

Strictly Speaking

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Honorable Anthony J. Principi
Secretary Of Veterans Affairs
National Press Club
May 27, 2003

Thank you Tammy for a very, very kind introduction, and good afternoon everyone, distinguished head table guests, distinguished guests all, my fellow veterans and certainly I see many of my fellow VA employees. Thank you for being here.

Less than 24 hours ago our nation observed Memorial Day, a time for Americans to reflect on their history and their core values by honoring those who gave their lives for the very ideal that we cherish as a nation.

More than a million service members died in the wars and conflicts our nation fought since the first colonials took up arms in 1775 to fight for our independence. Each soldier, sailor, airmen, Marine or Coast Guardsman was a loved one, cherished by their family and their friends, and each was a loss to their community and our nation.

The silent markers on veterans' graves speak eloquently to the price that some Americans paid so that the rest of us may live in freedom. And we owe it to those who died on our behalf to honor them by using wisely the gifts of freedom and opportunity that they purchased for us at the cost of their very lives.

American men and women in our armed forces still watch over the ramparts of freedom, ready to add their names to the roll call of honor if need be. Yesterday, even as we joined together throughout America to remember the sacrifice of those who answered our nation's call, we added yet another name to the list of heroes who have given the last full measure of devotion to rid the world from the threat of a cruel dictator. And unfortunately, this morning's news tells us two more brave young men were killed in our continuing battle to rescue the Iraqi nation and liberate the Iraqi people.

It is our sacred duty to keep the legacy of our nation's patriots forever fresh in the memories of future generations. We are bound by honor to do so. They gave up their own hopes and dreams to preserve our opportunities to realize our own.

Memorial Day is a day of opportunity for all Americans to give thanks for all of our blessings. It is also a day we rededicate ourselves to our country and to America's living veterans and their families in memory of the sacrifices that they and others have made. For the Department of Veteran Affairs it is a time to reflect for us on our sacred mission, first articulated by a great president in some of the greatest words ever written by an American citizen:

"With malice towards none, with charity for all, with firmness in the right as God gives us to see the right, let us strive on to finish the work we are in, to bind up the nation's wounds, to care for him who shall have borne the battle and for his widow and his orphan, to do all which may achieve and cherish a just and lasting peace among ourselves and with all nations." — Abraham Lincoln.

At this moment the Department of Veteran Affairs has no greater mission, no more sacred responsibility, than to prepare to serve the hundreds of thousands of America's finest citizens who put their lives on the line to free the Iraqi and Afghan people.

Let me depart from my prepared words to tell you about a story about my visit recently to Bethesda and Walter Reed Army Hospital. And while at Bethesda I came upon a young Marine who was severely wounded in Iraq who could barely talk and tried to comfort him and hold their hand for a few moments. And before I left I gave him a book about all of the benefits that a grateful nation has given to those who serve their nation in uniform, and I told him when he got better to take the time to read the book, because he had earned every benefit in the book.

And I went on to the next Marine in his room and spent a few minutes with him and his parents. And then as I was leaving I noticed that this young Marine was indeed reading the book. And I went over to him, and I told him how pleased I was to see that he was taking the time to read through the book.

He was pointing to one provision, and he said, "That's all I want." And I looked down the book and where he was pointing, and it was the provision that entitles him to become an American citizen. And of course at that point I welled up and broke down. And I thought to myself how very fortunate we are to have young men and women who not only grew up in this country but those who came to this country and were willing to give up their lives to become American citizens.

How indeed blessed we are to have such magnificent men and women. But to aid in their transition to civilian life, and if they were wounded or became ill like this Marine, to make them whole again, but we must also and at the same time have the responsibility to meet the needs of veterans of the wars of the last century.

Every time our nation commits the men and women who embody our armed forces to action, VA leaders must look at our entire system from top to bottom to determine what we must do to meet the needs of new generations of heroes.

Americans have always honored and rewarded those who have borne the battle on their behalf. But the benefits and services a grateful nation offers its defenders evolve to meet the needs of veterans of every new conflict.

Going back to the Continental Congress, one of the first acts after proving the Declaration of Independence was creating a compensation system for patriots disabled while serving in the glorious cause, offering grants of land and later creating a pension system for Revolutionary veterans who could no longer earn a living because of disabilities unrelated to their service.

When the Civil War ended in 1865, two million Union soldiers joined the ranks of 80,000 living war veterans at the time. To meet their needs the American government began crafting the prototype for today's VA program of disability compensation; a national cemetery system and the first national homes for disabled soldiers, the starting point for today's VA health system.

Fifty years later, nearly five million dough boys went “over there” during World War I, and our nation responded by building 44 new hospitals between 1922 and 1941, offering low-cost life insurance and creating new and unprecedented programs of vocational rehabilitation.

Then World War II came about and 16 million Americans went to war. And to reintegrate this enormous demobilizing army into our peacetime society, Congress did something revolutionary and passed the GI Bill of Rights. It fell then on my predecessor General Omar Bradley, just as it falls on me today, to transform the promise of the dry words of the statutes books into the benefits and services that transform both lives and America. Every veteran, rich or poor, black or white, could attend the best schools to which they could be admitted.

Higher education limited only by ability and aspiration unleashed a generation of men and women, and transformed America and America’s expectations for ourselves. Veterans could purchase homes with no down payment and the great suburbs of America were born, the Levittowns.

In the three years after World War II, the VA hired more new positions than they had on staff before the war and three times as many nurses. To meet this sudden demand for trained personnel, VA established a partnership with America’s medical schools, and in the process revolutionized medical education, medical research, and set the stage for today’s enormous federal commitment to research.

The balancing act of continually reinventing VA while remaining true to the veterans of prior wars continues to present day. Years after the Vietnam War ended, VA’s leadership finally learned the difficult and painful lesson that environmental hazards of the battlefield can be as deadly as bullet wounds and sabre cuts, a lesson reinforced after Operation Desert Storm.

One reason for our balancing act between generations is the fact that while wars may be of relatively short duration, their echoes reverberate for decades, even centuries. Veterans live a lifetime after their service, so our benefits and services must ensure they are cared for throughout their lifetimes and beyond. The last pension check based on the Revolutionary War service was issued to a veteran’s child in 1911, in the 135th year of our nation’s independence.

The last pensioned Civil War veteran died in 1959, and the last pensioned widow of the Civil War died just last year. And there are still a dozen dependent children on our Civil War rolls.

As many as 500 World War I veterans still embody the unrealized hope of a war to end all wars. It is a good bet that we will still be paying pensions to spouses and dependent children of World War II veterans well into the latter part of this century.

Today we must not only gear up to care for the young men and women who faced down the enemy in Iraq, but we must also find new and more cost effective ways to serve our World War II veterans, now in their 80s, and turning to our health care system, as Tammy indicated, in ever increasing numbers.

We must properly memorialize and honor Korean War veterans on the 50th anniversary of the end of their war; continue to provide special outreach and other services to Vietnam War

veterans, and increasingly monitor their health as they began to age. I hate to say that, but it is indeed happening and respond to the concerns of veterans of the first Gulf War, and find answers to Persian Gulf Syndrome.

And as we do this we must strive to fairly and promptly decide every veteran's claims to benefits. Historically we have not done that very well;

Improving all veterans' access to quality health care under the great demands that are being placed upon us. Growing from 2.9 million in 1998 to 7 million enrolled today, almost 5 million coming to us for health care every year; restore our national cemeteries as national shrines.

Harness the promise of modern information technology to deliver our services faster and more efficiently; and improve our stewardship of the dollars entrusted to us by the American people, the American taxpayer, indeed they send us a lot of money every year, almost \$60 billion.

One of the most dramatic changes we have made to ensure a successful homecoming for today's service members is the creation of an atmosphere in which VA and the Department of Defense work together in new and creative ways to benefit America and the men and women who defend her. Our two agencies have missions that are now and forever interwoven.

Secretary Rumsfeld and I share responsibility for the welfare of the same men and women, just at different points in their lives. Our servicemen and women have surmounted barriers thought impossible to overcome, scaling the cliffs above the beaches of Normandy, climbing the heights of Mount Surabachi, liberating Baghdad, a city of 5 million in hours, not days.

They should not have to overcome high barriers or high walls, between federal agencies in order to receive the benefits they've earned through their service and their sacrifices.

When the young men and women who are now defending our freedom in the foreign corners of the globe put down their uniforms and assume the honored title of veteran. They have every right to expect VA to pick up their health care needs seamlessly, move records more efficiently from active duty status to VA electronically; share critical medical information through coherent and timely transfers of medical information electronically; and process benefit claims as if DOD and VA were for all intents and purposes one shared system.

Today we are not, and we need to do better. Together we have made progress in our ability to protect the health of our troops stationed in areas where environmental hazards pose a real or possible threat. We do not now know if our troops will return ill from exposure to environmental hazards on the battlefield, as they did after the first Gulf War, as they did after Vietnam.

But thanks to the cooperation and coordination of Secretary Rumsfeld and his staff, I believe that we are better prepared than ever to identify and to treat whatever health care issue might arise. DOD is documenting the health care provided to forces deployed to the Gulf,

monitoring the environment in which our forces are deployed, and will document which service members were exposed to danger in the event of a toxic exposure, if one were detected.

DOD will also provide us with rosters of service members who have separated from military service; and is working with us to develop processes to share information including individual assignment data, unit location data, environmental surveillance data, and medical surveillance data. Together our two agencies will monitor and document the health of service members when they return home from the combat theater, as they are doing today.

For two years after separation, every military service member, including Reservists, Guardsmen, and women now serving in the theater of operations are eligible for VA health care on a priority basis. Some service members will return to our shores wounded, ill or injured. Treating veterans with service-connected disabilities is the primary reason VA exists.

To care for those who become ill as a result of their service and those who have been wounded in combat, VA must be there for them, and we must offer modern, technologically advanced health care delivery. Our computerized patient record system, where all of our VA hospitals are paper-free is the model for the private sector. Recently VA won the Harvard University and Ford Foundation innovation in government award for our patient safety program.

In the last six years we have transformed VA from a collection of in-patient hospitals, characterized by a limited number of specialized facilities, often far from a veterans home, to a health care system based on an out-patient model, with more than 1,300 sites and veterans communities across the nation. Besides priority scheduling for their care, veterans who were wounded or who became ill during Operation Iraqi Freedom are eligible for other benefits and services their predecessors may envy.

To help service members file for and receive service-connected disability compensation more quickly than in the past, VA has established a benefits delivery at discharge program at more than 125 military bases, where VA rating specialists and physicians are actually on the military base. Now a young Marine or soldier can walk across the street from their barracks and file a claim for a disability compensation.

