



# Veterans Affairs Media Summary and News Clips

1 July 2016

## [1. Top Stories](#)

**1.1 - USA Today (Video): [VA suicide hotline workers ripped for failing vets](#)** (30 June, Gregg Zoroya, 13.7M online visitors/mo; McLean, VA)

More than a third of troubled veterans are not getting through to the best trained suicide-hotline staffers because of poor work habits at the Department of Veteran's Affairs' call center, according to VA emails obtained by USA TODAY. Some workers handle only one to five calls each day and leave before their shifts end even though phone lines have gotten busier, the emails say.

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**1.2 - USA Today (Video): [4 vets tie up VA suicide hotline with abusive calls](#)** (30 June, Gregg Zoroya, 13.7M online visitors/mo; McLean, VA)

A suicide hotline struggling to assist increasing numbers of former servicemembers in crisis is being hampered by four veterans who call thousands of times per month, tying up phone lines with abusive and even vulgar comments, according to the Department of Veterans Affairs. The four called 5,619 times in May, more than 4% of all 128,346 calls that came into what's known as the Veterans Crisis Line.

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**1.3 - Stars and Stripes (AP): [Laws encourage alternatives to prison for veterans with PTSD](#)** (30 June, Anna Gronewold, 1.2M online visitors/mo; Washington, DC)

A former Army sergeant's defenders say he truly believed he was protecting fellow soldiers from a Taliban bomber when he emptied 24 rounds at police and firefighters responding to a fire in his apartment. Psychologists testified that Joshua Eisenhower returned from Afghanistan with post-traumatic stress that made him a paranoid, hyper-vigilant insomniac, and so delusional that he drew his 9 mm handgun whenever anyone came to his door in Fayetteville, North Carolina.

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**1.4 - Military Times: [VA commission health care report — contentious until the end](#)** (30 June, Patricia Kime, 482k online visitors/mo; Washington, DC)

The release of a report next week on the future of Veterans Affairs health care is not likely to end debate over what is the right mix of services provided to veterans by VA medical facilities or the private sector. The Commission on Care is expected to release recommendations Wednesday that call for VA to strengthen its performing hospitals and clinics, shut its underutilized facilities and establish nationwide networks of private providers...

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

**2.1 - Yahoo! News: [VA suicide counselors' work ethic questioned, report says](#)** (30 June, Jason Sickles, 88.4M online visitors/mo; Los Angeles, CA)

Veterans contemplating taking their own lives may not be reaching the most qualified counselors when they call the Department of Veterans Affairs suicide hotline, a USA Today

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report reveals. The newspaper, citing internal VA emails they obtained, reports some of the government's best-trained suicide-hotline staffers — facing an even higher workload with the volume of calls at record levels — were handling only one to five calls day and leaving work early.

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**2.2 - Raw Story: [Opioid scare run amok: VA won't buy pain medication for Vietnam vet after leg amputation](#)** (30 June, Sarah K. Burris, 5M online visitors/mo; Boynton Beach, FL)  
Vietnam veteran Richard Howard had an overproduction of red blood cells in the bones of his right leg. The problem created so many circulation problems his leg had to be amputated. While the Veterans Administration took care of Howard for the procedure, prosthetic and aftercare therapy, they won't pay for the prescription for his Oxycodone pills to stop his pain, KATV reports.

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**2.3 - KTUT (CBS-11): [Dozens Of Veterans Protest Possible Changes To VA System](#)** (30 June, Joel Thomas, 930k online visitors/mo; Dallas, TX)  
A proposal in front of President Obama to take services out of centralized VA buildings and send patients to private doctors, is spurring open protest among veterans who worry they'll lose the only caregivers who understand their needs. "We think differently," said U.S. Army Major Yvonne Tims who is a reservist who served in Iraq. "A lot of us when we come back from overseas we're on autopilot."

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**2.4 - WBTV (CBS-3): [Salisbury VA employees hold picket over possible privatization](#)** (30 June, 877k online visitors/mo; Charlotte, NC)  
VA employees in Salisbury held an informational picket Thursday to raise awareness of potential VA hospital closings proposed by the VA Commission on Care. "We're out here protesting the Commission on Veteran's Care," employee Essie Hogue said. "They're meeting and they're telling Congress that the best way to treat veterans is to privatize the VA and let veterans get their care through the private sector."

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**2.5 - WAVE (NBC-3, Video): [Louisville VA may have given improper exams for traumatic brain injuries](#)** (30 June, Eric Flack, 651k online visitors/mo; Louisville, KY)  
More than 20,000 U.S. veterans may have been given improper exams for traumatic brain injuries suffered in battle. The Department of Veterans Affairs says that means some of those vets could be walking around with undiagnosed brain injuries. That includes service members in Louisville. When scars from the battlefield are on the inside they can be hard to spot. Especially, if you don't know what to look for.

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**2.6 - Daily Press: [Hampton VA chief cites progress, more work needed](#)** (30 June, Hugh Lessig, 600k online visitors/mo; Newport News, VA)  
In December 2014, the Hampton VA Medical Center had the longest wait times for primary-care patients of any Veterans Affairs hospital in the nation. A subsequent visit by Sen. Mark R.

Warner was not exactly a goodwill call. Professing his disappointment, the senator called for a management strike team to visit the hospital and recommend improvements. Hampton VA leaders vowed to address staff and space shortages that contributed to the problem.

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**2.7 - Florida Today: [Funeral marks start of use of caisson at VA cemetery](#)** (30 June, R. Norman Moody, 561k online visitors/mo; Melbourne, FL)

A Gypsy Vanner horse guided by Gregory Gorman and his wife, Debra Gray, stepped slowly as it pulled a caisson carrying the remains of Army veteran Eugene Jesensky II. Tranquility Country, a newly-formed nonprofit organization, officially began today providing a caisson for funerals at Cape Canaveral National Cemetery, making it one of only four national cemeteries, including Arlington, to offer such a service.

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**2.8 - WTVM (ABC-9, Video): [Roby gathers VA, healthcare leaders to improve service for veterans](#)** (30 June, Hannah Lane, 393k online visitors/mo; Columbus, GA)

The Central Alabama VA is taking steps toward better serving veterans. Thursday, Rep. Martha Roby (R-Dist 2) held a meeting with leaders from the VA and the local healthcare community. The Central Alabama Veterans Health Care System has been one of many under scrutiny for long wait times and other issues over the last few years.

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**2.9 - Panama City News Herald: ["My pain is real" Veterans talk about VA](#)** (30 June, Collin Breaux, 377k online visitors/mo; Panama City, FL)

In response to Byng's comments, GCVHCS CEO and Director Anthony Dawson said the medical team for Byng can communicate with him when they change treatment plans. Dawson added that Byng should be taken care of since he was a hero, and if he didn't get the answers he needed on where his treatment was headed, he should let Dawson know.

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**2.10 - KENS (CBS-5, Video): [Transgender S.A. veterans hope for more benefits](#)** (30 June, May Ann Martinez, 333k online visitors/mo; San Antonio, TX)

The Pentagon has lifted the ban on transgender Americans serving openly in the military and announced that it will pay for current members of the armed forces to undergo gender reassignment surgery. In San Antonio, Military City USA, transgender veterans hope the ruling will mean more medical benefits for them.

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**2.11 - WLUC (NBC-6, Video): [Big changes may be in store for VA healthcare](#)** (30 June, Harri Leigh, 315k online visitors/mo; Negaunee, MI)

It all started when a VA medical center in Phoenix became embroiled in a long wait list scandal in 2014. Nearly 40 people died while waiting for medical appointments, CNN reported at the time. In response, Congress enacted the Choice Program, meant to speed up wait times. The Commission on Care is expected to release its report Wednesday, July 6.

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**2.12 - Montgomery Advertiser: [Roby's diagnosis of VA, community health care](#)** (30 June, Rebecca Burylo, 301k online visitors/mo; Montgomery, AL)

The pulse of the VA and the Community Health Care Network is getting stronger, but is still too weak for U.S. Rep. Martha Roby, R-Montgomery, who checked on the situation Thursday. Roby gathered leaders from Veterans Affairs and Alabama's health care community for a second meeting to discuss progress in localizing medical coverage for veterans, fix a broken system and streamline processes between the VA and the private sector.

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**2.13 - Waco Tribune-Herald: [Bruce Huff, guest columnist: How about a shoutout for our VA system?](#)** (1 July, Bruce Huff, 287k online visitors/mo; Waco, TX)

By all logic, I should be reaping a little of what I sowed. I was a 17-year-old conscientious objector, the son of an Air Force master sergeant, and I hated what Vietnam stood for. Canada was but a few miles away from my high school in Anchorage, Alaska. Easy, right?

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**2.14 - KSLA (CBS-12): [Lake Charles VA Clinic groundbreaking finally takes place - after 15 years of hurdles](#)** (29 June, Erica Bivens, 229k online visitors/mo; Shreveport, LA)

A major step forward happened Wednesday for veterans in Southwest Louisiana. Many are rejoicing Wednesday night after a groundbreaking ceremony for a new VA clinic. In a year's time, the site will hopefully open its doors as the area's newest VA clinic. It's something that's long been needed in Lake Charles.

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**2.15 - Salisbury Post: [VA employees, union rally against increasing access to private clinics](#)** (1 July, Josh Bergeron, 200k online visitors/mo; Salisbury, NC)

When Rosetta Sloan decided to switch jobs in the 1980s, she was mostly looking for stability. Sloan, who worked at a mill in Salisbury, decided to take a job at the W.G. "Bill" Hefner VA Medical Center. She has now worked at the Salisbury VA for more than three decades. "At that time, mills were opening and closing and opening and closing," Sloan said on Thursday.

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**2.16 - WJXX (ABC-25, Video): [Released emails show larger problem with VA suicide hotline](#)** (30 June, Steven Dial, 199k online visitors/mo; Jacksonville, FL)

Every day 22 veterans on average commit suicide, and some of those veterans on the verge of committing suicide are being ignored. Earlier this year we first told you that thousands of calls to the Veterans Affairs crisis center were not being answered. Last year, more than 500,000 calls were made to the VA suicide hotline.

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**2.17 - Arkansas Democrat-Gazette: [Bill adds to indigent vets' funeral aid, Cotton seeks to expand federal burial assistance to state, tribal cemeteries](#)** (30 June, Frank Lockwood, 164k online visitors/mo; Little Rock, AR)

U.S. Sen. Tom Cotton urged the Senate Veterans Affairs Committee on Wednesday to pass legislation that would offer federal burial assistance to indigent veterans laid to rest in state or

tribal veterans cemeteries. Currently, the government only pays funeral costs for poor veterans if they are buried in national cemeteries.

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**2.18 - KFOX (FOX-14): [Local VA suicide hotline sees increase in calls](#)** (1 July, Courtney Schoenemann, 160k online visitors/mo; El Paso, TX)

More than one-third of our nation's veterans' calls to the Veterans Affairs' suicide hotline are not being answered, according to a USA Today investigation. It found more people are calling for help since the hotline opened in 2007. This is a trend also being seen in El Paso. USA Today obtained emails from VA staffers.

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**2.19 - Insider Louisville: [Veterans and their families voice concerns over VA hospital site on Brownsboro Road](#)** (30 June, Steve Shaw, 112k online visitors/mo; Louisville, KY)

One of the stronger voices at a recent meeting of veterans and their families echoed the urging of "Deep Throat," the famous Watergate informant, to "follow the money" the U.S. Department of Veterans Affairs apparently overpaid for the new VA Hospital site off Brownsboro Road.

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**2.20 - The Chronicle-Telegram: [Temporary Veterans Affairs Clinic opens in Sheffield](#)** (30 June, Jon Wysochanski, 83k online visitors/mo; Elyria, OH)

A Veterans Affairs outpatient clinic officially opened its doors this week at a temporary location on the village's south side near Lorain County Community College. For years it was rumored the U.S. Department of Veterans Affairs planned to leave St. Joseph Community Center in Lorain. Those rumors were confirmed in October when it was announced that a building in Sheffield would serve as a temporary site for the clinic...

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**2.21 - LifeZette (Video): [Dogs Give Vets Faith in Society Again, New efforts pair service animals with our most deserving military](#)** (30 June, Deirdre Reilly, 82k online visitors/mo; Washington, DC)

Many veterans enjoy comfort, aid, and true bonding from their service dog. A specially-trained post-traumatic stress disorder service dog can interrupt agitation, wake a veteran from a traumatic nightmare, or perform a room search for a vet who suffers from hypervigilance. PTSD service dogs can also be a steady source of furry companionship, never leaving their beloved human alone with troubling thoughts.

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**2.22 - The Times Record News: [New Veterans Healthcare System director vows positive change](#)** (30 June, Claire Kowalick, 68k online visitors/mo; Wichita Falls, TX)

For the first time in more than four years, the Oklahoma City Veterans Healthcare System has a permanent director and he vows to make positive changes to the area VA health system. "Our first priority is customer satisfaction. Our job is to provide the best quality care in a patient-friendly manner," said new director Kristopher "Wade" Vlosich.

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**2.23 - Walla Walla Union-Bulletin: [What's Going Up? The Walla Walla State Veterans Home](#)** (1 July, Karlene Ponti, 49k online visitors/mo; Walla Walla, WA)

The facility is being built to fill a need for veterans' care in a skilled nursing facility, Audette said. "It was a wonderful opportunity to partner with the Walla Walla VA and we've gotten incredible support from the legislators. Senator Hewitt, Nealy and Walsh have been very supportive. "It will be very unique unlike any of the nursing homes you've seen," she said. "One unit will be a secure unit for those with dementia for those who are at risk of wandering."

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**2.24 - The Goshen News: [Veterans air grievances at annual town hall meeting](#)** (30 June, John Kline, 43k online visitors/mo; Goshen, IN)

Emotions ran the gamut at the Goshen VFW Post 985 Wednesday afternoon as area veterans gathered to share their questions, concerns and grievances during the annual Veterans Briefing and Community Town Hall hosted by the VA Northern Indiana Health Care System and Indianapolis VA Regional Office.

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**2.25 - American Press: [Work begins on VA clinic for LC](#)** (30 June, John Guidroz, 43k vom; Lake Charles, IA)

Jim Jackson, chairman of the Lake Charles Mayor's Armed Forces Commission, described Wednesday's groundbreaking of a permanent Veterans Affairs clinic as "finally seeing some light at the end of a very long tunnel." "It's been a struggle, (but) it's a blessed day for veterans," he said. "At least now we're starting to tear (the site) down and rebuild it."

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**2.26 - Larchmont Chronicle: [Local architect on front lines of VA land planning in Westwood](#)** (30 June, Sondi Sepenuk, 16k online visitors/mo; Los Angeles, CA)

The long-neglected United States Department of Veteran's Affairs (VA) campus in Westwood is finally getting a makeover, and Windsor Square resident and architect William Fain, FAIA, of Johnson Fain is helping to lead the charge. Fain, his wife, Jennifer, and their two grown daughters — Elizabeth Fain LaBombard and Margaret Fain Jenkins — have lived in Windsor Square since 1986.

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**2.27 - KTVL (CBS-10): [Veteran says he's not getting needed medication](#)** (30 June, William Maetzold, 3.4k online visitors/day; Medford, OR)

A veteran said an important prescription has been taken away from him through the Veterans Affairs (VA) clinic in White City. Raymond Hallbauer said he needs both pain and sleep medication, but a psychiatrist said he could only have one. "So I've been compensating by using over the counter sprays, creams, patches whatever to alleviate or try to get a little less pain," Hallbauer said.

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**2.28 - The News Guard: [VETS AND MEDICAL POT: Congressional action urged](#)** (30 June, 500 online visitors/day; Lincoln City, OR)

Oregon U.S. Senator Jeff Merkley and Congressman Earl Blumenauer have joined nine members of the U.S. Senate and U.S. House of Representatives urging Congressional leadership to protect veterans' abilities to discuss the use of medical marijuana with VA physicians in states where it is legal.

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**2.29 - KCIM (CBS-1380): [Young Reacts To Failed Testing Of Veteran Hotline](#)** (30 June, 400 online visitors/day; Carroll, IA)

Republican 3rd District U.S. Representative, David Young, reacted yesterday (Thursday) to a Government Accountability Office report that found nearly 30 percent of text messages sent as a test to the Veterans Crisis Line went unanswered.

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### **[3. Ending Veterans' Homelessness](#)**

**3.1 - The Republican: ['Welcome Home': Soldier On dedicates 44 apartments for homeless veterans in Northampton](#)** (30 June, Laura Newberry, 1.2M online visitors/mo; Springfield, MA)

The 44 apartments -- which were built using sustainable materials, according to Soldier On -- cost an estimated \$8 million and was funded primarily by the VA and some state money. About two dozen veterans were ceremoniously given welcome mats to their new homes Wednesday.

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### **[4. Ending the Claims Backlog – No coverage](#)**

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

**5.1 - Stars and Stripes: [GI Bill recipients at Ashford U. receive temporary stay of benefits](#)** (30 June, Alex Horton, 1.2M online visitors/mo; Washington, DC)

Thousands of student veterans attending Ashford University will temporarily avoid cuts to their GI Bill benefits, the school announced. The Iowa Department of Education approved a 90-day delay of a decision to revoke the ability of the Department of Veterans Affairs to pay for tuition, books and housing for more than 5,000 student veterans and military dependents attending Ashford, according to a recent Facebook post by the school.

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### **[6. Women Veterans – No coverage](#)**

### **[7. Other](#)**

**7.1 - New York Daily News: [NRA violated government policy in pro-Trump ad that featured veterans cemetery](#)** (30 June, Dan Good, 15.6M online visitors/mo; New York, NY)

The National Rifle Association is stepping on soldiers' graves — and apparently violating government policy — in its latest shameful display. The organization's Political Victory Fund released an anti-Hillary Clinton ad Wednesday, "Stop Clinton, Vote Trump," that shows former Marine and Benghazi attack survivor Mark Geist walking through a veterans cemetery. "A lot of people say they're not going to vote this November because their candidate didn't win," he says over shots of gravestones."

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**7.2 - Washington Free Beacon: [VA Colluding with Union to Promote Anti-Reform Rally, Federal employee union protesting efforts to fix veterans' healthcare](#)** (30 June, Morgan Chalfant, 1.6M online visitors/mo; Washington, DC)

An official at a Department of Veterans Affairs hospital is helping the largest federal employee union oppose efforts to reform the agency's network of hospitals. The public affairs officer at the Cheyenne VA Medical Center in Wyoming has advertised a rally organized by the American Federation of Government Employees (AFGE) next week to protest recommendations made by members of an independent commission that would overhaul VA healthcare...

