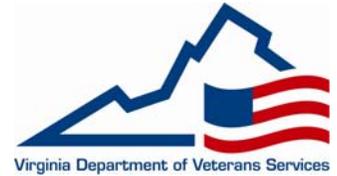


# The Virginia Department of Veterans Services



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## Town Hall Meeting Summaries

**Dale City, April 2, 2008**

### **Host**

Ron Laney, VFW Post 1503

### **Special Guests**

Secretary John Marshall, Senator Toddy Puller, Delegate Scott Lingamfelter, Delegate Paul Nicholls, Senator George Parker, Gwenn Sigda representing Senator Jim Webb.

### **Exhibitors**

Virginia Department of Veterans Services, Virginia Employment Commission, Quantico National Cemetery

### **Media**

*Potomac News*

### **JLC Representative**

Jenny Holbert, Women Marines Association

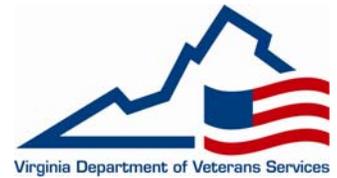
*The greatness of a nation is measured, not in part but in whole, by how it treats its veterans. People who are prepared to give the last full measure—that includes our military, law enforcement and fire fighters—are without peer in this nation and when this nation forgets, it will cease to be. Delegate Scott Lingamfelter.*

Meeting participants were welcomed by Ron Laney, Post Commander. Vince Burgess, Commissioner of the Virginia Department of Veterans Services, provided opening remarks and introduced Secretary of Public Safety John Marshall, Senator Toddy Puller, Delegate Scott Ligamfelter, Delegate Paul Nicholls, and Gwen Sigda who was representing Senator Webb. Commissioner Burgess also introduced Jenny Holbert, a member of the Joint Leadership Council.

Legend: Q = Question; A = Answer; C = Comment; R = Response

Q Every war has had it's signature wound—WWI, mustard gas; WWII, malaria and battle fatigue; Korea, frostbite; Vietnam, Agent Orange and PTSD; Iraq and Afghanistan, PTSD and TBI. When veterans are diagnosed for TBI at Salem VAMC, they are being forced to the McGuire VAMC in Richmond and are not being compensated for the travel. Is there anything the Commonwealth can do to help? This usually requires a family member to travel with the veteran.

# The Virginia Department of Veterans Services

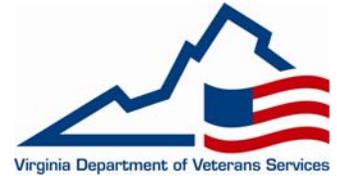


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- Q Southwest Virginia is without a national cemetery. Staunton is full. Amelia is the nearest one and this is quite a distance. Can building the cemetery at Dublin be put on a fast track?
- A DVS: We are halfway through the Army Corps of Engineering review process. The Virginia Attorney General's office has reviewed the package, we've worked with a vendor to create the cemetery design, so we are actually about four months ahead of schedule. Opening is set for fall 2010. DVS will start keeping everyone up to date through email updates and posting information on the web.
- Q I applaud DVS for getting more claims agents out in the field. The biggest thing I see is getting the information out to our folks. We need more information, more updates.
- A DVS will start doing articles for the VSO newsletters.
- Q We (VFW) receive letters about veterans who lose their jobs and get into financial trouble. We work with the National Guard Family Assistance Centers to help Guard members with unmet needs and we provide funding to these veterans. What is the state doing to help these veterans who go to Iraq, come back, their job is gone, and they can't pay their bills? What is there to help them with their unmet needs? These young reservists don't have a career or job to come back to. They haven't even been to college.
- A At the National Cemetery we hear about veterans coming home to no jobs, but we have to go out to the public to get employees. We would much rather hire veterans. There is a school in St. Louis that trains individuals to become cemetery directors. There should be a way to get the word out to veterans. It's difficult to even get the word out to veterans about the cemeteries. But, in terms of hiring, we look to veterans. We have jobs listed on USA.com right now.
- C You can put out a notice for employees at the Transition Assistance Program (TAP).
- C We don't see a lot coming out of DVS about employment opportunities.
- C If veterans have a complaint about discrimination, they can appeal loss of jobs and discrimination.
- Q Who is educating families while service member is deployed?
- A The FACs.
- Q What are plans to make more information available?
- A Advertising,  
Connecting with 211