He or she can get the medical evaluation, and have that claim evaluated within days, not months or years, so that they know what benefit they will be entitled to the moment they are separated from military service, rather than having to go through that process and starting at the beginning after they separate from military service.

I really think that's what putting people first is all about, and it's just a wonderful program, and we need to expand it hopefully in the years ahead throughout the military establishment, both at home and abroad where service members may be discharged from overseas assignments.

Our goal with the discharge program is to provide answers to veterans within 30 days. And, by comparison, our national average processing time is 178 days for all types of claims requiring rating. The benefits delivery at discharge program enables us to truly, truly put people first. But what about the hundreds of thousands of soldiers, sailors, airmen, Marines and Coast

Guardsmen who were not wounded in service, who come back whole?

Those who are successfully completing their enlistments and are contemplating the transition to civilian life when they return home, we must be there for them as well to help them in that transition.

Today's veterans have education benefits that will not only allow them to pursue a degree for 36 months or four years, but also a professional credentialing certificate for flight training, apprenticeship training, and correspondence courses.

As of October 1st, a veteran who is a full-time student with three years of service credit will be eligible for a stipend of \$985 a month, enough for tuition and room and board at most state colleges and universities. It wasn't always that way. The cost of education far exceeded the benefit that was provided.

We now offer work-study programs and tutorial assistance available for eligible students. And we can accelerate payments for students whose education will lead to employment in high technology areas, where the educational program might only be six months but very costly.

We can now accelerate the payments so that they can have that entire educational program paid for rather than just a monthly stipend that may only cover a portion of their benefits. We'll also pay for certification examinations for veterans who need to prove that the skills they learned in the military meet the professional standards for professions with licensing requirements.

Our nation has a moral obligation to those who commit themselves to our defense, and we must also capitalize on our investment in their training and development. I can think of no more important benefit for the men and women in uniform than to give them the opportunity to attend the best schools in America, so that they can get on with their lives and be a success.

Because indeed education and training is the key to the door to a successful life, I think this is one of the finest benefits that we can offer to them. Many of the responsibilities for employment for actually integrating transition service members into the work force are entrusted to the United States Department of Labor.

Veterans and their spouses have priority for Department of Labor employment, training, and placement services. Newly separated veterans I believe are some of our nation's most dedicated, mature, skilled, trained, disciplined, experienced, trustworthy, and drug-free people in the country.

They make exceptional workers, exceptional managers. All they need is a chance. And I believe it is our responsibility at the VA and Department of Labor to do what we can to give them that chance.

Anyone who watched the stories filed by embedded reporters, like Catherine Skeba to my right, in the field knows that the exceptional young men and women who liberated the Iraqi

people have the same ability to revolutionize American society.

We are well on our way to providing transitional service members with the means and opportunity to succeed in their civilian lives, and to invest in their talent and ability in the American economy. I have no doubt their talents and abilities will enable our nation to maintain its preeminent place among the world's economy for many years to come.

As I conclude, let me share one final thought. Our brave men and women in uniform in Iraq fought bravely for the cause of liberty and the peace of the world. Their courage, their willingness to face danger for our nation and for each other are the major reasons for our great victory.

President Bush has said the character of our military through history, the daring of Normandy, the fierce courage of Iwo Jima, the decency and idealism that turned enemies into allies, is fully present in this generation.

When I look at the members of the United States military, I see the best of our country. Every policy we implement in government, every improvement to our business processes, every action our department takes, every decision I myself must make, must ensure that we are prepared to serve the young men and women of this generation and of every generation who defended freedom with their bodies and their lives.

If we fail, we will do more than break faith with the brave soldiers, sailors, airmen, Marines and Coast Guardsmen who liberated Iraq. By creating disincentives to military service, we will place the very freedoms we cherish, the very freedoms all Americans cherish, at risk.

Rudyard Kipling's famous 19th century poem "Tommy," still stands today as the single best commentary on the relationship of soldiers to noncombatants who stay behind.

It concludes, "For it's Tommy this, an' Tommy that, an' 'chuck him out, the brute!' But it's 'Saviour of 'is country' when the guns begin to shoot; An' it's Tommy this, an' Tommy that, an' anything you please; An' Tommy ain't a bloomin' fool you bet that Tommy sees!"

Our nation has done much, very much, to move the roadblocks and detour signs that once carried veterans away from their unique American dreams. But we can't rest on our laurels.

As the Tommys of today come marching home from Iraq, they will watch the VA and they will watch Congress and the administration very carefully to see that we continue to smooth away the well-traveled path that leads away from military service and towards a society in which every veteran is limited only by the size and by the scope of his or her aspirations.

We welcome the scrutiny of these heroes. May God bless the United States and all who defend her Thank you very much.

Honorable Anthony J. Principi
Secretary of Veterans Affairs
Excellence in Government Conference
July 1, 2003

Thank you Pat for that very kind introduction.

It is good to be with you and Tim again, and I appreciate the Council for Excellence in Government's and Government Executive magazine's invitation to join with this enthusiastic audience of my federal colleagues.

Thank you all for your warm reception.

The Department of Veterans Affairs has been blessed in our association with the Council for Excellence in Government and Government Executive magazine. I am especially proud of our Government Innovations Award for our National Center for Patient Safety and for our Government Technology Leadership Award for our Virtual Learning Center. Both awards recognized the strides VA is making in health care for our Nation's 25 million veterans and the soldiers, sailors, Marines, airmen, and Coastguardsmen of today's Armed Forces who will one day join the ranks of men and women who have earned the title "veteran."

Both awards were accepted with humility and great pride on behalf of the VA employees who devoted their skills, initiative, time, energy, and love for our veterans to redeem our Nation's debt to those who served faithfully and with selfless sacrifice.

In keeping with the theme of this year's conference, "What's Next," I can say with great confidence that VA is not content to rest on our laurels; we will continue to break new ground in health care research and delivery; we will always be mining the rich fields of our employees' experiences and knowledge for innovations in medical technology, benefits delivery, and human resources management. In short, we will always be setting our sights higher than our last achievement's mark. Our heritage requires it; our mission demands it.

There is an often-told story of Benjamin Franklin leaving the Constitutional Convention in 1787 and being asked what sort of government the delegates had created.

Franklin's response was "A republic, if you can keep it."

In those words lie the heritage of every federal agency, and the challenge to honor the trust and vision of our founding fathers who believed that our form of representative democracy and a shared division of labor by the three branches of government was, in the long run, the most certain path to achieving their new republic's success well beyond their generation.

For Washington, Jefferson, Franklin, Adams, Hamilton, Madison, the challenge, "What's next?" was presented to them along with Cornwallis's sword at Yorktown. What was next for the young America were many paths, literally and figuratively leading into the wilderness of a new Nation inspired by patriots' dreams and secured with patriots' blood.

If ever there were change agents to be revered for their wisdom, emulated for their vision, and sanctified for their sacrifices, they are our founding fathers and the citizen-soldiers who gave and continue to give their lives for the immutable principles embodied in the Declaration of Independence we will honor on Friday. They are the charter members in the pantheon of greatness.

I am proud to lead the Cabinet department that honors America's commitment, our promise, in Abraham Lincoln's words, to "...care for him who shall have borne the battle and for his widow and his orphan."

Two years ago, I came to my office with four priorities:

- To insure that veterans receive timely and accurate decisions on disability claims.
- To provide them with increased access to high quality health care, including specialized service.
- To maintain our national cemeteries as national shrines.
- To insure that information technology serves to break down the barriers within our department, and eliminate the barriers separating us from other departments.

Setting goals is of little use if there is no leadership in place to inspire and guide the mission to meet those goals. That's about as effective as a million-dollar yacht without a propeller or rudder. Looks great, has the power, goes nowhere.

Excellence in government, the propeller and the rudder necessary to move America in the direction of the best interests of the beneficiaries who depend upon us and the taxpayers who expect and deserve their money's worth, begins with leadership committed to steadfast and credible principles.

Excellence in government requires a commitment by public servants to be more than managers. We must become leaders: leaders of vision, leaders of principal, and leaders of moral courage.

You must hold steadfast to your principles despite unfair criticism, but you must also be confident enough in your leadership to give credit for success where credit is due. And you must be constantly seeking out the good in the men and women who work for you and be ready to acknowledge their efforts.

Excellence in government requires leaders willing to make the difficult decisions, not the politically expedient ones; leaders who are compassionate and who understand that compassion is not just about how much money we spend but it's about the results we achieve in the lives that are affected by our decisions.

We need leaders of high ethical standards; leaders who respect others both up and down the line; and most importantly, we need leaders who hold themselves accountable.

Responsibility and accountability are inextricably interwoven. I can sum up my leadership philosophy in three words: I am accountable.

If I've met with success at VA, it is because the leaders I rely upon accept their responsibility with full accountability. They are problem solvers, not complainers. They know I manage by principal not procedure, and they know that communication is, and must be, a two-way street.

As government managers, you know you are fortunate if your agency operates on a more or less regular schedule, with predictable demands for services from a predictable and forecastable demographic clients.

At VA the only certain predictions I can make are that change will be the norm and our clients, America's veterans, will not stop looking to us for the health care, benefits, and memorial needs they have earned.

Back in 1830, Daniel Webster summarized the cause for which the patriots fought and died in just nine words: "Liberty and Union. Now and Forever. One and Inseparable." Today at VA, we have our own simple creed: "Leadership. Focus. Performance Standards. Accountability for Outcomes." These are the watchwords of our revolution.

To provide leadership, I have assembled a group of senior decision makers whose ability, judgment, energy and commitment are the equal of any management team in government.

We have established a board of directors to see to it that the changes that need to take place in our department are taking place.

A Strategic Management Council identifies, analyzes and wrestles with cross-functional processes spanning the Department, such as legislation, budget and human resources.

In his Management Agenda, President Bush calls for a government that is active but limited. A government that focuses on priorities and does them well. Our VA Strategic Plan addresses the President's Management Agenda and defines the key strategies the Department will implement to meet the President's goals.

This plan, and the new governance process that we have established serve as the cornerstones of VA's effort to strengthen our overall management, accountability, stewardship of VA resources, and our implementation of the Government Performance and Results Act.

The plan also communicates a top-level summary of VA's long-term direction and will be shared extensively with our partners and stakeholders. I am committed to working with them to achieve the priorities defined in this roadmap towards VA's "What's next."

The Strategic Plan has also been provided to all VA managers and serves as the foundation for accountability within the Department. I hold my leaders and all VA managers accountable for achieving the goals, objectives, and performance targets presented in this plan.

And although I expect my leaders to carry out my directions, I still believe in inspection. I want hard data on how well we are doing. I want to know if we are on track. If not, why not? I insist on performance measures that provide me with unvarnished information on the state of my Department, and most importantly, on the state of our mission.