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**7.3 - KSTU (FOX-13, Video): [Big Budah gets schooled at National Veterans Wheelchair Games](#)** (30 June, Ashton Edwards and Big Budah, 1.3M online visitors/mo; Salt Lake City, UT)

This video recounts events at the National Veterans Wheelchair Games in Salt Lake City. Video description: Big Budah got a lesson at the National Veterans Wheelchair Games in Salt Lake City.

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**7.4 - WCPO (ABC-9, Video): [Independence Day can be a 'nightmare' for veterans](#)** (30 June, Rose-Ann Aragon, 940k online visitors/mo; Cincinnati, OH)

Wilson spent his life serving, and today, he works for the Department of Veterans Affairs, helping fellow veterans who grapple with PTSD find resources and help. He's a particularly good resource himself, having personally dealt with the condition. "I got some help, and once I was, I realized that it is treatable and you can come through it," he said.

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**7.5 - Idaho Statesman (Video): [Man who shot two, self in Boise was VA employee](#)** (30 June, Katy Moeller, 738k online visitors/mo; Boise, ID)

A 53-year-old Kuna man who police say shot two people before taking his own life late Tuesday was an employee at the Boise VA Medical Center. Alan Robert Amundson was chief of Environmental Management Service at the medical center, spokesman Joshua Callihan confirmed Thursday. He had worked in custodial services there since 2008.

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**7.6 - Las Vegas Review-Journal: [Heller backs push to require VA to disclose high-level directors' bonuses, awards](#)** (30 June, Ben Botkin, 715k online visitors/mo; Las Vegas, NV)

U.S. Sen. Dean Heller is backing an effort that would require the Department of Veterans Affairs to disclose to Congress the bonuses and awards that high-level VA directors get. The push for added transparency comes as the VA has faced criticism for backlogs of veterans waiting for



medical appointments and treatments at clinics and hospitals. The scandal has been amplified after revelations that executives were awarded bonuses as veterans languished waiting for medical care.

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**7.7 - Bustle (Video): [This NRA Ad For Donald Trump Might Have A Very Serious Problem](#)** (30 June, Kastalia Medrano, 674k online visitors/mo; New York, NY)

My faith in the rectitude of the NRA is not strong. So while I would like to give the organization the benefit of the doubt and hope that this new anti-Clinton / pro-Trump NRA ad wasn't filmed in a military cemetery, as it definitely appears to be, I am not super optimistic. The ad, released Wednesday by the NRA's Political Victory Fund, is a Benghazi propaganda fest starring Mark Geist...

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**7.8 - KENS (CBS-5, Video): [San Antonio VA hospital going green](#)** (29 June, Bryan Wendland, 333k online visitors/mo; San Antonio, TX)

Reduce, reuse and recycle. The Audie L. Murphy VA hospital is taking those words to heart. "We've been building every year and this year we decided, as a facility and from our front office, that we need to be recognized for all the hard work we've been putting in for our environmental programs," said Terry Meeker, the hospital's Green Environmental Management Systems (GEMS) program manager.

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**7.9 - Battle Creek Enquirer: [Battle Creek VA: Consider veterans during fireworks](#)** (30 June, Jennifer Bowman, 163k online visitors/mo; Battle Creek, MI)

The Battle Creek Affairs Medical Center said fireworks around the Fourth of July holiday can have an adverse impact on some military veterans with post-traumatic stress disorder. In a news release, officials said the sound of fireworks "can trigger additional anxiety, nightmares and flashbacks" for former service members who were involved in combat. They suggested attending an organized event where fireworks will be set off in a controlled environment...

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**7.10 - Lagniappe Weekly: [Navy vet defrauds VA, says government 'wronged him'](#)** (30 June, Jason Johnson, 124k online visitors/mo; Mobile, AL)

A Navy veteran told investigators he believed the "U.S. government had wronged" him when asked why he had taken thousands of dollars in undue compensation from the U.S. Department of Veterans Affairs. Arthur McCants, III, a 68-year-old resident of Eight Mile, was convicted and sentenced recently for what authorities described as a four-year scheme to "pad" his travel voucher claim forms in order to claim undue mileage.

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**7.11 - WLOS (ABC-13, Video): [16 vets accused of submitting fake travel vouchers to the Asheville VA](#)** (30 June, Krystyna Biassou, 109k online visitors/mo; Asheville, NC)

Sixteen veterans face federal charges for submitting fake travel vouchers for reimbursement to the Asheville VA. Court documents allege the defendants submitted vouchers overstating the distance they traveled for medical appointments or to from medical treatment. Under certain

circumstances, veterans with service-connected disabilities are reimbursed for travel expenses to and from their residence and the VA.

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## 1. Top Stories

**1.1 - USA Today (Video): [VA suicide hotline workers ripped for failing vets](#)** (30 June, Gregg Zoroya, 13.7M online visitors/mo; McLean, VA)

More than a third of troubled veterans are not getting through to the best trained suicide-hotline staffers because of poor work habits at the Department of Veteran's Affairs' call center, according to VA emails obtained by USA TODAY.

Some workers handle only one to five calls each day and leave before their shifts end even though phone lines have gotten busier, the emails say. As a result, 35% to 50% of the calls roll over to back-up centers where workers have less training to deal with the emotional problems of former servicemembers.

"There are staff who spend very little time on the phone or engaged in assigned productive activity," then-crisis line director Greg Hughes complained in a May 13 email to the hotline staff. Hughes left the position June 17. "If we continue to roll over calls because we have staff that are not making an honest effort, then we are failing at our mission." His email suggested that as many as half the workforce was underperforming.

The VA, which confirmed the authenticity of the emails, has been swamped with calls since opening in 2007. The volume increased from fewer than 10,000 in 2007 to more than 500,000 last year, according to a recent Government Accountability Office report.

A 2010 calculation by the VA estimates that 22 veterans kill themselves each day. The VA, which has not updated that estimate, says the hotline "rescues" 30 veterans from suicide each day.

Thirteen days after Hughes' May 13 email message, he drafted a second email saying that the rollover rate had improved slightly to 35% to 40% of calls rolled over to the backup center, down from 45% to 50% when he sent his first message. Still, "We staff to a certain level and then we do not have that coverage because we have staff who routinely request to leave early," Hughes wrote in the May 25 email.

Sloan Gibson, deputy director of the VA, who has set a goal of zero calls going to back-up centers by Sept. 30, told USA TODAY he is unhappy about the staff problems.

"The first reaction is that it pisses me off," Gibson said. "The second reaction is that we got good leadership in place and we're moving to effect dramatic change."

The VA's efforts to provide suicide hotline counseling have taken a battering this year. Last year, the work of the hotline staff was movingly portrayed in an HBO film, *Crisis Hotline: Veterans Press 1*, which received an Oscar for best documentary, short subject. But in February, an inspector general investigation revealed that some of the in-coming calls early last year had rolled over to back-up centers and gone to voicemail.

The VA said it has fixed that problem. But the inspector general also complained about a lack of training and proper accreditation for the back-up centers. A report by the Office of Special Counsel in April said the training and accreditation problems with back-up centers had not been corrected.

"Part of the reason that we want to go toward where we eliminate the backup centers is because we feel we can do a better job," Hughes said in an interview.

The back-up calls centers are part of a network of 164 private, non-profit phone-banks that also provide services to the National Suicide Prevention Lifeline or national suicide hotline.

Hughes' efforts to improve the phone-bank were praised by the GAO. "It seemed like the director was on track to make needed improvements," GAO senior investigator Randall Williamson said.

In an interview, Hughes said he left the job for family reasons. Matthew Eitutis, director of VA Member Services, which oversees the hotline, said an acting director is in place and efforts are underway to hire a permanent replacement.

Asked how many staffers under-performed, he initially said he didn't know the specific number, but later said about 5%.

Hughes said that under a labor agreement, problem employees handling phone calls can be disciplined under a process that begins with raising concerns, as he did in his emails. Gibson, the VA deputy director, said the hotline jobs, where operators sometimes spend feverish minutes trying to dissuade a veteran from taking his or her life, are among the most stressful occupations in the department.

Eitutis said the hotline office is expanding and taking steps to improve services, such as recording phone calls to improve quality of care. Eitutis said the call center will have a record 236 responders answering phones within the next few weeks.

Gibson said changes for the VA hotline are long overdue. "I step back from this and I look at it and I see a function, an activity, that has been chronically under-managed for years," he said.

The toll-free hotline number is 800-273-8255.

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**1.2 - USA Today Video): [4 vets tie up VA suicide hotline with abusive calls](#)** (30 June, Gregg Zoroya, 13.7M online visitors/mo; McLean, VA)

A suicide hotline struggling to assist increasing numbers of former servicemembers in crisis is being hampered by four veterans who call thousands of times per month, tying up phone lines with abusive and even vulgar comments, according to the Department of Veterans Affairs.

The four called 5,619 times in May, more than 4% of all 128,346 calls that came into what's known as the Veterans Crisis Line. One caller alone was responsible for 2,158 calls in May, according to VA press secretary Victoria Dillon.

"Most of the calls are often abusive, vulgar and profane," said Sloan Gibson, VA deputy secretary.

The hotline was established in 2007 to provide counseling and assistance to veterans struggling emotionally. Since then, the volume has increased dramatically and last year the hotline received more than 500,000 calls. The counselors who answer perform an average of about 30 "rescues" — preventing suicides — each day, the VA says.

The service has come under fire in recent months amid reports that some in-coming calls last year were transferred to backup centers, where they were fed into a voicemail answering system. The VA said that problem has been corrected, but it still struggles to answer all the calls coming in and at times 35% to 50% go to backup centers outside the VA where people answering the phone lack the training and resources that the VA call center has.

The VA's goal is to handle all calls without any going to a backup center by Sept. 30.

The agency is expanding hotline staff. But Gibson said efforts can be frustrated by the repetitive, abusive phone calls from the four veterans who are not in crisis.

"It's unacceptable that they would block that kind of access for other veterans and other active-duty service members that really need crisis help and so we're working through this clinically now to address that, cause it's just wrong," Gibson said. "My bottom line was deal with it and deal with it quickly because we're not going to continue to have that happen."

Dillon said the VA will be "restricting their calls only after a consultation with clinicians at their local VA Medical Centers to ensure that these four veterans can be cared for appropriately, while at the same time freeing up staff at the Veterans Crisis Line for those veterans, servicemembers and family members who need to speak with crisis line counselors timely and thoroughly."

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### **1.3 - Stars and Stripes (AP): [Laws encourage alternatives to prison for veterans with PTSD](#) (30 June, Anna Gronewold, 1.2M online visitors/mo; Washington, DC)**

A former Army sergeant's defenders say he truly believed he was protecting fellow soldiers from a Taliban bomber when he emptied 24 rounds at police and firefighters responding to a fire in his apartment.

Psychologists testified that Joshua Eisenhower returned from Afghanistan with post-traumatic stress that made him a paranoid, hyper-vigilant insomniac, and so delusional that he drew his 9 mm handgun whenever anyone came to his door in Fayetteville, North Carolina.

They say untreated PTSD could scramble his mind beyond repair if he spends the rest of his sentence, up to 18 years, in Raleigh Central Prison.

"The only place where he belongs is one where he can get treatment for his PTSD," said Eisenhower's father, Mark. "That was what caused all of this. This never should have happened in the first place."

North Carolina is now considering enabling judges to consider PTSD as a specific mitigating factor when sentencing military veterans like Eisenhower, despite criticism that such measures are unnecessary and could end up harming people with the disorder.

As many as one in five veterans who served in Iraq or Afghanistan develop post-traumatic stress disorder each year, according to the U.S. Department of Veterans Affairs.

"I would hope the public policy of our state would be that we care about our veterans enough to do this for them," said state Rep. Billy Richardson, whose district includes more than 57,000 military personnel at Ft. Bragg, one of the world's largest military complexes.

Richardson's bill was approved by the House Judiciary Committee this session.

Most states lack such a law. Among them is Texas, where the well-documented PTSD of Eddie Ray Routh did not save him from life in prison without parole in the killing of "American Sniper" Chris Kyle and another veteran.

California, Kansas and Oklahoma do allow a court to consider post-traumatic stress disorder as a mitigating factor when sentencing a veteran in a criminal case. North Dakota lawmakers ordered a study of the issue last year.

Critics say the law is misguided, because PTSD already is among the many mental conditions that can reduce culpability in North Carolina and many other states. They worry about adding to the stigma veterans face, and leaving out others with PTSD, such as victims of war, domestic abuse and gang violence.

Dr. Allen Frances, an Army veteran and expert on combat-related stress disorders who calls himself a "PTSD skeptic," told the trial judge that Eisenhower "is an absolutely classic case of unmistakable and extremely severe PTSD."

But Frances, who chaired the committee that revised the American Psychiatric Association's recommendations on PTSD treatment, said a law associating veterans and PTSD with criminality would be a big mistake, partly because the condition is self-reporting and easy to fake.

"I can't imagine someone facing a long sentence who wouldn't have PTSD, under the circumstances," Frances said. "Whenever there's a reward for a diagnosis, rate of that diagnosis go up very suddenly and rapidly."

The North Carolina bill would enable but not require judges to cite PTSD when issuing lesser sentences or ordering specific treatments, as long as the veteran was diagnosed before the crime.

The U.S. Army Surgeon General in 2012 recommended specific treatments for veterans with PTSD, including cognitive behavioral therapy, an intensive program in which participants are encouraged to identify, challenge and restructure negative thought patterns.

At Eisenhower's sentencing, prosecutors said he neglected to actively seek out treatment for his worsening PTSD and consciously chose to drink heavily before he opened fire on the first responders.

Judge Jim Ammons found Eisenhower guilty of 15 counts of assault on law officers, none of whom were seriously injured. He said Eisenhower belongs in prison because he could endanger innocents if he experiences another flashback.

Eisenhower apparently still believed he was under fire in Afghanistan when he awoke in the hospital, nervously asking the nurse treating his four gunshot wounds to tell him, "who's got the roof?!"

Later, behind bars, hearing gunfire from a nearby shooting range caused him consistent flashbacks and distress. He was moved to Raleigh Central, where he remains heavily medicated.

The judge strongly recommended psychiatric treatment, but sent him to prison despite a warning from Raleigh Central's chief of inpatient services, Dr. Michael Larson, that staffing limits and security concerns in the state prison system would prevent any semblance of the trauma-focused psychotherapy recommended by the Surgeon General.

Fayetteville neuropsychologist G Martin Woodard also advised the judge, saying prison can lead PTSD sufferers to shut down emotionally while amplifying their the numbing, guilt, nightmares and flashbacks "to the point of potentially psychotic symptoms."

But some experts worry about the unintended consequences of legislating treatments in criminal cases for a certain class of defendants.

"It's ambiguous whether we are doing this because we're concerned about PTSD or whether we are doing this out of our natural, appropriate sympathy for our vets," said Betsy Grey, an Arizona State University law professor who specializes in neuroscience.

Grey, who published a paper on PTSD and mitigating factors in 2012, said the legislation communicates social leniency, falsely suggesting that afflicted veterans are more deserving than others with PTSD.

Other experts say the justice system shouldn't consider PTSD alone, since other factors, since substance abuse, financial instability and other factors put veterans at greater risk for criminal behavior.

A "PTSD diagnosis is relevant, but it's the tip of the iceberg," said Duke psychiatry and behavioral sciences professor Dr. Eric Elbogen, who coordinates the recovery of veterans at the Durham VA Medical Center.

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**1.4 - Military Times: [VA commission health care report — contentious until the end](#)** (30 June, Patricia Kime, 482k online visitors/mo; Washington, DC

The release of a report next week on the future of Veterans Affairs health care is not likely to end debate over what is the right mix of services provided to veterans by VA medical facilities or the private sector.

The Commission on Care is expected to release recommendations Wednesday that call for VA to strengthen its performing hospitals and clinics, shut its underutilized facilities and establish nationwide networks of private providers that veterans could use instead of going to VA.

But some panel members say the commission's deliberation process has left them without a voice, charging that chairwoman Nancy Schlichting has quashed opposing views by refusing to call for a vote on the final report or allowing any supplements or addenda.

Speaking for himself and two other commissioners, Darin Selnick, a former VA employee and management consultant who chaired a task force on VA health care organized by the Concerned Veterans for America, said the members would like their objections included.

"We don't have a problem with the recommendations so much, it's just that we don't think they go far enough or solve the problem," Selnick said. "There is more that needs to be done."

The dispute is not surprising in what has become an 18-month heated discussion over the future of VA care. Proposals floated by commissioners, Congress and veterans advocacy groups range from closing all VA facilities and turning the Veterans Health Administration into a health insurance management organization, expanding the Veterans Choice program to all veterans and turning VHA into a not-for-profit corporation overseeing specialty medical centers and managing payments to private providers.

Most of the proposals that include some variation of private care have raised the hackles of major veterans groups, and in mid-June, VA employees joined the fight, holding rallies outside VA hospitals to protest proposals to shut down facilities and expand private care.

On June 22, Senate Veterans' Affairs Committee Chairman Johnny Isakson, R-Ga., and House Veterans' Affairs Committee Chairman Jeff Miller, R-Fla., wrote Schlichting asking for a vote by commissioners on the final report and emphasizing that they want to hear all commissioners' opinions on the matter.

They said they expected the report to include a tally of commissioners' votes as well as supplemental material with any opposing views.

"We write to urge you to ensure that the individual viewpoints of each commissioner be accurately and transparently reflected in the commission's final report," they wrote.

Schlichting defended her approach to the final report in an email to commissioners. She said she is trying to show consensus among the group and noted that the final report acknowledges differences within the body of the text.

She added that commissioners could opt not to sign the final version but added that the "strength of the report relies on consensus."

"Emphasizing again the importance of the consensus we have reached in open meetings, the hard work invested in getting to that consensus, and the charge that this be a 'commission report,' I hope you will understand my decision not to include supplementary views or other additional statements in the final report," she wrote.



The Commission on Care was created in 2014 under legislation that established the Veterans Choice program. It is expected to provide Congress with a framework for designing the Veterans Health Administration for the next 20 years.

