line to be able to finally get in to see somebody?” he asked.

Farmer said he also knew a Charlie Company veteran who shot himself in the face because he was unable to get the help he needed to deal with PTSD.

“It’s unacceptable, and I hear your frustration,” Smith said.

Local communities need to step up to meet that challenge, Smith said, and they also need to challenge large federal agencies like the VA to help.

Smith said PTSD is not a disorder; it’s a normal reaction to combat — the “invisible wounds of war” — and affects between one quarter and one third of returning veterans.

“I have never seen veterans more strong than when they admit they have that challenge,” Smith said.

Some veterans told Smith the VA’s choice-card system is broken. It was designed by Congress as a stopgap solution to long waits and long drives for care, and it was intended to allow veterans facing those problems to receive care outside the VA.

Veterans of Foreign Wars Post 2468 Commander Mike Eakin blamed both the VA and its private insurance partner Tri West for the problems veterans have encountered while trying to use the choice cards.

“It is definitely not working. It is a fiasco, and one’s blaming the other,” Eakin said.

Smith said he will advocate for the choice program. He also said he believes the VA hasn’t gotten its “sea legs” under the choice program.

“It is not working yet,” he said.

Evelyn Anderson, a former VA nurse and a Korean War veteran, said she believes more nurses at the Roseburg VA are doing administrative work than actually caring for veterans.

Little, who is participating on one of a handful of committees tasked with improving the VA, said he fears it will take about five years to turn around the culture at the VA.

[Back to Top](#)

1.15 - WCBD-TV (NBC-2, Video): [VA program helps veterans start new career](#) (27 August, Mayci McLeod, 221k online visitors/mo; Mount Pleasant, SC)

Getting struggling veterans back on their feet, that's the goal of a unique program at the Ralph H. Johnson VA Hospital. The first step is to help veterans find jobs, and then keep them.

Thomas Gilliard says, "I had issues in my life that I'm not too proud of."

Samuel Toomer says, "I kind of hit rock bottom."

Both Thomas Gilliard and Samuel Toomer served in the Army, but then they left, battled substance abuse. Now, they are back on their feet.

Toomer says, "This gave me an opportunity to learn the skills, and I like it."

The work for the VA through the Compensated Work Therapy Program, which helps vets translate the skills they learn in the military to civilian jobs.

Joan Dunn, Supervisor of Vocation Rehab, says, "Sometimes it's just not knowing how to go out into the community and look for work. They've always been in the military and always know where the next step is. Sometimes it's a big leap to go from a different world of the military to the civilian life."

The program helps vets who are homeless, overcoming substance abuse, or coping with mental illness. Both Gilliard and Toomer work with the Sterile Processing Services, which makes sure all of the surgical tools are properly sterilized and prepped.

Rodney Hicks, RN and Chief of Sterile Processing Services, says, "That program provides an opportunity for the staff or the veterans to gain a skill set through a one year program and we offer them a certification at the end of it at that one year and potentially a job."

The veterans tell News 2 this program gives them a second chance. They walk into the hospital with limited opportunities and walk out with a brand new career.

Gilliard says, "This is the country of second chances and they gave me a second chance and I'm really really happy and thankful for that."

Last year, the Johnson VA Medical Center helped 280 veterans through the Compensated Work Therapy program. About half of those were homeless at the time they joined.

Dunn says, "Every day I see at least one or two veterans that I've worked with throughout the years that are permanent employees here. I just think it's an opportunity for the Department of Veteran Affairs, and the VA Medical Center specifically to give back."

The VA also has employment opportunities with the CWT program in housekeeping and food service, but the Sterile Processing Services path is the only training program that ends in a national certification.

[Back to Top](#)

1.16 - WABE-FM (NPR-90.1, Audio): [Ga. Sen. Isakson Talks Candidly On Veterans' Health Care, More](#) (27 August, Shelby Lin Erdman, 213k online visitors/mo; Atlanta, GA)

Military veterans are still running into problems scheduling timely doctor's appointments, either with the Veterans Administration or a new alternative option called the Veteran's Choice Program.

Basically, the new Choice Program allows eligible veterans who live more than 40 miles away from a VA health care facility or can't get an appointment scheduled within 30 days to arrange an appointment with a Medicare-approved doctor, who can schedule an appointment earlier and is closer to the veteran's location.

When it comes to general health, primary or diagnostic care or illness and disease among veterans, the number of appointments this year alone have increased by millions, Georgia Republican Sen. Johnny Isakson, the chairman of the Senate Veterans Affairs Committee, said during an interview on "Closer Look."

"The good news is veterans have a choice. The pressure on the VA has generated 7 million more appointments in the first eight months of this year, which demonstrates the pressure we've got to meet the demand we have in the Veterans Administration today," Isakson said.

Isakson thinks the program is working better, as far as meeting the demand for veterans' health care, but he acknowledged there are still some problems with the Choice Program that need addressing.

"Prompt pay to the doctors, in terms of doctors being satisfied with the program, in terms of there being the doctors available in rural communities that these guys really need to get, that's still being worked on. We're still working on that," he said.

"We got plenty of challenges at the VA," he added.

The Veterans Health Administration is the largest integrated health care system in the U.S. with more than 1,700 sites for veterans' care, according to the agency's website. The VA serves almost 9 million veterans a year.

Isakson discussed veterans' health care, VA leadership, how he's handling his recent Parkinson's disease diagnosis and more on "Closer Look."

[Back to Top](#)

1.17 - WVVA-TV (NBC-6, Video): [VA Center eager for even more Veterans to access benefits](#) (27 August, Courtney Davis, 170k online visitors/mo; Bluefield, WV)

For many veterans in the area, using their VA benefits has not always been easy. Which is why veterans with the VA like Darin Dowdy spend their time talking to veterans to explain what the VA can offer.

"We try to go out in the areas in the community and outreach to those veterans needing assistance in places they may never have even heard of the VA or what they could be eligible for," says Dowdy.

Dowdy says there are so many benefits and branches of the VA, he would have been overwhelmed himself if it wasn't for other veterans.

He and other VA veterans visited the clinic in Princeton on Thursday to answer questions fellow veterans had about their benefits. Something that veteran Linda Besenyei says was extremely helpful.

"I was surprised that there is going to be so much more that they could do for me," says Linda. "That I do have some options now,

Besenyei says she hasn't used her VA benefits for years, but thought it would be better to re-enroll as she got older.

"I'd like to get back in the system so that if something does show up that's really critical, whatever, it can be taken care of with the VA."

And Dowdy says the more veterans that come out the better it will be.

"The more people that will use these facilities then it will justify them expanding to a larger facility possibly down the road," says Dowdy. "Or providing more services, so the more the merrier. Which means more benefits here for the veterans."

Dowdy says it is extremely important if you are a veteran to even just come in for a yearly check up, so the VA can receive the maximum amount of funding and help as many people in the area.

[Back to Top](#)

1.18 - Manteca Bulletin: [Ripon Legion opens veterans' center](#) (27 August, Glenn Kahl, 65k online visitors/mo; Manteca, CA)

The Allen Bugbee Veterans' Center in downtown Ripon held a soft opening this week allowing Congressman Jeff Denham to be part of the festivities while he was on a session break.

The facility is located at 201 South Stockton Avenue across from the Ripon Consolidated Fire Department. Denham presented the center with an American Flag that flew over the Pentagon on Veterans' Day in 2013. He also provided the center with a computer, keyboard and printer that had been used by his Washington office staff that was replaced with a new computer recently.

A more formal ribbon cutting is being scheduled by the Ripon Chamber of Commerce for the entire community in the next few weeks, according to chamber President Tamra Spade.

Post Commander Ernie Tyhurst said the Ripon Post has been working on the idea of providing a place for returning military personnel to gather in comfort for the last couple of years and hoped they could find something in the downtown area.

The center on Stockton Avenue is directly across the street from the American Legion Hall that is often rented out to community when the Legion doesn't have anything scheduled on their calendar.

Bugbee was a past commander of the Ripon Clinton McCausland American Legion Post 190. Bugbee along with his wife Fern were very involved in Legion activities some 40 years ago. Following his death in 1995 his wife reconstructed his trust giving an estimated \$100,000 to the Ripon Post — \$40,000 of that amount has been used in the construction of the veterans' center.

The Bugbee home was located next to that of Clinton McCausland's sisters, acting as their support until they passed away. The Bugbees didn't have any children. Fern was very involved in music and was very proficient on her violin.

Past American Legion Commander Ken Lawson put it succinctly when he explained the reasoning for their \$40,000 rehab of the former George's Bike Shop.

"We expect to see a new generation of returning vets coming back from war needing to be in a family atmosphere and among friends," he said.

Virginia Wimmer, San Joaquin County's Veterans Service Officer was also present for the ceremonies. She is planning an upcoming dinner for the returning GI's in Ripon.

Ripon's is the only Veterans' Service Center in San Joaquin County, she noted, that will be central to benefit workshops beginning later in the year that will also see case work being addressed.

The building has been completely refurbished from the restrooms to the lounge area with a large TV and reclining rocker recliners. There is also an up-to-date pool table and offices to the back of the building.

Past Commander Ken Lawson is part of Jeff Denham's Veterans Committee and will serve as a liaison with regional Veterans Administration offices assigned to resolving veterans' issues. The Ladies Auxiliary members have donated \$500 toward the new flagpole outside the front of the building.

Commander Tyhurst said he hopes the opening of the service center might lead to other facilities opening throughout the county in the near future.

[Back to Top](#)

1.19 - WJHG-TV (NBC-7, Video): [Two New Military Health Clinics To Benefit Bay County](#)
(27 August, Samantha Read, 61k online visitors/mo; Panama City, FL)

The Department Of Veteran Affairs is partnering with the Navy to bring two new medical clinics to Northwest Florida.

Engineers say the clinics will benefit a lot of people.

Stephanie Cantrell is retired from the Air Force, and said she's looking forward to not driving all the way to Pensacola for her doctor's appointments.

The new clinics being built on Magnolia Beach Road in Panama City Beach are five times bigger than the current outpatient facility at Naval Support Activity.

Christopher Phillips, the Project's Manager said, "Although they're separate projects, they're integrated. They're integrated utility wise, parking lot wise, you know one integrated campus."

One clinic will be called "Panama City Beach Veteran Outpatient Clinic" and the other the "Department of Naval Branch Health Clinic."
Each clinic will see approximately 30 patients a day.

"The VA clinic is your typical primary care clinic," said Phillips. "Your typical primary care and dental services."

They will also have a laboratory, radiology and a pharmacy.

Project employees believe there will be shorter wait times for patients.

"You don't always get to see the doctor at your appointed time," said Cantrell. "I've waited over an hour past my appointed time so it's a full day."

The new complex's location means not having to go on to the Navy Base for a doctor's appointment.

"You're not having to go through a gate, you're not having to sign in, you're not having to arrange base access," said Phillips.

Some local veterans say they find great relief in knowing elderly veterans and disabled veterans will get the care they need in their own back yard.

"When I travel to Pensacola I always look in the newspaper and check to see if there is another veteran that needs to go the same day," said Cantrell.