# The Virginia Department of Veterans Services

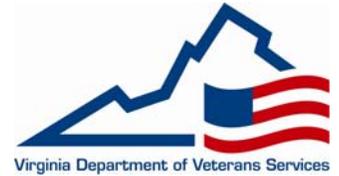


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- C Lifetransformed.org: Very small, provides training for wounded warriors' spouses so they can work from home.
- C DVETS and TecAccess received funding through the Governor's office to train wounded veterans, but if the veteran is too disabled to train, then they will train the spouse.
- C VDOT Wounded Warrior program hired 19 disabled veterans and placed them in jobs. Funded by FHWA, and veterans can stay in these jobs for up to two years.
- C The Independence Empowerment Centers work with people with disabilities. There is no waiting list and these centers are not a bureaucracy. There are 16 in Virginia. They are non-residential. The Centers want to make sure that veterans are not overlooked. They want to help people live in the community as best they can. There is no fee charged to the clients they work with directly.
- C Vietnam veterans are dying and at the services we have a boom box playing taps and two people folding the flag who don't know how to fold it. We need a bill to ensure that veterans have full military honors at burial. It's ridiculous that people don't know how to fold the flag when that's what these veterans fought for. It's more embarrassing when the honor guard doesn't show up for the service.
- C TAP is a great place to talk about the services provided to veterans. The TAP class that the Veterans Affairs gives is an embarrassment. As a veteran, things I would like to know about are the things we are talking about.
- C What about veterans who have been home for decades?
- C As soon as they get back, let them know about their benefits. It takes time to go through the claims process.
- R DVS: We receive the DD214 for everyone who is cycling out of the military and the agency sends them a letter and brochure. We've talked with DMV and asked them to capture veteran status to build a database so we can reach veterans.
- C Other ways to reach veterans are through public service announcements.
- C We applaud sending letters to everyone that DVS has received a DD214 for; however, we've missed 1.5 million who have already transitioned out.
- C TAP is a good avenue to advertise. I commend what we've done so far, but we have a long way to go.

# The Virginia Department of Veterans Services

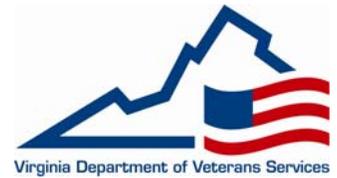


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- C Benefits delivery can be taken care of at the time of discharge. Service members can get the military and VA exams and claims done at the same time.
- C I know for a fact that this meeting was publicized to 6,500 VFW members plus it was on the radio and only 22 people show up.
- C Best way to get word out is word of mouth.
- C Roanoke is doing their job but 18 months is too long to wait to get your claim turned around. Why should I be treated differently from the veterans coming out of Iraq and Afghanistan?

# The Virginia Department of Veterans Services



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**Galax, April 8, 2008**

## **Host**

Dan Boyer, VFW, and the Crossroads Institute

## **Special Guests**

Secretary John Marshall; Angel Hall for Delegate Nutter; Gwyn Dutton for Senator Jim Webb,

## **Exhibitors**

Department of Veterans Services, Virginia Employment Commission, Salem VMAC, Hillsville CBOC, Appalachian Independence Center, Inc., Brain Injury Services of SWVA, Inc., Veterans Upward Bound

## **JLC Representative**

Dan Boyer, Veterans of Foreign Wars

The meeting was opened by Dan Boyer, a member of the Joint Leadership Council. Vince Burgess, Commissioner of the Virginia Department of Veterans Services, made opening remarks and introduced Secretary of Public Safety John Marshall, Angel Hall representing Delegate Nutter, and Gwyn Dutton representing Senator Jim Webb. He also introduced Dan Boyer, representing the VFW.