VA officials say transformation of the VA health care system is underway and they have asked Congress for legislation that would allow them to consolidate its numerous community care programs, including the Veterans Choice program, downsize its real estate holdings and shut 12 to 15 underused facilities.

Members of Congress also have pitched their own VA health care reform proposals. Sen. John McCain, R-Ariz., has introduced legislation that would make the Choice program permanent and available to all veterans, and Rep. Cathy McMorris Rodgers, R-Wash., has put forth a proposal to consolidate VA health facilities under a government-chartered, not-for-profit corporation with a board of directors and to give all new veterans access to private health care.

Whether lawmakers will act on the commission's final report is unknown. Isakson and Miller said that the commission's work will provide a framework but it is "just the beginning of the work that Congress, VA and the American people must do to increase access to care for our nation's veterans."

Selnick said he wants the commission's final report to reflect the panel's discussions and rise above the political debate on privatization that has colored debate on the issue.

"Would you call Tricare system privatization? We are not trying to privatize. We are trying to make sure that VHA itself is a good provider, and we also want to make sure that veterans have other sources that meet their [health care] needs," he said.

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## **2. Access to Benefits/Care**

**2.1 - Yahoo! News: [VA suicide counselors' work ethic questioned, report says](#)** (30 June, Jason Sickles, 88.4M online visitors/mo; Los Angeles, CA)

Veterans contemplating taking their own lives may not be reaching the most qualified counselors when they call the Department of Veterans Affairs suicide hotline, a USA Today report reveals.

The newspaper, citing internal VA emails they obtained, reports some of the government's best-trained suicide-hotline staffers — facing an even higher workload with the volume of calls at record levels — were handling only one to five calls day and leaving work early.

Poor work habits, USA Today reports, have recently resulted in 35 percent to 50 percent of calls rolling over to backup centers where counselors don't have access to veterans' electronic medical records and are less experienced in dealing with the emotional problems of former service members.

"There are staff who spend very little time on the phone or engaged in assigned productive activity," former VA call center director Greg Hughes wrote in a May 13 email obtained by the

newspaper. “If we continue to roll over calls because we have staff that are not making an honest effort, then we are failing at our mission.”

The Veterans Crisis Line — which allows troubled veterans to reach counselors via telephone, web chat or text messaging — experienced a nearly 700 percent increase in phone calls between 2008 and 2015.

A 2012 report by VA researchers estimated that 18 to 22 veterans commit suicide each day, but those calculations have been scrutinized by some for being too high.

The allegations made in the internal emails come on the heels of a recent congressional investigative report that questioned the call center’s responsiveness to contacts made via mobile text.

According to Government Accountability Office auditors, four of their 14 test text messages did not receive a response from VA staffers. Of the remaining 10 test text messages, eight received responses within two minutes, and two received responses within five minutes, states the report made public this week.

“VA officials stated that text messages are expected to be answered immediately, but, as with online chats, the VA has not yet developed formal performance standards for how quickly responders should answer text messages,” auditors wrote.

Crisis Hotline: Veterans Press 1, a 2013 HBO documentary, won an Oscar for its poignant portrayal of the VA’s hotline staff’s emotional efforts.

When calls don’t get answered, they are forwarded to a network of 164 private, nonprofit phone banks that also provide 24/7 services for the National Suicide Prevention Lifeline. A 2015 Inspector General investigation found that some incoming calls from veterans went to voicemail after rolling over to the backup centers.

“The first reaction is that it pisses me off,” said VA deputy director Sloan Gibson, when USA Today questioned him about the report of poor work habits. “The second reaction is that we got good leadership in place, and we’re moving to effect dramatic change.”

Gibson and other officials said they are currently adding counselors and taking steps to improve quality of care.

“I step back from this, and I look at it and I see a function, an activity, that has been chronically undermanaged for years,” Gibson told the newspaper.

Hughes, the call center’s former director, left his position two weeks ago for family reasons, USA Today reported.

In a second email before resigning, Hughes wrote the call rollover rate had improved during the month of May, but that the center didn’t have the manpower to allow for absent workers.

“We staff to a certain level, and then we don’t have that coverage because we have staff who routinely request to leave early,” Hughes wrote on May 25.

Compounding the workload problem, Gibson told the newspaper in a separate story, is that four veterans are believed to have called the hotline 5,619 times in May, tying up phone lines with “abusive, vulgar and profane” language.

A spokeswoman said the VA has identified the veterans and will be “restricting their calls only after a consultation with clinicians at their local VA medical centers to ensure that these four veterans can be cared for appropriately.”

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**2.2 - KTUT (CBS-11): [Dozens Of Veterans Protest Possible Changes To VA System](#)** (30 June, Joel Thomas, 930k online visitors/mo; Dallas, TX)

A proposal in front of President Obama to take services out of centralized VA buildings and send patients to private doctors, is spurring open protest among veterans who worry they’ll lose the only caregivers who understand their needs.

“We think differently,” said U.S. Army Major Yvonne Tims who is a reservist who served in Iraq. “A lot of us when we come back from overseas we’re on autopilot.”

Tims said she still jumps for cover when she hears loud noises. It’s one of the PTSD symptoms she says only the VA can truly treat.

“Everybody I’ve come in contact with since I’ve been coming to the VA, they understand,” she said. “They have empathy. Not apathy.”

“I just being there for them,” said VA worker Lakeysa Townsend. “I don’t want to lose that.”

Townsend said without the VA, her patients wouldn’t have proper medical care.

“I work for homeless veterans. That’s very important. where would they go?”

Tims and Townsend were among dozens of protestors who stood across the street from the Dallas VA Hospital, the second largest of its kind in the U.S., and held up signs, wore shirts and gave speeches in favor of improving the current system rather than privatizing large portions of the VA, shrinking services at crowded hospitals and sending the patients into the private sector.

“If you’re looking at just moving the crowds through that’s one thing if you’re looking at and how do we do the best job of getting to patients quickly, that’s something else,” said political analyst John Weekly. “Privatization is one of several ideas that’s come up.”

Opponents of the plan worry President Obama may pass it with a presidential order and no debate. That could mean reform of the VA would come to a grinding halt if congress refused to fund it

“I can’t see the Congress and the president compromising on something like this during election year because you’re going to really disturb a lot of constituents,” Weekly said.

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**2.3 - WBTB (CBS-3): [Salisbury VA employees hold picket over possible privatization](#)** (30 June, 877k online visitors/mo; Charlotte, NC)

VA employees in Salisbury held an informational picket Thursday to raise awareness of potential VA hospital closings proposed by the VA Commission on Care.

"We're out here protesting the Commission on Veteran's Care," employee Essie Hogue said. "They're meeting and they're telling Congress that the best way to treat veterans is to privatize the VA and let veterans get their care through the private sector."

The employees don't agree with that idea.

"We know that's not good for the veterans. It's not what the veterans want," Hogue said. "We're here to let the public know what they're trying to do so that something can be done about it."

The picket, held from 11 a.m. to 12 p.m. outside the W.G. (Bill) Hefner VA Medical Center on the 1600 block of Brenner Avenue, was held in hopes to raise awareness about that possibility.

"We know that Congress will soon vote on whether or not to privatize VA, or to put more money into VA to support," Hogue said.

The picket was held by AFGE President J. David Cox Sr, VA employees and members of AFGE Local 1738.

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**2.4 - WAVE (NBC-3, Video): [Louisville VA may have given improper exams for traumatic brain injuries](#)** (30 June, Eric Flack, 651k online visitors/mo; Louisville, KY)

More than 20,000 U.S. veterans may have been given improper exams for traumatic brain injuries suffered in battle. The Department of Veterans Affairs says that means some of those vets could be walking around with undiagnosed brain injuries. That includes service members in Louisville.

When scars from the battlefield are on the inside they can be hard to spot. Especially, if you don't know what to look for.

In a stunning revelation, the Department of Veterans Affairs now says 24,588 vets making disability claims for traumatic brain injury, or TBI, were evaluated by people who weren't qualified to do the exam.

"To think that there are veterans have have seen unqualified people at the VA, and now have gone back out on the street without a diagnosis? It's terrifying to think about," said Jason Quick, Regional Director for Concerned Veterans for America.

Quick said the Vets at the greatest risk are the ones walking around with undiagnosed traumatic brain injuries, and later decided to self medicate with drugs, and alcohol.

"The effects of a misdiagnosis in cases like this, could be fatal," Quick said.

Eric Hazard, spokesman for the Louisville Veterans Benefits Office and Dr. Stephen Spanbauer, chief of compensation and pension for the Louisville VA Hospital, say they don't know if veterans groups have reason to be upset. This despite the fact that 28 of the affected veterans came from the Louisville VA.

Those veterans were examined not by a specialist - like a neurologist, psychiatrist, physiatrist or neurosurgeon - but by a general physician or in some cases, a physicians assistant or nurse practitioner.

Spanbauer contends anyone who performed a TBI exam did have some training in brain injuries and because a veteran wasn't seen by a specialist doesn't mean a traumatic brain injury was misdiagnosed.

"Did they get it right? Did they get the diagnosis right?" Spanbauer said. "I'm gonna bet we got it right."

That's not good enough for the Department of Veterans Affairs. It has updated its guidelines requiring all traumatic brain injury exams be done by a specialist. The VA is also sending out a letter to veterans who did not see a specialist the opportunity to resubmit their TBI claim and receive a new evaluation for Traumatic Brain Injury.

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**2.5 - Daily Press: [Hampton VA chief cites progress, more work needed](#)** (30 June, Hugh Lessig, 600k online visitors/mo; Newport News, VA)

In December 2014, the Hampton VA Medical Center had the longest wait times for primary-care patients of any Veterans Affairs hospital in the nation.

A subsequent visit by Sen. Mark R. Warner was not exactly a goodwill call. Professing his disappointment, the senator called for a management strike team to visit the hospital and recommend improvements. Hampton VA leaders vowed to address staff and space shortages that contributed to the problem.

At the mid-point of 2016, the situation has changed.

The Hampton campus is awash in new construction projects, from a new mental health center to specialty care that includes a sleep lab. Wait times are down. Staffing is stable. Sen. Warner has become a fierce advocate for the medical center's top priority: a new health-care center in South Hampton Roads.

Mike Dunfee, medical center director, cautioned that a positive trend does not allow him to declare victory.

"I think, overall, we have made progress," he said last week. "We are not anywhere close to saying we have accomplished everything we need to accomplish."

Dunfee and his staff fielded questions June 29 at an Open House and Assistance Fair held on campus. Veterans came to learn more about services at the VA, and Dunfee spent some time visiting with veterans one on one.

John H. Golden Jr., a Vietnam combat veteran whose cap bears the insignia of the storied 1st Cavalry Division, said he was satisfied with the treatment he received for a bad knee.

"Contrary to belief, the VA is a good health-care provider," he said.

He acknowledged that some patients have grounds for complaints, but he tried to put it in perspective.

"It's a give-and-take thing," he said. "Some veterans come in and they have legitimate issues. And there's some that come in — it may not be the case."

#### Construction a-plenty

The open house was held at the campus chapel, built in the earlier part of the century and typical of the historic structures in the Hampton complex. Picturesque buildings, an expansive waterside view and a smattering of gazebos contribute to the appearance at the Hampton VA. But the campus has precious little open space, and some old buildings are impractical when it comes to delivering modern health care.

So Hampton has embarked on several projects to beef up its capability.

A scenic white house that stood out for anyone entering the grounds from Mallory Street has been torn down to make way for a 25,000-square-foot mental health center. That project is about 45 percent complete, said Scott Brown, director of facilities management.

Also in the pipeline: a 28-bed dialysis unit, a six-bed sleep lab, a new eye clinic and various projects to create additional 300 spaces in the parking-challenged campus.

The hospital would like to expand further in South Hampton Roads. More than 60 percent of its patient pool is located in cities such as Norfolk and Virginia Beach. Congress has yet to authorize a 155,000-square-foot health care center for that area, despite lobbying from Warner and others. The delay stems from how the projects are scored for financial impact.

The Hampton VA has been able to expand its community outpatient clinic in Virginia Beach, adding 5,000 square feet to a 10,000-square-foot facility. If fewer veterans have to travel to Hampton from Virginia Beach and Norfolk, it makes the situation at Hampton that much better.

"Anything that we can do to make access easier down there will make access easier at the Hampton VA," Dunfee said.

#### Staff and patients

Even as the Hampton VA grabbed headlines with long wait times, it was working to hire more health-care providers. Dunfee said the current staffing situation is stable, but gaps remain.

"In some ways, we are in a better position now than we have been in the last couple of years," he said.

Wait times dropped throughout 2015. The average wait time for primary-care patients is under 10 days, down from a high of 30 days in December 2014. Dunfee said Hampton must still improve wait times for new patients coming into the system. The 10 days is an average of new patients and those already in the system.

Dunfee said the evening and weekend clinics will give patients more options to get care.

One thing that hasn't changed is the workload. The Hampton VA has seen patient workload increase 27.2 percent over the past five years. The national average in the VA is 8 percent.

Because of that, staffing will be a continuing challenge.

"Since I've been here, for three years, we've never stopped recruiting for primary-care providers," he said.

For such a varied and complex campus, Dunfee said the underlying challenge is relatively simple.

"A lot of this," he said, "boils down to human interactions and taking ownership for making sure that each and every one of our veterans has a good experience."

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## **2.6 - Raw Story: [Opioid scare run amok: VA won't buy pain medication for Vietnam vet after leg amputation](#)** (30 June, Sarah K. Burris, 5M online visitors/mo; Boynton Beach, FL)

Vietnam veteran Richard Howard had an overproduction of red blood cells in the bones of his right leg. The problem created so many circulation problems his leg had to be amputated. While the Veterans Administration took care of Howard for the procedure, prosthetic and aftercare therapy, they won't pay for the prescription for his Oxycodone pills to stop his pain, KATV reports.

The opioid addiction has become so widespread both inside the veterans community and among non-veterans, that the Department of Health and Human Services reports over 650,000 opioid prescriptions are dispensed on a given day. According to a Frontline investigation, veterans are at a greater risk for addiction because they suffer greater cases of chronic pain.

That was little consolation to the 100 percent service-connected disabled vet, however, who just hoped his pain would stop. The northern Franklin county, Arkansas man explained he could understand if they sought to underprescribe out of caution, but to pay for nothing after 19 surgeries on his leg is a little absurd.

"But it's been a hard road (sigh)," admits Howard. Despite being sprayed "like cattle" with Agent Orange during the war, Howard describes the ordeal as the hardest of his life. Physical therapy

begins this week for Howard, where he was expected to go through the excruciating process of learning to walk with his new prosthetic and without any pain medicine.

After reaching out to local news as well as Sen. Tom Cotton and Sen. John Bozeman's offices, Howard got a call from a nurse promising to get him some pain medicine.

"The nurse called and apologized this morning and said it was her fault," Howard explained.

He expects the pain medicine to arrive by Friday.

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**2.7 - Florida Today: [Funeral marks start of use of caisson at VA cemetery](#)** (30 June, R. Norman Moody, 561k online visitors/mo; Melbourne, FL)

A Gypsy Vanner horse guided by Gregory Gorman and his wife, Debra Gray, stepped slowly as it pulled a caisson carrying the remains of Army veteran Eugene Jesensky II.

Tranquility Country, a newly-formed nonprofit organization, officially began today providing a caisson for funerals at Cape Canaveral National Cemetery, making it one of only four national cemeteries, including Arlington, to offer such a service.

Horse-drawn caissons and limbers are offered for burials for men and women with the rank of colonel or higher at Arlington National Cemetery, Fort Sam Houston National Cemetery and Camp Nelson National Cemetery. Tranquility Country will offer it to all military and veterans, and they will accept donations for the upkeep and expenses. Jesensky attained the rank of corporal.

Caissons and limbers are two-wheel carts designed to transport artillery pieces and ammunition. Together, they have long been used to carry caskets for military funerals.

Jesensky, 73, of Mims, a Vietnam veteran who served in the as a radio repairman with the 82nd Airborne Division, died June 20.

About three dozen friends gathered for the funeral under a shelter as a soldier, one of three from the 396th Transportation Company in Fort Stewart, Georgia, played Taps. The soldiers folded the American flag that had draped over the coffin and presented it to Jesensky's teenage daughter.

The Department of Defense is responsible for providing military funeral honors, to include folding and presenting the United States flag and the playing of Taps. The military honors detail usually consists of two or more uniformed military personnel. Veterans organizations also assist in providing military honors at national cemeteries.

Brevard Honor Guard, a group formed by veterans from American Legion Post 1 and 359, and Veterans of Foreign Wars 4228, rendered a 21-gun volley.

Born on an Army base in California, Jesensky, was drafted and served two years in the military including in the Vietnam War. After military service he became a cowboy, working on a ranch and later owning several horses. He later worked as a welder, owning a welding business. He



also worked at Kennedy Space Center before going to work for Florida Department of Transportation, retiring in 2008.

Gorman said Jesensky had a stroke in March and told Gorman, who had known him for many years, that he only wanted to make sure that his 19-year-old daughter would be prepared to take care of herself.

"He said, 'all I want is to make sure she graduates from high school,'" Gorman said.

His daughter, Victorya Jesensky, graduated May 19 from Astronaut High School and plans to join the Army Reserves.

Victorya said she was able to help her father after he became sick.

"I liked taking care of my dad," she said. "He took care of me my whole life."

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**2.8 - WTVM (ABC-9, Video): [Roby gathers VA, healthcare leaders to improve service for veterans](#)** (30 June, Hannah Lane, 393k online visitors/mo; Columbus, GA)

The Central Alabama VA is taking steps toward better serving veterans. Thursday, Rep. Martha Roby (R-Dist 2) held a meeting with leaders from the VA and the local healthcare community.

The Central Alabama Veterans Health Care System has been one of many under scrutiny for long wait times and other issues over the last few years.

Roby's office said, based on the latest data provided by the Department of Veterans Affairs and HealthNet, the average wait time for completed primary care appointments has been cut by more than half in the past year. It's gone from 16.29 days to 7.2 days.

Also, the number of paid referrals to outside care providers is now more than 7,600. That's up from only 56 a year ago.

That's been the goal, for veterans to have choice and be able to see private practice doctors, mainly to cut down on those wait times. The problem there has been issues with billing, primarily confusion about where outside physicians should send bills, either to the VA or HealthNet, a company specializing in connecting veteran patients to outside health care providers.