William Bryan, is retired from the Army and said, "It also serves as a deterrent for the veterans to seek care because many of them don't have the ability to travel to Pensacola."

The new clinics are set to open in March of 2016.

Project Manager Christopher Phillips tells NewsChannel 7 in addition to two clinics near the Navy Base a new mental health clinic for veterans on R. Jackson Boulevard is currently in the process of being refurbished and is set to open next summer.

[Back to Top](#)

1.20 - California Healthline: [VA Faces Psychiatrist Shortage Despite Spending Billions, OIG Finds](#) (27 August, 57k online visitors/mo; United States)

The Department of Veterans Affairs does not employ enough full-time psychiatrists, and those on staff are not using their time effectively, according to a report released by VA's Office of Inspector General, the Wall Street Journal reports. The findings come despite VA's multibillion-dollar investment into improving mental health care.

Background

VA in 2012 unveiled an effort to hire 1,600 mental health professionals, which included increasing pay scales to boost recruitment. The initiative came after a report released that year found wait times for psychiatry appointments were longer than one month. In addition, the report noted VA had a high number of vacancies for psychiatrists.

In 2014, VA Secretary Robert McDonald announced an additional hiring initiative as part of a broader VA reform measure (Kesling, Wall Street Journal, 8/25).

Report Findings

VA's OIG found that VA psychiatrist appointments have increased by 10% since 2012, while the agency's spending on psychiatrists has increased by about 15%, indicating waste, the Washington Times reports.

According to the report, VA health clinics prioritized meeting broad hiring goals instead of hiring a sufficient number of mental health professionals (Shastry, Washington Times, 8/25). Further, VA's OIG noted that VA has not developed effective hiring goals, nor has it developed a system that effectively manages psychiatrists (Wall Street Journal, 8/25).

In addition, the report noted that, at several clinics, psychiatrists performed duties other than providing patient care. According to the report, about one-quarter of VA facilities could have better used psychiatrists' clinical time to care for veterans during fiscal year 2014. The mismanaged time accounted for almost \$113.5 million in psychiatrists' salaries. VA's OIG wrote, "Over the next five years, this clinic time not used for patient care would equate to over \$567 million if clinic management is not strengthened now" (Washington Times, 8/25).

VA concurred with the findings and said it already has started to address the issue by:

- Requiring mental health providers to meet certain productivity targets; and
- Creating staffing benchmarks for VA facilities (Wall Street Journal, 8/25).

[Back to Top](#)

1.21 - WGXA-TV (FOX-24): [VA hospice center opens at Carl Vinson](#) (27 August, Kathryn Sheperd, 53k online visitors/mo; Macon, GA)

Veterans Affairs officials cut the ribbon on a brand new state-of-the-art hospice care unit at the Carl Vinson VA Medical Center on Thursday.

The Medical Center's Director Mary Alice Morro said the new unit will provide a comfortable and peaceful environment for veterans and their families.

Construction on the new building started in 2013 and cost \$4.5 million.

Once veterans are admitted into the unit, staff members will be able to exclusively meet their needs.

[Back to Top](#)

1.22 - WSAU-AM (AM-550, Wheeler News Service): [Psych unit at Tomah VA to temporarily close](#) (27 August, 29k online visitors/mo; Wausau, WI)

The Tomah Veterans Administration Medical Center is changing its psychiatric and emergency services.

The changes will address staffing shortages.

On Wednesday, the hospital's 11-bed in-patient psychiatric unit stopped admitting new patients, and will temporarily close as of next week. The two patients who are currently in the unit likely will be discharged before the September 4th closure, according to a spokesman.

In the meantime, any local veteran requiring psychiatric treatment will be transferred from the center in Tomah to VA facilities in Madison and Milwaukee, or to non-VA hospitals.

Tomah VA Medical Center also plans to suspend psychiatric admissions to its residential long-term care facility, the Community Living Center, until additional staff are hired. The nursing home will continue admitting veterans with non-psychiatric needs.

Interim Director John Rohrer says that the changes are intended to ensure the "safe, high quality care" that veterans deserve, adding that the psychiatric unit won't reopen until "we have the necessary psychiatric staff to do so safely."

In an effort to recruit the psychiatrists needed, the facility has increased the starting salary to \$240,000, the maximum amount allowed for a staff physician under the VA's pay scale.

[Back to Top](#)

1.23 - The Exponent Telegram: [VAMC opens new community building](#) (27 August, Brittany Murray, 28k online visitors/mo; Clarksburg, WV)

A new community building at the Louis A. Johnson VA Medical Center celebrated its open house Thursday to better serve patients in residential rehabilitation program.

“I think the building will serve as an area that’s more conducive to therapy and people’s accommodations,” VAMC interim Director Dr. Glenn Snider said. “It gives them an environment that’s not interrupted by other activities, and it gives them an area that they can have large meetings where all of the patients in one program can participate in an activity.”

Previously located on the hospital’s fifth floor, the residential program’s patients would have to travel to other areas and floors of the hospital for its various activities, Snider said.

Once the VAMC became accredited by the Committee for the Accreditation of Rehabilitation Facilities plans for the community building began, said Dr. Joel Vogt, section chief of community psychiatry and rehabilitation.

“One of the big ideas was the idea that we needed to have more of a home-like setting, so that when veterans came, it wouldn’t be so much like a hospital setting. It would be more like home,” he said. “We weren’t really able to do that inside the hospital, so we developed plans to make a community building so that all the group rooms and all the group activities are in one place.”

The benefit of the new community building is the ability to offer all of the program’s services in one central location.

“Before, our staff was kind of scattered in the hospital too,” Vogt said. “Now the residential staff have offices in the same building where they bring their groups and work with the patients. Nursing is here, and we’ve made arrangements to have medications be dispensed from here when patients need inpatient medicine.”

With large group therapy rooms, recreational therapies, a fitness room and a kitchen area, the community building is not only more convenient, but it allows patients to form relationships with each other, Vogt said.

“Now everyone’s in one place. They all eat their meals in one location, which helps them bond to each other, get to know each other and work with each other outside the formal therapy sessions,” he said.

Snider agreed.

“I think that the building helps keep the patients together so that they feel like they’re one program instead of various little programs,” Snider said.

The residential rehabilitation program offers different treatment options for patients, whether for PTSD, substance abuse or mental health, Vogt said.

“They each have their own core program in the morning. Then in the early afternoon, we basically have electives,” he said.

With an assigned case manager and therapist, each patient works to develop a plan, whether it's financial assistance, getting a job or building relationships, Vogt said.

"Whatever it is they decide they need to work on, we try to help them," he said. "We try to look at the whole person — their physical health, their spiritual health and their mental health."

Recreational therapy also allows patients to attend outings in the community — from malls and special events to baseball games, golf trips and fishing trips, Vogt said.

"One, they want to get them back out around people in the community, and the other is to help them learn leisure skills," he said.

Though many patients in the residential rehabilitation program are from West Virginia or neighboring states, some have traveled from as far as New Jersey, New York, California and Alaska.

"There are a number of these scattered around the country, depending on availability and need," Vogt said. "Especially with PTSD, because there aren't that many for PTSD, they come from all over the country."

Depending on their needs and progress, patients stay at the VAMC for four to eight weeks, Vogt said.

"This program has been running for a long time," he said. "I've been here a little over six years, but it was going long before that. It's had a reputation for a number of years."

Occasionally, patients return to the program after developing other problems, Vogt said.

"The whole program operates on the idea of recovery, and the recovery idea is that it's not linear," he said. "You're going to be up and down, back and forth. People get to their recovery in all kinds of ways."

The development of the new community building was a long time in the making for the VAMC.

"A lot of people worked diligently to get this done — contracting staff, facility staff and a lot of our mental health staff," Snider said. "Counselors, psychologists, nurses, physicians all collaborated to design this so it's a therapeutic environment for our veterans."

The community building is only the first part of a plan for the residential program, Snider said.

"We have plans to build a second building, which will be a villa where veterans will be able to stay at night," he said. "I don't have any dates for the villa, but we do have plans to build one."

Snider believes that the new community building will be of great benefit to the VAMC.

"The visual impact is welcoming, and the building and the staff that we've been able to bring on will attract more patients to the program, and that's our goal — to serve as many patients as we can," he said.

[Back to Top](#)

1.24 - KUNM-FM (NPR 89.9, Native American Calling, Audio): [Thursday, August 27, 2015 – Access to Health Care for Veterans](#) (27 August, 12k online visitors/mo; Albuquerque, NM)

Last year, the U.S. Department Veterans Affairs was heavily criticized for inadequate medical care and falsifying documents about wait times for veterans who needed to see a doctor. Secretary of Veterans Affairs Eric Shinseki resigned amid the scandal. Congress later passed the Veterans Choice and Accountability Act of 2014. Are veterans getting the health care they need today? What has the VA done to improve care for Native veterans?

Guests:

Candy Klumpp (Muscogee Creek) – Native American nurse navigator at the U.S. Department of Veterans Affairs

Marvin Trujillo (Laguna Pueblo) – chairman of the Southwest Native American Veterans Association

Mary Cully (Seminole Nation of Oklahoma/Creek) – tribal relations specialist at the US Department of Veterans Affairs

Kristin J. Cunningham – VA Chief Business Office, Director, Business Policy.

[Back to Top](#)

2. Ending Veterans' Homelessness

2.1 - The Wall Street Journal: [Connecticut Ends Chronic Vet Homelessness, Federal officials say it's the first state to do so](#) (27 August, Joseph De Avila, 37.5M online visitors/mo; New York, NY)

The federal government designated Connecticut on Thursday as the first state in the U.S. to end chronic homelessness among veterans.

In a statewide survey conducted this year by the Connecticut Coalition to End Homelessness counted only 41 veterans on the streets, a drop of 45% since the previous count, in 2013. Nearly 300 homeless veterans have been placed in permanent housing under a roughly two-year push by the state.

“This is a moral obligation that we owe to all of our veterans,” said Gov. Dannel Malloy, a Democrat, at a news conference at Victory Gardens, a veterans' housing complex in Newington.

The chronically homeless are those who have been homeless for a year or on four separate occasions in the past three years. State and federal officials said on Thursday that they expect to eliminate all homelessness among veterans in Connecticut by year's end, and among civilians in the state by the end of 2016.

“It’s not that there is never going to be a homeless person again,” said Laurie Harkness, director of the Errera Community Care Center, a Department of Veterans Affairs-affiliated facility in Connecticut that helps veterans with mental-health and drug-addiction needs. “When people fall into homelessness, we have the safety net to immediately get them housed, and our goal is to get permanent housing within 60 days.”

State and federal housing vouchers provided the money to get the veterans in homes, Dr. Harkness said. New job-training and clinical services to help veterans deal with mental-health issues and addiction helped keep them off the streets, she said.

Hector Guadalupe, 55 years old, has been living in Victory Gardens for about two years, doing maintenance for the facility. He lost his home in 2008 after the financial downturn and developed problems with his heart and eyes.

He was sleeping on his sister’s couch when he was accepted into Victory Gardens.

“I probably would have been jumping from couch to couch or living in one of those homeless shelters,” said Mr. Guadalupe, who served in the Army for six years.