Legend: Q = Question; A = Answer; C = Comment; R = Response

- C We want a counselor here in Galax. Veterans have to drive to Wytheville and the counselors there come from West Virginia. Why can't Virginia provide something right here? The Vietnam Veterans of America would provide a building and provide transportation for the veterans. We would like the counselor to come twice a month.
- C This is a unique area. You can go to Johnson City or Salem for VA services; however, it's a 120 mile drive either way.
- C An issue that bothers so many veterans is submitting applications to the VA. They already have a huge backlog and now we're adding thousands more every month. We're embarrassed that our government is taking so long to do something. Many veterans are at a disadvantage; they don't know how to work the system. The government owes them a streamlined way to file for benefits. Whatever the state can do to facilitate the benefits claim process will be helpful.
- R DVS: Last summer the average wait time for a claim was 240 days. Many of the delays are based on law. The TurboVet initiative is designed to make it so that the veteran is getting the best possible interviewer and advocate and so that when the form gets to Roanoke, it will go through quickly. We have been told that this could take 100 days off the process. The VA doesn't like the situation either.

- C We haven't conducted a review but we've found a feeling among a lot of veterans who have said to hell with the benefits process until they are forced into it. Then they run into problems that are self inflicted and this, in turn, causes backlogs.
- R DVS: Benefits application paperwork is most unpleasant. It asks for proof every single step of the way. TurboVet will not fix this because by law, the VA has to ask for documentation. But TurboVet will ensure that all questions are answered and hopefully it will make the questions clearer. However, the individual has to take the initiative to start the claims process.
- C We started a newspaper column and Jason McNutt's business picked up. It may be worthwhile to do more advertising. As a Navy counselor, one of the biggest problems was getting personnel to get a copy of their personnel and medical records.
- Q Copies of medical and personnel records are supposed to go out to the VA. What happened to all these records?
- A Salem VAMC: The VA has the duty to assist and when a veteran applies and doesn't have his/her DD214, we help obtain it. We have increased electronic capability and it is very seldom that we have to put the burden on the veteran. For veterans without online access, we will apply online for them. So, it is becoming easy to verify veterans' service electronically.
- We can verify it almost instantaneously. VA and DOT are starting to have a connection between their databases. We can still access veterans records through archives and it takes seven to 14 days. If the DD214 was burned, we can still reconstruct them. It takes longer, but those veterans are not forgotten. Some have a DD214 but no verification of an injury. It can be reconstructed but it is difficult.
- C It would be helpful if the VA could instruct some of its employees about their duty to assist veterans. C&P examiners shouldn't shoot people down because of the length of time it took for a disability to surface.
- C This is on the medical side rather than the benefit side, but isn't this the same as previously mentioned, that veterans wait so long to file.
- C WWII veterans didn't file because they didn't want anything.
- C Not all veterans are created equal. The more complex the veteran, the more time needed for adjudication.
- C There is a plant with 275 employees closing in the area. Younger veterans are not coming back to the area. Veterans losing their jobs do not have the skills to go to newer factory jobs. This is a depressed area. They come home to see their families and then they leave. We have training programs; but, the income is \$5.35 per hour. And, these veterans losing their jobs are too young for Social Security.

There is a gap between older workers and younger workers. There is work at Goodwill Industries and some people working there are in their 70s and 80s and some are veterans. The work provides training and pays \$5.85 per hour. It helps them get back into the community.

- C Good ways to get the word out about veterans issues and resources would be to talk to the editors of the newspapers. Look at the *Floyd Press* and the *Galax Gazette*. Other good sources are radio stations, flyers in businesses, the community channel, military/veterans organizations—put in their monthly bulletins. Local VSOs can also be a distribution point.

This meeting was in the paper, on flyers, and on the community channel. But people have to read and react.

- C Will Wounded Warrior have a budget for PSAs?