"HealthNet's commitment to get this online, so nobody has to call an 800 number and wait for an hour to find out whether or not the claim is authorized and then know where to send the bill, this will help streamline," Roby said. "Long term, we've got to make it a one-stop-shop. The provider should under no circumstances have to determine whether it's VA or choice. They ought to just be able to send the bill to one place and know it's going to get paid."

Roby said great strides have been made to help improve the healthcare of veterans, but she believes more needs to be done, in particular when it comes to mental health.

"I think we all here recognize that there is much work left to be done on behalf of our nation's veterans. We can be an example here in the state of Alabama. We have an opportunity right here in Central Alabama Veterans Health System to show the rest of the nation how we can do this and how we can make it successful for our veterans to have access to the best care that we can give them in a timely fashion," encouraged Roby.

The group of leaders plan to meet again to make more improvements in three months.

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**2.9 - Panama City News Herald: ["My pain is real" Veterans talk about VA](#)** (30 June, Collin Breaux, 377k online visitors/mo; Panama City, FL)

The pain is chronic for Army veteran Garry Byng.

Byng, who served from 1971 to 1977, has had chronic pain for more than 30 years. He has been in BayCounty for 13 years, but said he felt he received better medical treatment in California, where he took a variety of pain medications.

While he enjoys living in Panama City Beach, VA doctors have reduced his medications, citing a nationwide cut. He had a hip replacement last October and also deals with nerve damage. He doesn't want to buy pain pills or go doctor shopping.

If it wasn't for his adolescent son and daughter he cares for, he's not sure he'd still be around since he can barely function on his current dosage.

"My pain is real," said Byng. "I have X-rays and MRIs. I get three pills instead of four. They're on the very lowest dosage there is. I've had to grin and bear it. I can only go so far."

Byng spoke during a town hall hosted by the Gulf Coast Veterans Health Care System (GCVHCS) at the treatment facility on RichardJackson Boulevard. About 50 veterans attended, some of whom spoke of frustrations with VA care while others praised the help they have received.

In response to Byng's comments, GCVHCS CEO and Director Anthony Dawson said the medical team for Byng can communicate with him when they change treatment plans. Dawson added that Byng should be taken care of since he was a hero, and if he didn't get the answers he needed on where his treatment was headed, he should let Dawson know.

Other veterans voiced concerns ranging from also dealing with pain management to not hearing back from GCVHCS staff when calling for appointments to a lack of available mental health professionals.

Dawson addressed each concern and often told the veterans to stay in touch with him on the progress of their concerns.

Numerous veterans also met with GCVHCS staff directly after they spoke to have their problems addressed.

Army veteran Jeffrey Ulmer, who served from 2002 to 2012, complimented GCVHCS for the in-treatment program at its Biloxi, Mississippi, facility. Ulmer is in a therapeutic justice program overseen by Justice Michael Overstreet and wants an in-treatment program in Panama City and an outreach effort to troubled veterans.

“Everything I’ve had with you all has been getting better and better, and it was already great,” Ulmer said. “It lifted me up out of a hole I was in. I’d like to be able to tell some of my buddies out in the streets going through hard times that there’s hope.”

No clinics in Panama City have beds and there are no plans to provide such because the clinics aren’t designed for beds or overnight stays, said Dawson, who added that his group is partnering with community organizations to get veterans into programs where beds are available.

Other veterans did not have such pleasant experiences with the VA.

Tim Ford, a retired major who served in Afghanistan, said he has had a spinal fusion and deals with chronic pain. He said was told by his primary care provider that he was taking too many pain medications, and said while he understood there is a national opioid abuse epidemic, he had to go home that night and deal with his pain.

He deals with post-traumatic stress disorder exacerbated by dealing with the pain, and said he didn’t want to end up one of the “22 a day,” a widely cited statistic of veteran suicide rates.

“Pain elevates your anxiety,” Ford said. “I have enough trouble dealing with the anxiety. I have two options: deal with the pain or end the pain. Something has to be done.”

In response, Dawson said he would work with Ford’s physician and come up with alternative ways to manage the pain and push forward with the medication issue.

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**2.10 - KENS (CBS-5. Video): [Transgender S.A. veterans hope for more benefits](#)** (30 June, May Ann Martinez, 333k online visitors/mo; San Antonio, TX)

The Pentagon has lifted the ban on transgender Americans serving openly in the military and announced that it will pay for current members of the armed forces to undergo gender reassignment surgery.

In San Antonio, Military City USA, transgender veterans hope the ruling will mean more medical benefits for them.

Antonia Celeste Padilla is still legally a man, but her Department of Veterans Affairs ID card identifies her as a woman.

Padilla joined the U.S. Air Force in 1978.

"I joined primarily because I was an Air Force brat," Padilla said. "My dad had been a lifer in the military and I thought, 'Hey, this will be a good thing for me to do because it will make a man out of me.'"

After basic training at Lackland Air Force Base in San Antonio, being stationed at Kirkland Air Force Base in New Mexico, and another four years, she felt like she didn't fit in. Padilla left the military and started her transition in her mid-40s.

In her day, being openly transgender in the military would have meant being discharged. She's grateful that a younger generation of transgender Americans don't have to sacrifice a military career for their gender identity.

"It's a mirror of society today. I think the fact that marriage equality was enacted last year and now this lift of a ban of transgender service, I think it really reflects where this country is headed," she said.

Thursday's decision has been in the works for years. Since 2011, Veterans Affairs has paid for transgender services for veterans.

A statement on the VA's website says, in part:

*VA provides health care for transgender patients, including those who present at various points on their transition from one gender to the next. This applies to all veterans who are enrolled in the VA's health care system or are otherwise eligible for VA care, including those who have had sex reassignment surgery outside of VHA, those who might be considering such surgical intervention, and those who do not wish to undergo sex reassignment surgery, but self-identify as transgender. Intersex individuals may or may not have interest in changing gender or in acting in ways that are discordant with their assigned gender. VA does not provide sex reassignment surgery.*

*In Padilla's case, the VA pays for weekly estrogen shots and a doctor who monitors how her body responds to the hormones.*

*Padilla has not had gender reassignment surgery. She said that it's expensive and hopes that Thursday's change will one day mean that the VA will pay for at least a portion of the surgery for veterans. In the meantime, she says the VA has treated her with dignity and respect.*

*"They're competent, they're knowledgeable and, more importantly, they're compassionate about what they do," Padilla said. "It's quite a pleasure to walk in to see a nurse or a doctor and hear them say, 'Antonia, how's it going,' because most people would not address me so warmly."*

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**2.11 - WLUC (NBC-6, Video): [Big changes may be in store for VA healthcare](#)** (30 June, Harri Leigh, 315k online visitors/mo; Negaunee, MI)

It all started when a VA medical center in Phoenix became embroiled in a long wait list scandal in 2014. Nearly 40 people died while waiting for medical appointments, CNN reported at the time. In response, Congress enacted the Choice Program, meant to speed up wait times.

The Commission on Care is expected to release its report Wednesday, July 6. According to an unreleased, 34-page draft document, the VA healthcare system is "seriously broken," with "no efficient path to repair it." It cited challenges with the VA's budget, operations and leadership.

"When they enacted the Choice Program in 2014, they also mandated a Commission on Care to evaluate the future of veterans care services," Coast Guard veteran Michael Brabender said.

The Commission on Care is expected to release its report Wednesday, July 6. According to an unreleased, 34-page draft document, the VA healthcare system is "seriously broken," with "no efficient path to repair it." It cited challenges with the VA's budget, operations and leadership.

In addition, some veterans say they become entangled in red tape when they try to get answers about their healthcare or medical problems. The Commission's conclusion: the VA should transition to private healthcare.

"I'm leaning towards I don't want to see it happen, but as long as the vets are treated properly and they get the care that they're entitled to and they need, I may be flexible in that category," Coast Guard veteran Michael F. Day said.

Privatization means underutilized VA facilities would close, and patients would transfer to community care. The VA would continue to pay for the care.

Of the 15 commission members, four represent major medical centers.

The medical centers could profit from privatization, Washington Monthly and other publications have said. Those same sources said two members are aligned with an advocacy group, Concerned Veterans for America. CVA is mainly funded by the Koch brothers—David and Charles—who have long supported libertarian causes, like privatization of markets, according to Forbes. Only one member is from a mainstream veteran service organization.

But don't expect changes to happen right away. The report still needs to go to the president. If he approves it, it would still need to go through Congress. Then the transition would take about 20 years.

U.S. Representative Dan Benishek (R-MI 1st District) of Iron Mountain declined to comment for this story.

"We have challenges in VA and we own them, but the transformation that [the report] talked about is well underway and already delivering measurable results for improving access to care and improving the Veterans experience," Deputy Secretary of Veterans Affairs Sloan D. Gibson said.

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**2.12 - Montgomery Advertiser: [Roby's diagnosis of VA, community health care](#)** (30 June, Rebecca Burylo, 301k online visitors/mo; Montgomery, AL)

The pulse of the VA and the Community Health Care Network is getting stronger, but is still too weak for U.S. Rep. Martha Roby, R-Montgomery, who checked on the situation Thursday.

Roby gathered leaders from Veterans Affairs and Alabama's health care community for a second meeting to discuss progress in localizing medical coverage for veterans, fix a broken system and streamline processes between the VA and the private sector.

The first candid talk was held in January, which created the pipeline for conversations between the Alabama Hospital Association and government-run health care providers. This week's meetings focused on the billing concerns between those organizations looking at both long-term and short-term solutions, Roby said.

One of the main challenges facing private providers is not knowing the difference between a VA claim and a Health Net-generated claim.

Health Net, contracted by the government, oversees Veterans Choice, a program put into place to allow veterans access to care "in their own neighborhoods," Roby said.

However, since its implementation, problems have arisen, such as private providers not getting paid for their services and thus declining to see veteran patients. One reason for that, Roby said, was that private providers did not know the difference between a VA-generated claim and a Health Net claim and thus they didn't know who should be billed.

That is one of the issues being rectified now, the congresswoman said.

"Health Net has said that very soon outside providers will have access via their website to look up claims and see immediately if it's an authorized claim by Health Net or not," Roby said.

A long-term solution would be to create a "one-stop-shop," where providers wouldn't have to determine the difference, but would be able to send a bill to one place and know that it's going to get paid.

There are claims on both the VA and Health Net side that have yet to be reimbursed to private physicians, she added.

However, marrying the two systems operated by the private sector and the VA is a "bureaucratic" process, said Leslie Wiggins, VA network director for the Southeast Network, VISN 7.

"That's business with the government," Wiggins said. "It's tied to rules and regulations, but I came here for a win-win and I got that. I came here wanting our time and energy spent improving the delivery of health care to our veterans."

Another challenge Wiggins faces is not being able to recruit physicians for the VA — including the Central Alabama Health Care System in Montgomery. An increase in staffing would reduce wait times for veteran patients.

She's currently looking at how to make hiring competitive and attractive at CAVHCS.

The bottom line from the meeting was communication. Holding conversations is vital in continuing to solve issues plaguing the VA.

"I believe that we have seen improvements, but we still have a long way to go," Roby said. "This is our opportunity to show the rest of the nation how we can do this and how we can give veterans access to the best care we can give them in a timely fashion."

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**2.13 - Waco Tribune-Herald: [Bruce Huff, guest columnist: How about a shoutout for our VA system?](#) (1 July, Bruce Huff, 287k online visitors/mo; Waco, TX)**

By all logic, I should be reaping a little of what I sowed. I was a 17-year-old conscientious objector, the son of an Air Force master sergeant, and I hated what Vietnam stood for. Canada was but a few miles away from my high school in Anchorage, Alaska. Easy, right?

Actually, my generation was told that if we avoided being drafted into this increasingly unpopular war, we would be hunted down every day of our lives with no mercy. I believed it.

Watching friends with draft cards in hand march into the recruiting station for what was a sure death sentence, I realized I needed to take charge. My dad was a hard man, but he quite reasonably insisted we go down to all the recruiters' offices and actually shop around for the right fit. My main concern: I didn't want to shoot anyone and I certainly didn't want anyone shooting at me.

January 1970: I enlisted in the U.S. Navy, tested well, then volunteered for submarine service, as I felt that was the safest place on earth.

For the two years I was in the Navy's charge, I drove onto base with a peace sticker, misbehaved and basically acted as proverbial thorn in our military's side. You might call it protesting from within.

Forty years later, 2012: Facing a critical medical dilemma, I was diagnosed with multiple sclerosis early on and kind of lived with a slight inconvenience and then BOOM. At the insistence of my stepmother, I contacted her brother, a retired attorney for the Department of Veterans Affairs, to see what might or might not be available for one with a pre-existing condition. After all, I was not insurable and had been turned down several times, even by AARP.

"Son, get your DD-214 and your keister down to the VA Regional Office," he said. "The worst they can say is no."

He was right. Within an hour I was told matter-of-factly to take this form to the Waco VA and they would handle it from there. I must have had that deer-in-the-headlights look.

The VA system took over. The protocols set in place for every veteran to receive the very best diagnostics, testing and evaluations, one by one, step by step, now swept me into its embrace. My multiple sclerosis was managed. I am comfortable. My neurologists are top-notch, my

nurses sensitive and every step of the way has placed the patient first. I have good quality of life.

During an April town-hall meeting staged by Republican Congressman Bill Flores, I spoke out, asking why we are happily managing my health through the VA to the tune of \$250,000 a year for me alone instead of adopting proven cutting-edge technology such as stem-cell therapy costing less than \$15,000 to return me to productivity instead of a mobility scooter and a cane?

To my surprise, Flores was well-versed and knowledgeable about Veterans Affairs issues. He told me and the crowd of 60 that he would get back to us.

At 4 a.m. on May 11, I woke my wife Sherrell and asked her to pull my legs around the bed, as I couldn't move them, so I could go to the restroom. Next I knew, I was on the floor like a Salvador Dali sculpture. No feeling in my legs and arms, high fever, disoriented and in the worst abdominal pain. Emergency technicians quickly came to my aid. Hillcrest emergency room doctors stabilized me, then contacted the Temple VA medical center. I was transported there immediately.

As we arrived, I was surrounded by the most efficient team of caring professionals in white coats, not knowing how serious things were. When ICU docs came in, I knew. In the ensuing days, I took in antibiotics, steroids and magic sauce. No one left my side. I was important. This is why these people choose to work at the VA.

Sherrell said later, "Wow! You are getting rock star status!"

Oddly enough, this was National Nursing Week and, on my television monitor, as I lay motionless in bed, I was asked to vote for my favorite nurse. What a daunting task. Day 2 became Day 3, then Day 4. I must have had a chorus of 15 nursing angels.

Every medical department paid me a visit, explaining their findings with compassion. They discussed my EKG, blood work, X-rays, neurology, urology, physical therapy and, yes, my hopes.

I'm home now. Feeling is returning, mobility is suspect at best, but it's progress — and I will be better.

Upshot from a skeptic and reluctant hero: The VA system gets a bad rap in the news, in casual conversation, between veterans and politicians. Yes, it isn't perfect, probably because we want it to be everything to all people all the time. But in my career in the Navy, I learned one thing: We're taught, "left, right, left, right," for good reason. Be patient, we'll get there. And so, putting the ugliness of today's politics aside for a moment, I thank:

President Barack Obama, Vice President Joe Biden, Secretary of Veterans Affairs Robert McDonald, Central Texas Health Care System Acting Director Russell E. Lloyd, former Congressman Chet Edwards, Congressman Bill Flores, the Doris Miller VA Medical Center, Olin Teague VA Medical Center in Temple, Hillcrest emergency room staffers, East Texas Medical Service personnel, city of Hewitt first responders — and, especially, the gifted doctors, nurses, lab technicians, transporters, culinary staff, scullery, housekeeping, groundskeepers and valets. They do their jobs selflessly, addressing each veteran with the very best resources available. Job well done!



Incidentally, I failed in my duty. I never could settle on a favorite nurse. My entire team got my vote as each wanted to be a part of my successful recovery. If only I were in charge of handing out the medals.

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**2.14 - KSLA (CBS-12): [Lake Charles VA Clinic groundbreaking finally takes place - after 15 years of hurdles](#)** (29 June, Erica Bivens, 229k online visitors/mo; Shreveport, LA)

A major step forward happened Wednesday for veterans in Southwest Louisiana.

Many are rejoicing Wednesday night after a groundbreaking ceremony for a new VA clinic. In a year's time, the site will hopefully open its doors as the area's newest VA clinic. It's something that's long been needed in Lake Charles.

"How long has it been?" said Mayor Randy Roach.

"Too long," responded the audience.

Southwest Louisiana veterans have fought for a VA clinic for more than a decade.

"When I first took office in 2004, or actually, ran for office in 2004, I remember having a conversation with Mayor Roach and realizing we didn't have a Veteran's clinic here," said Congressman Charles Boustany.

But Wednesday, despite all the hurdles, a groundbreaking ceremony finally took place.

"We celebrate the fact that we are stepping up and providing a facility for the very finest care - the best care possible for our veterans," added Boustany.

The 24,000 square foot clinic will reside in the former Toyota Center off Gerstner Memorial Boulevard on roughly 4-and-a-half acres.

"I'm really excited," said veteran Al Cochran.

Despite the excitement, some veterans still have their doubts.

"It's been so many upsets over the past 15 years; we still wonder if we're being told the truth," explained Cochran.

It's something the VA continues to work on.

"The VA is working very hard to rebuilding the trust between our veteran's and the American people," said Skye McDougall, network director of South Central VA Health Care Network.

While construction is estimated to take about 12 months, having a closer facility is something all veterans say they look forward to.

"I've been driving to Jennings - driving to Alexandria to get my appointments done. This is going to save me a lot of time and effort," said Lee Perkins, retired captain of the U.S. Marine Corps.

Veteran Caroll Landry added, "It'll be about probably 20 minutes from my house to here, so it'll be a big change."

For three years, many sought care out of the mobile clinic on Fifth Avenue.

"And I wanna thank them for their efforts during that time period," said Peter Dancy, director of AVAHCS Medical Center.

While health services will continue at the interim clinic on McNeese Street, which opened last year, Col. Joey Strickland with the Veteran's Affairs Office said, "This community based outpatient clinic will be a place of wellness. It'll be a place of hope."

But many say the work isn't over - concerns over construction finishing in time, as well as adequate staffing remind on the minds of many.