Once a month, my leadership team joins my Deputy Secretary in a conference room to brief him on the status of every one of their areas of responsibility. They go through a binder page-by-page, number-by-number.

That binder has a prominent place on my desk and I know what each one of my team knows; the good, the not so good, and sometimes the ugly. As I review our performance against the standards I've set, I hold my leaders accountable for accomplishing their objectives, as they in turn, expect accountability from their teams.

We all know in what direction we are moving as an organization, and if our course and progress does not match the thumb-line and timeline I've set for VA, then my team also knows that I expect a full accounting for the deviation from our charted course.

Let me share with you a few examples of how we are promoting excellence in government by applying performance standards, tools with which to measure performance outcomes, and accountable leadership.

When I became Secretary I promised the President and Congress that VA would improve our procurement processes in order to use all of the taxpayer dollars entrusted to us efficiently and effectively. To accomplish this, in 2001, I established a Procurement Reform Task Force.

Our Department spends nearly \$6 billion every year for pharmaceuticals, medical-surgical supplies, prosthetic devices, information technology, construction and other services. We also administer contracts for the Department of Defense, Coast Guard, Public Health Service, Indian Health Service, and the Bureau of Prisons.

Every year, we make more than two million purchases, more than any other federal agency except DoD. We owe it to America's veterans and to the American taxpayers, to buy goods and services for veterans without waste and with the least amount of bureaucratic overhead.

The only way to guarantee sound stewardship of such a broad-ranging program is to set standards of performance that can be reliably measured and to hold the program managers and senior leadership accountable for the outcomes. When we applied these criteria to our procurement programs we were able to rein in purchasing practices that were sapping VA of resources that could have been applied more directly to caring for our veterans.

The changes we are now making to our procurement system and strategies are enabling us to reduce prices and administrative costs. Making more cost effective purchasing decisions and generally improving our procurement performance.

Our contractors benefit from lower transaction costs and from improved access to VA and its markets. And veterans benefit, because the savings we realize from procurement are used to provide them with more and better care.

The absence of performance standards, outcomes measures, and accountable leadership were also threatening to crush our veterans under unacceptable delays in claims benefit's decisions.

Two years ago, it was clear to me, the President, Congress, and our Nation's veterans that many veterans had lost faith in VA's ability to fairly and promptly decide their claims for benefits. It took too long, much too long, to decide a claim. And the error rate remained too high, much too high.

Had nothing been done, and done quickly, we were facing a backlog of 600,000 pending claims. The average time it takes to process a claim would have soon reached nine months.

At the time, I talked about this issue with a judge from the U.S. Court of Veterans Claims, which reviews our work in this area. And he said that it was becoming almost routine that his law clerks would come into his chambers and tell him that they could take two more names off the docket, because they were World War II veterans, and they passed on.

That was an intolerable state of affairs. A black mark against VA, and it was a black mark against this country's promise to care for our veterans. I told President Bush and the Congress that such a condition could not, must not stand.

Last year, our inventory of pending disability claims peaked at 432,000, and then the numbers began to yield to our concerted and tireless efforts to arrest their upward climb.

Today the number stands at 279,000, even though we receive an additional 60,000 new or reopened claims every month. To achieve that progress, we increased the average number of claims decided every month from 40,000 to 66,000 while maintaining the quality of our decisions. In March, 2002, it took an average of 233 days to process a claim. Today, it takes only 170 days.

The dramatic improvement in claims decisions is the direct result of:

- Instituting performance standards where once there were none
- Of measuring performance with tools that did not exist before 2001
- And by holding leadership accountable as never before.

This formula of applied standards plus outcomes measurements multiplied by accountable leadership is also evident in VA's mission to reform our information technology.

Over the past two years, we have made substantial progress in this area and will con-

tinue our reform efforts. We are moving forward with the implementation of the One-VA Enterprise Architecture developed in 2001.

We are managing information technology resources to account for all expenditures and ensure our scarce resources are spent in compliance with this Enterprise Architecture; and we are developing a strong program for Cyber Security.

We are re-engineering our IT workforce to ensure that our employees are equipped with standardized and measurable skill sets. That they are supported by accountable management that understands our program needs. I have recently approved a comprehensive change in how we manage our IT projects to ensure they deliver high quality products, meet performance requirements, and are delivered on time and within budget.

Standardization, measurement tools, and accountability are at the heart of our commitment to redeem our Nation's debt to our veterans.

We begin all considerations about VA's present and future operations by acknowledging that there is one immutable principle, stated succinctly by General Omar Bradley, "We are dealing with veterans, not procedures, with their problems, not ours."

With that inflexible principle as our guide star, we then must tailor the rest of our mission to meet the challenges of a very flexible, dynamic, often unpredictable world in which legislation, economics, demographics, and world events sometimes seem to conspire against our best laid plans.

At VA, we are up to the challenges because we have leaders and managers who share core values and immutable principles that remain strong even in the winds of inevitable change. And with those values and principles firmly lined across the chart of our mission for America's veterans, I can know how to answer the question, "What's next?"

We are treating more veterans, at less cost, and with a higher level of quality than ever before, and we are re-establishing our priority to care for poor and service-connected veterans.

We are returning our national cemeteries to their status as America's most hallowed grounds. We are mastering technology in the service of veterans.

We are restoring accountability and responsibility to our management of the funds Americans have entrusted to us to serve and honor our nation's veterans. And we are in line for our fair share of the resources we need to operate the second-largest cabinet agency.

Earlier I spoke of change agents. I spoke of the founding fathers and the colonists who took up the sword of liberty to secure freedom for future generations. They were America's first change agents, but they were not the last.

Every generation to follow was gifted with young men and women eager to push out to new frontiers, to be change agents for their times; to open up America to new ideas, new hopes and dreams, new destinations.

Woodrow Wilson, a change agent for his time and a man for whom service to his fellow citizens was a sacred trust said, "Public service is the highest form of patriotism." Each one of you gathered here this morning, patriots all, embody President Wilson's faith in the honest spirit and good will of our Nation's government employees. It is your energy that fuels the engine of democracy; it is your vision that sees the brightest future for all Americans; and it is your selfless service that transforms the drudgery of the daily routine into the gold of excellence in government.

As you consider the lessons of leadership, remember always that no agency can move forward under a leader's power alone; leadership must work in concert with workers who are motivated to excel. At VA, leadership without our doctors is not health care; leadership without our claims staff does not amount to benefits for our veterans; and leadership without the workers in our National Cemeteries cannot pay the final and just tributes to our fallen heroes.

As leaders, you must create the environment in which people want to excel, with that teamwork; excellence in government is an assured destination.

Excellence in government has always been one of America's destinations and it is incumbent on each one of you to continue the journey, to never be satisfied with where American government is now, but to always ask the question, "What's next? and how can I contribute my vision, skills, and leadership to the next part of our journey?"

Overarching all our society's accomplishments of the past 227 years are the selfless, mostly unheralded sacrifices of 50 million men and women who wore our Nation's uniform to secure the blessings of liberty for every generation past, present, and future. Our Nation's veterans – and the men and women now in uniform – are the true change agents of our democracy.

Because of their unquestioning devotion to the immutable principles set down in our Declaration of Independence and in our Constitution, and with their steadfast determination to turn away the forces of evil, even with their lives, you and I have the freedom to ask, "What's Next?" and the assurance that the answer is "a better America."

Thank you, and God bless America and the men and women who defend her.

Honorable Anthony J. Principi
Secretary of Veterans Affairs
Northport VAMC 75th Anniversary
April 15, 2003

Congressman Bishop, Congressman Israel, Congresswoman McCarthy, Mr. Farsetta, Director Shuster, members of the Armed Services, service organization representatives, community representatives, fellow VA employees, fellow veterans, ladies and gentlemen. Thank you Jim, for that kind introduction, and thank you all for that warm reception.

Let me begin by thanking the members of the Long Island congressional delegation who are here today for taking time from your busy schedules to be with us. Congressman Bishop, Congressman Israel, and Congresswoman McCarthy are all great friends of our nation's veterans, and I am delighted to have the privilege to work with you on behalf of Long Island's veterans and their families.

Let me also thank the Veterans of Foreign Wars for your donation of 1500 phone cards to our troops as part of VFW's Operation Uplink.

Operation Uplink brings home a little closer to service members and veterans by providing them with free long-distance calling time.

We all watch with pride as our troops in Iraq show once again they are the best led, best trained, and best disciplined in the world. But we forget sometimes that many of them are still very young; and that despite their bravery in battle, they still need to hear regularly from their friends and families.

Operation Uplink gives these young heroes the little touch of home they need to keep their spirits sky-high. Thank you VFW, as a parent and as a Secretary, for sponsoring this wonderful program.

And finally, I thank Vivian Ryder for her remarkable fifty-seven years of volunteer service to Long Island veterans. VA's volunteers are the heart and soul of our health care system. They enable VA to extend the scope and reach of the care we provide, and help humanize the sometimes impersonal practice of medicine. Ms. Ryder, God bless you and all of Northport's volunteers for everything you've done for my fellow veterans.

When the Northport Veterans Hospital was opened seventy-five years ago, Calvin Coolidge was President of the United States. President Coolidge is not remembered for his eloquence. In fact, his contemporaries nicknamed him "Silent Cal."

But President Coolidge could be extremely eloquent when he spoke of men like Aniceto Teclat, and his comrades who fought and won what the world then thought was the war to end all wars.

Speaking to the American Legion, President Coolidge said, "The magnitude of the service you rendered to your country and to humanity is beyond estimation. You represented

on the battlefield the united efforts of our whole people ... I know you are well aware that your glory lies in what you have given, and may give, to your country, not in what your country has or may give to you. But a country which is worth defending takes care of its defenders.”

The Northport Veterans Hospital offers proof that President Coolidge was a man of his word. This immaculately-maintained medical center on these scenic grounds embodies our nation’s commitment to honor the service of our defenders by providing them with world-class health care.

For 75 years, Northport has been the heart of a community, growing with the spirit of cooperation between the citizens of Northport and a federal government that sought a quiet place of respite for our Nation’s battle-worn soldiers. Back in 1928, the new hospital that was raised beyond the quiet little harbor village of Northport was just what those veterans needed, a place where they could find care for their broken bodies and troubled minds.

I marvel at the historic images of Northport patients engaged in agricultural rehabilitation therapy, farming, and raising livestock for food and for work on these grounds, a practice that lasted into the 1960s.

Long Island and Northport can be proud of their commitment to this hospital; there were tough times, indeed, in your mutual history, surviving the Great Depression alone was a test of endurance and character for any community in America, but Northport, the hospital and the village, made it through, stronger than ever.