- A DVS: There are never enough resources so we will have to think where we can get the most bang for the buck. We are looking to partner with 211 to get the word out. We will train their call center folks to be more knowledgeable about veterans issues. We will put information in the VSO publications. We are also talking to the DoD and may be able to use some of their resources.

- C Think about Southwest Virginia, think about how stubborn they've been for the last 200 years. They didn't want people to know their business. How do we educate people to use these services?

- A DVS: You need to have an advocate on your side. File your claim using someone who has expertise. You need an advocate.

- C At the monthly meetings of the DAV or VFW, why can't we have 10 or 15 minute program and have someone come and talk about these programs?

- C Veterans are told that they need to sign up to use the VA hospital, but their claim comes back rejected for having too high of an income. So the veterans are angry and not getting the medical care they need. A lot of veterans who do not have a service connected disability are not getting treatment.

- R Salem VAMC: At the VA, there is talk about expanding. There is dialog and some action to see about getting these folks into the VA system.

- C As a military retiree, it's abhorrent that we don't have concurrent retirement and disability pay. It's available for veterans with a 50 percent or higher rating, but it should be available to everyone.

**Front Royal, April 9, 2008**

**Host**

Terry Person, Post 53

**Special Guests**

Secretary John Marshall, Gwenn Sigda representing Senator Jim Webb.

**Exhibitors**

Virginia Department of Veterans Services, Virginia Employment Commission, Culpeper National Cemetery

**JLC Representative**

Dale Chapman, American Legion

Terry Person, Post Commander, welcomed meeting participants. Bert Boyd, Chief Operating Officer of the Virginia Department of Veterans Services, gave opening remarks and introduced Secretary of Public Safety John Marshall, Gwen Sigda representing Senator Webb, and Dale Chapman, a member of the Joint Leadership Council.

- C All my life I was a young man until a couple of years ago. I didn't apply for anything. Then I called the VA a couple of years ago about medical insurance. They told me I made too much—the cutoffs were \$16,000 annual income for a single person and \$32,000 annual income for married.
- C A couple of years ago I was told that unless you are wounded you won't get into the VA.
- R DVS: The individual needs to submit a claims application. Otherwise, you won't know if you qualify. DVS has full-time representatives who can guide you through the system. When you're filling out the claims application form, one wrong answer can lead you down the wrong track. That's why you need someone else to help you build your claim.

In July 2003 Congress cut off enrollment. Prior to 2003, any honorably discharged veteran could qualify for medical coverage. They decided to means test veterans. The means test is based on income and your zip code. If you don't meet the means test and you do not have a service-connected disability, you cannot get coverage.

Veterans should apply anyway. You will need your DD214 and you must have an other-than-dishonorable discharge. You will need to try to establish a service connection to your disability. Until money becomes available, veterans in priority group 8 will not be cared for.

If you have health care insurance, the VA will bill your insurance provider for non service-connected issues. If your income changes and goes down, they you may qualify. It's totally

based on income. The VA will perform a computer cross check with other agencies that have your social security number. They will also review your assets.

Q A number of guys work for me. I understand that Guard and Reserve veterans do not have the same G.I. Bill benefits that the active duty service members have.

A DVS: Refer them to the Buffalo Regional VA Office about their G.I. Bill benefits. There is a toll-free number. Normally, they are very helpful. Determining G.I. Bill benefits is very complicated. The G.I. Bill benefit is a perishable benefit.

Q I was in country (Vietnam) twice. Is there a timeframe for Agent Orange?

A DVS: There are 11 presumptive conditions associated with Agent Orange exposure. A veteran must have been diagnosed with one of them in order to qualify for compensation. There is no time limit associated with Agent Orange. This is one of the most common types of claims. You must have actually been on Vietnam soil to qualify, or you must be able to show that you were on the rivers or providing naval support. So, the three keys are showing that you have one of the presumptive diseases, having a current diagnosis, and being able to show that you were in country.

If you have a disease that's chronic but you didn't file a claim, the more time that passes, the more difficult it is to build a claim and show that it's service-connected. The VA relies solely on evidence in awarding claims.