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## **2.15 - Salisbury Post: [VA employees, union rally against increasing access to private clinics](#) (1 July, Josh Bergeron, 200k online visitors/mo; Salisbury, NC)**

When Rosetta Sloan decided to switch jobs in the 1980s, she was mostly looking for stability.

Sloan, who worked at a mill in Salisbury, decided to take a job at the W.G. "Bill" Hefner VA Medical Center. She has now worked at the Salisbury VA for more than three decades.

"At that time, mills were opening and closing and opening and closing," Sloan said on Thursday. "My husband told me 'if we ever want to own our own home and raise our children, we're both going to have to have stable jobs. So, I decided to come to the VA. It was a good job."

Standing outside of the gates of the Salisbury VA, Sloan joined about a dozen other people who participated in a rally against the possibility that veterans' health care would be shifted further toward private providers. When speaking to the Salisbury Post, some participants in the rally raised the possibility that VA hospitals across the country could close because of access to private facilities.

Multiple members of North Carolina's congressional delegation support increasing the ability for veterans to seek care at private clinics. For example, Sen. Thom Tillis, R-N.C., and Rep. Richard Hudson, R-8, have introduced bills to expand access to private facilities. Currently, veterans can only seek care at private providers after meeting certain requirements.

American Federation of Government Employees union National President J. David Cox said he is specifically concerned about a group called the Commission on Care, which was scheduled to deliver a report to President Barack Obama on Thursday with recommendations about health care for veterans. A draft of the Commission on Care report recommends increasing access to private providers. Cox expressed concerns that the final report's recommendations could lead to the closure of VA hospitals.

Tillis has argued that increasing access to private clinics provides reliable health care regardless of the location, cuts down on waste and inefficiency and divers higher quality care for veterans. For his part, Hudson has argued that increasing access to private clinics would end the “red-tape nightmare” that too many veterans face each day.

Cox and other attendees of Thursday’s rally said the current choice program takes money away from VA hospitals that could be used to hire additional physicians. Private providers also don’t provide the best care for veterans, he said.

“When you talk about veterans’ choice, you’re talking about them getting out of a line, where they’re somewhere in the line, to go to the back of a line at a private provider,” Cox said.

David Fleming, an Army veteran who has worked at VA facilities in Salisbury and Hickory, said the quality of the care he receives at VA hospitals is routinely better than a private clinic. Fleming said he would rather wait for an appointment at a VA facility than go to a private provider. However, Fleming said he’s never experienced lengthy wait times.

The draft Commission on Care report’s executive summary states that the quality of VA health care “is generally comparable to that of the private sector and by some measures superior, but it is inconsistent from facility to facility and serves some population better than others.” Access to care remains a problem in parts of the country, the draft report states.

The latest available patient access data shows about 95 percent of appointments at the W.G. “Bill” Hefner Medical Center are complete within 30 days. That’s slightly worse than the national average. Multiple participants in Thursday’s rally said patients wait for longer periods of time at private providers.

Essie Hogue, who leads the local chapter of the AFGE union, said VA hospitals are also able to deal with veterans’ issues in a manner that private providers cannot.

“When we get someone who is having mental problems, we do not call the police to lock them up because we know how to deal with them,” Hogue said.

In the wake of recent scandals involving VA wait times, Hogue said proper oversight of the VA is needed. If run properly, however, she said an adequately staffed VA would eliminate the need for the choice program.

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**2.16 - WJXX (ABC-25, Video): [Released emails show larger problem with VA suicide hotline](#)** (30 June, Steven Dial, 199k online visitors/mo; Jacksonville, FL)

Every day 22 veterans on average commit suicide, and some of those veterans on the verge of committing suicide are being ignored.

Earlier this year we first told you that thousands of calls to the Veterans Affairs crisis center were not being answered.

Last year, more than 500,000 calls were made to the VA suicide hotline.

Our news-partner USA TODAY obtained emails from the former head of the crisis line who said some employees were answering just one to five calls a day.

Every year, thousands of calls come into the VA Suicide Hotline. And every year, thousands of those calls are going unanswered.

"Its just a little disgusting, that is the only word I can use to say it," said Jason Snodgrass with K9s for Warriors.

More than a third of troubled veterans are not getting through to the best trained suicide-hotline staffers because of poor work habits at the Department of Veterans Affairs call center, according to VA emails obtained by USA TODAY.

Those emails are from the recently retired director, Gregory Hughes.

In his emails to staff, he said some workers handle only one to five calls each day and leave before their shifts are over.

One email said 35 to 50 percent of the calls roll over to back-up centers where workers have less training to deal with the emotional problems of former service members.

"I can't imagine being in a position where I am suicidal and calling the suicide hotline and my call being unanswered, that would be devastating probably life ending," Snodgrass said.

The organization he's with, K9s for Warriors, is a Jacksonville organization that matches retired warriors with service dogs. Despite performance numbers increasing since the May email, Snodgrass says much more needs to be done.

"There is always room for improvement. If you have a good or bad situation there is always room for improvement and this is one of those situations where that program can be improved."

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**2.17 - Arkansas Democrat-Gazette: [Bill adds to indigent vets' funeral aid, Cotton seeks to expand federal burial assistance to state, tribal cemeteries](#)** (30 June, Frank Lockwood, 164k online visitors/mo; Little Rock, AR)

U.S. Sen. Tom Cotton urged the Senate Veterans Affairs Committee on Wednesday to pass legislation that would offer federal burial assistance to indigent veterans laid to rest in state or tribal veterans cemeteries.

Currently, the government only pays funeral costs for poor veterans if they are buried in national cemeteries.

The maximum reimbursement for a casket is currently \$2,421; for an urn, it's \$244.

During his testimony, Cotton called his proposal "a simple straightforward change," adding that it would cost the federal government about \$2 million over the next decade.

"I would suggest the cost is minimal, when you consider the sacrifices our veterans have made and the solace this could provide their loved ones," he said.

Cotton introduced S. 3076, known as the Charles Duncan Buried with Honor Act of 2016, on June 20. It has been endorsed by the American Legion, the Veterans of Foreign Wars and other groups.

The bill is named for a former sailor, Charles Cleveland Duncan. The Little Rock man, who died on July 25, 2015, at age 66, didn't have the money to pay for his own funeral. Because the national cemetery in that city is full, Duncan was buried in Fort Smith, 150 miles west.

There was space available at the state veterans cemetery in North Little Rock, but federal law prevented the government from paying for the burial there.

Duncan's wife and daughter lacked the resources to travel to western Arkansas, Cotton said. Neither was on hand when their loved one was laid to rest.

During his short presentation, Cotton showed senators a map, indicating the location of Arkansas' three federal cemeteries (Fort Smith, Little Rock and Fayetteville) and two state-run veterans' cemeteries (in North Little Rock and Birdeye in Cross County in east Arkansas.)

At Wednesday's hearing, the Department of Veterans Affairs indicated its support for Cotton's legislation.

Cotton's legislation "would support VA's efforts to ensure the unclaimed remains of Veterans receive a dignified burial," Deputy Under Secretary for Disability Assistance David McLenachen said in a written statement.

State veterans cemeteries "provide the same services and benefits to veterans and their eligible family members and are required to comply with the same national shrine appearance standards as national cemeteries," he added.

Afterward, Cotton said he is "cautiously optimistic" that his legislation will gain congressional approval this year.

Senate colleagues are supportive, he said. "They recognize that it's not good for the families to have their loved ones buried so far away and it's not good for the taxpayer who ends up reimbursing the cost of, say, transporting the remains from Little Rock to Fort Smith when [they] could have stayed in Little Rock."

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**2.18 - KFOX (FOX-14): [Local VA suicide hotline sees increase in calls](#)** (1 July, Courtney Schoenemann, 160k online visitors/mo; El Paso, TX)

More than one-third of our nation's veterans' calls to the Veterans Affairs' suicide hotline are not being answered, according to a USA Today investigation.

It found more people are calling for help since the hotline opened in 2007.

This is a trend also being seen in El Paso.

USA Today obtained emails from VA staffers.

The emails said 35 to 50 percent of veterans' calls are sent to backup centers with less qualified call takers.

The El Paso VA has seen a steady increase of vets calling the crisis hotline.

But it's unknown how many of them are getting through to the main center.

"I know more what happens on a local level. Once they come to us, that's when we become alerted that there is a vet that needs help that's in crisis of some sort," said Emilia Campos, a psychologist with General Mental Health Program at the El Paso VA.

Campos said when a local vet calls the national hotline, the El Paso VA is notified.

The VA then has 24 hours to follow up with whoever made that call.

"Our suicide prevention coordinator will follow up with the veteran and try to contact them and do a safety assessment and make any other clinical decisions that need to be made," Campos said.

Calls from El Paso veterans to the VA suicide hotline have skyrocketed since 2009.

That year, Campos said 42 calls were made, and the number has gone up every year, topping out at 402 last year.

El Paso veteran David Nevarez has never called the crisis hotline but wasn't surprised to read the report

"The VA has been undermanned, and we've known about this for years, and there's not enough qualified personnel to take care of us, and it's been proven," Nevarez said.

Nevarez said veterans have started turning to each other to talk about their problems instead of relying on the VA.

"It's my hope that veterans step up, fill the holes the VA is not providing," said Nevarez.

U.S. Rep. Beto O'Rourke, from El Paso, responded to the findings.

In a statement, he said, in part,

"The VA's number one priority should be preventing veteran suicide. There's no excuse for this kind of failure."

The El Paso VA has a suicide prevention team of two. Campos said right now, the staff is able to handle the average 40 calls a month, but they want to do more.

"We do want to continue increasing our staffing levels because then we can get, as you know, that will help increase our access to care," Campos said.

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## **2.19 - Insider Louisville: [Veterans and their families voice concerns over VA hospital site on Brownsboro Road](#)** (30 June, Steve Shaw, 112k online visitors/mo; Louisville, KY)

One of the stronger voices at a recent meeting of veterans and their families echoed the urging of "Deep Throat," the famous Watergate informant, to "follow the money" the U.S. Department of Veterans Affairs apparently overpaid for the new VA Hospital site off Brownsboro Road.

In September 2015, the Office of Inspector General released a report concluding the VA might have overpaid for the site by more than \$3 million.

"I would like to know where that 3.1 million went," Jeanne Crawford, the wife of a World War II veteran, said from her wheelchair during Tuesday's public meeting at Robley Rex VA Medical Center on Zorn Avenue. "I know they deal in billions now, but 3.1 million, to me, is astronomical — and it's just gone! And nobody will tell me who got the money."

The short answer: An investment group led by Louisville businessman Jonathan Blue got the money when he sold the 36-acre site at 4906 Brownsboro Road, near the Watterson Expressway, to the Department of Veterans Affairs.

An initial appraisal in December 2010 valued the land at \$9.85 million, while a second appraisal in 2012 valued the land at more than \$12.9 million. In July 2012, the land was purchased at the latter price.

"[Blue] owned the property, he went through the process, he offered a price, it was appraised, and people with the authority for VA agreed to pay" the \$12.9 million, said Martin Traxler, director of the Robley Rex VA Medical Center. "And it's never going to be reversed. It's done."

In late February 2014, U.S. Rep. John Yarmuth, D-Louisville, wrote to the inspector general: "It is critical that not only is the VA a good steward of taxpayer dollars, but that the community has confidence in this project. Therefore, I request that you investigate the actions taken thus far by the VA."

Despite that investigation of two vastly different appraisals that increased the value of the Brownsboro Road site 31 percent — along with a separate, ongoing congressional probe — the crisis of confidence persists.

"Will we have access to the actual contract and how it was called up?" asked Air Force veteran Keith Lewis of Clifton. "Will we actually be able to see it online, how it was negotiated... the parties involved and all that?"

Traxler replied, "I don't know how much you can see. I don't know if, today, you could actually get to the sales contract. All that information, at some point, becomes public information. I don't know how long it takes."

When asked whether any amount of protest at this point would make a difference, Traxler made it clear the process is nearing its end. He indicated that the final Environmental Impact Statement will be completed later this summer: A Finding of No Significant Impact would allow the VA to move forward immediately, while a Finding of Significant Impact would mean the timeline and budget could be extended in order to mitigate any impact.

Traxler then speculated on a mitigation-cost threshold. "For \$100,000, we're probably gonna do it," he said. "If it starts getting into the millions, then the question would be, OK, how far do you go before you ... move another direction?"

Jeanne Crawford, who worked as a secretary at Norton Elementary School for 27 years, wants the VA to move another direction mostly because the intersection of eastbound Interstate 264 and Brownsboro Road is too congested. Outside the meeting room, she said, "I came that way this afternoon about 4:15, and it was already stop and go. On an ordinary Tuesday afternoon at 4, it's stop and go."

And then there's the element of distrust over how the deal was struck: Crawford believes the process was rigged, she suspects the site-selection committee is the culprit and that U.S. Sen. Mitch McConnell knows all about it.

"They may say it's not a done deal, but I'm 99 percent sure it is," Crawford added.

In an interview after the meeting, Traxler, who lives in Glenview and braves the morning and evening rush hours en route to and from the Zorn Avenue hospital via the infamous Brownsboro Road interchange, acknowledges there are many adjectives to describe the traffic, "and none of them is good."

He said he hasn't been briefed on the emerging draft Environmental Impact Statement. "I know they've put corings in the ground to check the aquifer. I don't know if they've done any more studies on the traffic," he added.

Critics maintain that the VA squandered public trust in the project by insisting, for years, that a comprehensive Environmental Impact Statement wasn't required. Eventually, the VA reconsidered amid pressure from opposition groups and a unanimous Metro Council resolution led by Councilwoman Angela Leet, R-7, whose district encompasses the East End site.

In the meantime, alternatives that would have been subject to a more transparent process were eliminated and the preferred alternative was selected by a panel that met behind closed doors.

The ongoing Environmental Impact Statement is studying the Brownsboro Road site selected by the panel, along with a far eastern Jefferson County Factory Lane property no longer on the market.

Traxler said the Factory Lane site was contemplated as a last resort that would spare the time (an estimated six months) and cost of preparing an additional EIS in the event the current study found the Brownsboro Road site too problematic.



But with the failsafe alternative no longer in play, a process that usually compares many feasible alternatives to arrive at the most viable choice for the natural and human environments seems extraordinarily limited.

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**2.20 - The Chronicle-Telegram: [Temporary Veterans Affairs Clinic opens in Sheffield](#) (30 June, Jon Wysochanski, 83k online visitors/mo; Elyria, OH)**

A Veterans Affairs outpatient clinic officially opened its doors this week at a temporary location on the village's south side near Lorain County Community College.

For years it was rumored the U.S. Department of Veterans Affairs planned to leave St. Joseph Community Center in Lorain. Those rumors were confirmed in October when it was announced that a building in Sheffield would serve as a temporary site for the clinic while the VA continues to scope out a spot for a permanent facility.

The 22,000-square-foot building at 5255 N. Abbe Road across from Ruby Tuesday was vacant for a year and previously under a lease agreement with the Cleveland Clinic.

Despite the VA Clinic's temporary status, Army Reserve veteran Tom Ryan said the new location and services are wonderful.

Ryan, 78, is a Vermilion resident who served from 1961-67 in fire direction control for an artillery unit and reached the rank of staff sergeant, and he has gone to the clinic for more than 20 years.

Ryan said getting to the new site is much easier than getting to the old location off Broadway in Lorain because Abbe Road is a stone's throw away from Interstate 90. He added that there is more than enough parking and it is easier for those with disabilities to get around outside and inside.

"They have done a wonderful job," he said. "It was a seamless move really. I was there on Monday and Tuesday to visit my general practitioner and all his equipment was there. Everyone was friendly and treated us first class."

One initial downside to the new site is that there appears to be some confusion between the VA Outpatient Clinic, 5255 N. Abbe Road, Sheffield, and the nearby Lorain County Veterans Services building, 1230 N. Abbe Road, Elyria.

Both sites are less than a mile apart and Lorain County Veterans Services President Jose Torres said people have been stopping in to Veterans Services quite often thinking it is the VA Clinic.

"Some people still don't know exactly where (the clinic is) located," Torres said.

One reason for some of the confusion may be the placement of the new VA Clinic sign which was posted along Hoag Drive about 500 feet off North Abbe Road, Torres said.

Despite the initial confusion, Torres said he believes the new locations and close proximity of both the VA Clinic and Lorain County Veterans Services will serve all veterans well.

Torres added that LCCC has a large number of student veterans who will now know exactly where to go for either outpatient treatment or help through Veterans Services.

“Everything is in one area now,” Torres said. “If you have an appointment at the VA and need to stop at Veterans Services to talk about benefits it’s almost a one-stop shop.”

Sheffield Mayor John Hunter said he believes the temporary location will ultimately lead to Sheffield being the permanent site of a new VA clinic in the future.

“It’s gorgeous,” Hunter said of the temporary site.

“The site will be a great service for all the veterans.”

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**2.21 - LifeZette (Video): [Dogs Give Vets Faith in Society Again, New efforts pair service animals with our most deserving military](#)** (30 June, Deirdre Reilly, 82k online visitors/mo; Washington, DC)

Many veterans enjoy comfort, aid, and true bonding from their service dog. A specially-trained post-traumatic stress disorder service dog can interrupt agitation, wake a veteran from a traumatic nightmare, or perform a room search for a vet who suffers from hypervigilance.

PTSD service dogs can also be a steady source of furry companionship, never leaving their beloved human alone with troubling thoughts.

“It’s hard to imagine the level of despair of someone who suffers from PTSD,” said one Boston-area Gulf War veteran. “It’s exhausting, frightening, and somewhat surreal — you’ve come back from active duty, but you are in an internal war.”

This veteran feels his PTSD symptoms are “80 percent” managed — but said he would have welcomed a PTSD service dog when he first returned home.

A 2014 RAND study found that 20 percent of veterans of the Iraqi and Afghanistan conflicts have PTSD. With 2.7 million veterans in total from those wars, that means some 540,000 vets are dealing with the disorder.

The VA does not pay for associated costs for training and obtaining a PTSD service dog. It will only pay for “evidence-based” therapies for PTSD — such as cognitive processing.

If a veteran needs a service dog for PTSD, he or she must fill out a complex application with a registered therapy dog nonprofit, then sit back and wait (and hope) for a four-legged companion. The training of each PTSD service dog takes over a year.