He hopes other states duplicate the steps Connecticut has taken. “There’s still a lot of brothers out there that need support,” he said. “We aren’t asking for freebies. We want to be part of a community too.”

U.S. Secretary of Veterans Affairs Robert McDonald said at Thursday’s news conference that getting housing is only the first step for many homeless veterans.

“It’s more important than just the roof and the house,” Mr. McDonald said. After they have homes, “then we can deal with the other things like mental illness, addiction or mental care, whatever is needed by the veteran.”

Getting veterans out of what officials call “less-than-acceptable housing” has been another priority. Wayne Dorsett, 74, and his wife Joyce Dorsett moved into Victory Gardens two years ago after living in a senior facility provided by the U.S. Department of Housing and Urban Development that they shared with residents who were alcoholics, drug addicts or mentally ill.

“It was getting to be a scary place to live before we moved here,” Mrs. Dorsett, 70, said.

She and Mr. Dorsett, an Air Force veteran who is disabled, began looking for other housing options. They are much happier now in Victory Gardens, he said.

“It’s the best place we’ve lived in since we sold the house” in 2004, Mr. Dorsett said. “If it hadn’t been for the VA, I’d be in real trouble.”

[Back to Top](#)

2.2 - POLITICO New York: [Mark-Viverito unveils nearly \\$1 million in funding to curb veteran homelessness](#) (27 August, Gloria Pazmino, 7.5M online visitors/mo; Arlington, VA)

City Council Speaker Melissa Mark-Viverito announced a \$940,000 initiative on Thursday to support veteran homeless prevention, job placement, legal and mental health services.

In an announcement at the Project Renewal homeless men shelter in Lower Manhattan, Mark-Viverito said the Veterans Services Initiative, which is included in the city's budget for Fiscal Year 2016, will fund nonprofits citywide that work with veterans and will help meet the administration's goal of ending veteran homelessness by the end of the year.

"The Veterans Services Initiative will increase access and opportunities for veterans on issues including health, education, employment, and building strong communities while providing guidance into family law, housing, public benefits, healthcare and home care, financial planning, and consumer protection," she said.

According to the Mayor's Office of Veterans Affairs, the city is home to 225,000 veterans. A recent survey found that at least 70 percent cited finding employment as their biggest challenge, and in 2013 the Food Bank of NYC reported that 70,000 veterans in the city — or 30 percent of the veteran population — relied on soup kitchens and food pantries for their meals.

In his first State of the City speech, Mayor Bill de Blasio pledged to end veteran homelessness by the end of this year, and MOVA commissioner Loree Sutton said the administration is close to meeting its goal.

Sutton said that in the last two years, the city has reduced the number of homeless veterans by 70 percent.

"We are now continuing to double down on our efforts," Sutton said. "We have less than a 1,000 to go and we are now just pulling out all of the stops and not just for an end of the year sort of grand finish — we know that the work that we are doing now is laying the groundwork for sustaining these gains."

De Blasio has had a complicated relationship with the veteran community since he took office. Activists and local groups have criticized him for not allocating enough money to their needs and for taking too long to install veteran-specific policies and to appoint new members to the MOVA board.

On Thursday, however, Sutton and Mark-Viverito, countering those charges, said that the administration had agreed to allocate more resources to MOVA so it can hire veteran service officers in the five boroughs and additional staff at the Department of Homeless Services dedicated to working with homeless veterans.

"The record is clear," Mark-Viverito said. "We are almost doubling all the resources of the office and with the enhancement and support that we are providing through this initiative of services to the veterans community it's definitely a good record. When you are putting a commitment and resources to end veteran homelessness to provide housing, obviously the record is very clear that the commitment is there."

[Back to Top](#)

2.3 - KPCC-FM (NPR-89.3, Audio): [VA housing vouchers fizzle in hot SoCal rental market](#)
(27 August, John Ismay, 4.1M online visitors/mo; Pasadena, CA)

The building manager's office was closed, but Veronica Schenkelberg and Adrian Carrillo decided to wait.

All day, they'd been hitting buzzers and knocking on doors, looking for an apartment for Carrillo, and this building showed promise--it had an apartment available, and from what Carrillo could gather online, it took Section 8 housing vouchers.

After 35 minutes, Cindy Morrison arrived to unlock the door and deliver the same statement the two had been hearing all day--no, the building doesn't take federal rent assistance vouchers.

"Not even for veterans?" Carrillo asked.

"Not for anybody," Morrison said.

And so it goes in Los Angeles, which is home to one of the hottest rental markets in the country, and also the nation's largest population of homeless veterans. For those reasons, L.A. has become the kingpin of the Obama administration's pledge to end veteran homelessness by the end of 2015.

And resources have been flowing in. Los Angeles received over 800 new Veterans Affairs Supportive Housing (VASH) vouchers in 2015. And there are close to 4,000 active leases through VASH right now in the L.A. area.

In addition, the Veterans Affairs office in Los Angeles has received an additional infusion of \$30 million for rapid rehousing programs.

It's the single biggest vet housing effort in the U.S.--yet it's not entirely smooth.

Veteran homelessness has remained essentially flat over the last two years, according to the latest homeless county. And while 3,000 VASH vouchers have been successfully used, another 700 remain on the streets, in the hands of people like Carrillo, who for all their efforts, cannot find a place to use them.

"If I would've known I was in this predicament, I would've never ever moved out here," Carrillo said. "I wake up to regret every single day."

Carrillo served six years in the U.S. Army, including a deployment to Afghanistan. After being discharged, he carved out a comfortable life in Fayetteville, just outside North Carolina's massive Fort Bragg. A combination of medical conditions left him with a 100% service-connected medical disability, which pays him about \$3,000 each month.

That was enough to rent a nice house he, his fiancé, and their 5-year-old daughter Adrea could live in. With his rent at \$650 per month he had enough left over to save for his daughter's future too.

Then, about a year ago, his mother, who lives in Whittier, underwent an emergency brain operation, and he needed to take care of her as she recovered.

Thus began Adrian Carrillo's rough entry into Southern California's rental housing market--and ultimately, homelessness.

"California is expensive," he said.

And VASH seemed like a lifesaver.

The voucher, which is much like a federal Section 8 voucher, would pay a chunk of Carrillo's rent for him. To help him find a place that'd take it, the V.A. assigned him a caseworker.

That's when he met Veronica Schenkelberg.

A licensed social worker, Schenkelberg walked Carrillo through the services available to him: medical care, counseling, job training, and job placement assistance. He was approved for a 2-bedroom apartment and handed a voucher worth about \$1,700.

"We do lease-up the veterans," Schenkelberg said. "It takes a little longer because the market is so tight, but we do. We do find housing eventually. It just takes a little bit of time."

Part of her job is selling landlords on the program. But Section 8, an anti-poverty program, has a stigma in the landlord community, said Charles Lazar, who owns five apartment buildings in Los Angeles.

He used to accept Section 8 tenants but stopped doing so long ago. He feels that some vets may create problems for his other tenants.

"What happens if someone does have mental issues that aren't being addressed?" he said. "When you have someone screaming in the middle of the night and you've got people waking up and kids that are small and they are scared, then you have to deal with it. What are you going to do?"

VASH vouchers come with supportive services and a case worker. Each vet also have a support network tasked with responding to issues around the clock.

Ed Cabrera, a spokesman for the U.S. Department of Housing and Urban Development, said he encounters Lazar's argument a lot.

"There are a lot of stereotypes out there that affect veterans who've returned from combat or current theaters, he said. " So a lot of education needs to happen."

For Carrillo, landlord education won't come soon enough.

Walking away from his fourth apartment complex of the day, he looked worn out.

The landlord there told Carrillo he did indeed have an apartment available--a 2-bedroom, which at \$1,600 per month was well within the dollar value of Carrillo's voucher--but he wasn't interested in the voucher program.

"Man, it just tears you up," Carrillo said.

Being homeless was clearly taking its toll.

"If it was just me and Lori, that's one thing," Carrillo said, referring to his fiancée. "We can hang in there. But it's very very painful when your daughter wakes up crying and she says 'this is not our house, Daddy. I want to go back to North Carolina. I want to go back to the old house.'"

Getting back into his car, Carrillo said he thought he was done looking at this point. That it's time to leave Southern California and his impossible situation, and head to Texas, where the family just might be able to find an affordable, decent home.

[Back to Top](#)

2.4 - The Washington Times (AP): [Feds: Connecticut ended chronic homelessness among veterans](#) (27 August, Dave Collins, 3.7M online visitors/mo; Washington, DC)

The federal government has declared Connecticut the first state in the country to end chronic homelessness among veterans, officials announced Thursday.

The declaration means that all known veterans experiencing chronic homelessness in the state either have housing or are on an immediate path to permanent housing, officials said. Chronic homelessness is defined as being homeless for at least one year or being homeless at least four times in the past three years.

Advocates last year estimated there were more than 500 homeless veterans in Connecticut. A statewide survey in February by the Connecticut Coalition to End Homelessness found 282 homeless veterans, including 18 experiencing chronic homelessness. Forty-one veterans were living on the streets or in other places not designated for human habitation - the lowest number in the 10-year history of the survey.

U.S. Veterans Affairs Secretary Robert McDonald and Gov. Dannel P. Malloy held a news conference Thursday with other officials at a veterans' housing development on the campus of the VA Medical Center in Newington.

They said a wide range of people, agencies and organizations have been working hard to identify homeless veterans and find housing for them in Connecticut, from the state Veterans Affairs and Housing departments to federal VA case workers to the Connecticut Heroes Project campaign. Malloy also credited the state's investments in affordable housing.

"This is everyone working together," Malloy said. "I'm surprised that more states haven't joined this effort. This is a moral obligation that we owe to all of our veterans."

McDonald added, "The federal government cannot do it by itself. Ending homelessness in this country is a team sport."

Officials said that while their declaration doesn't mean more veterans won't become chronically homeless, systems are in place to help them quickly once they've been identified. Programs have the capability to find veterans temporary housing within 30 days and permanent housing within the next 60 days.

Luis Vazquez, a 49-year-old Navy veteran, has lived at the housing development where the news conference was held for the past two years. Vazquez said he was homeless off and on for 10 years - occasionally sleeping on park benches and friends' basements - before discovering the VA programs that helped him find permanent housing.

"It's awesome," he said about Thursday's announcement. "They (veterans) served their country. They deserve it. Each and every one of them deserve it, and the help is there."

Malloy said the efforts have found permanent housing for nearly 300 veterans who were chronically homeless.

Officials credited increases in housing vouchers through a federal program run by the departments of Veterans Affairs and Housing and Urban Development. Connecticut sought and received 54 additional vouchers last fall and obtained another 75 vouchers last spring, bringing the statewide total to 755.

Connecticut is among four states and more than 70 communities nationwide participating in the Zero: 2016 initiative, a national campaign to meet the Obama administration goal of ending veteran and chronic homelessness by next year. Just under 50,000 veterans are homeless nationwide, according to Community Solutions Inc., a Washington-based nonprofit overseeing Zero: 2016.