For three-quarters of a century, thousands of unsung heroes, doctors, nurses, technicians, managers, clerks, and volunteers, dedicated their lives and skills to a high and honored calling here at Northport and in so doing, they breathed life into every corner of this noble hospital.

Northport’s long white line of skilled medical professionals, caring staff, and loving volunteers transformed the mere brick and mortar, steel and glass of these buildings into a shining constellation of compassionate care for generations of veterans. This hospital achieved greatness on the broad shoulders of dedicated men and women whose selfless service to our veterans, every day for 75 years, redeems Lincoln’s pledge “... to care for him who shall have borne the battle and for his widow and his orphan.”

Today Northport stands as a gleaming beacon of care, shining with a light that is fueled by a special formula of technology and humanity. Veterans whose vision is growing dim can turn to Northport’s Visual Impairment Center for Optimizing Remaining Sight; and homeless veterans are welcomed into the loving and caring arms of Northport’s outreach professionals. By every measure, Northport is a living and vibrant symbol of VA’s broad and uncompromising health care commitment to our Nation’s 25 million veterans.

Just as Northport stood tall for veterans of the 20th century’s conflicts and peacetime duty atop the watchtowers of freedom, this noble medical center is ready to meet the healthcare needs of the men and women who will soon be returning from the first war of the 21st Century.

Over the past three weeks, we have witnessed the heroism, bravery, courage, commitment, compassion, heartbreak, and loss of this new generation of America's defenders.

Less than a month ago, the men and women of our Armed Forces armed with the world's finest military technology, drew the scalpel of justice across Iraq, and removed with surgical precision, a vicious cancer that had been growing in the hearts and souls of terrorized and brutalized men, women, and children.

Throughout the operation, the world watched as our finest sons and daughters probed for and cut away the rampaging cells of tyranny. Just as the doctors here at Northport pledge to "first do no harm" in their Hippocratic oath, our Armed Forces engaged in the fight for the lives of the Iraqi people, pledged to do no harm to the innocents, to brutalized and terrorized, and freedom loving men, women, and children.

They performed their duty with incredible skill and even more incredible compassion, placing themselves in harm's way at every turn in defense of the people of a once-proud nation. Too often they paid the ultimate price for their selflessness. We grieve for them, and for their families.

As I watched the images of the war for Iraq's freedom I asked myself, how can we not look at these men and women and not be awed by their magnificence?

Let me give you two examples of the nobility of the men and women who today uphold the finest traditions of our Nation and our armed services.

Just over a week ago, Martin Savidge of CNN filed a report from somewhere in the Iraqi desert. Mr. Savidge is one of the embedded correspondents who are placing themselves in the line of fire to help Americans understand as never before the nature of war and the valor of those who fight for freedom.

Four young Marines stood with Savidge as he filed his story of how well the Marines had looked out for him since the beginning of the war, and how well they looked after each other.

As the correspondent concluded his report, he turned to the four Marines and told them their commanders would allow them to use his videophone to call their homes, CNN's own version of Operation Uplink. Savidge well knew that none of the Marines had been able to talk with their families for many weeks. The Marine next to him thanked him for the offer, but said, "Sir, if you wouldn't mind, I'd like to go and get our Sergeant. His wife is pregnant, and the Sergeant hasn't been able to talk to her in over a month."

Savidge was surprised by the request, but nodded his head yes and the Marine went off to find his Sergeant. While the others awaited the Sergeant's return, the correspondent asked which of the other three men would like to call home first.

And the Marine next to him responded without a moment's hesitation, "Sir, if it's all the same to you, we'd like to call the parents of a buddy of ours. He died last week near Nasiriya.

We'd like to see how his folks are doing and let them know that their son died bravely."

At that, the reporter broke down, virtually in tears, and was unable to speak. He could only say one more thing before signing off:

"Where do they get young people like this?"

I had an opportunity, just last week, to visit some of our wounded troops at Bethesda Naval Hospital. As I passed from bed to bed, I gave each wounded serviceman a book describing the benefits a grateful nation offers those who have put themselves in harm's way on our behalf.

In one room I met a badly wounded soldier. As I visited with his roommate after leaving the soldier's bedside, the serviceman quickly turned the pages of the book I had just given him. His wounds prevented him from speaking clearly, but he called me back as I was about to leave the room.

That soldier wasn't interested in the compensation he was entitled to for the injuries he suffered, or the circumstances under which he could receive health care after being separated from the armed services.

No, he drew my attention to a part of the book that told him that as a foreign national with honorable service in the Armed Forces during a period of conflict, he was eligible for preferential treatment if he wanted to become a naturalized citizen of the United States.

More than money, more than medical care, more than any other honor he might have been entitled to, he wanted to share in the privileges of citizenship in the nation for which he had already nearly given his life.

When he asked me to help him become a citizen, it was my turn to fight off tears. And I remembered the CNN correspondent's question:

"Where do we get young people like this?"

The answer is that America has always had more than its share of men and women of nobility and honor. As befits the nobility of a great nation, these heroes are given honored titles: soldier, sailor, airman, Marine, Coastguardsman, and veteran.

The Northport VA Medical Center was built for Aniceto Tehclay and his fellow doughboys who fought and won World War I.

But it was also built for all the soldiers, sailors, airmen, Marines and Coastguardsmen who answered the call in World War II; for those who fought in Vietnam and in the first Gulf War; and for all who have worn the uniform of this country for two hundred and twenty-seven years.

Today, the skilled medical professionals working within the walls of this hospital, the

pride of Long Island, bring to bear skills and technologies undreamed of in 1928 to meet the challenges of 21st Century healthcare.

In years to come, VA's challenges will include caring for the four young men who put their comrades needs above their own in the heat of Iraqi desert; for the young man in Bethesda Naval Hospital whose only thought as he battled his grave injuries was to become a citizen of the greatest country on earth; and for our brave troops in Iraq and around the world who have caused leaders of every other nation in the world to ask:

“Where does America get young people like this?”

We at the Department of Veterans Affairs embrace our responsibility to care for these heroes. It is an honor, and a privilege, to serve all of America's living veterans, and we will never forget that.

For seventy-five years, the men and women of the Northport VA medical center have healed the bodies, minds and souls of those whose willingness to lay down their lives insured all of us the freedom to celebrate this anniversary.

Elderly or young, comfortable or homeless, combat veteran or peacetime warrior, every veteran who comes through the hospital's doors merits our deepest respect and best possible care.

They gave their all to defend our freedom. We must do no less for them.

Two weeks after the Northport Veterans Hospital opened its doors, President Coolidge spoke at a Memorial Day ceremony at Gettysburg National Cemetery. He said: “All the countries on earth in all their history, all put together have not done as much for those who have fought in their behalf as our country alone has done.”

Although much has changed in America and the world in the past three quarters of a century, President Coolidge's words are still as true today as they were the day they were spoken. Our nation's commitment to veterans is the wellspring of our national greatness—and VA is honored to keep that commitment fresh and strong for every new generation to come.

Thanks to everyone who participated in, or helped to organize, this wonderful anniversary ceremony.

Thanks to Bob Shuster and the staff of this medical center, to our medical school affiliates at Stony Brook, and to all who work and volunteer here. You give life to the promises America has made to our veterans.

Thanks to our neighbors, the citizens of Northport and all of Long Island's towns and villages, for your unstinting support to this hospital throughout its history.

And most of all, thanks to Long Island's veterans and to all of our nation's 25 million living veterans. Our debt to you can never be repaid.

God bless our great country and the men and women who defend her.

Honorable Leo S. Mackay, Jr., Ph.D.
Deputy Secretary
African Americans in the Korean War
April 17, 2003

Good morning ladies and gentlemen, my fellow veterans. In 1865, at the end of four, long, bloody years of civil war, Abraham Lincoln called on Americans to “care for him who shall have borne the battle.”

The Department of Veterans Affairs draws its mission from these words. Today, my Department continues to do the things necessary to keep President Lincoln’s 19th century promise to America’s 20th and 21st century veterans. We do not do this because we are good people. We do not do this because we are noble, or because we have charitable impulses.

We do this because great nations are judged by how they treat those who stood up for them, who protected them.

We do this for our Nation, in allegiance to its past, and in commitment to its future.

President Calvin Coolidge once noted, “The nation which forgets its defenders will be itself forgotten.”

Although much has changed in America and the world in the past 75 years, those words are still as true as they were the day they were spoken.

VA embraces its responsibility to care for our country’s warriors, whether they fought in the war to end all wars in America’s mis-named forgotten war, or in Operation Iraqi Freedom.

Secretary Principi and I have set some high goals for our Department:

- To restore veterans’ faith in VA’s ability to fairly and promptly decide their claims for benefits.
- To improve timely access to quality health care.
- To restore our national cemeteries to places of immaculate care and quiet reflection. To National Shrines, if you will.
- To harness the promise of modern technology.
- To deliver our services quickly and efficiently.
- To be a good steward of taxpayer dollars.
- To fight hard for VA’s fair share of Federal funding.

But as Winston Churchill once said; "It is no use saying, 'we are doing our best.' You have got to succeed in doing what is necessary."

And indeed, I can report to you that we have made good progress in meeting our goals.

For one thing, VA has positioned itself as a force in health care delivery. One that, today, leads private and other Government health care providers across almost every measure; in research, medical education, patient safety, computerized records, telemedicine, and in special services like blind rehabilitation, severe psychological conditions, prosthetics, and spinal cord injury.

We also are striving to meet new challenges spawned by time and technology. We are restructuring our capital assets to meet the changing practice of medicine, one that is characterized by ambulatory care, not inpatient care. Our capital asset realignment process is a blueprint for alleviating crowded, overflowing patient waiting rooms in VA facilities.

Facilities that, in many instances also contain one, two, or even three unused and empty floors!

Our second mission is to provide compensation and benefits.

Here again, we are demonstrating that reducing the benefit claims backlog and expediting claims processing are not just goals, but reality.

Last year, our inventory of pending disability claims peaked at 432,000, a totally unacceptable number. Today, it stands at 305,000, even though we receive an additional 60,000 new or reopened claims every month.

More important, we are on target to reach our goal of no more than 250,000 pending claims by the end of this fiscal year.

One year ago, it took an average of 233 days to process a veteran's claim, an equally unacceptable period of time.

Today, it takes less than 200 days. It's still not good enough. But, we are closing in on our goal of no more than 100 days.

Regarding our third mission, dignified, pristine, and respectful final resting places stand as a last and lasting opportunity to honor Americans who served Freedom's cause.

To meet the growing demand of our aging veteran population, we have established the most aggressive schedule of cemetery expansion since the Civil War. Over the next few years, we will be opening new cemeteries near Atlanta, Detroit, Pittsburgh, Sacramento, and in South Florida. Still others are in the planning process.