“The dogs are specially bred for this work, [and are] with us for up to 18 months of highly specialized training, including nightmare and anxiety alerts,” a representative of This Able

Veteran, a PTSD service dog training academy in Carbondale, Illinois, told LifeZette in an email. "Veterans are brought to our facility from across the nation for three weeks for our trauma resiliency program."

Just like with several other non-profits that train and match PTSD service dogs with those who have served, cost is not a worry for the waiting vet. "We fundraise to offset all of these expenses, so there is no charge to our veterans," the This Able Veteran rep said.

The VA is now in the fourth year of a \$12 million study to gauge the efficacy and costs of using dogs to help veterans who suffer from post-traumatic stress. A veteran with a PTSD service dog will say, however, that the proof is in his or her ability to keep progressing in life after duty.

"He's put faith back into my way of looking at society," army veteran Joe Aguirre told The Associated Press of his dog Munger, who is trained to "sweep" an area for potential threats and "block" his owner from potential aggressors.

The dog is essentially searching for "anything that would be out of the ordinary. A bag. A particular weapon. People acting erratic," Aguirre told the AP. Aguirre's four tours of duty left him struggling with daily life.

The VA study has been beset by problems and criticism, the AP noted. Only 50 dogs, approximately, have been placed with veterans for the study, and some question whether the dogs are being trained to meet VA protocols that could actually reinforce PTSD fears, such as teaching them to "sweep" and "block" a room for threats.

Could this be a substitute for the taxing but necessary work that comes with a commitment to other therapies?

Meg Olmert is the chief research adviser for the Maryland-based Warrior Canine Connection. Her nonprofit has veterans train service dogs for other veterans, and advocates "softer" canine PTSD skills, such as picking up cues and providing appropriate support — learning to wake someone up during a nightmare, or detecting when a veteran is anxious and interacting with him to calm him down.

Rep. Ron DeSantis, chairman of the House Committee on Oversight and Government Reform's national security subcommittee, introduced the Puppies Assisting Wounded Service Members Act, or the "PAWS Act," to create a \$10 million project that would set aside \$27,000 per dog for veterans diagnosed with the most severe forms of PTSD.

Funding would come out of a Veterans Affairs budget pegged for such things as convention planning and office décor, reported the Fairmont, West Virginia Timeswv.com. The House Veterans Affairs committee is scheduled to hear the bill next week.

A federal-level decision from the VA on covering the costs of the dogs for veterans with mental disorders won't be made until at least 2018.

"Veterans cannot wait until 2018. The problem of veteran suicides is too urgent," DeSantis, a lieutenant commander in the U.S. Naval Reserve, said during an April hearing.

Former Marine Tony Austin would no doubt agree. After returning from active duty, he was struggling with PTSD and also rescued a bull mastiff named Hadji. Then, he learned about trained service dogs that help sufferers of PTSD.

"I learned what these dogs can do, and I learned about what they can cost and how long it can take to get one," Austin told People Magazine of the process.

Along with struggling to meet the high costs of a service dog, Austin was having trouble going through the demanding application process to obtain a service dog due to his PTSD — and what would he do with the newly rescued Hadji?

"We were having the conversation about getting rid of him or not, and he was lying on the couch between my wife and I," Austin told People of Hadji. "The next night, or two nights later, was the first night he woke me up from a nightmare."

Austin suddenly wondered if the perfect PTSD service dog was already living under his roof.

"His whole point is disruption, to break my train of yelling," Austin said of Hadji's methods. "He breaks my focus and my train of thought and my sense of structure in my head on what I am gonna say. That disruption is not a reset switch, because you can't forget what was said or how it was said, but it's that opportunity to recalibrate and add some stuff with a new approach," Austin explained.

Austin's experience convinces him of the need for PTSD service dogs for those who are hurting. He has started his own nonprofit called Dog Tags and Capes — he and his wife provide service dogs to other vets. "Hadji is definitely my four-legged soulmate," Austin told People.

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## **2.22 - The Times Record News: [New Veterans Healthcare System director vows positive change](#) (30 June, Claire Kowalick, 68k online visitors/mo; Wichita Falls, TX)**

For the first time in more than four years, the Oklahoma City Veterans Healthcare System has a permanent director and he vows to make positive changes to the area VA health system.

"Our first priority is customer satisfaction. Our job is to provide the best quality care in a patient-friendly manner," said new director Kristopher "Wade" Vlosich.

Vlosich and his leadership team came to Wichita Falls and visited with dozens of veterans who came to a town hall meeting Wednesday afternoon at Red Door Senior Center.

The OKC VA hospital is one of the largest in the country, serving more than 61,000 veterans and maintains an operating budget of \$460 million.

In recent years, the system has come under scrutiny after numerous complaints claiming questionable management and/or health services.

Vlosich assumed the leadership at the end of May, coming from Columbia, Mo., where he held a similar position at a smaller veterans' hospital.

A native of Amarillo, he earned his master's degree in business administration and health organization management and a bachelor's degree in psychology and business management from Texas Tech University.

Vlosich said the team is reaching out to area veterans to listen to how they can provide better care.

"We are here today to reach out to veterans to see what's going on in the community. We are here to serve you; we cannot fix things until we know about it," he told the audience.

Vlosich said the number of veterans needing services in the OKC area is growing at a rate of 5.8 percent. He said veterans coming from the Wichita Falls area is growing at a whopping 21 percent.

"There has been a dramatic increase in patients coming into the system. And there are more veterans choosing to come to Oklahoma City because of the quality of care," he said.

Under his leadership, Vlosich vowed to focus on improved access to care, better coordination between care providers and improved patient satisfaction.

Part of the plan includes moving the Wichita Falls VA clinic to Sheppard Air Force Base into a larger facility. The current VA center is about 5,000-square feet and the proposed center at SAFB is about 22,000-square feet.

Getting veterans through security onto the base will be a logistical challenge, Vlosich admitted, but they are working on getting veterans base access cards that can be renewed annually.

Plans should be finalized by September or October and information will be disseminated to veteran patients.

"There will be letters and contact about how the process will work. We want to make the process as easy as possible within the limits of the Air Force," Vlosich said.

The director said there were some problems they were working on with the choice program and TriWest, saying with TriWest they were "building the plane as they were flying it."

Vlosich listened to dozens of veterans' questions during the hour-long meeting and coordinated with other OKC VA team members to make sure each person was helped.

Wichita Falls Disabled American Veterans, Chapter 41, Commander Joel Jimenez said there was a great turnout at the event and promises there will be more town hall meetings for veterans to discuss healthcare issues.

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**2.23 - Walla Walla Union-Bulletin: [What's Going Up? The Walla Walla State Veterans Home](#)** (1 July, Karlene Ponti, 49k online visitors/mo; Walla Walla, WA)

An 80-bed veterans facility is under construction at the Jonathan M. Wainwright Memorial Veterans Affairs Medical Center campus.

The Walla Walla State Veterans Home, a skilled nursing facility, will consist of eight houses with 10 beds each, according to Heidi Audette, Washington communications and legislative director, Washington State Department of Veterans Affairs.

“Each bed is separate and will have its own kitchen, living room. It’s a private room and it will be home.”

The facility is being built to fill a need for veterans’ care in a skilled nursing facility, Audette said.

“It was a wonderful opportunity to partner with the Walla Walla VA and we’ve gotten incredible support from the legislators. Senator Hewitt, Nealy and Walsh have been very supportive.

“It will be very unique unlike any of the nursing homes you’ve seen,” she said. “One unit will be a secure unit for those with dementia for those who are at risk of wandering.”

Homes will have room for family and friends to come visit. Units will have a dining room and a den area, also.

The groundbreaking was held in July 2015. “We hope to be complete at the end of this year,” she said. “We hope to be open in mid-February 2017.

Absher Construction Co., Puyallup, Wash., is the general contractor. The cost is approximately \$32 million.

For more information: [dva.wa.gov](http://dva.wa.gov), then hit “menu,” then “homes.”

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**2.24 - The Goshen News: [Veterans air grievances at annual town hall meeting](#)** (30 June, John Kline, 43k online visitors/mo; Goshen, IN)

Emotions ran the gamut at the Goshen VFW Post 985 Wednesday afternoon as area veterans gathered to share their questions, concerns and grievances during the annual Veterans Briefing and Community Town Hall hosted by the VA Northern Indiana Health Care System and Indianapolis VA Regional Office.

The event began on a positive note with the presentation of special 50th anniversary commemorative pins for all present Vietnam War veterans by Michael Stephens, director of the United States Department of Veterans Affairs Indianapolis Regional Office.

“In 2007 Congress authorized the Secretary of Defense to conduct a program that commemorates the 50th anniversary of the Vietnam War,” Stephens said of the origins of the commemorative pins. “By presidential proclamation on May 25, 2012, the commemoration extends from May 28, 2012, through Nov. 11, 2025. VA offices throughout the country are participating with other partners in local, federal and state government. We’re doing what should

have been done 50 years ago, thanking our Vietnam veterans and their families for their service and sacrifice, and to properly welcome them home.”

Representatives from the Indianapolis VA Regional Office then provided attendees with an in-depth breakdown of the various processes for how best to apply for and submit veteran benefits claims. Areas such as compensation, dependents, pension, vocational rehabilitation and burial benefits were each touched on. Attendees were also given a quick tutorial on how to navigate the online benefits application portal, [ebenefits.va.gov](http://ebenefits.va.gov).

The room was then opened up for a town hall-type discussion lead by a panel of VA NIHCS and Indianapolis VA Regional Office representatives. Panel members included Stephens, Jay Miller, acting director of the VA NIHCS, Wayne McBride, chief of staff with the VA NIHCS, and Audrey Frison, associate director of patient care services with the VA NIHCS.

Of the various issues and concerns raised by veterans during the meeting, the vast majority had to do with the VA's use of programs such as the Veteran Choice Program, which dictate which doctors and health facilities veterans have access to for care, and programs such as Health Net, which has partnered with the VA to provide wide-spectrum health care services.

Many who spoke Wednesday indicated they feel such systems have been and continue to be far too restrictive, confusing and often result in veterans having to wait months at a time for appointments due to issues with backlogging and inadequate access to facilities.

Mishawaka veteran James Yakym was among the more animated veterans to speak of such issues Wednesday.

“What the VA has done for me: provided me with financial ruin, no career to retire from, no accountability, incompetent doctors, delay in care, travel hours to appointments... the hurry-up-and-wait game and empty promises to fix everything,” Yakym said of his frustrations with the current system. “The same government that pulled me out of my job as a young man to serve during 9/11 has turned its back not just on me but on thousands of veterans. We did not wait to serve, so why do we wait for care?”

Others in the audience complained of issues such as having to make appointments multiple times, or undergoing procedures only to discover that the VA has not paid their claims and their credit ratings have been damaged as a result. Still others raised concerns that quality medical establishments they'd prefer to use have pulled out of the VA networks due to concerns they will not get paid.

“There are veterans with claims pending over five years,” Yakym added. “I really do not understand why this is happening.”

Those on the panel acknowledged there are still plenty of issues the VA has to work through in order to get back in the good graces of the veterans they serve. That said, they did note the organization has achieved some significant inroads recently in working toward that goal, such as reducing the VA's overall backlog of claims by as much as 92 percent and improving the timeliness of the compensation exam process.

“We've come a long way, but we've got work left to do,” Stephens said.

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**2.25 - American Press: [Work begins on VA clinic for LC](#)** (30 June, John Guidroz, 43k vom; Lake Charles, IA)

Jim Jackson, chairman of the Lake Charles Mayor's Armed Forces Commission, described Wednesday's groundbreaking of a permanent Veterans Affairs clinic as "finally seeing some light at the end of a very long tunnel."

"It's been a struggle, (but) it's a blessed day for veterans," he said. "At least now we're starting to tear (the site) down and rebuild it."

Jackson joined dozens of elected officials and veterans to celebrate the groundbreaking of the facility, at 3601 Gerstner Memorial Drive. The site, formerly the Lake Charles Toyota office, will house a 24,000-square-foot clinic and will provide primary and mental health care, some specialty services and an expanded lab.

Peter Dancy, medical center director for the Alexandria VA Health Care System, said Southwest Louisiana veterans have waited too long to get a permanent VA facility secured in Lake Charles. The project was riddled with delays over many years.

Dancy said construction should be done by the summer of 2017 and that the facility will open 90 days after that.

Lake Charles Mayor Randy Roach gave credit to the community of veterans in the region for bringing the clinic to Lake Charles.

"This is your day," he said. "The least that we can do is to support you in what you need and deserve."

Joey Strickland, secretary of the Louisiana Department of Veteran Affairs, said he will continue to work to make Louisiana the "best veterans state in the nation."

"The important thing is the vision is here," he said of the clinic.

Strickland said he was told recently that the veterans cemetery will be located in Jennings.

U.S. Rep. Charles Boustany, R-Lafayette, said getting to the groundbreaking has been a team effort and a "long project with a lot of hurdles."

"This is indeed a very proud day for all of our veterans throughout the region who will access this clinic," Boustany said.

Skye McDougall, network director of the South Central VA Health Care Network, said the VA is also working to improve the interim clinic in Suite 100 at 814 W. McNeese St.

She said the interim clinic, open since November as a replacement for the mobile clinic on Fifth Avenue, should have a new pharmacy dispensing machine by mid-July. McDougall said specialty care access in the region should be improved, along with implementing Telehealth at the interim clinic.



“The VA is working really hard to rebuild the trust with our veterans and the American people,” McDougall said.

Jackson said there are still some things the VA could fix that would help veterans over the long term. He said there are “interminable waits” when calling VA offices.

The Pittsburgh-based engineering, planning and consulting firm Michael Baker International was recently contracted to design the permanent VA clinic, according to a news release from the firm.

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**2.26 - Larchmont Chronicle: [Local architect on front lines of VA land planning in Westwood](#)** (30 June, Sondi Sepenuk, 16k online visitors/mo; Los Angeles, CA)

The long-neglected United States Department of Veteran’s Affairs (VA) campus in Westwood is finally getting a makeover, and Windsor Square resident and architect William Fain, FAIA, of Johnson Fain is helping to lead the charge.

Fain, his wife, Jennifer, and their two grown daughters — Elizabeth Fain LaBombard and Margaret Fain Jenkins — have lived in Windsor Square since 1986. Fain has practiced architecture and urban planning for more than 35 years and is currently the managing partner for Johnson Fain, a firm of 70-plus architects, planners and interior designers, headquartered in downtown Los Angeles.

Focus on urban design

Fain’s long and award-winning career has focused on advancing the practice of urban design as a bridge between the public good and private benefit. He studied for his undergraduate architecture degree at UC Berkeley, attended the University of Manchester in England and then earned his graduate architecture degree from Harvard’s Graduate School of Design in 1975. Fain then went to work as an urban designer in the Office of Midtown Planning and Development of New York City and later served as senior architect and urban designer for the Boston Redevelopment Authority. Before co-founding their firm in 1987 with Scott Johnson, FAIA, Fain worked for Pereira Associates as Director of Urban Design.

With a resume like that, its no wonder that Fain and his firm were approached by lawyers Ronald Olson and O’Malley Miller of Munger, Tolles & Olson LLP, as well as Bobby Shriver of Veteran’s Advocacy, to help develop a master plan for the West Los Angeles VA campus.

Bandini – Jones land

The 387-acre property formerly owned by Arcadia Bandini de Baker and Senator John P. Jones, located just west of UCLA and the 405 freeway, was donated by them to the federal government in 1888 They stipulated that the property was to be used as the Pacific Branch of the National Home for Disabled Volunteer Soldiers. If not used for veteran purposes, the property would revert back to the original family ownership.

Over the years, the VA campus has served thousands of veterans as one of the largest medical centers in the VA system. Services include state-of-the-art hospital and outpatient care, rehabilitation, residential care, long-term care, and medical research and education facilities.

#### Private leases

Beginning in the 1970s, however, the federal government began leasing some of the campus buildings to private entities, and there was increasing neglect and disrepair of many of the other structures and spaces.

“The VA campus went through three periods of growth,” explains Fain. “From the 1800s–1920s, the campus was made up of a ravine filled with sycamores and wide open spaces with sea breezes, homelike architecture, porches and views of the ocean... In addition to the veterans who stayed on the campus, people from West Adams, Bunker Hill and Exposition Park would hop on the streetcar, which terminated at the VA, and come out to picnic on the property.”

The 1920s–1950s saw much more institutionalized growth.

“The buildings weren’t as ‘friendly,’” reports Fain. “They had long corridors and they were more Empire style — plus the VA added different road plans to the campus — which made it hard to figure out where to go.”

In the period from the 1970s–1990s, the campus went through a period of neglect. More than twenty leases were made on the property, including leases to the Brentwood School, UCLA, a solar panel company and many more.

“This was a very opportunistic period and the campus was broken up into parcels,” explains Fain. “It was a time when the federal government was trying to bring in revenue from federally-owned properties.”

#### Vets and Bandini heir lawsuit

In 2011, the ACLU Foundation of Southern California filed a lawsuit, *Valentini v. Shinseki*, on behalf of several veterans, the Vietnam Veterans of America and Carolina Winston Barrie (a descendent of Arcadia Bandini de Baker who deeded her land to the United States). Valentini was one of the veterans; Shinseki was the then-Secretary of the VA. The plaintiffs alleged that the VA violated the 1888 deed by misusing part of the campus for commercial purposes.

In 2015, settlement was reached that incorporated a “Principles Agreement,” executed between current VA Secretary Robert McDonald and attorney Ronald Olson. The agreement memorialized the VA’s intent to prepare a new master plan for the campus to make it more Veteran focused.

And that’s where William Fain and his firm, Johnson Fain, came in.

After months of input from veterans and the community during a “Preliminary Draft Master Plan Comment Period” (including more than 100 meetings and over 1,000 responses in the Federal Register), Fain and his firm helped draft a master plan that is, at long last, moving forward.

#### Draft Master Plan

The West Los Angeles VA Campus Draft Master Plan recites goals of: providing supportive housing and other services on campus; giving veterans access to a more welcoming and healing environment in which to live and receive care, services and benefits; and working collaboratively among government, veterans, stakeholders and charitable entities to end veteran homelessness in Los Angeles.

The Draft Master Plan brochure lays out the framework for the campus. According to the plan, key features will include Veteran Housing Neighborhoods that have their own supportive housing and neighborhood services, a Town Center located in the geographical center of the campus, and five Neighborhood Centers located throughout the campus that connect to each residential neighborhood.