When you file your claim, you want it to be as ready to process as possible. If the evidence is not there, you won't get service-connected compensation. The VA does a wonderful job. You may not always think it's fair, but they really do try to help you.

Hypertension is being looked at to become a presumptive illness.

There are eight diseases that you can get due to diabetes. These are secondary and can also be service-connected.

C Ways to reach veterans:

- Web-based text messaging
- USArmy.mil—broadcast message
- Military.com
- TV advertising
- Radio
- Flyers
- VSO posts
- Universities
- TAP
- Transition points

- C Three percent unemployment rate in this area for the last ten years—a strong, balanced economy, so employment is not an issue.
  
- C We would like to see a Vet Center in this area. We would also like to establish better rapport with the director of the VAMC in Martinsburg.

**Salem, April 17, 2008**

## **Host**

Richard Winstead, American Legion Post 3

## **Special Guests**

Secretary John Marshall, Wanda Hancock representing Congressman Bob Goodlatte.

## **Exhibitors**

Virginia Department of Veterans Services, Virginia Employment Commission, Brain Injury Services, Salem VAMC, American Legion Post 3

## **JLC Representative**

Frank Sherman, Roanoke Valley Veterans Council, Dan Karnes, Roanoke Valley Veterans Council

## **BVS Representative**

Pat Green

Richard Winstead, Post Commander, welcomed the meeting participants. Vince Burgess, Commissioner of the Virginia Department of Veterans Services, gave opening remarks and introduced Secretary of Public Safety John Marshall, Wanda Hancock representing Congressman Bob Goodlatte, Frank Sherman and Dan Karnes, Joint Leadership Council members, and Pat Green, a member of the Board of Veterans Services.

Legend: Q = Question; A = Answer; C = Comment; R = Response

C We just moved here from Germany. (The husband is still active duty in Army with three weeks left; he has nine years in military, she has 13 years.). We want to settle here in Salem. We are looking for employment, ways to meet the veterans community and ways to volunteer.

C AMVETS: We work with volunteers at the VA hospital in Salem.

C American Legion Post 3: Our post has has 587 members; we are proud, civic, and charitable. We support boys and girls activities, three baseball teams, the Military Support Center, the Virginia Veterans Care Center. Our oldest member is 97.

C I worked with two sergeants in Southwest Virginia. They showed no symptoms in Iraq, none when they returned, and none four months after their return. I went back a year later and found out that both had committed suicide. What help could they have gotten?

I want to see community health services that know what's going on. My youngest son has been in Turkey, Iraq, Kosovo, and Afghanistan. This is very personal to me; but, more so because I saw how these two sergeants got their men home safely, how they took care of their men, but how their community did not take care of them.

C I have been a surgeon at the Salem VAMC for 17 years. In this group tonight, I do not see any non veterans. We all have a vested interest. I would like to see in a group like this the civilian force working with us on these issues. We have an excellent psychiatric team, but other hospitals, like Catawba, don't have that expertise. There has to be something set up that gives a positive view of the VA and our veterans.

I came here in 1968 and I have been a citizen since 1980. We will give a minute of silence for 911 victims; but, what happened on December 7, 1947? The general public needs to understand what our military does for us. What do we have to do to get the rest of the public involved. We need to get that out. If they won't do it from their heart, then we need a think tank to figure out how to get the word out. We must be positive and understanding of what is happening at the VAMC. Once this information is out, the two sergeants wouldn't have had a problem because their family doctor would have known where to go to have helped them.

C I want to see military service personnel evaluated pre-mobilization, post-mobilization and at PDHRA. I would like to see psychiatrists and doctors go and diagnose them on the spot for PTSD and TBI. Once a veteran leaves, he or she is more likely not to get help.

C One of the things that pulled us away from active duty was the desire to be part of a community and a veteran community. Veterans seem to pull together as a community. While many are returning with PTSD, many are coming back okay. You have a strong group of people who are coming back okay, who are not disabled. It is important to pull these veterans in, too. I hope we can bring in more people who have been in the military within the past ten years and learn about volunteerism. It is so important to link the generations and put a face to what people have gone through.