[Back to Top](#)

2.5 - The Hartford Courant: [Connecticut Says It Has Ended Chronic Homelessness for Veterans](#) (27 August, Gregory B. Hladky, 1.4M online visitors/mo; Hartford, CT)

Earlier this year, advocates counted 41 chronically homeless veterans living on Connecticut's streets. On Thursday, state and federal officials proclaimed that housing has now been found for all those troubled vets, calling it a landmark in the effort to help veterans.

"We are the first state in the nation to end chronic homelessness among our veterans," Gov. Dannel P. Malloy said during a ceremony at a veterans' housing complex.

The governor said the state's goal is to bring an end to homelessness for veterans in Connecticut by the end of this year, and to provide housing and support services for all homeless people in the state by the end of 2016.

A February survey by the Connecticut Coalition to End Homelessness found there were 4,038 people in the state living on the streets or in places not intended as housing. The organization said that number represented a 10 percent drop in homelessness since the last survey in 2013.

Despite the progress being made, Malloy and members of Connecticut's congressional delegation who attended the event Thursday said more needs to be done to help both veterans and others living on the streets.

"This is not a 'mission accomplished' moment," said U.S. Sen. Richard Blumenthal. "We still have a lot of work to do."

A spokesman for the state Department of Housing said Thursday the state has invested at least \$3 million in rental subsidies and special services for Connecticut's homeless veterans, with the bulk of that money being allocated in the past five years.

Lisa Tepper Bates, executive director of the Connecticut Coalition to End Homelessness, said state funding has been critical in helping to "fill in the gaps" despite the millions spent by the federal government to deal with homeless veterans.

"In a lot of states," Bates said, "there is no state investment."

Bates said that, while ending chronic homelessness for Connecticut's veterans is important to those people who are now in safe housing, it is also a critical symbol demonstrating that homelessness is a solvable problem. "This proves to everybody that you can do it ... You can end homelessness, you just need to go one person at a time," she said.

She said the key is addressing the needs of each individual or family, and having the right type of housing and support services available to fulfill those needs.

U.S. Veterans Affairs Secretary Robert McDonald also attended Thursday's celebration and praised Connecticut's efforts to help homeless veterans.

"The federal government can't do it by itself," said McDonald, who has been in charge of the federal agency for barely a year. Cooperation with states and nonprofit organizations is critical, he added.

A "chronically homeless veteran" is defined by state and federal officials as a veteran who has a disability and has been homeless for a year, or three times in a four-year period.

Connecticut's February survey showed a total of 39 additional veterans who were homeless in addition to the chronically homeless vets who were found living on the streets.

Malloy said ongoing state efforts have placed "nearly 300 veterans previously experiencing chronic homelessness" in permanent housing in recent years.

Veterans' Housing Complex Shows Way Forward

Most of those veterans were provided housing using federal vouchers through the U.S. Department of Housing and Urban Development in combination with state-funded housing vouchers set aside for use by veterans, according to state officials.

The survey of Connecticut's homeless earlier this year found declines in virtually all categories of people and families living on the streets or in homeless shelters. The total number of people living in homeless shelters in February was 3,412, a 4 percent drop from the previous year.

Another 626 people were found to be living on the streets — a decrease of 32 percent from the 2013 survey by the Coalition to End Homelessness.

Thursday's event dealing with chronic homeless veterans was held on the lawn of Victory Gardens, a veterans' housing complex next to the U.S. Veteran Affairs medical facility in Newington.

McDonald said progress has been made to reduce the huge backlog in applications by veterans seeking help from the federal veteran's administration. Revelations about that backlog created an uproar and demands for reform in recent years.

According to McDonald, that backlog in applications peaked in March 2013 at more than 611,000 applications waiting to be processed by the VA. He said that number has been cut by 80 percent, and new claims are now being handled within 125 days.

Blumenthal, who is the ranking Democrat on the U.S. Senate Committee on Veterans' Affairs, said the reduction in the numbers of veterans in Connecticut waiting for their applications to be processed reflected those national statistics.

[Back to Top](#)

2.6 - WTNH-TV (ABC-8, Video): [Connecticut ends chronic homelessness among veterans](#)
(27 August, Mark Davis, 1M online visitors/mo; New Haven, CT)

Governor Malloy, the U.S. Secretary of Veterans Affairs, and members of the Congressional delegation visited with veterans at Victory Gardens veterans' housing complex near VA hospital in Newington on Thursday touting a major breakthrough.

"We are the first state in the nation to end chronic homelessness among veterans," said Gov. Dannel Malloy, D-Conn.

Also there Thursday were the foot soldiers, state and federal employees and volunteers that have made this happen by actually going out and finding homeless veterans.

"Often times, people will call a hotline if they encounter someone who's experiencing homelessness," said Dr. David Rosenthal of the Errera Community Center in West Haven.

One of those that was homeless is Brandon Bristol of New Haven.

"I was a suicide attempt; I was on alcohol and drugs, and I sobered up thanks to the help of the VA that I didn't know about five years ago," he said.

Thankfully, many veterans turn their lives around and some end up helping others. That's what Bristol is doing.

"I get down to New Haven's Green or West Haven's beach and I hand out information," he said. "I approach veterans, walk up, and ask them if they're a veteran to begin with, you know."

Bristol's efforts were singled out Thursday as having helped bring many veterans to a better place.

"I just started doing it to keep myself sober, next thing you know it's a snowball effect and I have a bunch of guys patting me on the back," he said. "It's a good feeling, that's why I do it."

[Back to Top](#)

2.7 - The Fairfield Daily Voice: [Connecticut Honored As First State To End Chronic Homelessness Among Vets](#) (27 August, 1M online visitors/mo; Norwalk, CT)

The State of Connecticut has been designated by the federal government as the first state in the nation to have ended chronic homelessness among veterans, Gov. Dannel P. Malloy announced Thursday.

A count of chronically homeless veterans earlier this year found only 41 in Connecticut, a decrease of 45 percent. A report said that through Connecticut's efforts, nearly 300 veterans previously experiencing chronic homelessness have been permanently housed.

This announcement means that all known veterans experiencing chronic homelessness are either housed or are on an immediate path to permanent housing. Also, the state will be able to rapidly place any veteran who newly experiences chronic homelessness on the path to permanent housing.

Chronic homelessness is defined as an individual with a disability who has been homeless for a period of at least one year or has experienced four separate episodes of homelessness in the past three years.

"We are truly a national leader on these issues, because our veterans deserve access to housing, quality health care, education, and career opportunities. It's our obligation to deliver for them, and that's just what we're doing as a state," Malloy said.

"We established this bold goal to end homelessness among our veterans ... because it's morally right."

U.S. Secretary of Veterans Affairs Robert A. McDonald praised Connecticut.

"President Obama has made a bold goal to end veteran homelessness by the end of this year. ... Here in Connecticut, you've responded to that challenge by helping the most vulnerable homeless veterans find permanent housing," McDonald said. "Americans understand and believe, as I do, that no one who has fought for this country should have to fight to keep a roof over their head."

The primary resource for housing veterans experiencing chronic homelessness are vouchers provided through the Department of Housing and Urban Development-Veterans Affairs Supportive Housing program.

"VA CT and its homeless programs are pleased to be working with such a rich array of accomplished and committed partners to address the disgraceful issue of homelessness among our country's veterans," said Connecticut Veterans Affairs Commissioner Sean Connolly. "We are proud of our results as we again lead the country in addressing complicated social issues."

[Back to Top](#)

2.8 - WVIT-TV (NBC-30, Video): [NBC Connecticut News at 5:30](#) (27 August, 416k online visitors/mo; West Hartford, CT)

This three-minute clip reports on the announcement that Connecticut may have become the first state to meet a White House goal of ending chronic Veteran Homelessness by year's end. The state claims that all known homeless Veterans had already been housed or are on their way to being housed. This clip includes remarks made by Secretary McDonald at a press conference.

[Video Clip](#)

[Back to Top](#)

2.9 - Minnesota Public Radio (Audio): [Again this year, mayors aim to end vets' homelessness](#) (27 August, Josh Marcus, 412k online visitors/mo; Saint Paul, MN)

In this next installment of MPR News' Young Reporters Series, Josh Marcus examines an effort to help homeless veterans in the Twin Cities.

The mayors of Minneapolis and St. Paul fell short of their goal to end veterans' homelessness in the Twin Cities last year. But officials think they're on track to do it this year.

When Mayors Betsy Hodges and Chris Coleman announced the goal in January 2014, federal data showed 204 homeless veterans in the metro area. Fifty-nine-year-old Jeff Pert joined that list last December. For 10 years he lived in a shed in Minneapolis. When the shed's owner died, Pert, a Coast Guard veteran, moved to a homeless shelter.

Pert never considered himself homeless, but federal definitions said he was, for the last 10 years. His social worker at the Department of Veterans Affairs connected him to a subsidized apartment in Minneapolis. It's in the Emanuel housing development in Minneapolis' Mill District.

"After living for seven weeks in basically a church basement with 50 other guys, all I was hoping for was a place with a door that I could shut and have some privacy," Pert said. "So Emanuel was that and a great deal more. It far exceeded my expectations."

The Minnesota Department of Veterans Affairs says 107 homeless vets have found housing since last December. But it has also identified 198 who are still homeless in Hennepin and Ramsey counties. Overall, that's just six fewer than when the mayors made their pledge more than a year ago.

But in a way, officials have been victims of their own efforts to put a spotlight on the problem. The Minnesota VA created a digital registry that tracks every homeless veteran identified in each region of the state. That's how Pert got his apartment. Minnesota VA officials say the registry provides a clearer image of veterans' homelessness than they've ever had.

What that image reveals is that the problem is bigger than people thought. Roughly 50 homeless veterans join the registry each month.

"We have certainly good contacts in our shelters, in our affordable housing programs," said Nancy Homans, policy director for St. Paul. "We have outreach advocates who talk to folks who are on the street. So I think we probably thought that there would be a period of identifying homeless veterans that would go very quickly."

"We still are identifying some every month."

Eric Grumdahl, special adviser on ending veterans' homelessness for the state and the Minnesota VA, said government agencies, social service providers and outreach workers meet twice a month. They go down the list, veteran by veteran, creating a housing program for each one.

"We know every veteran by name," Grumdahl said. "These are not statistics any more. They're not abstract numbers. ... We really are working with each individual veteran. We understand their story. We understand what they're aspiring and looking to do and also that we've got the right array of supports available to help them achieve those goals."

But barriers to housing homeless vets remain. For instance, there are still stigmas attached to homeless people that make some landlords hesitant to rent to them.

Despite the challenges, officials say they are confident their new approach will make veterans' homelessness brief, especially if more people have experiences like Jeff Pert. The Minnesota VA says the metro area will soon be housing homeless vets faster than new ones are found. That means the Twin Cities might just reach the mayors' new goal: ending veterans homelessness by the end of this year.

[Back to Top](#)

2.10 - The Hour: [Norwalk helps CT end chronic homelessness among veterans](#) (27 August, Robert Koch, 190k online visitors/mo; Norwalk, CT)

Connecticut has become the first state in the nation to end chronic homelessness among veterans and Norwalk lent a hand in the effort, according to officials.