But challenges confront VA. None more evident than in our health care services. We are treating more veterans than ever before. In 1998, VA treated 2.9 million individual veterans. In 2002, we treated more than 4-and-a-half million.

We are providing an expanding population of veterans with an increasing array of services, and their number is projected to increase dramatically along with the increasing medical needs of an aging veterans' population.

This fact, combined with rising health care costs everywhere, present us with ever more difficult issues.

I can assure you we are responding in a number of ways;

- By improving our procurement practices.
- By reshaping our legacy infrastructure.
- By increasing cooperation with the military health care system.
- By improving our business practices, and by continuing to look for ways to make our medical services more cost effective without sacrificing quality.

Of course, President Bush's record-breaking VA budget, almost \$64 billion dollars, the second largest in Government, will help us achieve our goals.

In a period of tough budget choices, the president again has shown his strong support for veterans.

VA, as America herself, owes its veterans of Korea an un-payable debt of gratitude.

This very conference gives testimony to that fact.

The troops memorialized on the grassy slopes of the Nation's Korean War Veterans Memorial faced unimaginable hardships: the frigid, unrelenting, Korean winters, the weeks and months spent isolated in foxholes and bunkers, and the overwhelming numerical advantage held by the enemy.

Yet, these men stood firm against unbridled tyranny and brutal aggression, at Inchon, the Chosin Reservoir, along the Yalu River, and in a hundred other places.

Today, we can look to the images etched in the Memorial's polished granite and see in those ghostly faces a reflection of our own.

We can look to those 19 soldiers, frozen in time and animated in steel, and for a moment walk among them as veterans, family members, and citizens.

Our Nation's obligation to the 3.7 million veterans they represent is at the wellspring of our country's greatness.

VA is pledged to keep that commitment fresh and strong for them, and for every new generation of America's defenders to come. Thank you.

Honorable Leo S. Mackay Jr., Ph.D.
Deputy Secretary, Department of Veterans Affairs
LVA
April 11, 2003

Thank you Jim for that kind introduction and thank you all for that warm reception.

I would also like to extend my thanks to our hosts at the Philadelphia Medical Center, your generosity, time and efforts made this week a tremendous success.

Congratulations on completing your first week of LVA. The friends, contacts and experiences you make here will last you a lifetime and broaden your personal and professional life here at VA.

The American Philosopher and idealist Thomas Paine once said "What we obtain too cheap, we esteem too lightly: It is dearness only that gives everything its value."

Never have truer words been spoken. Nothing of value comes easily; all true success is built upon hard work, dedication and preparation. Today VA enjoys considerable success. Establishing itself as a leader in the provision of world-class health care, VA is second to none.

Ensuring a seamless transition from military service to civilian life, VA's benefits and outreach are the envy of every armed nation. Memorializing veterans VA leads the way in guaranteeing that yesterday's heroes will be remembered today.

From New York to San Francisco, from Bangor to Baton Rouge VA successfully provides our nation's veterans the care and benefits they deserve.

President Bush, Secretary Principi, and I cannot be prouder of this success. We know that it did not come easily and rests on a foundation of hard work, preparation and dedication; a foundation made possible by strong leadership built by 25 years of LVA.

Established in 1978, LVA's business has been VA's future. With your class, LVA continues this legacy of preparing VA's next generation of leaders for the challenges of tomorrow by expanding leadership skills through workshops, field excursions and meetings with top VA officials. A pioneer in federal government, LVA not only prepares tomorrow's leaders of VHA, VBA, and NCA but also unites us together as one VA. Creating a forum where leaders and representatives from each administration can come together exchanging vital information, and ideas.

Uniting VA, preparing the leaders of tomorrow, and laying the foundation of VA's success, LVA represents excellence in training. We have met with success but the real challenge lies ahead.

Today we face a daunting set of circumstances, as a nation and as a department. Nationally, a slowly growing economy, weapon proliferation, and a new generation of dictators

and tyrants threaten our very way of life; while as a department, VA is besieged by rising costs, expanding responsibilities and increased enrollment.

President Bush has given us the tools for success as Nation and a Department, wining the war in Afghanistan, destroying a cruel regime in Iraq, and delivering a bold and timely budget to Congress with more than 63 billion dollars for VA. President Bush has indeed given us the tools, but it is up to you to use them.

It is time for you to step up to the plate and take hold of the opportunity LVA represents, becoming better stewards of the people's money, meeting the needs of our oldest and most needy veterans, and supporting DoD and our troops not only in Afghanistan or Iraq but here at home as they transition back to civilian life and take on the honored title of veteran.

When I came to VA two years ago, I made a commitment. I committed myself to take up the tools given to me by President Bush and Congress to do more to redeem America's debt to her veterans by improving the quality of and access to the benefits and healthcare veterans earned in the service of our country.

I committed myself to be a good steward of the dollars the taxpayers entrusted to us. I committed myself to harness the promise of modern technology to deliver VA's services faster and more efficiently.

I promised to bring an aura of accountability and good business management to VA. And I committed myself to a team: my colleagues and co-workers at VA.

Since that time, we have worked tirelessly to create a climate of accountability and responsibility within VA. We changed the culture in VBA restoring timeliness and quality to our disability claims decision process.

We insisted on employee performance standards that truly measure performance. We demanded improved training methods to make sure everyone involved in deciding a veteran's claim knows how to achieve the outcomes for which we are holding them accountable.

We've returned to a system of triage, in which cases are looked at as soon they come in, and simple claims are decided quickly instead of waiting their turn in the queue. We've put veterans' needs before VA procedures.

Antiquated infrastructure, misappropriated funds and misplaced resources: these are not veterans' problems; they are VA leadership challenges.

Putting veterans first, we distribute our health care resources with increasing precision to the right geographic locations with the right facilities and personnel to enable us to continue providing high-quality, cost-effective and timely health care veterans deserve.

That is what our Capital Asset Realignment for Enhanced Services, or CARES, initiative is all about.

CARES will identify areas where we need to realign our health care assets based on veteran population projections for 2012 and 2022 and the changing nature of health care. CARES will provide us with a national plan for directing our resources where they are most needed. CARES will ensure that we continue to provide high-quality care to more veterans in more locations. CARES is VA leadership at work, working for VA's future, and for our Nation's veterans.

Two years ago we made a commitment. We committed ourselves to take up the tools given to us by president Bush and to do more to redeem America's debt to her veterans by improving the quality of and access to the benefits and services veterans earned in the service of our country. We have made a great start.

But, there is much to do still. Those of you who will lead into the future must take up the challenge. We need you, your talent, your brains, your dedication and your faithfulness.

Today it is time for you to make an enduring commitment to our Nation, our veterans and VA.

You are the leaders of tomorrow, but the future starts now! Grasp destiny, embrace responsibility, and LEAD.

Thank you and God bless.

Robert H. Roswell, M.D.
Under Secretary for Health
Human Research Participant Protection Program
June 18, 2003

Mr. Chairman and Members of the Subcommittee, I appreciate the opportunity to appear before you today to discuss the Department of Veterans Affairs (VA) human research participant protection program. We share your concern about research activities that placed patients at inappropriate risk or resulted in actual harm. The simple truth is that because of inappropriate research activities, some VA patients were placed in harm's way. It is unconscionable that any man or woman who wore a uniform in defense of our country be placed in jeopardy once again because they volunteered for research. We are in the process of changing our policies and operations in a manner that demonstrates that unethical research behaviors will not be tolerated. We will ensure that patients are optimally informed when they consent to participate in research, and that the research activities are safe and ethical. Thus, we have developed and are implementing new programs and training to support successful research conduct, management, and oversight at every level of the organization. Today, I would like to give you a progress report.

Since VA announced a research stand-down on March 6, 2003, we have made significant changes in the requirements for the conduct of research. First, we have required verification of appropriate Institutional Review Board (IRB) operation. In this process, leadership at each VA facility that conducts human research were required to certify that the local institutional review board (IRB) and research and development committee oversee human studies effectively. This process assures that research protocols were adequately reviewed by an appropriately constituted IRB committee and that forceful provisions for ethical research conduct, such as good informed consent, are present.

Second, we have required training of over 15,000 individuals involved in human studies research in good clinical research practices. The good clinical practices program addresses the responsible, ethical, and accepted conduct of research. It provides particular focus on assuring the adequacy of informed consent and the increased responsibility for the care of patients in research protocols. Human studies research personnel are now also required to take refresher courses on an annual basis.

Third, to assure appropriate training and no history of illegal or unethical behavior, we have required credentials verification and background checks of VA research personnel with any degree patient contact or programmatic responsibility. Facilities were directed to confirm the credentials of all VA research personnel that come into contact with patients, not just those of independent health care providers. Sites are independently verifying education and professional certifications and have annual checks of all licenses. Facilities now repeatedly review the Department of Health and Human Services exclusionary lists to assure that they do not include any research staff. The Office of Research and Development (ORD) is also creating an electronic means of tracking all employees involved in human subjects research to facilitate checking these individuals against exclusionary lists.

In the past 90 days, VA has achieved 98 percent compliance with the IRB verification requirements, 93 percent compliance with the training requirements, and 85 percent compliance with the credentialing responsibilities. As outliers have correction plans in place, we will achieve 100 percent compliance.

While VA demonstrated leadership in establishing an Office of Research Compliance and Assurance (ORCA) in 1999, our experiences have compelled us to establish mechanisms for more rapid, broad, and effective development and dissemination of policy and education. These actions are directed to go beyond assurance of compliance and assure adequacy and integrity of research operations.

Recently, VA established the Program for Research Integrity Development and Education (PRIDE) within the ORD. PRIDE is a groundbreaking program that is responsible for all education, training, and policy development related to human research protection at the VA. Although it has been in existence for only a few weeks, PRIDE already has assisted in:

- Staffing the research “stand down.”
- Creating a blue ribbon advisory committee on ethical research conduct.
- Reinitiating the accreditation process for human research programs at VA facilities.
- Creating new programs for education and assistance.
- Establishing links with other organizations involved in the protection of human research subjects.
- During the three-month period of the research stand down, VA instituted credentialing standards for research personnel that exceed any in place anywhere in the United States.

VA has already sought, and is receiving, external guidance in setting the agenda for PRIDE. A nationally prominent panel to advise ORD and PRIDE on important issues pertaining to the protection of human subjects has been established. One of the foremost research ethicists (with particular expertise in informed consent), Dr. Baruch Brody from the Baylor College of Medicine, is heading the Blue Ribbon Panel on Maximizing Human Protection in VA Research. The panel includes members representing bioethics, health law, industry, and academia. The panel is charged with articulating the necessary structures and process for insuring ethical research. They are charged to base their work upon review of all relevant U.S. and international documents governing human subjects research.