In May, the Los Angeles Conservancy recognized a beginning part of the plan, architecture firm Leo A. Daly's award-winning design for the rehabilitation of Building 209 that is located in the supportive housing neighborhood in the northern portion of the Draft Master Plan.

A Reintegration Zone will be located in the current "industrial district," providing opportunities for education and employment training, plus workshop and gallery space for the arts and an incubator space for nurturing veteran-initiated start-ups.

A Medical District, south of Wilshire Blvd., will provide an array of in-patient and ambulatory care facilities, along with a variety of hospitality facilities for visitors and their families. Open Space and Recreation areas will be offered throughout the campus, including a ballpark and several parks.

Veteran-centric

The Draft Master Plan brochure also states that "the framework for development of the West LA Campus envisions a long-term build-out that focuses use of the site on housing and services for veterans, restores and enhances the site's historic legacy, conserves and repairs its natural setting, and facilitates, encourages and promotes reintegration of veterans into civilian life."

Though the Draft Master Plan will take years to complete, Fain is confident that things are finally moving in the right direction.

"This master plan is veteran-centric," says Fain. "Because of the efforts of many vets and their representatives and the descendants of Arcadia Bandini de Baker, this master plan is going to reflect the wishes of the original donors of the property."

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**2.27 - KTVL (CBS-10): [Veteran says he's not getting needed medication](#)** (30 June, William Maetzold, 3.4k online visitors/day; Medford, OR)

A veteran said an important prescription has been taken away from him through the Veterans Affairs (VA) clinic in White City.

Raymond Hallbauer said he needs both pain and sleep medication, but a psychiatrist said he could only have one.

"So I've been compensating by using over the counter sprays, creams, patches whatever to alleviate or try to get a little less pain," Hallbauer said.

He said the quality of his care has been declining since he first began going there in 1992.

"Right now I have to teleconference a doctor in Idaho," he said. "She's not bad, but she can't do everything."

Hallbauer is a 20-year veteran of the Air Force and was happy with his doctor when he originally began getting care.

The office of U.S. Representative Greg Walden of Oregon works with veterans on a daily basis and they have been working to address issues like these.

"Whether that's through the VA choice program which is something that Congress put in place last year," Walden's Medford office director Riley Bushue said. "We've been working to make sure that's implemented properly. It's really about getting that care in a timely manner."

Bushue said Walden's office has worked more than 5,000 cases dealing with the VA since he took office and more than 500 just last year.

Hallbauer said he's choosing to take the sleep medication over the pain.

"I'm just more of stay at home person now because of pain," he said.

A spokesperson at the VA clinic in White City said doctors look at each veteran's health differently and prescribe what they think is best for each veteran.

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**2.28 - The News Guard: [VETS AND MEDICAL POT: Congressional action urged](#)** (30 June, 500 online visitors/day; Lincoln City, OR)

Oregon U.S. Senator Jeff Merkley and Congressman Earl Blumenauer have joined nine members of the U.S. Senate and U.S. House of Representatives urging Congressional leadership to protect veterans' abilities to discuss the use of medical marijuana with VA physicians in states where it is legal.

The group wants such protection included in the final Veterans Affairs funding bill. The appropriations bill for Military Construction, Veterans Affairs and Related Agencies agreed to by the House and Senate did not include the provision.

The Fiscal Year 2017 Military Construction, Veterans Affairs, and Related Agencies Appropriations Act Conference Report failed to include amendments sponsored by Senators Jeff Merkley and Steve Daines (R-MT) and Earl Blumenauer that would allow for parity between VA and non-VA facilities in 26 states which have medical marijuana programs. The amendment does not change current laws preventing the possession or dispensing of marijuana on VA

property, but simply allows veterans to discuss all options that are legally available in their state with their VA health care providers.

“The Conferees failed to include a provision passed by bipartisan votes in the House and Senate that would allow VA doctors to discuss medical marijuana and make recommendations regarding its use in states where it is legal,” the members wrote. “We strongly believe the inclusion of either the House or Senate language in the final text should have been nonnegotiable.

“We feel the failure of the Conferees to include either provision is a drastic misfortune for veterans and is contrary to the will of both chambers as demonstrated by the strong bipartisan support for these provisions.”

The letter is signed by U.S. Senators Steve Daines (R-MT), Jeff Merkley (D-OR), Kirsten Gillibrand (D-NY), Barbara Boxer (D-CA), Cory Booker (D-NJ), Tammy Baldwin (D-WI) and Ron Wyden (D-OR) and U.S. Representatives Earl Blumenauer (D-OR), Jared Polis (D-CO), Dina Titus (D-NV) and Ruben Gallego (D-AZ).

The Senate Appropriations Committee passed Merkley and Daines’ amendment with a bipartisan vote of 20-10, and a substantially similar amendment passed the U.S. House with a vote of 233-189.

The full text of the letter is available below.

*Dear Speaker Ryan, Majority Leader McConnell, Minority Leader Reid, and Minority Leader Pelosi:*

*We write to express our serious concern with the conferenced Military Construction, Veterans Affairs, and Related Agencies Appropriations Act for Fiscal Year 2017. The Conferees failed to include a provision passed by bipartisan votes in the House and Senate that would allow VA doctors to discuss medical marijuana and make recommendations regarding its use in states where it is legal. The provisions that appeared in both the House and Senate bills were substantially similar and had broad bipartisan support. We strongly believe the inclusion of either the House or Senate language in the final text should have been nonnegotiable.*

*Currently, twenty-six states and the District of Columbia have laws allowing for the medical use of the cannabis plant to treat certain conditions, and sixteen more have laws allowing for the use of some its constituent compounds. However, under VHA Directive 2011-004, the Veterans Health Administration effectively prohibits VA physicians from taking any steps toward providing their own clinical judgment when discussing or recommending the use of cannabis with their patients.*

*For the second year in a row, language correcting this and giving veterans a life changing benefit has overwhelming passed the Senate after being adopted by the Senate Appropriations Committee, this year by a bipartisan vote of 20-10. A substantially similar amendment passed the House by a vote of 233-189. There is precedent and an expectation that identical or similar language is to be accepted in the final version of conferenced legislation. Additionally, both the House and Senate sponsors of the legislation wrote to the Conferees requesting inclusion of the language and providing*

*guidance on a preferred outcome. As you will note, the texts of these provisions are drastically similar.*

*Senate Text: SEC. 247. None of the funds appropriated or otherwise made available to the Department of Veterans Affairs in this Act may be used in a manner that would interfere with the ability of a veteran to participate in a medicinal marijuana program approved by a State; deny any services from the Department to a veteran who is participating in such a program; or limit or interfere with the ability of a health care provider of the Department to make appropriate recommendations, fill out forms, or take steps to comply with such a program.*

*House Text: SEC. 523. None of the funds made available by this Act may be used to implement, administer, or enforce Veterans Health Administration directive 2011–004 (or directive of the same substance) with respect to the prohibition on “VA providers from completing forms seeking recommendations or opinions regarding a Veteran's participation in a State marijuana program.”*

*We feel the failure of the Conferees to include either provision is a drastic misfortune for veterans and is contrary to the will of both chambers as demonstrated by the strong bipartisan support for these provisions. We urge you to act to ensure one of these provisions is included in any final funding bill sent to the President.*

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**2.29 - KCIM (CBS-1380): [Young Reacts To Failed Testing Of Veteran Hotline](#)** (30 June, 400 online visitors/day; Carroll, IA)

Republican 3rd District U.S. Representative, David Young, reacted yesterday (Thursday) to a Government Accountability Office report that found nearly 30 percent of text messages sent as a test to the Veterans Crisis Line went unanswered. The toll-free hotline is in place for veterans seeking suicide prevention and crisis assistance from Department of Veterans Affairs (VA) responders. Young, who introduced legislation, the No Veterans Crisis Line Call Should Go Unanswered Act earlier this month, said the tests confirmed concerns he had already voiced about veterans failed attempts to receive help. “Our veterans deserve quality mental health care resources,” Young said, “yet this recent report further highlights unacceptable problems with the Veterans Crisis Line. Enough is enough,” he added. “The VA must improve the responsiveness and performance of this hotline immediately.” The report, according to Young, directly disputes previous assurances from the VA to congressional veterans’ affairs committees that problems like these had been addressed.

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### **3. Ending Veterans’ Homelessness**

**3.1 - The Republican: [‘Welcome Home’: Soldier On dedicates 44 apartments for homeless veterans in Northampton](#)** (30 June, Laura Newberry, 1.2M online visitors/mo; Springfield, MA)

Soldier On dedicated a 44-unit housing community for homeless veterans in Northampton Wednesday, a project that took several years to become reality.

Many people spoke emotionally of the project's completion during a ceremony behind the new facility at the Veterans Affairs Medical Center in Leeds.

John Downing, CEO of Soldier On -- which works to provide shelter and support to homeless vets in partnership with the Department of Veterans Affairs -- said many people describe those who have served in the armed services as "culturally deprived."

"Cultural deprivation exists because gifted and generous people don't give away enough," Downing said, adding later, "The more we give away, the more we chip away the barriers."

"What we give away lives on forever in the people that we give to," he said.

The spirit of giving was strong at the ceremony, which lasted for two hours and was filled with words by dignitaries including Col. David Sutherland, Congressman James McGovern, Massachusetts Secretary of Veterans Affairs Francisco Urena and Lisa Pape, U.S. Director of Homeless Programs for the Veterans Health.

Several speakers addressed the veterans themselves by saying, "Welcome home."

Northampton Mayor David Narkewicz, who served in Massachusetts' Air National Guard, also spoke. He noted that the city serves more veterans per capita than any other community in Massachusetts, and voiced his commitment to continue supporting vets.

Northwestern District Attorney David Sullivan said the nation has the responsibility to "leave no veteran behind."

"We've often lost our way," Sullivan said of fulfilling that responsibility, but held up Soldier On's new housing community in Leeds as an example of breaking down bureaucratic barriers in order to help vets.

"A flood of persistence has made this happen today," he said.

The 44 apartments -- which were built using sustainable materials, according to Soldier On -- cost an estimated \$8 million and was funded primarily by the VA and some state money.

About two dozen veterans were ceremoniously given welcome mats to their new homes Wednesday.

David Brown, 59 of Camden, N.J. said he might move in on Friday. He's had his ups and downs -- he served as a Private First Class in the U.S. Army from '74' to '81, and spent 29 months in prison after pleading guilty to cocaine possession and violating his probation. But after years of struggle, he has a schedule he can count on.

He's lived on the Leeds VA campus since December.

"It's been pretty good," he said. "I get up, take a shower, go to some groups. It ain't that bad."

The complex, called the Gordon H. Mansfield Veterans Community, is named after the former Deputy Secretary of Veterans Affairs and Pittsfield native who died in 2013. The first Gordon Mansfield facility opened in Pittsfield in 2010; the Leeds community is the second.

In these Soldier On communities, veterans who have been successful in the organization's programs are given the opportunity to purchase an equity stake in their homes. They are also provided lifetime supportive services including addiction treatment, mental health counseling, education and employment assistance, and physical and medical health help.

In December, Soldier On also opened on the Leeds campus a 16-unit complex for women, including those with children.

The facility has a wellness center, four kitchen areas, two shared living areas, an arts and crafts room and a yoga room.

Col. David Sutherland, the co-founder and Chairman of Easter Seals Dixon Center for Military and Veterans Services, stressed that "veterans are not victims," that they should be seen with "potential, not pity," and they deserve a "hand up, not a hand out."

Sutherland, who was a brigade commander in Iraq, painted a gruesome portrait of war and what is often its counterpart, Post Traumatic Stress Disorder.

"War is vile. It's one of the most vile things you can imagine," he said. "But there are things that are more vile, and that's why we fight."

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## **5. Veteran Opportunities for Education/GI Bill**

**5.1 - Stars and Stripes: [GI Bill recipients at Ashford U. receive temporary stay of benefits](#)**  
(30 June, Alex Horton, 1.2M online visitors/mo; Washington, DC)

Thousands of student veterans attending Ashford University will temporarily avoid cuts to their GI Bill benefits, the school announced.

The Iowa Department of Education approved a 90-day delay of a decision to revoke the ability of the Department of Veterans Affairs to pay for tuition, books and housing for more than 5,000 student veterans and military dependents attending Ashford, according to a recent Facebook post by the school.

Students attending the online, for-profit school were in jeopardy of losing access to their benefits by July 1. The issue stemmed from Iowa announcing the termination of GI Bill payouts after the school decided it would close their campus in that state and move their operations to California, where it would need approval from state officials there.

Iowa granted the delay of withdrawal through Sept. 18, or until California makes a decision on their certification, according to an email from the VA sent to Ashford students and obtained by Stars and Stripes. The California State Approving Agency for Veterans Education will determine



whether the institution is qualified for approval by July 8, June Iijana of the California Department of Veterans Affairs wrote in an email.

Ava Red, 22, who studied psychology at Ashford on the GI Bill as a dependent, said the controversy made her doubt the reliability of Ashford to receive approval in California.

“Once I saw there was a problem, I decided I wasn’t going to waste my benefits,” Red said. “My admissions counselor didn’t mention my education would be in jeopardy when I applied in February. It’s either deceitful or ignorance. Either way it’s unacceptable when it comes to veterans education.”

Red withdrew from the university and is seeking alternative online programs. Admissions counselors at other schools described an uptick of students from Ashford seeking new programs in the past weeks, she said.

Red relied on roughly \$600 a month for a housing allowance to carry her through the summer, but with many programs accepting students in the fall at the earliest, she is worried about missing out on nearly \$2,000 income, she said.

In their latest update on June 21, Ashford sought to reassure students of their attention to the issue, saying the university is “committed to maintaining your benefits and we are proud of the education we’ve provided to thousands of veterans and their families.”

Ashford advised GI Bill recipients 10 days earlier to consider programs outside of their school as one course of action if benefits seemed unlikely to be restored, according to an email obtained by Stars and Stripes. VA officials could not immediately determine how many student veterans have left Ashford since the certification issue arose this month. A spokeswoman for Ashford did not respond to requests for comment.

The university has become a magnet of controversy in recent years. The school’s parent company, Bridgepoint, was subpoenaed by the California Attorney General’s Office in 2013 while the state investigated its financial aid and enrollment practices. The investigation is ongoing, according to a spokeswoman for the attorney general there.

Attorneys general in New York and North Carolina, along with the federal Consumer Finance Protection Bureau, have launched similar probes to investigate possible violations of consumer protection laws at Bridgepoint, according to Securities and Exchange Commission filings.

“My father served in the Air Force for 26 years. Our family has gone through too much for this to happen,” Red said. “After all he’s done for the country it was a given that I would receive an education. And now it’s becoming a hassle.”

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## 7. Other

**7.1 - New York Daily News: [NRA violated government policy in pro-Trump ad that featured veterans cemetery](#)** (30 June, Dan Good, 15.6M online visitors/mo; New York, NY)

The National Rifle Association is stepping on soldiers' graves — and apparently violating government policy — in its latest shameful display.

The organization's Political Victory Fund released an anti-Hillary Clinton ad Wednesday, "Stop Clinton, Vote Trump," that shows former Marine and Benghazi attack survivor Mark Geist walking through a veterans cemetery.

"A lot of people say they're not going to vote this November because their candidate didn't win," he says over shots of gravestones. "Well, I know some people who won't be voting this year either."

Federal government officials dismissed the ad, stating that the NRA never requested to film on the solemn, hallowed ground — and would have been rejected if it had.

"Partisan activities are prohibited on national cemetery grounds as they are not compatible with preserving the dignity and tranquility of the national cemeteries as national shrines," the Department of Veterans Affairs National Cemetery Administration, which maintains 134 national cemeteries, told The News in a statement.

The Army also claimed that the ad was not filmed at Arlington National Cemetery.

The NRA, which did not respond to a News inquiry about the commercial's setting, told ABC News that the ad was filmed outside of a national cemetery — but failed to disclose which cemetery is shown.

Political ads that feature veterans cemeteries have been criticized and pulled in the past, including a North Dakota politician's 2014 spot which showed a state-run cemetery.

The NRA is spending more than \$2 million to share its graveyard commercial in battleground states of Ohio, Colorado, Pennsylvania, Florida, Virginia and Nevada, according to USA Today.

Critics pounced on the slimy spot.

The NRA is spending more than \$2 million to share its graveyard commercial in battleground "The NRA used the graves of heroes to smear Hillary Clinton," James Bazan wrote on Twitter. "My Uncle Isauro and Aunt Helen deserve better than to be used by ghouls."

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**7.2 - Washington Free Beacon: [VA Colluding with Union to Promote Anti-Reform Rally, Federal employee union protesting efforts to fix veterans' healthcare](#)** (30 June, Morgan Chalfant, 1.6M online visitors/mo; Washington, DC)

An official at a Department of Veterans Affairs hospital is helping the largest federal employee union oppose efforts to reform the agency's network of hospitals.

The public affairs officer at the Cheyenne VA Medical Center in Wyoming has advertised a rally organized by the American Federation of Government Employees (AFGE) next week to protest

recommendations made by members of an independent commission that would overhaul VA healthcare, according to internal communications obtained by the Washington Free Beacon.

“I wanted to make sure you were aware that the American Federation of Government Employees (AFGE) is planning a ‘Keep the Promise to Veterans Rally’ outside the Cheyenne VA gates, on July 6 from 0700-0900 to protest the Commission on Care’s proposed recommendations,” Samuel House, public affairs officer at the Cheyenne VA Medical Center, wrote in a “message to Cheyenne VA partners” last Friday sent to an unknown email list.

AFGE has organized more than three-dozen rallies outside VA hospitals across the nation in recent weeks to protest efforts to “privatize” veterans’ healthcare. The union has taken issue with proposed recommendations from members of the Commission on Care, a 15-member independent panel convened to examine VA healthcare and propose ways to fix it. The commission was established by Congress through legislation enacted following the 2014 wait list scandal.

Advocates for reform at the VA pointed to the email as evidence that VA officials are advancing the interests of government unions while ignoring the needs of the nation’s veterans.

“It is no secret that the VA works hand-in-glove with government unions like AFGE,” Dan Caldwell, vice president for legislative and political action at Concerned Veterans for America, told the Free Beacon. “What is unfortunate, however, is the VA’s clear commitment to advancing unions’ interests even at the expense of veterans.”