C My son is just back from Afghanistan. There are only two people here tonight who are not service providers. We advertised to get the people here tonight. In 1977, guys returning were released to the community and left to fend for themselves. It took years to realize that a transition program was necessary. We need to mobilize services to get out to the veterans in the far reaches. We need to take the battle to them.

R VA Regional Office: The Department of Veterans Affairs has hired a contractor to call 570,000 combat veterans who are not enrolled in VA healthcare starting May 1. The VA will step in when the calls get too technical. We are looking at a 110,000 calls coming in through Roanoke. We plan to write, call, email to let veterans know about the VA.

Q Any plans to open up the phone system?

A VA Regional Office: The Veterans Benefits Administration (VBA) has set up national call centers—eight large call centers. When the call goes to a centralized location, that location has all the database systems necessary to respond to the caller. We will have a toll-free system set up.

- C When people call the VA, they are being told that their questions can't be answered because their records are in Roanoke.
- R VA Regional Office: That is happening due to poor training.
- R Salem VAMC: That two veterans committed suicide in an under-served area bothers me. We're doing outreach, letters are going out to every returning service member, we have an OEF/OIF coordinator with the names of 1,500 veterans, they call if veterans don't show up for appointments. I hadn't thought of the rolling van, but if that's what helps suicide prevention, we need to consider it. I would appeal to you that this hospital is here to help people. We have CBOCS in Danville, Hillsville, Lynchburg, and we will open one in Staunton. This VA is here for them. We need to treat every veteran in front of us as the most important person.
- C If it hadn't been for Brad, I wouldn't have known about this meeting tonight. We need to put out flyers to Walmart, libraries, other social events, YMCAs, VSOs, so when members do have meetings they see this information. Get into places where people do their shopping.
- C We're talking to the choir. It's a census problem in this country. In 1970, one in ten in the audience had direct experience with the military. Now, one in every 250 people has any knowledge of military experience—we are two generations since conscription. Much of what we are doing here we should be doing in the units. All have been mobilized. They don't want to talk to a psychiatrist at Fort Dix or Fort Campbell. All they want to do is get home. But, that's just the beginning of our problems here. We must have people in the units. Every Army reserve unit has a suicide prevention module, but it's assigned to someone in that unit because they don't know there's a professional in the community who could do this for them. We know the need is out there. The annual training plan of every unit is chock full. Warning orders are still coming out. So, it's not stopping but will be a continuing situation.
- C Joan Washburn: I'm currently coordinating wounded warrior events. I've done events for politicians and many others. The best way to turn out a crowd is by phone banks. Veterans calling veterans. I would be happy to bring in volunteers to set up phone banks.

**Richmond, April 28, 2008**

## **Host**

Dale Chapman, Department Adjutant, American Legion Department Headquarters; Andy Robertson, State Commander, American Legion

## **Exhibitors**

Virginia Department of Veterans Services, Virginia Employment Commission, McGuire VAMC, Employer Support for the Guard and Reserve (ESGR), Culpeper National Cemetery, Brain Injury Association of Virginia, Independent Living Centers

## **JLC Representatives**

Sam Wilder, MOAA  
Dale Chapman, American Legion

## **BVS Representatives**

Paul Galanti, Thad Jones

Dale Chapman, American Legion Department Adjutant, and Andy Robertson, American Legion Commander, welcomed the meeting participants. Vince Burgess gave opening remarks and introduced Joint Leadership Council Chairman Sam Wilder and Board of Veterans Services Chairman Paul Galanti and Board of Veterans Services member Thad Jones.