PRIDE is already serving as a resource for providing guidance and policy development for responsible research conduct. These activities coordinate with, and require collaboration with, the policies and work of other agencies and organizations involved in protection of human subjects, both inside and outside the VA. Such entities include NCQA, the Food and Drug Administration, the National Institutes of Health, other components of VA, and quality assurance and patient safety organizations.

Policy development and education are only useful to the degree that they inform the actions of managers and researchers. One of PRIDE's most critical initiatives is the Center On Advice and Compliance Help or "COACH." This new center is directed toward providing training and educational resources on all aspects of the ethics and the logistics of human research protection. COACH will communicate with local VA facilities and investigators in person, by phone, by e-mail, and will provide educational materials on the Internet and at local, regional and national meetings. COACH will also provide training in research conduct that will lead to successful research program accreditation.

In 2000, VA became the first Federal department or agency to seek independent, external accreditation of human research programs. Following a competitive selection process, VA contracted with the National Committee on Quality Assurance (NCQA) to develop and implement a comprehensive program. Based on a review of first-year evaluations, VA and NCQA placed this program on "pause" in the spring of 2002 to refine the logistics and better standardize the review criteria. Revised standards were published April 2003. The accreditation process will begin again this summer, and all VA facilities that have human research programs will complete the accreditation process by the summer of 2005.

While a new infrastructure has been developed in the ORD to support effective, rapid improvement in research conduct, VA believes strongly in independent oversight. As described, policy and programmatic educational activities now reside in the Office of Research and Development. Oversight of compliance with policy, regulation, law, and ethics is the responsibility of the Office of Research Oversight (ORO). All human resources of the predecessor office, ORCA, are contained in ORO and devoted to their charged responsibility for oversight of compliance with regulatory and policy aspects of human subjects protections, animal welfare, research safety, and research misconduct. ORO reports to the Office of the Under Secretary for Health.

Since its inception in 1999, ORO's predecessor, ORCA, contributed in many ways to the improvement of VA's protection of human subjects participating in research. ORCA provided prospective compliance consultations, retrospective compliance reviews, a compliance assurance program, and a training, education, and development function.

Despite ORCA's remarkable contributions since 1999, continuing and intolerable breeches of human research conduct compelled us to make changes in office responsibilities. These changes modify, not abandon, the principles that brought ORCA forth. Oversight is required, but as Deming taught, quality cannot be inspected into a process. For improved outcomes, processes must be changed. As the Office of Research and Development has responsibility for the management of research processes, clear alignment of policy, and training with ORD is critical. The diffusion of role responsibilities has unacceptably delayed necessary policy on human subjects protection. Moreover, reluctance of field managers and researchers to rapidly seek corrective assistance from the authority that imposes sanctions is understandable.

As all personnel in the former ORCA are now exclusively devoted to oversight in ORO, VA's capacity for research oversight is effectively increased. While we fully expect and are observing that ORO's investigations and reviews are educational, the Office of Research and Development's PRIDE and COACH programs have already established successful relation-

ships with the responsible facility officials and researchers. Their early work, including training in good clinical research practices and policies requiring certification of IRP function and researcher credentialing, is proactively addressing and resolving potentially, and manifestly, problematic situations. As described, the progress in the past 90 days alone has been remarkable.

The legacy of ORCA's accomplishments will be used to facilitate the roles of both ORO and ORD in improving research. In addition to providing seminars for researchers and leadership, ORCA developed compliance information and tools for regulatory compliance, research program self-assessment, and continuous quality assurance. ORCA developed invaluable compendia of linked regulations, policy, and accreditation standards that were published on compact disk, a template for standard operating procedures in research compliance, and a web-based training program. ORCA also provided outreach to veterans about their rights in research.

Both ORO and ORD will benefit from ORCA's history of active participation at national meetings regarding ethical research conduct and regulatory initiatives. Both offices also benefit from established linkages with other Federal regulatory agencies and professional organizations such as the Office of Human Research Protections and the Food and Drug Administration that help ensure consistent approaches to compliance oversight within VA, appropriate external reporting, and rapid correction of noncompliance.

ORD and ORO activities are increasingly complementary with oversight problems identified by ORO being met with aggressive solutions by ORD. It is also indisputable that ORO's oversight and investigative process is invariably educational. The skill set embodied by ORO staff in its five Regional Offices around the nation, and guided by ORO's Central Office component, is well capable of informed, consultative intervention.

ORO operations will continue in the tradition of ORCA which visited nearly all VA Medical Centers and Health Care Systems that conduct research and provided ten formal prospective overview visits, nine systematic post accreditation team visits to sites found not accredited by the National Committee for Quality Assurance, 19 major for-cause onsite reviews, 13 more limited visits to focus on issues of serious noncompliance in human subjects protections, and investigations of hundreds of compliance issues identified from sources within and outside of VA amenable to correction through compliance advice or action plans developed collaboratively with local facility personnel.

Because of its oversight mission, ORO will continue to serve as VA's governing body for Federal Wide Assurance (FWA) for VA facilities. ORO, in partnership with the Office of Human Research Protections in the Department of Health and Human Services, administers this assurance of compliance process, without which no IRB or human research program can operate.

Notably, ORO and its predecessor office negotiated over 100 Federal Wide Assurances and related agreements with VA facilities to assure their commitment to carrying out the Common Rule protections afforded to human subjects of research, and set forth in the VA regulations at 38 C.F.R. Part 16.

While compliance is critical, ORD's now explicit responsibilities for policy, training, program management, and funding are linked in a manner that provides support for rapidly correcting deficiencies. Research programs that fail to appropriately safeguard patients and the values of ethical research conduct will have funding terminated. In parallel, this transition affords ORO the opportunity to focus on oversight activities. In the past four years, ORO has laid extensive groundwork for a sound research oversight program to better assure compliance with policy, law, and ethical research conduct. Not surprisingly, ORO's increased oversight and assessment activities have resulted in increased numbers of findings and have revealed that ORO will need to continue its vigilance in the years and months ahead. As compliance issues are identified, the ORO compliance staff has worked closely with local facilities, research personnel, and the Veterans Integrated Service Networks to correct both isolated and systematic problems through prescribing and ensuring remedial actions.

In our revised program of protections, ORO will enjoy greater role clarity in discharging the oversight functions of its predecessor. The increased focus on oversight activities will assure that problems are investigated and, with ORD as a committed peer office, providing effective and timely policy and training corrected. We commit to this so that the Department of Veterans Affairs maintains the highest quality research programs in the country, and most responsibly serves the needs of our nation's veterans.

Honorable Jonathan B. Perlin, MD, PhD
Deputy Under Secretary for Health
Before the Committee on Veterans' Affairs Subcommittee on Oversight and Investigations
July 9, 2003

Mr. Chairman, I am pleased to be here to testify before the Subcommittee on VA's role in the care of veterans of Operation Iraqi Freedom. With me today is Dr. Craig Hyams, VA's Chief Consultant for Occupational and Environmental Health.

Because over 200,000 U.S. troops have been engaged in Operation Iraqi Freedom, I am grateful for the opportunity to emphasize that VA is prepared to provide high quality health care and disability assistance to Iraqi Freedom veterans. Since the Gulf War in 1991, VA has developed and implemented improved policies and programs to care for our nation's newest war veterans. As we have all witnessed over the last couple of months, this conflict is not over and our men and women in uniform remain in harms way and deserve our best efforts.

Health Care, Surveillance, Education, and Outreach

Health Care following Combat

It is critical to provide high-quality health care after every war. Congress understands this and under 38 U.S.C. § 1710(e)(1)(D), added by Public Law 105-368, VA was authorized to provide health care for a two-year period to veterans who serve on active duty in a theater of combat operations during a period of war after the Gulf War, or in combat against a hostile force during a period of hostilities after November 1, 1998. Consequently, combat veterans, like those now serving in Iraq, have a two-year period of access to free VA health care, unless there is sufficient medical evidence to conclude that the illness is not attributable to that service.

To date, 22 combat veterans have been transferred to VA from DoD for specialized, long-term health care and rehabilitation. These patients have had spinal cord injuries, gunshot and grenade wounds, and other combat trauma. There have been relatively few veterans of Operation Iraqi Freedom who have otherwise presented for care at a VA medical center because most combat troops are still serving in Iraq or remain on active duty. The Iraqi war veterans presenting to our clinics have had a varied range of health problems. No illnesses due to chemical or biological agents have been reported.

Assessment of Health Care Needs

In addition to providing high-quality health care for veterans, VA now has the capability to collect and analyze comprehensive health information with its computerized outpatient and inpatient medical records. The capability to assess the health status of veterans has been greatly improved since the Gulf War. Standard health care databases help VA evaluate specific health questions. Importantly, VA clinicians are able to review veterans' prior treatment in VA when the veterans obtain care from the Department. This capability will support broad, long-term, and comprehensive assessment of health status because many veterans return

frequently for VA health care and are often seen in different clinics, and may be evaluated in different parts of the country for specialized health care needs.

VA is working with DoD to obtain a roster of recent combat veterans to facilitate analysis of computerized health records. Furthermore, veterans of Operation Iraqi Freedom are eligible for evaluation in the Gulf War clinical registry. Every Iraqi Freedom veteran is being offered an opportunity to participate in this registry, which provides a thorough clinical evaluation and documentation of symptoms and potential exposures.

Supplementary Clinical Programs

VA is developing a new clinical reminder that will pop-up on the computer screens of VA health care providers when they encounter a new patient who may be a veteran of the war in Iraq or Afghanistan. This clinical reminder will ensure that health care providers evaluate veterans for deployment-related medical and psychological risks. It will also provide Internet links with relevant clinical practice guidelines and exposure health risk information.

In addition, the VA Depleted Uranium Follow-Up Program at the Baltimore VAMC is coordinating screening of the urine of veterans who may have been exposed to depleted uranium during Operation Iraqi Freedom. The service is being provided to both VA patients and to the Defense Department for active duty troops. The results of this testing are provided directly to the veteran and their VA or DoD physician.

Ensuring High Quality Post-Deployment Health Care

Specialized health care during the post-deployment period can help prevent long-term health problems. Therefore, VA and DoD developed evidence-based clinical guidance for treating veterans following deployment. Clinical Practice Guidelines (CPG's), which are based on the best scientifically supported practices, give health care providers the structure, clinical tools, and educational resources they need to diagnose and manage patients with deployment-related health concerns. VA and DoD have developed two post-deployment CPG's: a general purpose Post-Deployment CPG and a CPG for unexplained fatigue and pain. Our goal is to make sure that all VA health care providers are well informed about specific deployments and related health hazards. Information on these Clinical Practice Guidelines is available online at www.va.gov/environagents.