"There are no veterans in our shelter now. Because of the resources that have been invested in this important cause the veterans are rarely in our shelter long; we have moved them to homes very quickly," said Jeannette Archer-Simons, executive director of Open Door Shelter in Norwalk. "When any veteran shows up, chronically homeless or not, we make a call and within 24 hours they can be housed. That has happened seven times in the past year."

On Thursday, Gov. Dannel P. Malloy announced that Connecticut had been designated by the federal government as the first state in the nation to have ended chronic homelessness among veterans.

Chronic homelessness is defined as a person with a disability who has been homeless for at least one year or has experienced four separate episodes of homelessness in the past three years.

The designation means that veterans experiencing chronic homelessness are either housed or are on an immediate path to permanent housing, according to Malloy's office.

"We have set a high bar -- and with today's announcement, we're on our way to achieving it," Malloy said in a statement. "We are truly a national leader on these issues, because our

veterans deserve access to housing, quality health care, education, and career opportunities. It's our obligation to deliver for them, and that's just what we're doing as a state."

Last year, Malloy laid out a plan to end veterans' homelessness by 2015 through, among other measures, providing \$600,000 in grants to area housing agencies for employment specialists and job developers to get veterans back into the workforce.

In Norwalk, former Mayor Richard A. Moccia, a U.S. Air Force veteran, helped launch the city's Ten-Year Plan to Prevent and End Homelessness, which was modeled after a federal report released in June 2010.

Mayor Harry W. Rilling, a U.S. Navy veteran, has continued the effort.

"As mayor of Norwalk, I signed on to a pledge to end chronic veteran homelessness by the end of this year, and to end all chronic homelessness in our community by the end of 2016," Rilling said Thursday. "I am proud to report that we have already met our first goal of ending chronic veteran homelessness here, as (have) other communities have across the state. We are the first state in the country that can make this announcement."

Rilling said he looked forward to a similar announcement next year "when we end all forms of chronic homelessness."

Adam D. Bovilsky, Norwalk's human relations director and co-chairman of Opening Doors of Fairfield County, said the designation came as no surprise to those working locally to end homelessness among veterans.

"In our own community here, both in greater Norwalk and lower Fairfield County, for some time we have been very close to zero chronically homeless veterans, so this did not come as a surprise to us here," Bovilsky said.

Bovilsky credited the U.S. Department of Housing and Urban Development's (HUD) Veterans Affairs Supportive Housing, which combines housing vouchers with case management and clinical services, for helping Connecticut achieve the designation.

The designation came from the United States Interagency Council on Homelessness, which includes HUD, the U.S. Department of Veterans' Affairs and other federal agencies, according to Malloy's office.

"President Obama has made a bold goal to end veteran homelessness by the end of this year, and states and cities across the country are committed to making sure every veteran has a safe and stable place to call home. Here in Connecticut, you've responded to that challenge by helping the most vulnerable homeless veterans find permanent housing," U.S. Secretary of Veterans Affairs Robert A. McDonald said in a statement. "Americans understand and believe, as I do, that no one who has fought for this country should have to fight to keep a roof over their head."

Malloy credited the Reaching Home Veterans Workgroup for coordinating the effort. The workgroup includes HUD, the U.S. Department of Veterans Affairs, the Connecticut Department of Housing, the Connecticut Heroes Project, Connecticut's Supportive Services for Veteran Families, the Connecticut Coalition to End Homelessness and the Connecticut Department of Veterans' Affairs.

U.S. Sen. Richard Blumenthal, D-Conn., said the designation reflects "a remarkable and relentless commitment to combating veteran homelessness.

"I commend the advocates and leaders who made it possible," Blumenthal said. "But now is not the time to rest on our laurels or unfurl a 'mission accomplished' banner -- we must recommit to continuing this fight together. Combating the underlying causes of homelessness -- lack of jobs, skill training, health care, particularly treatment for post-traumatic stress and other invisible wounds of war -- remains an unaccomplished goal. We can, and will, do more to help our veterans."

[Back to Top](#)

2.11 - HamletHub – Wilton: [Gov. Malloy Announces CT is 1st State in America to End Chronic Veteran Homelessness](#) (27 August, Gov. Dannel Malloy, 147k online visitors/mo; Ridgefield, CT)

Governor Dannel P. Malloy today announced that the State of Connecticut has been designated by the federal government as being the first state in the nation to have ended chronic homelessness among veterans.

Last year, Governor Malloy announced several initiatives aimed at combatting veteran homelessness with the goal of ending homelessness among veterans by the end of 2015. The state has since made major investments in housing, becoming a national leader for its work.

Ending chronic homelessness among veterans is a milestone for Connecticut in its efforts to end homelessness entirely among veterans by the end of the year. Connecticut is one of just a handful of states designated for, and participating in, the Zero:2016 initiative, which aims to end all chronic homelessness by the end of next year. Today's announcement means that all known veterans experiencing chronic homelessness are either housed or are on an immediate path to permanent housing, and that the state will be able to rapidly place any veteran who newly experiences chronic homelessness on the path to permanent housing. Chronic homelessness is defined as an individual with a disability who has been homeless for a period of at least one year or has experienced four separate episodes of homelessness in the past three years.

"We have set a high bar – and with today's announcement, we're on our way to achieving it. We are truly a national leader on these issues, because our veterans deserve access to housing, quality health care, education, and career opportunities. It's our obligation to deliver for them, and that's just what we're doing as a state," Governor Malloy said. "We established this bold goal to end homelessness among our veterans not because it's good for our economy and makes communities stronger, but because it's morally right. Ending chronic veteran homelessness is just another step forward and another marker of progress towards reaching our goal of ending all veteran homelessness by the end of this year."

"President Obama has made a bold goal to end veteran homelessness by the end of this year, and states and cities across the country are committed to making sure every Veteran has a safe and stable place to call home. Here in Connecticut, you've responded to that challenge by helping the most vulnerable homeless Veterans find permanent housing," U.S. Secretary of Veterans Affairs Robert A. McDonald said. "Americans understand and believe, as I do, that no

one who has fought for this country should have to fight to keep a roof over their head. This progress would not be possible without the partnerships that have been built here in Connecticut and across the nation; partnerships across the federal government, with state and local governments, with non-profit organizations and with the private sector. This is not a static challenge; it is an ongoing challenge and we will keep at it because that is what the men and women who have served our nation have earned and deserve.”

Connecticut reached this milestone through the coordinated leadership of the Reaching Home Veterans Workgroup, an unprecedented collaboration among key stakeholders around this state, which includes: the U.S. Department of Veterans Affairs (VA), the Connecticut Department of Housing (DOH), the Connecticut Heroes Project (CTHP), the U.S. Department of Housing and Urban Development (HUD), Connecticut’s Supportive Services for Veteran Families (SSVF) grantees, the Connecticut Coalition to End Homelessness (CCEH), the Connecticut Department of Veterans’ Affairs (DVA), and the Partnership for Strong Communities – all working together with other community-based providers.

“The historic work being done in Connecticut to combat homelessness, especially among veterans, is having a tremendous impact on people’s lives,” Lt. Governor Nancy Wyman said. “We are committed to ensuring that veterans and their families who are in need have access to the programs and services that will help rebuild their lives, rejoin the workforce, and successfully establish themselves in our communities.”

The designation by the federal government comes in response to the state’s application to the United States Interagency Council on Homelessness, which was reviewed by the U.S. Department of Veterans’ Affairs, the U.S. Department of Housing and Urban Development, and other federal agencies and organizations after a report was submitted in June. During the 2015 point-in-time count, only 41 veterans experiencing homelessness were counted on the streets or in other places not intended for habitation – a decrease of 45 percent since the last unsheltered count in 2013.

Through Connecticut’s efforts, nearly 300 veterans previously experiencing chronic homelessness have been permanently housed. The primary resource for housing veterans experiencing chronic homelessness are vouchers provided through the Department of Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) program. The HUD-VASH program combines rental assistance from HUD with case management and clinical services from the VA. Connecticut applied for and received 54 additional HUD-VASH vouchers in the fall of 2014 and also received another 75 vouchers this past spring 2015, bringing our statewide total to 755. The federal rental assistance provided through this partnership are in addition to the state RAP vouchers that have been set-aside for veteran use.

Connecticut’s recent investments in affordable housing totals almost one billion dollars. Since 2011, the state has created 6,150 affordable housing units, with an additional 2,908 affordable units under construction, and another 5,255 additional units committed to funding.

“Governor Malloy has been a tireless advocate for the homeless community and I am proud that he has made housing such a central part of his administration,” Connecticut Department of Housing Commissioner Evonne Klein said. “We are fortunate in Connecticut to have built a strong collaboration of partners all working together to end veteran homelessness. What we know is that when we address an individual’s housing needs it will have a lasting and positive impact on that person’s overall well-being for years to come.”

Connecticut Department of Veterans Affairs Commissioner Sean Connolly said, “This is a proud moment for Connecticut Veterans as the culmination of hard work and true determination by our leadership has brought us to this point in history where we have ended chronic Veteran homelessness in the state. We will continue collaboration efforts and approach Veteran homelessness with a multipronged strategy of support services, keeping in mind the very real and very attainable goal to end it once and for all.”

“This important milestone reflects a remarkable and relentless commitment to combating veteran homelessness and marks a significant step. I commend the advocates and leaders who made it possible,” U.S. Senator Richard Blumenthal said. “But now is not the time to rest on our laurels or unfurl a ‘mission accomplished’ banner – we must recommit to continuing this fight together. Combating the underlying causes of homelessness – lack of jobs, skill training, health care, particularly treatment for post-traumatic stress and other invisible wounds of war – remains an unaccomplished goal. We can, and will, do more to help our veterans.”

“Today’s announcement is the result of years of hard work on the ground to end chronic homelessness among veterans,” U.S. Senator Chris Murphy said. “We’ve come a long way from when I brought federal officials to Waterbury in 2009 to show them that veterans were living under bridges and in the woods. This is a significant victory for the state of Connecticut. We invested our resources in the right programs – from the HUD-VASH and other federal programs, to better access to health care and social services – and we have proven that when federal and state policymakers collaborate with service providers and advocates, the outcomes can be life-changing. Ending chronic homelessness for veterans has been a top priority for me since I was first elected to Congress, because the brave men and women of our armed forces – who have served and sacrificed for our country – should never be without a home. I’ve always said that one homeless veteran is one too many, and today’s announcement means that this goal has become closer to a reality. Connecticut’s story of success should be a model to end chronic veterans homelessness across America.”

“No one deserves to live without housing – especially our veterans. They have sacrificed so much for the safety of our nation, and it is our moral obligation to ensure they receive the support they need when they come home,” Congressman John Larson (CT-1) said. “I commend Governor Malloy, the Department of Veterans’ Affairs, and the Department of Housing and Urban Development for their commitment to our veterans. Never before has any state been able to declare an end to chronic veteran homelessness. This is a historic moment, and one that makes me incredibly proud to call Connecticut home.”

“Ensuring that no veteran goes without housing after returning home from the battlefield is part of the sacred compact we have with those who defend our freedom. Governor Malloy and the State of Connecticut deserve praise for their dogged efforts to earn this significant designation,” Congressman Joe Courtney (CT-2) said. “This is a vital issue on which Connecticut leaders will maintain their vigilance, and I will continue my efforts in this field, which included working with veterans advocates for supportive housing in Jewett City.”