Legend: Q = Question; A = Answer; C = Comment; R = Response; F = Facilitator

- C The DAV wants to look for ways to increase family benefits. Congratulations on Wounded Warrior; but, would it be worthwhile to increase outreach to military families by other social service agencies? There is so much needed for veterans. There's a wait-in-line mentality.
- C We don't do a good job of promoting the need for insurance. Many veterans are coming back with issues, without understanding how to access those basic benefits, and without understanding the need for insurance other than for burial—life insurance for example. A veteran passed away, and thought he was rated 100 percent permanent and disabled for 15 years. But, he was really only rated permanent and disabled for eight years. So, the widow will not get the DIC she expected and could lose her home. We need to be sure to put information out so that veterans understand the need for life insurance. We talk about benefits, but not where the benefits end.

If you make more than \$7,000 per year, you can't get a pension. If a veteran is rated as 100 percent, he or she is getting \$2,500 per month or \$30,000 per year. But when he dies, his family has no income.

- F How do you do a large scale communication that is effective?

- C My chapter is sponsoring a function this Friday. We posted the event online on our web site, at colleges, community colleges, on radio shows, in churches and gas stations. We will have three national claims officers from the Roanoke Regional Office. We do this every two months. We got about 60 people last time.
- C I hear veterans talking, but I don't hear people as a whole talk about veterans issues. There is a lack of compassion, even among veterans. Last year, there was a lack of compassion about incarcerated veterans at the town hall meeting. So few outside the veterans circle know about the issues and care about them. There is a lack of knowledge and even the desire to understand.
- C We need to do quite a bit of outreach to law enforcement officers. We want to be sure law enforcement is brought to the table so they understand the issues of veterans.
- C Why was law enforcement singled out? Why not all high stress occupations?
- C Some veterans have impulse control issues. We want to be sure these guys don't end up in jail with a record, so we're trying to keep them out of the criminal justice system.
- C Mental health is linked to home life, financial health, physical health, and family health.
- C We have a lot of people ashamed to admit they're veterans. We have legislative bodies working for us, but yet veterans are losing more benefits.
- C At one town hall meeting a young man brought a claim letter with him and he was very angry that the VA had give him only a 10 percent disability rating and nothing for hearing loss. He had gone to the VA center to talk about it; they hooked him up with a veterans service representative. We have to break through the bureaucracy and feel compassion. We have gaps in the system that we need to get filled.
- C In the Bob Hope shows during World War II, he talked about the nation sacrificing and supporting the troops and war effort. It's a very different mind set today than decades ago. There are very few veterans in our legislature these days.
- C A lot of people give up. The insult of the bureaucracy is too much. That's where we need to have the advocates.
- C Virginia has one of the highest percentages of veterans serving in the legislature.
- C If a state agency is confused, word must go out through law enforcement, radio, newspapers, PSAs, newsletters, VSOs, etc. If a state employee is confused, then heaven help the veteran.
- C A survey was done of all health care chains, the one with the number one outcome was the VA.
- C Phillip Longman wrote a book, *The VA Health Care—Why It's Better Than Yours*. In this book he goes over how good the VA healthcare system really is.

- C We encourage delivery and working with incarcerated veterans. Any veteran incarcerated for 60 days or more is entitled to only 10 percent of his or her benefits; but, the rest can be apportioned to the family. But, that's not happening many times.
- C In terms of outreach, the Brain Injury Association of Virginia has tried to have a conversation five times with the National Guard transition assistance. Just want to send them information on brain injury. I cannot get anyone to even call me back.
- C The American Legion would like to have a tear out sheet with contact information for resources that we can put in our newsletters.

Norfolk, April 30, 2008

## Host

Don Scholten, VFW Post 4809

## Special Guests

Senator Northam, Delegate Bouchard, Delegate Mathiason, Delegate Paula Miller, Andrea Trotter representing Senator Webb's office

## Exhibitors

Virginia Department of Veterans Services, Virginia Employment Commission, Hampton VAMC, Employer Support for the Guard and Reserve (ESGR), Culpeper National Cemetery

## JLC Representative

John Bonnell, Marine Corps League; Bill Townsley, Military Order of the World Wars; Jim Aucion, AMVETS; Dan Miller, Disabled American Veterans