Assessment of Difficult-to-Diagnose Illnesses

The majority of veterans returning from combat and peacekeeping missions are able to make the transition to civilian life with few problems. Most who come to VA for health care receive conventional diagnoses and treatments. Some veterans have greater problems on their return to civilian life, and a small percentage of them develop difficult-to-diagnose symptoms. Sustained clinical care and research is needed to understand post-deployment health problems. Consequently, VA has established two "War-Related Illness and Injury Study Centers" (WRIISC's), in East Orange, NJ, and Washington, DC, to provide specialized health care for veterans from all combat and peace-keeping missions who suffer difficult-to-diagnose but disabling illnesses.

VA's two WRIISC's focus on determining the causes and most effective treatments for chronic symptoms, which are a problem following all wars. Health care at the centers is available to veterans of all eras — including recent war veterans — through referral by primary VA health care providers. The two centers also provide research into better treatments and diagnoses, develop educational materials, and develop specialized health care programs to meet veterans' unique needs. More information on the WRIISC's can be found at the VA website, www.va.gov/environagents.

Veterans Health Initiative

VA has built upon the lessons learned from our experiences with Gulf War and Vietnam veterans' programs to implement innovations and improved approaches to health care for all veterans. The Veterans Health Initiative (VHI) is a comprehensive program designed to improve recognition and treatment of deployment health effects, to better document veterans' military and exposure histories, and to establish a database for further study.

The education component of the VHI prepares VA healthcare providers to better serve their patients. VA has completed modules on: spinal cord injury, cold injury, traumatic amputation, Agent Orange, the Gulf War, Post-Traumatic Stress Disorder; ex-POW health effects, blindness/visual impairment and hearing loss, and radiation. We are currently developing modules on infectious disease health risks in Southwest Asia: sexual trauma, traumatic brain injury, health effects from weapons of mass destruction, and occupational lung diseases. These important tools are integrated with other VA educational efforts to enable VA practitioners to more quickly and accurately arrive at a diagnosis and provide more effective treatment.

Enhanced Outreach

Veterans and their families, elected representatives, the media, and the nation all need timely and reliable information about wartime health risks. Consequently, VA has developed two brochures that addresses the main health concerns for military service in Afghanistan and Iraq. These brochures answer health-related questions that veterans, their families, and health care providers may have about these hazardous deployments. They also describe relevant medical care programs at VA. These two brochures can be accessed at:

- <http://www.va.gov/gulfwar/docs/IraqiFreedomMay21.pdf> for Operation Iraqi Freedom, and
- <http://www.va.gov/environagents/docs/afghanVet302.pdf> for the war in Afghanistan.

Another challenge for outreach is to address the specific concerns of veterans and their families over the potential long-term health impact of environmental exposures during deployment. These concerns are addressed through newsletters and fact-sheets to veterans covering health and compensation issues, including: environmental health risks, regular briefings of veterans service organizations, national meetings on health and research issues, media interviews, and other educational material and websites with information, like www.va.gov/environagents.

Very importantly, VA recently published, in collaboration with DoD, a new brochure called "A Summary of VA Benefits for National Guard and Reservists Personnel." This brochure does an excellent job of summarizing the benefits available to this special population of veterans upon their return to civilian life. Too often Reservists and National Guard personnel have not received timely information about the benefits they have earned. A million copies of this brochure are being printed and distributed. This brochure is also available on line at: <http://www.va.gov/enviroagents/docs/SVABENEFITS.pdf>.

Recruit Assessment Program (RAP)

VA is committed to the development of a life-long health record for all military personnel and veterans. Therefore, VA is supportive of DoD's efforts to develop and implement the Recruit Assessment Program (RAP) that will collect comprehensive baseline health data from U.S. military recruits.

VA Vet Center Program

VA's Vet Centers, originally conceived to provide a wide variety of readjustment services to Vietnam veterans, have been invaluable in providing similar services to veterans from more recent combat and peacekeeping missions. More than 115,000 veterans of the Gulf War have made use of their services. The VA Vet Centers are now ready to help veterans of the current hostilities in Iraq.

Disability Compensation

To assist in disability evaluations, VA has actively worked with DoD to implement a standardized separation physical examination that thoroughly documents a veteran's health status at the time of separation from military service and that also meets the requirements of the physical examination needed by VA in connection with a veteran's claim for compensation benefits.

Additionally, VA has worked to provide fair compensation for Gulf War veterans with difficult-to-diagnose illnesses. Under 38 U.S.C. § 1117 (as amended by Public Law 107-103), VA has authority to compensate Gulf War veterans for chronic disabilities resulting from an undiagnosed illness or certain medically unexplained chronic multi-symptom illnesses. Service members who serve in the Southwest Asia Theater of Operations during the current conflict with Iraq will also be eligible for compensation for disabilities resulting from undiagnosed illnesses under this authority.

Research

VA places a high priority on the development of improved methods of diagnosis, treatment, and prevention of illnesses related to deployments. In October 2002, VA's Office of Research and Development released a Program Announcement on Deployment Health Research to expand VA's research portfolio on long-term health effects of hazardous deployments, such as the Gulf War, Bosnia/Kosovo, Afghanistan, and the current war in Iraq. Up to 20 million dollars will be spent on research to evaluate deployment health hazards. The results

of this research program should provide useful guidance in improving the medical care of veterans who return from combat, and in improving preventive medicine efforts during future deployments.

Coordination with the Department of Defense

Deployment Health Work Group

One of the important lessons learned since the Gulf War was the need for continuous and formal intergovernmental coordination among VA, DoD, and Department of Health and Human Services (HHS). As a result, the Deployment Health Work Group of the VA-DoD Health Executive Council was established in 2002 to ensure interagency coordination for all veteran and military deployment health issues. Governmental coordination will play a critical role in addressing health problems among veterans in future conflicts and peacekeeping missions. This work group has met repeatedly during the recent conflict in Iraq to coordinate government efforts, such as the development of a roster of deployed troops.

Transmission of Health Data between DoD and VA

VA and DoD are closely collaborating to develop the capability to share medical information electronically. Recently, the VA/DoD Joint Executive Council and Health Executive Council approved the adoption of the Joint VA/DoD Electronic Health Records Plan. This plan provides for the exchange of health data and development of a common health information infrastructure supported by common data communications, security and software standards. This will allow interoperability of DoD and VA high performance health information systems. Since June 2002, VA providers have had online access to health information from DoD's Composite Health Care System for discharged and retired service members. Currently, such information is available for more than 1.5 million separated service members. Key initiatives in the Electronic Health Records Plan are the Federal Health Information Exchange (FHIE) and HealthePeople (Federal), which allows VA clinicians to view DoD health information for separated service members.

Deployment Health

VA applauds the efforts of DoD to prevent health problems among deployed troops and to provide immediate care for combat casualties. DoD has made substantial progress in lowering morbidity and mortality rates on the battlefield. Nevertheless, we have to focus greater attention on the long-term health problems of veterans that occur after every war. The trauma of warfare has lasting effects. The physical and psychological wounds of war heal slowly, and toxic exposures on the battlefield may have enduring health consequences long after the actual war has ended.

The key to addressing the long-term needs of veterans is improved medical record-keeping and environmental surveillance. VA therefore is actively engaged with DoD in obtaining as much deployment health and exposure information as possible, including data on troop locations and data collected as part of pre- and post-deployment health screening.

Summary

A veteran separating from military service and seeking assistance today from VA will receive improved health care and disability assistance. VA has successfully developed new programs and adapted many existing programs for the benefit of combat veterans. VA also has significant experience with the special provisions in law authorizing disability compensation for war veterans with unexplained symptoms. In collaboration with other federal agencies, VA has initiated new programs for developing and coordinating federal research on veterans' health questions. The Department of Veterans Affairs is committed to helping ensure the health of service members both during deployment and after they leave military service.

Mr. Chairman, this concludes my statement. Dr. Hyams and I will be happy to respond to any questions that you or other members of the subcommittee might have.

Cathy Rick
Chief Nursing Officer for the Department of Veterans Affairs
National Nurse Week Ceremony, Opening Remarks
May 5, 2003

Mr. Secretary, Under Secretary, distinguished guests, award recipients, colleagues and friends, welcome to the Secretary's Awards for Nursing Excellence Ceremony.

As the Chief Nursing Officer for the Department of Veterans Affairs, it is my honor and privilege to lead our nation's largest nursing workforce. I am committed to focus on our strengths of caring and competence to advance the practice of nursing for our nations Veterans.

I believe that in our pursuit to advance nursing practice, we must develop strong collegial relationships with our clinical partners. Positive nurse-physician partnerships are pivotal to achieving quality patient care. And building systems to support this working relationship are essential. The VA Nursing Strategic Plan and Call to Action for Nursing Workforce initiatives were developed with this in mind.

I have had the pleasure of visiting the majority of our VHA facilities. It is clear to me that our veterans are served by a dedicated, caring and competent nursing staff. These positive attributes are particularly noteworthy in light of the multiple stressors facing our health care workers today.

The challenges of implementing numerous cutting-edge clinical initiatives raise the bar for our caring and competence. We thank our nursing staff for their contributions to meet the challenges of clinical initiatives such as Pain Management, End-of-Life Care, Bar Code Medication Administration, Computerized Patient Record System, RAI/MDS, and increasing capacity across the continuum of care. I am impressed by your hard work that makes all of these initiatives come to life.

When I ask nursing staff what makes their work satisfying, rewarding and fun, the most common answer I get is, "making a difference, helping our veterans." And we thank you for making a difference!

National Nurses Week shines a light on the treasures of nursing. I offer my recognition and sincere gratitude for the contributions of VA nurses. Each year we solicit nursing excellence nominations from each VA facility. Our 21 VHA Networks then chose their top nominations to forward for national recognition. Of those 21 nominations, only one individual is chose in each category. All nominees for the Secretary's Award for Excellence in Nursing are to be congratulated for being recognized by their colleagues. We are gathered here today to honor six individuals who have been selected as "the best of the best" representing VA nursing.

We thank every one here and in our virtual audience for taking the time to join us for this special ceremony. It is now my pleasure to introduce the Honorable Robert H Roswell, Under Secretary for Health.

Jeffrey E. Phillips
Deputy Assistant Secretary for Public Affairs
Opening Session of 2003 VA Public Affairs Training Conference
June 24, 2003

Good morning, thank you for that kind introduction.