“As a nation, we have an obligation to ensure that, at the very least, the brave men and women who serve our country have a place to call home,” Congresswoman Rosa DeLauro (CT-3) said. “We have to be sure we are doing everything possible to facilitate the smoothest possible transition from the battlefield to civilian life. It makes our communities stronger, gives families a solid foundation and is the moral thing to do. Today’s announcement is thanks to the people in Connecticut who are working tirelessly to end veteran homelessness.”

"Today's announcement is great news for Connecticut's veterans that put their lives on the line to protect our country and way of life. We know that with safe, stable housing in place, these brave men and women will get the healthcare, education and jobs they have earned and deserve," Congressman Jim Himes (CT-4) said. "Connecticut has taken a bold and comprehensive approach to fighting homelessness, setting ambitious goals and working across all levels of government, housing authorities and private organizations to reach them. I applaud Governor Malloy on today's achievement and commit to working tirelessly until all veterans live in a place they can call home."

"In Connecticut, we are doing the right thing for our veterans who have suffered with chronic homelessness, and I commend Governor Malloy for making this critical issue a key priority," Congresswoman Elizabeth Esty (CT-5) said. "Today's news marks a historic turning point for our state and for our veterans. Our veterans have sacrificed so much serving our country, and they deserve access to benefits that they have earned, including housing and high-quality healthcare. In Congress, I will continue working to ensure that all veterans have the support they need to live healthy, successful lives."

"Today we are celebrating what can happen when federal, state and communities work together to better care for our citizens," Dr. Laurie Harkness, Founder and Director of VA Connecticut Healthcare System's Errera Community Care Center, said. "VA CT and its homeless programs have been and are pleased to be working with such a rich array of accomplished and committed partners to address the disgraceful issue of homelessness among our country's Veterans. We are proud of our results as we again lead the country in addressing complicated social issues."

[Back to Top](#)

3. Ending the Claims Backlog

3.1 - AL.com: [U.S. Rep. Bradley Byrne blasts VA data showing a reduction in claims backlog as 'self-serving propaganda'](#) (27 August, John Sharp, 5.5M online visitors/mo; Birmingham, AL)

U.S. Rep. Bradley Byrne blasted the Department of Veterans Affairs Wednesday for releasing what he says is "self-serving propaganda" about a reduction in disability claims older than four months.

"I don't believe a bit of it," Byrne said. "They play games on how they get rid of their backlog. They will deal with a claim when, in essence, they just turned it down and it will go into their appeals process, which by the way, is really backed up."

He added, "I don't buy a bit of it."

Byrne's comments come after media reports cited a VA official who said the department cut its case backlog of claims older than 125 days from a record 611,000 disability claims in 2013 to under 100,000.

Allison Hickey, the VA's undersecretary for benefits, was quoted by the Associated Press saying the current backlog of 98,535 claims older than 125 days is the lowest since the agency started measuring the claims backlog in 2007.

The reduction was described as a "historic milestone."

"We're still handling a very large number of cases in our office with the VA across the board on everything," Byrne said. "I haven't seen an improvement at all in their performance."

A VA spokesperson did not respond to a request for comment.

According to reports, the improvements were credited to mandatory overtime for employees within the benefits division that has been in effect for three years.

Hickey also attributed the reduction of lengthy claims to "hard work" at the Veterans Benefits Administration, an improved computer system and a willingness of VA doctors and nurses to provide veterans with medical examinations needed to support disability claims.

"They will put stuff like that out there to convince the public and people like me that they've made a change," Byrne said. "What I'm seeing from Congress and directly through my office, things have not gotten better."

Byrne has focused on veterans health issues since he took office in late 2013, particularly focusing on ways to reduce wait times for veterans seeking care.

Byrne pushed a measure through the U.S. House in April to prohibit the VA from moving money from the VA Card Choice Card program to other accounts. The card program, created last year, lets veterans who have been waiting longer than 30 days for care or who live more than 40 miles from a VA center to seek private care.

Byrne has been critical of a VA provision that limits where a veteran can receive care if they live 40 miles from any VA facility of any kind. If a veteran lives 40 miles from a VA facility, they are not eligible for private care, Byrne has said.

There are 62,000 veterans living within Byrne's congressional district.

He said it can be problematic in Mobile, where a VA outpatient clinic only provides minimal services. Despite numerous hospitals in the city, veterans have to travel to Pensacola or Biloxi for major surgeries.

The VA has been under scrutiny since last year after national news reports surfaced showing that at least 40 U.S. military veterans died while waiting for care at the Phoenix, Ariz., facilities.

An inspector general's investigation showed problems at VA regional offices throughout the country.

In 2013, the average benefits claim at the downtown St. Louis regional benefits office was 171 days.

U.S. Rep. Ann Wagner, R-Mo., who represents the St. Louis area, said there have been improvements largely because "we went crazy about it" and had to "stay on them."

"I'm still not pleased in many of these locations, they have too many acting directors and not enough stability," Wagner, who was in Mobile Wednesday, said. "Our veterans are precious to us. They should have the best care we can possibly provide."

She added, "I'm pleased by some of the progress, but they have a ways to go."

[Back to Top](#)

3.2 - KPCC-FM (NPR-89.3, Audio): [VA improving benefits system just as veterans flood Los Angeles](#) (27 August, John Ismay, 4.1M online visitors/mo; Pasadena, CA)

The Department of Veterans Affairs has made major headway getting benefits to former service members quickly, officials say. The news comes a time California is expecting an influx of thousands of new veterans.

In L.A., the average wait time for disability claims has dropped from 14 months to three months since 2013.

"It's definitely getting better," said Garry Augustine, of the Disabled Veterans of America, a group that helps veterans apply for benefits.

The backlog of disability claims provoked a major scandal for the Veterans Administration in 2012. Jon Stewart mocked the department on The Daily Show for what he called Operation Enduring Wait.

Augustine said the "the backlog of claims over 125 days was over 600,000 cases" back then. This week, the V.A. announced that number was down to about 95,000.

That's good news for California, as local V.A. officials are seeing a massive influx of new veterans seeking benefits.

Robert McKenrick, regional director of the Veterans Benefits Office, said more veterans are moving to California to take advantage of the public university system.

In 2012, they received over 11,000 new claims. And this year, they're on-track to hit 29,000. Benefits paid through L.A.'s office have more than doubled in recent years to \$2 billion annually.

McKenrick and Augustine both credited the V.A.'s switch from a paper to digital claims system with clearing up the backlog.

By getting rid of hard-copy claims, the VA found it dramatically cut down time it took to adjudicate each file. And it allows the busiest claims offices to quickly share the load with V.A. administrators in other cities when needed. It also makes it far less likely that documents will get lost along the way.

In L.A., for instance, the V.A. Inspector General found that some veterans' disability claim paperwork had ended up in shred bins.

McKenrick told KPCC the documents were removed before being shredded.

[Back to Top](#)

3.3 - WHBQ-TV (FOX-13, Video): [VA employees accused of shredding documents](#) (27 August, 479k online visitors/mo; Memphis, TN)

Military veterans are waiting months for help to heal from injuries on the battlefield, but this week, the VA says they have the smallest backlog of outstanding claims ever.

FOX13's Justin Gray found out congress isn't buying that theory.

We've learned there were a series of surprise inspections at the Atlanta VA Medical Center and 9 other major VA hospitals across the country July 20th, after concerns about staff improperly shredding documents.

The VA Inspector General found evidence that staff at a Los Angeles clinic was likely shredding patient records.

It was just a few weeks ago the VA Inspector General launched an investigation of the Dayton VA Medical Center because of irregularities in patients scheduling there.

"This is a step back and they've got to fix it...and we continue to need to build the trust of veterans for their hospitals. I mean these are people that served us and we need to continue to serve them," the VA Inspector General said.

This new information on possible wrong-doing comes as the VA touts major improvements in the backlog of veterans benefit claims - the backlog down 84-percent since 2013. They're calling it the best numbers in VA history.

FOX13 checked the VA's number for the Southeast region which includes Memphis; the backlog of claims is currently at about 20,000 - that's a huge improvement.

That's a fraction of the more than 80,000 pending claims around this time last year.

Congressional sources told us top leadership is skeptical of the VA's numbers because of those allegations of document shredding, and other past incidents where VA staff were caught fudging numbers.

On the record, House VA Chairman Jeff Miller told us, quote: "the officially reported numbers rarely tell the whole story."

Stay with FOX13 for the latest on this investigation.

[Back to Top](#)

3.4 - Health Data Management: [VA Says Disability Claims Backlog at Lowest Level Since 2007](#) (27 August, Greg Slabodkin, 79k online visitors/mo; Chicago IL)

The Department of Veterans Affairs has announced that its disability claims backlog is at the lowest level since it began tracking the data in 2007, due in part to replacing antiquated information systems.

According to Allison Hickey, VA undersecretary for benefits, the current backlog of more than 98,000 claims older than 125 days represents an 84 percent decrease from a peak of more than 600,000 claims reported in March 2013. Hickey credited the dramatic drop to more employees processing claims through mandatory overtime and using digital records rather than paper ones.

“We streamlined our processes; we moved out of antiquated systems; we got away from thousands of tons of paper; we met you online so that you could access us wherever and whenever you needed; and many of you changed right along with us,” Hickey wrote in a blog this week.

With the increase in veterans filing their claims electronically, the processing time has been reduced significantly while improving the accuracy of the VA’s review and decision making process, Hickey said. Further, the accuracy rate in reaching decisions on disability requests has improved from about 83 percent in 2011 to 91 percent currently. And, on the eight separate quality categories measured within a claim, VA employees are making the correct decision more than 98 percent of the time.

Nonetheless, according to an internal VA document obtained last month by The Huffington Post, more than 238,000 veterans in the VA’s backlog have died while waiting for treatment. In response to the revelation, Rep. Jeff Miller (R-Fla.), chairman of the House Committee on Veterans’ Affairs, said the troubling news highlights ongoing VA mismanagement and calls into question the department’s ability to care for American veterans.

“No veteran should ever fall through the cracks when attempting to receive the care they have earned,” Miller said.

[Back to Top](#)

4. Veteran Opportunities for Education/GI Bill

4.1 - Las Vegas Review-Journal: [Bill would offer child care to student veterans](#) (27 August, Steve Tetreault, 857k online visitors/mo; Las Vegas, NV)

A new bill in Congress aims to help veterans obtain child care while they pursue an education.

The measure would offer federal grants for colleges to establish or expand child care centers that could assist students who have served in the military.

Sponsor Rep. Dina Titus said the bill nods to changing demographics in the armed forces and among veterans.

"The population of women veterans is rapidly growing and is going to grow in the future," she said, adding women veterans who go back to school tend to be older and tend to have families.

The Nevada Democrat introduced the measure on July 29 and promoted it Thursday at the Bennett Early Childhood Education Center at the University of Nevada, Las Vegas.

The bill would offer grants to schools to establish or expand child care centers, with the understanding that 75 percent of new services would be provided to students who are veterans.