“Instead of devoting time and effort to pursuing meaningful reforms at the department, VA employees are, on taxpayers’ dime, promoting union events and fighting the very reforms that would make the VA more responsive to veterans’ needs,” Caldwell, a Marine Corps veteran, continued. “This relationship may benefit union members, but it is toxic for our veterans.”

Earlier this year, seven members of the Commission on Care released a 34-page document recommending “immediate drastic change” at the VA’s network of hospitals. The members of the commission recommended that veterans be given the ability to choose between seeking care with VA providers or other providers within their community. The plan would also result in the closure of numerous VA facilities, the document explained.

“It has become well recognized that the VHA is in a state of crisis, and as a result, our deserving veterans are not receiving the medical care and related services they need. This crisis is exemplified in a number of urgent challenges. The Commission finds significant gaps in staffing, leadership and governance; facilities and capital needs; data and information systems; operations and processes,” the seven commission members wrote in the document.

According to a Gallup survey released in March, roughly nine in 10 Americans believe veterans should be able to get healthcare from any provider that accepts Medicare, not just VA medical facilities.

The commission is expected to deliver its finalized recommendations to Congress, President Obama, and VA Secretary Robert McDonald by June 30.

The Cheyenne VA official noted in the email the medical center’s commitment to giving veterans access to high quality healthcare. He also emphasized the hospital’s “well-documented collaborative and proactive partnership with our employees and their union.”

“The Cheyenne VA respects the union and shares their commitment to federal workers,” he wrote.

House told the the Free Beacon Cheyenne VA has a “wonderful relationship” with its unions.

“The Cheyenne VA Medical Center has a wonderful relationship with our unions and we honor and respect their right to rally,” House said. “The ‘Keep Our Promise to Veterans’ movement has been seen at other VA medical centers across the nation, and we consider ourselves very fortunate to have passionate individuals working with us.”

AFGE, which represents 230,000 VA doctors, nurses, and officials, has balked at congressional efforts to hold VA employees accountable for misconduct. The union opposed the VA Accountability Act introduced by Republican lawmakers last year, legislation that would have given McDonald the power to remove or demote a VA employee for misconduct or poor performance.

Rep. Jeff Miller (R., Fla.), chair of the House Committee on Veterans Affairs, told the Free Beacon last year that McDonald refused to support the legislation because of pressure from labor unions.

“There are a quarter of a million union members that work for the Department of Veterans Affairs. They have a stranglehold not only on the agency but the leadership there as well,” Miller said in October.

President Obama also threatened to veto the legislation, and said it would create “a disparity in the treatment of one group of career civil servants.”

Insufficient care and waits have persisted at VA facilities across the country in the two years after staffers were discovered keeping secret wait lists at the Phoenix VA hospital despite congressional efforts. Multiple investigations from the VA inspector general have pointed to continuing insufficiencies and wait-time manipulation at VA medical facilities.

The Cheyenne VA Medical Center was one of several facilities reviewed by the department’s watchdog in June 2014 regarding allegations of patient appointment and wait time manipulations. The inspector general found evidence that a manager was cancelling veterans’ appointments and rescheduling them to make wait times appear shorter, according to a report released in April.

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**7.3 - KSTU (FOX-13, Video): [Big Budah gets schooled at National Veterans Wheelchair Games](#)** (30 June, Ashton Edwards and Big Budah, 1.3M online visitors/mo; Salt Lake City, UT)

This video recounts events at the National Veterans Wheelchair Games in Salt Lake City. Video description: Big Budah got a lesson at the National Veterans Wheelchair Games in Salt Lake City.

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**7.4 - WCPO (ABC-9, Video): [Independence Day can be a 'nightmare' for veterans](#)** (30 June, Rose-Ann Aragon, 940k online visitors/mo; Cincinnati, OH)

In a few short days, fireworks will light up the Tri-State in a celebration of the United States' independence — but for some who served our country and fought to protect that freedom, the day may be a difficult one.

“The Fourth of July is supposed to be about our independence and our freedoms,” said Staff Sgt. Shawn Grueser. “But ever since I served in Iraq and Afghanistan, the Fourth of July, for me, is a nightmare.”

Grueser served with the 173rd Airborne Brigade, 82nd Airborne Brigade and First and Second Ranger Battalions.

For him, Independence Day can be an emotional trial.

“It’s a scary thing for veterans because that noise—the booming noise of fireworks — brings you right back,” he said.

Right back to Balad, Iraq, the site of 2003’s Operation Peninsula Strike. Grueser, then a paratrooper, narrowly dodged an RPG during the mission, and the experience — bright light followed by a booming explosion and a hail of shrapnel — is one he still carries with him.

“Every time I hear an explosion, (such as) a car backfiring, a firework, I immediately want to hit the ground because in my mind — I mean, it brings you right back,” he said.

Beneath the bullet and shrapnel scars Grueser sustained over his military career lies an invisible injury carried by up to 20 percent of other military veterans: post-traumatic stress disorder.

“Veterans aren’t fragile people,” said Master Sgt. Steve Wilson. “They just have some unique life circumstances.”

Wilson spent his life serving, and today, he works for the Department of Veterans Affairs, helping fellow veterans who grapple with PTSD find resources and help. He’s a particularly good resource himself, having personally dealt with the condition.

“I got some help, and once I was, I realized that it is treatable and you can come through it,” he said.

Wilson encouraged Tri-State residents who plan to celebrate with fireworks to exercise a little consideration for veterans who live nearby.

“Just be considerate that maybe they’ve had some experiences that are unique to them,” he said.

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**7.5 - Idaho Statesman (Video): [Man who shot two, self in Boise was VA employee](#)** (30 June, Katy Moeller, 738k online visitors/mo; Boise, ID)

A 53-year-old Kuna man who police say shot two people before taking his own life late Tuesday was an employee at the Boise VA Medical Center.

Alan Robert Amundson was chief of Environmental Management Service at the medical center, spokesman Joshua Callihan confirmed Thursday. He had worked in custodial services there since 2008.

“I can’t comment past that,” Callihan said when asked about whether there had been any work-related issues with Amundson.

A Boise police officer who was shot in the chest Tuesday — and saved from fatal injury by his ballistic vest — was treated at a local hospital and released Wednesday. Another man, who hasn’t been identified, was hospitalized with life-threatening injuries.

The man remained hospitalized Thursday but authorities declined to release any information about his condition due to privacy laws. Boise police haven’t disclosed the man’s name because the department has a policy that prohibits the release of the names of victims.

Amundson was not charged with any crimes in Idaho, according to online court records. He and his wife divorced in the spring last year.

Police have indicated that Amundson was a resident of Kuna. He also lived at a house on West Antietam Street in South Boise, according to online records.

A neighbor on West Antietam told the Statesman that he thought Amundson and his wife had lived in the house about a year; he’s unsure when the couple moved out. He said he never saw any conflict or issues at the house.

“He seemed pretty mild-mannered,” said Nathan Galvin, who has lived in the neighborhood about 18 years.

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**7.6 - Las Vegas Review-Journal: [Heller backs push to require VA to disclose high-level directors’ bonuses, awards](#)** (30 June, Ben Botkin, 715k online visitors/mo; Las Vegas, NV)

U.S. Sen. Dean Heller is backing an effort that would require the Department of Veterans Affairs to disclose to Congress the bonuses and awards that high-level VA directors get.

The push for added transparency comes as the VA has faced criticism for backlogs of veterans waiting for medical appointments and treatments at clinics and hospitals. The scandal has been amplified after revelations that executives were awarded bonuses as veterans languished waiting for medical care.

Heller is co-sponsoring a bill that would require the secretary of Veterans Affairs to annually report the performance-based awards and bonuses given to regional office directors, hospital directors and directors of integrated service networks for veterans.

“VA leadership on the local level, whether it is a VA hospital director, or a regional office director exerts significant control over the quality of care and benefits Nevada’s veterans receive,” Heller said in a statement. “That is why I personally meet with these individuals and work with them closely to address challenges on the local level and keep them accountable.”

In 2013, 292 senior-level VA executives and directors received \$2.7 million in performance-based awards top of their base pay. That figure included two separate \$8,680 bonuses awarded the then-director of the VA Medical Center in North Las Vegas and the director of Sierra Nevada Health Care System in Reno.

Heller, R-Nev., is leading the push with U.S. Sen. Bob Casey, D-Pa. Both lead the VA Backlog Working Group that’s examining the backlog. Heller added that the measure would increase accountability to the system.

“Therefore, members of Congress should be informed of whether VA leaders in their districts or states are being awarded bonuses based on performance,” Heller said. “This measure is critical to bringing greater transparency and accountability to the VA.”

Under the bill, the annual reports would include the amount of each bonus and the individual’s job title and work location. The reports would go the Committee on Veterans Affairs and the Committee on Appropriations of both the Senate and House.

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### **7.7 - Bustle (Video): [This NRA Ad For Donald Trump Might Have A Very Serious Problem](#)** (30 June, Kastalia Medrano, 674k online visitors/mo; New York, NY)

My faith in the rectitude of the NRA is not strong. So while I would like to give the organization the benefit of the doubt and hope that this new anti-Clinton / pro-Trump NRA ad wasn’t filmed in a military cemetery, as it definitely appears to be, I am not super optimistic. The ad, released Wednesday by the NRA’s Political Victory Fund, is a Benghazi propaganda fest starring Mark Geist, one of the half-dozen military personnel from the Libyan catastrophe in 2012. It depicts him both inside and outside the grounds of an unnamed but undeniably military-looking cemetery. I guess there’s still a chance it could have been filmed on an elaborate set or something, but that’s sure not the way it seems right now.

The government restricts such areas from filming, based on the eminently reasonable idea that hijacking the dead for partisan crap is not an OK thing to do. Bustle has reached out to the Trump campaign for comment. The NRA has not yet named the location, claiming only that it was filmed outside the cemetery, not inside, even though the ad includes unmistakable shots of Geist walking among the tombstones. It’s been a weird few weeks for the NRA, what with the Trump infighting and all. If it was trying to get its groove back by making a brazen, attention-getting move, it picked a staggeringly disrespectful way to do it.

“A lot of people say they’re not going to vote this November because their candidate didn’t win,” Geist says as action movie music gets you pumped up for all the hypocrisy and grave-trampling. “Well, I know some other people who won’t be voting this year either.” At this juncture, the camera cuts helpfully to a bunch of tombstones, in case you didn’t get where Geist was going with this — or perhaps if you still thought the NRA still had a few remnants of tact, respect, or grace. “Hillary as president? No thanks. I served in Benghazi,” Geist intones over images of war zones and mangled American flags. “My friends didn’t make it. They did their part. Do yours.”

A representative for the Department of Veterans Affairs told ABC News that the VA’s National Cemetery Administration never received any filming requests, and that any such request would have been categorically denied.

“As always, our veterans, their families and survivors are our top priority,” said VA rep James Hutton. “To maintain the sanctity and decorum of VA National Cemeteries as national shrines, our filming policy states that filming may not be used for the expression of partisan or political viewpoints, or for uses that are (or may be interpreted as) an endorsement of a commercial entity.”

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**7.8 - KENS (CBS-5, Video): [San Antonio VA hospital going green](#)** (29 June, Bryan Wendland, 333k online visitors/mo; San Antonio, TX)

Reduce, reuse and recycle. The Audie L. Murphy VA hospital is taking those words to heart.

"We've been building every year and this year we decided, as a facility and from our front office, that we need to be recognized for all the hard work we've been putting in for our environmental programs," said Terry Meeker, the hospital's Green Environmental Management Systems (GEMS) program manager.

That hard work was recognized with two Practice Greenhealth awards: the Emerald Award for environmental and energy excellence, plus the Circles of Excellence Award for water conservation. The VA hospital is the only hospital in San Antonio to win both, and one of just 10 in the nation to get the water conservation award.

"We're very proud of our programs and what we've accomplished," Meeker said.

The numbers speak for themselves: 1.3 million pounds of solid waste recycled, a 35 percent reduction in potable water usage and 7,000 pounds of food donated to the San Antonio Food Bank last year.

That last stat comes via a program set up by the VA's Administrative Dietician, Dorian Foster.

"I served in the United States Peace Corps, so food donation is very important to me," Foster said. "I've seen a lot of people go hungry in this world."

So, in 2011, she worked with the hospital's director to get the VA-food bank partnership going.



"I feel like we're doing the right thing," she said. "We're supposed to be good stewards of government funds, and throwing food away is not being a good steward, but donating it to people who need it is the best part of all."

The awards are great, but Meeker and his staff aren't getting complacent. They've got a construction project underway to put solar panels on carports in the parking lot and the hospital's roof. All told, the panels will eventually produce 50 percent of the VA hospital's energy during the heat of day.

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**7.9 - Battle Creek Enquirer: [Battle Creek VA: Consider veterans during fireworks](#)** (30 June, Jennifer Bowman, 163k online visitors/mo; Battle Creek, MI)

The Battle Creek Affairs Medical Center said fireworks around the Fourth of July holiday can have an adverse impact on some military veterans with post-traumatic stress disorder.

In a news release, officials said the sound of fireworks "can trigger additional anxiety, nightmares and flashbacks" for former service members who were involved in combat. They suggested attending an organized event where fireworks will be set off in a controlled environment, or, talking to neighbors to give advance warning to any nearby combat veterans of planned use of fireworks at home.

Veterans seeking Fourth of July celebrations that will not include fireworks can find more information at the Michigan Department of Natural Resources website.

In Battle Creek city limits, consumer fireworks are permitted by ordinance to be used between 7 a.m. and midnight the day before, the day of and day after the Fourth of July. Residents can call 911 with fireworks complaints and police will respond, the city said in a news release this week.

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**7.10 - Lagniappe Weekly: [Navy vet defrauds VA, says government 'wronged him'](#)** (30 June, Jason Johnson, 124k online visitors/mo; Mobile, AL)

A Navy veteran told investigators he believed the "U.S. government had wronged" him when asked why he had taken thousands of dollars in undue compensation from the U.S. Department of Veterans Affairs.

Arthur McCants, III, a 68-year-old resident of Eight Mile, was convicted and sentenced recently for what authorities described as a four-year scheme to "pad" his travel voucher claim forms in order to claim undue mileage.

McCants, who served in the U.S. Navy as a communications officer from 1972-1977, was officially charged and convicted of theft of government funds. As a veteran, McCants is entitled to travel benefits during his visits to the Veterans Health Administration.

However, federal prosecutors say McCants used a fake address to falsely claim \$43,580.34 in additional mileage compensation, filing nearly 1,000 fictitious travel claims between January 3, 2011 and January 9, 2015.

According to McCants' statements to authorities, "he knew what he was doing was wrong, but he felt that the U.S. Government had wronged him, also."

U.S. District Court Judge William E. Steele sentenced McCants to time served on June 29 — bringing his total time in custody to just under four months. McCants will also serve a three-year term of supervised release and will additionally be required to make full restitution to the VA.

Though defrauding the VA was McCants first charge under federal law, he's seen several arrests locally for cocaine possession, theft and other drug-related charges. The most recent of those was recorded in 2009, according to the Mobile Metro Jail.

Special Agents of the VA's Office of the Inspector General assisted with the investigation of this case, which was prosecuted by Assistant U.S. Attorneys Suntrese Williams-Maynard and George May.

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#### **7.11 - WLOS (ABC-13, Video): [16 vets accused of submitting fake travel vouchers to the Asheville VA](#)** (30 June, Krystyna Biassou, 109k online visitors/mo; Asheville, NC)

Sixteen veterans face federal charges for submitting fake travel vouchers for reimbursement to the Asheville VA.

Court documents allege the defendants submitted vouchers overstating the distance they traveled for medical appointments or to from medical treatment.

Under certain circumstances, veterans with service-connected disabilities are reimbursed for travel expenses to and from their residence and the VA.

A federal grand jury returned federal indictments on June 7 against three people, charging each defendant separately with one count of making a false claim for travel benefits from the VA, for allegedly submitting multiple fraudulent travel vouchers over a period of months or years.

The charge levies a maximum penalty of five years in prison and a \$250,000 fine. The three indicted are:

- Arlan M. Land, 53, of Nolanville, TX, was indicted for allegedly obtaining from the VA approximately \$18,839.10 in fraudulent claims.
- David B. Wright, 56, of Asheville, is facing federal charges for allegedly obtaining approximately \$15,391.52 from the VA.
- Pamela L. Smith, 55, of Asheville, has been indicted for allegedly defrauding the VA of approximately \$5,318.96.

The following 13 people are each charged with one count of stealing money from the VA, a charge that levies a potential maximum prison term of one year and a \$100,000 fine. The loss amount associated with each case is less than \$5,000.

- Harris Hamilton, 60, of Chesnee, S.C., is charged for allegedly obtaining from the VA approximately \$2,662 in fraudulent claims.
- Marcus McEachin, 45, of Asheville, is charged for allegedly obtaining from the VA approximately \$4,029 in fraudulent claims.
- Michael Tate, 55, of Asheville, is charged for allegedly obtaining from the VA approximately \$2,919 in fraudulent claims.
- Christopher Miller, 52, of Spartanburg, S.C., is charged for allegedly obtaining from the VA approximately \$3,411 in fraudulent claims.
- Tommie Borders, 62, of Asheville, is charged for allegedly obtaining from the VA approximately \$1,426 in fraudulent claims.
- Ruben Dixon, 59, of Lenoir, N.C., is charged for allegedly obtaining from the VA approximately \$1,234 in fraudulent claims.
- Jeffrey Franklin, 58, of Asheville, is charged for allegedly obtaining from the VA approximately \$3,486 in fraudulent claims.
- Violet McKinney, 53, of Asheville, is charged for allegedly obtaining from the VA approximately \$4,737 in fraudulent claims.
- Guy Stivender, 57, of Asheville, is charged for allegedly obtaining from the VA approximately \$1,534 in fraudulent claims.
- TC Littlejohn, 56, of Asheville, is charged for allegedly obtaining from the VA approximately \$1,514 in fraudulent claims.
- Kevin Simms of Asheville, is charged for allegedly obtaining from the VA approximately \$ 4,348 in fraudulent claims.
- Marshall Dukes, 61, of Asheville, is charged for allegedly obtaining from the VA approximately \$3,780 in fraudulent claims.
- Kenneth Pickens, 47, of Asheville, is charged for allegedly obtaining from the VA approximately \$2,480 in fraudulent claims.

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