Legend: Q = Question; A = Answer; C = Comment; R = Response

- Q The DAV, Chapter 4, has claims officers there. We welcome veterans. I wanted to ask the question about family benefits—the benefits plan and how to get information to family and spouses. What about benefits for the homeless? How do we get information to the families so that they know what's going on?
- A There are family benefits but not all families know about them. Communication tools include newsletters, benefits books put out by the VA, website.
- Q Veterans go overseas and fight. They come back and have a spouse. The wives stay married all these years. Why don't they have anything for the wives or spouses?
- A DVS: The Wounded Warrior Initiative covers the family as well. Not just wives and husbands but also children. We recognize the impact on the family unit and the community as well. It is recognized that families are very much affected.
- A Hampton VAMC: There are a number of programs for veterans and some limited resources for spouses. We are exploring to see what we can have for spouses and children. Often we work with resources in the community. We are happy to talk with spouses and steer them to resources.
- The military service personnel coming back from Iraq are not coming to the VA because of the stigma. The state needs to have social workers go out into the community to the veterans, their houses, their churches, etc.
- C American Legion: Getting the word out seems to be the biggest problem. We are working with DVS to put together a newspaper page with web site and toll free numbers of resources. This

will get out to at least 75,000 veterans. The VFW, DAV can all do the same thing and the more we get out this information, the more services will be utilized.

- C Can we develop a self test for PTSD and TBI?
- C When I look for help I find lacking a definitive resource available, whether on the web or hard copy.
- R DVS: 211, if applied properly, will have individuals who will answer the phone and work with you to understand what you need and will give you the services available. They may give you one of our benefit services representatives as a fall back. Part of the funding will be to advertise 211—billboards, TV, newsletters. DoD has put together an initiative at the national level and asked us about partnering.
- C Quite often you hear that it's the family who recognizes the problem. They are the ones who need the self test to recognize that there's a problem.
- R Salem VAMC: Every single veteran who comes in is screened. The fundamental problem is to get the veteran to come in. New veterans are very resistant to coming to the VA. They don't want to come in and be labeled. We screen for PTSD, depression, substance abuse to identify veterans and get them to the appropriate services. We're also integrating our care—mental health team counselors are co-located with primary care clinics to deliver care.
- C People don't recognize their own problem. I went to the VA to get help and it was only a big brick wall. Just forms to fill out and too much detail about what day the incident happened. They look down at you and you get treated like crap. What about the dude down there who's a tobacco farmer? It's been 40 years since I filled out forms at the VA. They need to get off people's backs when they come in. It makes you feel ashamed. You go in and you're apprehensive and you feel like crap to start with. I was laid off because of a mental problem. Just another vet, a kid with tobacco farmer for a daddy, with nothing more than a truck with the fenders falling off. I'm nobody. I was diagnosed with PTSD, but never got a dime.
- I'm talking about when my kids were little and my wife couldn't go in the same room with me. I went hunting and my buddies had to bring me home two days early because I couldn't be in the woods with a gun.
- C About two months ago I was trying to get insulin. The doctor put me on a certain type and the VA said they didn't have it and I would have to do something else. This went on for six to eight weeks. So, I went to my congressman and he fixed it. A lot of veterans give up. But, you can't do that, you've got to keep trying.
- R VA: We're here to serve our veterans but we are on a budget, so there are certain medications we don't offer because we're trying to save money. It shouldn't take a congressman to get your medicine. We don't like it either. I'm sure some of you have had negative impacts, but please allow us to serve you and give us a chance to care for you.

Q When will the VA accept more veterans in Virginia Beach? What do you have to do to get accepted?

R VA: We will resolve this with you.

R VA: The VA hospital has patient advocates and is a good point for any veteran to start. Ms. Mims, the Director, is really hard on these patient advocates.

C I work at a Vet Center and get 15 or 20 calls from veterans who want to know something. So, I make sure my staff know the phone numbers. But, they can't find the phone number for the Department of Veterans Services in the phone book. Veterans don't know that it's a state agency. The number should be in the yellow pages.