Schools that do not offer child care could still apply for grants that could be redistributed as stipends for students to pay for off-campus care.

Titus, a former UNLV political science professor, said the idea came from student-veterans at the school expressing frustration at finding child care. An estimated 1,500 active duty military, reservists, veterans and military family members are enrolled students at the school.

[Back to Top](#)

4.2 - WJCT-TV (PBS-7): [A Kinder, Gentler GI Bill Making College More Affordable For Vets](#) (27 August, Cyd Hoskinson, 313k online visitors/mo; Jacksonville, FL)

A change to state law is making it simpler for military veterans to attend college regardless of where they call home.

In the past, veterans going to a public college or university were often considered non-residents.

But since the GI Bill only paid for in-state tuition, veterans had to pay the difference between in-state and the higher out-of-state rate from their own pockets.

VA Deputy Under Secretary for Economic Opportunity Curtis Coy, says Florida was one of the early adopters of the change that is now the standard nationwide.

"All of Florida's public colleges and universities (and the last time I checked there were about 148 of them) are now in full compliance," Coy said, "and they offer in-state tuition to all those veterans who have separated within the last three years."

Florida's version of the GI Bill was signed into law in March of last year.

In addition to waiving out of state tuition for veterans going to school in Florida, the law also requires Visit Florida to spend \$1 million a year marketing to veterans.

The bi-partisan measure also created the non-profit Florida Is For Veterans to encourage more veterans to move to the state and to encourage more employers to hire them.

[Back to Top](#)

4.3 - WDTV-TV (CBS-5, Video): [Student Veteran Not Getting Federal Funding](#) (27 August, Renata Di Gregorio, 9k online visitors/mo; Bridgeport, WV)

We know veterans face difficulties in everyday life, but what about in education? 5 News talked with a student veteran who says he hasn't gotten any of the federal funding he's supposed to have.

Christopher Lujan spent 10 years in the Marine Core and qualifies for the Post-9/11 G.I. Bill and the Veterans Vocational Rehabilitation Program. The only problem? Lujan says he hasn't seen a penny of that money. 5 News spoke with Lujan and different officials to try to figure it out.

Lujan says the official that handles his Vocational Rehabilitation educational package told him it came down to West Virginia Wesleyan College's Learning Center that separated it from state schools and that to get the funding he would need to have a documented learning disability.

"The official who's handling your rehabilitation package, they don't always want to let you go to that smaller institution," Lujan said. "They want you to go some place where all the vets are. But nowhere in the administration, nowhere in the legislation, nowhere in the details does it say they get to choose the school. It says that I get to choose the school that's right for me and that I have to work with them to make sure that the career is right for me and it's a career that I'm suited for. Like I said, this has happened to me not once now, but twice that I made it all the way through the system and basically I was approved if I chose to go to a different school. Essentially it was down to him. I said, 'So what do I need to do to stay at Wesleyan and get this to happen?' He said, 'Well I'd have to write a justification and I'm not comfortable doing that unless you go through further, outside the VA, private firm testing to see if you have a disability, a learning disability.'"

The Rehabilitation Program official that handles this for Lujan was unable to be reached.

Wesleyan has the G.I. Bill and 5 News spoke with Shauna Jones who is the school's VA Certifying Official. But since the issue is between the federal government and Lujan and not with West Virginia Wesleyan College, everyone's hands seem to be tied.

L.G. Corder, the Director of Veteran Education and Training Programs, says he also isn't sure why Lujan hasn't gotten his funding, at least for the G.I. Bill. He guessed that perhaps it had to do with his transfer from Florida.

5 News spoke with Delegate Joshua Nelson who is the Chair of Veteran Affairs. He says he doesn't handle the Rehabilitation Program, but where Lujan's G.I. Bill funding is is also a mystery to him. He says he would need to look into the situation further, but encourages people in these situations to reach out. Lujan says he has reached out to Senator Capito and others.

"In West Virginia we do take a great deal of pride in, and actually we have the highest number of veterans per capita than any other state in the country, so taking care of veterans is something that's extremely important to us," said Joshua Nelson (R-Boone, 23).

Lujan says he doesn't think he would do as well at a larger school.

"I chose one that appeals to my strengths and it shows," said Lujan.

Lujan says he thinks the funding will come in the future, but doesn't know just how far in the future that may be.

[Back to Top](#)

5. Women Veterans

5.1 - FOX News Channel (Reuters): [2 in 5 military women endure sexual trauma during service](#) (27 August, 31.8M online visitors/mo; New York, NY)

In the U.S. military, women may be nearly 10 times more likely than men to experience sexual assault or harassment, a study of recent veterans suggests.

Researchers from the Department of Veterans Affairs (VA) surveyed more than 20,000 men and women who served during the conflicts in Iraq and Afghanistan. About 41 percent of women and 4 percent of men reported suffering some form of sexual harassment during their time in the military.

"Research among both civilians and those who have served in the military consistently find that rates of sexual assault and sexual harassment are higher among women than among men," lead study author Shannon Barth of the VA said by email.

"Despite the higher prevalence among women veterans, given the far greater number of men who have served in the military, there are significant numbers of both men and women who have experienced (sexual trauma)," Barth added.

One in five U.S. women and one in 71 men report being raped at some point in their lifetime, and among both genders, about one in 20 people experience other forms of sexual coercion and unwanted sexual advances, according to the Centers for Disease Control and Prevention.

Barth and colleagues assessed sexual trauma in the military as part of a health survey of recent veterans conducted between 2009 and 2011. Of 60,000 veterans invited to participate, 20,563 completed the questionnaire.

One survey item related to sexual trauma asked whether service members received uninvited or unwanted sexual attention such as touching, cornering, and pressure for sexual favors or inappropriate verbal remarks. Another item asked if anyone ever used force or the threat of force to initiate unwanted sex.

For both men and women, sexual harassment was far more common than assault, the study found.

Roughly 41 percent of women and 4 percent of men experienced sexual harassment, while about 9 percent of women and less than 1 percent of men said they were assaulted.

"It's not surprising that sexual trauma was so much more prevalent among women compared to men in this study, given that there are so many more men in the military than women and most

are heterosexual," said Dr. Daniel Grossman, a researcher at Ibis Reproductive Health and the University of California, San Francisco.

Deployed men had lower risk of sexual trauma exposure than men who weren't deployed, but deployment status made no difference for women, the study also found. Veterans with combat exposure during deployment were more likely to experience sexual trauma.

Among women, Marines and Navy veterans had increased risk for military sexual trauma compared with Air Force veterans.

"In our research with recently deployed women, we heard that certain aspects of military culture, including widespread sexism and the fact that men often outrank women, contributed to an environment that was conducive to sexual trauma," Grossman, who wasn't involved in the current study, said by email.

One shortcoming of the study is that researchers relied only on the survey data, and not on follow-up clinical screenings to assess the extent of possible exposure to sexual trauma, the researchers acknowledge in the American Journal of Preventive Medicine.

Gender disparities also don't tell the entire story, noted Dr. Timothy Hoyt, director of an intensive outpatient behavioral health program at Madigan Army Medical Center in Tacoma, Washington.

Data from comprehensive health screenings done by the VA show that more than 100,000 service members have reported experiencing military sexual trauma, with cases evenly split between men and women, Hoyt, who wasn't involved in the study, said by email.

Since 2002, the VA has implemented universal screening for sexual trauma, the study authors note.

"All of these survivors need comprehensive care, regardless of gender," Hoyt said. If appropriate services are provided, he added, "the burden of this trauma on survivors can be significantly reduced."

[Back to Top](#)

6. Other

6.1 - FOX News Channel (Video): [Mystery solved: Vet tombstones used for Missouri patio were discards](#) (27 August, 31.8M online visitors/mo; New York, NY)

The rural Missouri homeowner whose patio made from military headstones sparked anger among veterans "used poor judgment," but did nothing illegal -- or malicious -- when he scavenged discarded defective markers from a local landfill, authorities said.

The patio, which was made up of about 150 headstones with veterans' names, made national news when a veteran posted photos of it to Facebook. That prompted an investigation by the federal National Cemetery Administration as well as a probe by the Ozark County sheriff. But

when the apologetic homeowner told officials where he got the gravestones, authorities simply had the patio removed.

"The guy used poor judgment and taste," Sheriff Darrin Reed said, according to the St. Louis Post-Dispatch. "He kept apologizing to us. He's a very simple sort."

The unidentified man told a local station he was sorry.

"I ain't blaming nobody for nothing but me," he said.

Reed sought no charges against the man because the company which cut the stones never billed the federal government for the defective ones.

A photo of the patio was uploaded to a Navy veteran's Facebook page and prompted a federal investigation.

"When I first saw them, it was like getting hit in the gut with a punch. It made me mad," Ed Harkreader, 55, told Reuters. Harkreader visited the property in July. The headstones, which were mostly dated in the past 10 years, were discarded by Chaney Monument Co. in a nearby landfill.

Authorities did not charge against the man because the company that cut the stones never billed the federal government for the defective ones.

But Harkreader said, "There's still a name of a soldier who died."

The headstones are set to be buried at a nearby cemetery that will be attended by local Cub Scouts and an honor guard. Local veterans are reportedly going to help the homeowner replace the patio.

Government regulations require that even discarded headstones be destroyed, but the U.S. attorney's office in Kansas City said no action is likely.

The headstone company told KSPR.com that it stopped making military grave markers because of the strict guidelines and how, if defective, the company had to make a new one at its own expense.

[Back to Top](#)

6.2 - Daily News (Video): [Missouri man who built patio with gravestones of military veterans will not be charged: cops](#) (27 August, Deborah Hastings, 15.4M online visitors/mo; New York, NY)

A homeowner in rural Missouri will not be charged for using the gravestones of military veterans to build a patio, authorities said.

Navy veteran Ed Harkreader took photos of the veranda and a staircase and posted them to Facebook last week, saying he was outraged. The stones carried the names of service members and their families.

The National Cemetery Administration in Washington and the local sheriff investigated the strange home improvement project and announced this week that no laws had been broken.

"The guy used poor judgment and taste," Ozark County Sheriff Darrin Reed said earlier this week, the Southern Illinoisan reported. "He kept apologizing to us. He's a very simple sort, and he told me he didn't think the thing through."

The man, who was not identified, got the headstones at a local dump. They had been discarded because of spelling errors, the sheriff said.

A rural Missouri homeowner has apologized for using the discarded grave markers of veteran service members to build a patio and outdoor staircase. He salvaged the stones from a local landfill.

A rural Missouri homeowner has apologized for using the discarded grave markers of veteran service members to build a patio and outdoor staircase. He salvaged the stones from a local landfill.

The stones had been cut by a local company that is no longer in business, he said.

The patio has been disassembled and a service was held Tuesday to bury the grave markers.

[Back to Top](#)

6.3 - The Baltimore Sun: [Ben Carson suggests doing away with Department of Veterans Affairs](#) (27 August, Ian Duncan, 4.2M online visitors/mo; Baltimore, MD)

Republican presidential hopeful Ben Carson suggested eliminating the Department of Veterans Affairs in a talk radio interview Wednesday, leading to swift condemnation from one veterans group.

The former Johns Hopkins pediatric neurosurgeon said problems with the Veterans Affairs health system are discouraging people from joining the military in the first place and said there needed to be a single system to take care of active duty troops as well as those who are no longer serving.

"We don't need a Department of Veterans Affairs," Carson told host Dave Ramsey. "Veterans Affairs should be folded in under the Department of Defense. And it should be a smooth transition. We need to be looking at the way we take care of soldiers."

Instead of the current system that provides treatment for veterans at government-run hospitals, Carson suggested that they should have a health savings account that would pay for treatment at any medical facility. The VA facilities could then be used for specialized treatments for traumatic brain injuries and limb replacements — problems that particularly afflict veterans.

But Paul D. Eaton, a retired Army Major General and adviser to progressive political group VoteVets.org, said Carson's plan was an insult to veterans.

"Rather than think of ways to nickel and dime our veterans, Dr. Carson should be thinking of other areas of fat in government – particularly in defense contracts – that can be cut, so we can hire more doctors and caregivers, to provide returning veterans with the kind of care they earned," Eaton said in a statement.

In the past 18 months the VA health system has been shaken by revelations that some doctors manipulated wait lists and fresh questions over the availability of care for veterans. Veterans Affairs Secretary Robert A. McDonald, who was put in place to clean up the department, is scheduled to be in Baltimore next week to address the American Legion convention.

Henry Howard, a spokesman for the American Legion, said the problems have been a priority for veterans, but that most former service members are happy with the care that they get through the VA.

"A large percent of veterans getting healthcare are great, the veterans love it," he said.

[Back to Top](#)

6.4 - Patch.com (Decatur-Avondale Estates Patch): [Former Decatur VA Worker's Appeal Denied, The former VA Police Services employee was sentenced to 13 months in prison for using a government purchasing card for personal expenses](#) (27 August, Justin Ove, 3.8M online visitors/mo; New York, NY)

A former secretary at the Atlanta VA Medical Center (VAMC) in Decatur who was sentenced to prison after pleading guilty to charges of theft of government funds and making false statements for misusing a government-issued credit card will remain behind bars after her latest appeal was struck down earlier this week.

Attorneys for Zerry Feaster of Ellenwood tried to argue that though Feaster was convicted of siphoning more than \$80,000 of federal funds she to buy personal items and gamble, she should have only been charged with misdemeanors as she only stole in increments of fewer than \$1,000 at a time.

The Atlanta Journal-Constitution reports that the 11th Circuit Court of Appeals rejected the argument and upheld Feaster's sentence.

According to the U.S. Attorney's Office for the Northern District of Georgia Atlanta Division, Feaster was employed as a secretary with the Police Services Division at the VAMC and was responsible for buying office supplies and equipment for the division with a government-issued credit card.

Instead, Feaster used the government-issued card to buy pre-paid gift cards. She then used the gift cards to purchase personal luxury items such as jewelry and designer accessories. She also gambled with some of the money she stole. To cover her tracks, Feaster submitted fake purchase orders.

Following her June 27, 2014 guilty pleas on seven counts of theft of government funds and five counts of making false statements, Feaster was sentenced to serve 13 months in prison followed by three years of probation. Feaster must also pay \$88,264.47 in restitution.

“Rather than supporting the men and women who have served our country honorably, Ms. Feaster stole from the VA to gamble and buy herself luxury goods at Coach and Tiffany,” said United States Attorney Sally Quillian Yates in a statement.

“Feaster’s betrayal of the public trust for personal gain is reprehensible” said Special Agent in Charge Monty Stokes, Office of Inspector General, U. S. Department of Veterans Affairs.

“The VA OIG will vigorously investigate allegations of the misuse of public funds whether for the funds whenever the funds are related to VA programs and operations.”

[Back to Top](#)

6.5 - The Washington Times (AP): [Louisiana holding summit to assist imprisoned veterans](#) (27 August, 3.7M online visitors/mo; Washington, DC)

Louisiana is holding a day-long summit to help connect imprisoned veterans with available services.

The Thursday summit is the third year of the event, hosted by the state corrections and veterans affairs departments and the federal VA.

The corrections department says about 220 veterans housed at state prisons are expected to attend the event at Rayburn Correctional Center in Angie.

Federal, state and local officials will be on hand to tell veterans about programs and services they can access, like education programs, transition assistance, post-traumatic stress disorder treatment and job search help.

Louisiana has an estimated 1,350 veterans in state prisons. Corrections Secretary Jimmy LeBlanc says the summit helps veterans while incarcerated and when they leave prison - and also assists their families by connecting them with available services.

[Back to Top](#)

6.6 - The Hill: [GOP lawmaker plans VA reform bill](#) (27 August, Cristina Marcos, 1.8M online visitors/mo; Washington, DC)

Rep. John Kline is slated to introduce legislation next month to prevent the Department of Veterans Affairs from belatedly charging veterans for medical care received years ago.

The Minnesota Republican, who chairs the House Education and the Workforce Committee, said in a Thursday statement that he will roll out a measure when the House returns from recess in September.

Kline explained he is introducing the measure in response to complaints from Minnesota and Wisconsin veterans who were billed by the VA for medical treatment received as much as five years ago.

“We owe a great deal to those who have proudly served our nation, and they deserve more than unexpected, outdated bills because the VA failed to notify veterans of payments in a timely manner,” Kline said.

Under the proposed measure, the VA secretary would be granted authority to waive co-payments if the agency didn't send the medical bill out on time.

The introduction of Kline's bill will come about two months after the House passed legislation to make it easier for the VA to fire or demote employees for poor performance.

[Back to Top](#)

6.7 - Pittsburgh Tribune-Review: [Items in drug stockpile to counter pandemic past prime at Pittsburgh VA](#) (27 August, Walter F. Roche Jr., 1.5M online visitors/mo; Pittsburgh, PA)

Veterans Affairs Pittsburgh Healthcare System has completed a review of hundreds of medical supplies stockpiled for large-scale emergencies because some of them expired, officials said. The inventory of more than 200 pallets of items, stored at the VA Pittsburgh's H.J. Heinz campus in O'Hara, was expected to determine which items can still be used, said Beth Miga, a VA Pittsburgh spokeswoman.

“We determined that a hands-on review of our pandemic response supplies was necessary to ensure our inventory records were as accurate as possible,” Miga wrote in an email.

The review was completed this week, but Miga would not disclose its results. She said federal law did not permit her to disclose what specific supplies have expired. She would only say that items in seven of 22 categories expired, triggering the review.

Experts say it is difficult to guarantee the efficacy of medical supplies that exceed a manufacturer's expiration date.

“A reliable stockpile of supplies for combating an infectious disease outbreak or pandemic is essential,” said Dr. Amesh Adalja, an infectious disease physician at the UPMC Center for Health Security. “When certain supplies' age exceeds their manufacturer's expiration date it is difficult to guarantee their efficacy, and health care workers should have the highest level of confidence in their equipment when treating patients with contagious infectious diseases.”

Those supplies include medications, vaccines and certain medical equipment, such as masks, respirators and other personal protective equipment for healthcare workers, he said.

“The proper handling of these substances is important for patients and public health,” U.S. Sen. Robert Casey said when told about the outdated items. “It's incumbent upon the VA to replace these items quickly so they're there in case of emergency and provide the public and local health officials all appropriate information.”

Miga said some of the items do not have manufacturer's expiration dates, "but we are still examining these supplies to determine their status and order replacements if necessary." She said the inventory would provide an opportunity "to study our warehouse procedures and ensure that soon-to-expire stocks are shifted for use within the VA system."

Rules referred to by Miga describe the supplies as being "reserved specifically for the treatment of casualties from a mass casualty event."

The caches, according to the directive, "are specifically intended to treat veterans, staff and others that may present to the local VA medical facility."

Michael Stelacio, department commander of the Pennsylvania American Legion, called it unfortunate that supplies expired when they could have been transferred to other VA facilities for immediate use before expiration.

"It's obvious there's some ineptness," Stelacio said. "This is another one of these things that has to be corrected."

[Back to Top](#)

6.8 - C-SPAN (C-SPAN 3, Video): [2015 White House Conference on Aging](#) (27 August, 1M online visitors/mo; Washington, DC)

This five minute clip records remarks made by Secretary McDonald as a member of a panel at the 2015 White House Conference on Aging. In the clip, Secretary McDonald describes the role that the VA Caregiver Support Program plays in the larger mission of VA in providing care to Veterans. [Video Clip](#)

[Back to Top](#)

6.9 - Idaho Press-Tribune: [Veterans: Have you completed my survey?](#) (27 August, Sen. Mike Crapo (R-ID), 158k online visitors/mo; Nampa, ID)

In the wake of last year's scandals involving the U.S. Department of Veterans Affairs, I created a veterans survey to learn more about the experiences and needs of Idaho's veterans community. The 2014 Veterans Survey was an invaluable tool.

I read the comments that came in and heard loud and clear the voices of Idaho veterans. Their voices have shaped my actions on veterans policy and legislation.

For example, several veterans told me of their experiences with Agent Orange. Because of their insight, I am a co-sponsor of measures such as S.901, the Toxic Research Exposure Act, and S. 681, the Blue Water Navy Vietnam Veterans Act.

Earlier this summer, I began conducting the 2015 Veterans Survey. This survey builds on lessons learned from last year to ask more specific questions about the experiences of our

veterans. This year's survey is better than last year's and has captured the attention of the Senate Veterans Affairs Committee, which has VA oversight responsibility.

If you have not already done so, please consider taking the survey. I am interested in hearing from veterans, family and friends, and those who work with veterans on a regular basis. The information you share with me will drive my legislative agenda for the next year and affect how I consider several of the pending VA reform measures.

The final report on the survey's findings will be shared with the Senate Veterans Affairs Committee, the VA and with Idaho's VA community. Ensuring timely, high-quality veterans care is an ongoing effort. Idahoans, please help with this effort and take the survey before Sept. 30.

Regular feedback from Idaho veterans is needed to ensure that veterans policy changes are resulting in improvements when veterans seek assistance from the VA. Please remember that the information you share with me is protected by my privacy policy. The VA will not know you shared information with me unless you want them to know or you ask for direct assistance with a VA matter and sign a privacy release.

There are several ways to take the 2015 Veterans Survey. It can be accessed online through my website. Participants may also stop by one of my offices or call to have a staff member administer the survey. The following phone numbers can be used to reach my offices: Washington, DC (202) 224-6142; Idaho State Office (Boise) 334-1776. Idahoans in need of specific assistance in working with the VA or other federal agencies may also contact my office for further assistance through the survey or separately.

Veterans casework more than doubled, and Idaho veterans received more than \$723,000 in retroactive benefits as a result of the assistance sought by many of the survey participants last year.

Idaho veterans and their loved ones know best what is working and not working for veterans utilizing VA services. Their ongoing input drives sound and lasting improvements. The solutions they help institute today not only improve the services for current veterans, but also help ensure that other military families do not face similar challenges.

Thank you, Idaho veterans, for your service and assistance with improving services for your fellow and future veterans. Please continue to guide meaningful reforms that will improve Idaho veterans' access to first-rate services by taking the 2015 Veterans Survey.

[Back to Top](#)