Before I say anything more, please let's thank with some thunderous applause the folks who arranged this great, unparalleled, conference: Dallas Regional OPA director Ozzie Garza and his staff, Fran Heimrich from OPA's central office, and a special thanks to Jane Goin, who is now in Denver, but has our enduring thanks for her enduring love for VA and for the practice of public affairs.

I also want to introduce Bill Brough, who as many of you have heard is stepping into my former role. Bill has worked at OPIA for two years and has a broad understanding of the public affairs issues we face, and how we all work together to address them. He has hit the ground running and will be a great asset. Bill, welcome.

A conceit among managers is to date the beginning of history from the day they arrived, and you'll perhaps forgive me if I fall into that trap, albeit with premeditation.

When I mulled over what to say to you today, I discarded notions of high rhetoric. You are professional communicators and you've heard it all.

Instead I asked what you'd like to hear from me. I decided, with the help of members of the OPA staff and others such as VHA's Kerri Childress, that you'd like to hear specifics, you'd like to hear about where we've been over the last two years or so, and where we're headed.

And that makes a lot of sense, because the conference is founded on the concept of learning. Where we have come from as a public affairs community is helping us determine where we're going, and how we'll get there.

Two years ago, I addressed many of you; who here was in Orlando at the 2001 conference?

Congratulations on your endurance!

When we met two years ago, VA public affairs told the VA story in a time-proven manner. OPA at central office told the national story, issuing news releases and reacting to national media queries. OPA's regional offices focused on supporting the communications officers, staffs, and directors in the networks, regions, and facilities.

This was important because as you know, many if not most communications officers wear two or three hats, and turnover is fairly high – I've heard as high as fifty percent. So having a seasoned pro like Ozzie or any of our wonderful directors was valuable.

Two years ago, I think that, aside from issuing news releases, public affairs at central office was essentially reactive. Don't get me wrong, that's a critical component, and we have to do it well, and we did. But we waited for them to come to us. The largest and best healthcare system in the free world, maybe the world. Ask yourself, does Nordstrom or Amazon or Target wait?

It occurred to me that public affairs in the field was much more proactive: you in the field conducted health fairs, tried to get directors out into the public, engaged with your post commanders, and even forged relationships with reporters. And your regional OPA team worked closely with you.

A functional equilibrium existed two years ago. Things worked reasonably well.

Over the past two years that equilibrium changed. I helped change it.

In the 2001 conference, I spoke about the importance of being proactive and of supporting the programs of Secretary Principi and President Bush, both of whom are leaders committed not just to efforts, but to results.

And so in the last two years, in a drive to achieve the outreach potential, we have done some things at CO that upset the equilibrium. That was good and bad. No Secretary of Veterans Affairs has ever traveled like Secretary Principi does. Dr. Mackay is no travel slouch either.

In order to get the biggest proactivity bang out of their travel buck, we have capitalized on their comings and goings, to the point that we now have a template for media on a given trip: newspaper interview, morning TV show interview, drive time radio, minority and specialty media interviews, editorial board if it can be scheduled.

Dr. Mackay on his visit here will be doing much of this. We no longer issue an advisory and react to whomever shows up. That is good.

We have also called on you to disseminate op-eds and statements from the Secretary to your media as part of that outreach campaign. You have worked hard to do so, and when you did, the results were impressive, achieving significant grassroots penetration.

But in the process, the effort eroded the ability of OPA's field staff to support its natural customers, you. Dave Bayard couldn't give you the time he used to give. That has displeased Dave Bayard, as it should. If we cannot support you adequately, we cannot expect you to reciprocate. So for all of us, that was bad.

So the first thing I want to say to you as my natural customers, is — we're fixing that problem. Larry Devine and I have begun making some changes that will ease the development of trip packs, and free up my staff so that they can spend more time with you, because your success is simply indispensable to ours.

Now we will not walk away from the successful outreach we have developed, but we will do it in a manner that preserves the balance between CO-centrism and field-centrism.

If you had told me two years ago that one of our biggest problems was going to be providing guidance and materials to the field ahead of the media juggernaut, I would have been incredulous. It's basic – your people should know before the media does. But that has been a problem. No excuses.

We have taken steps to fix that problem. When we develop a media plan that I brief to the Secretary, we plan-in advance notice to the field and issue brief email heads-up notices giving as much info as we can. We want you to have an idea of the issue, how to prepare, and when you might expect materials and further guidance. We have gone from a slow old-fashioned serial paper-based concurrence to parallel email concurrences wherever possible. We recognize the problem and will solve it.

When we met two years ago, I told you that I thought, "people working together in cross-functional teams are more engaged and maybe even happier than those working away in isolated stove pipes. Look for a greater emphasis on teams."

Several months ago, after a successful pilot test, OPA reorganized. Like virtually every other government public affairs office, we used to have a section that dealt with media and one that dealt with internal information. The relationship was time honored. But it tended to create stovepipes between the development of internal and external information within natural customers, such as VHA, which is a natural customer of OPA. Often a story idea or issue developed for one set of audience did not get picked up for the other.

So we changed it. We are still ironing out details, but now OPA has a staff led by Phil Budahn that comprises two groups. One focuses on supporting VHA and health-related issues, developing both internal information and external information. Another group handles internal and external information pertaining to benefits and memorial affairs – VBA and NCA.

Chris Scheer leads a team that develops the products themselves, other than news releases and fact sheets, which Phil still does.

Chris's group produces the completely updated and improved VAnguard, VA News, our daily news clips, specialized speeches and correspondence, and is now managing OPA's web-based products.

With the change, I think the quality of information has improved. Productivity is certainly impressive. Last year, Budahn's team, answering some 1,200 media queries, also produced some 200 news releases and fact sheets, just under one every work day; some of those news release topics are adapted for the internal audience, and you see them in VAnguard or VA News or other avenues.

Barriers still exist, but now they are less within a given customer area. We will continue to develop the potential. You do see immediately that OPA's field service has always benefited from this integrated focus, and they did not change. In fact, a facility public affairs office is a fully integrated communications effort.

Two years ago, I told you that we would call on you to help develop new capabilities, like grassroots outreach. As much as Washington or New York may want to believe it, not

everyone, everywhere, reads the Post or the Times. Veterans in fact read the Palm Beach Post and the Bucks County Courier Times.

They also send and receive lots of email.

Grassroots outreach is critically important because without it, we simply cannot achieve our communication goals.

Those goals were stated in the 2002 Department Communication Plan. The plan established five big-picture goals, each one supporting one of VA's four strategic goals and one enhancing goal. More specific objectives support these goals, and yet more specific, assignable actions support these objectives. There are more than 90 actions in all.

The goal of the plan itself, apart from the goals it laid out, was to organize the practice of public affairs and simultaneously enhance the image of public affairs within VA management circles, both in the field and at CO, and thus enhance support of public affairs activities across the board.

It is not too early to judge whether that all worked. Of the 98 actions in the plan, we accomplished some 70. Among those 70:

We launched a permission-based email list-server that already provides more than 10,000 subscribers with VA news releases as they are released, without filtration by the media. Many of those subscribers send the releases to their own networks, in a logarithmic growth pattern.

We totally revamped VAnguard, moving it into the age of color. The new VAnguard is the work of editor Lisa Respass, who had a vision of this magazine's potential and working with her colleagues such as ace photographer Robert Turtill, realized that vision.

Our regional folks, led by Adrien Creecy and Carl Henderson developed media training modules suitable for VA managers, and we'll use them next month for the first of, I predict, many top-level VA leaders. These great PAOs also have developed web-based public affairs training modules.

We have revived the Qs&As campaign, to provide veterans through the media with how-to information useful in getting the goods and services they've earned.

You in the field made unprecedented efforts to get your facilities and your people in the news, with great impact at that crucial grassroots level.

We began web-streaming VA News to desktops. This excellent show, produced each week by CO's Ken McKinnon, should be seen by every VA employee and constituent. Waiting for it to air at a specific time on some TV set is a non-starter. Information must be available easily and on-demand. As an aside, Ken lost his home to fire a few months back. He ensured VA News was produced without interruption. That's professionalism, and showmanship!

So we had a lot of success last year. Management noticed that success.

And today, supported by the Secretary, we have a strategic communications working group that meets monthly. It comprises the communications officers from each administration and a member of their management team.

Chief of Staff Nevin Weaver represents VHA, Deputy Under Secretary Lois Mittelsteadt is there for VBA, and Deputy Under Secretary Dick Wannemacher is there for NCA. That is management acceptance and commitment.

That team two weeks ago formed a task force that will revise the department's communications plan. This task force is a cross-section of VA's communicators. Working alongside the administration communications officers are facility, network, and regional public affairs officers. They will further draw on the lessons learned by VHA's impressive communications advisory board, which is also a source of some task force members.

Their goal is to produce an integrated plan that supports the department's strategic goals through the aggressive use of full-spectrum communications, from the web through electronic and print media, to community relations, VSO and intergovernmental coordination, and consumer affairs.

The plan will be developed by the men and women who have to use it, and it will also form the framework for each administration's own communications plan. That brings us to where we're going.

Goals only exist to bring about some desirable condition; you might call it an end state. An end state is a state of being. You could say that an end state we desire is that all Iraqi Freedom veterans know they have two years of VA health care available to them without having to enroll. That is a desirable state of being for us and for them.

Our strategic goals must get us to that end state. We must communicate to these veterans through whatever means that are suitable and feasible.

We must preserve and enhance any factors that improve our ability to get our message across, and conversely, we must mitigate whatever factors tend to reduce our ability to impart our message.

So we must, as communicators, determine why people listen to us: perhaps they trust VA; perhaps they trust certain VA staff members they know. These "trusted agents" can carry our message effectively, and we as communicators must enhance further their ability to be heard, seen and believed. What we can accomplish is significant, as these examples show:

When a class action lawsuit was filed at McGuire VAMC, claiming racial discrimination, the PAO maintained her key message that discrimination of any kind is not tolerated at the hospital. The lawsuit is still pending, but that PAO's focus has helped communicate the department's values and increase the public's trust.

After international media coverage of a tragic organ transplant death at Duke University Medical Center, the Durham PAO did a fine job of maintaining the perception of separation

between the medical center and the university, a remarkable feat as the two are affiliated and are located across the street from one another. The result: VA's reputation was preserved.

At central office, we recognized that a crucial factor in our success was Secretary Principi's own credibility. It is tremendous. So we protect that credibility and we enhance it and we leverage it.

We protect it by correcting media errors. We enhance it whenever the Secretary can right a wrong or otherwise help veterans, especially if we can get him some publicity when he does. His credibility was enhanced with his quick decision to service-connect ALS with Gulf War service.

That credibility helps him get through the tough calls, such as the enrollment decision and the potential closure of facilities.

We leverage that credibility by exposing him to top public opinion leaders. Every two to four weeks, he has breakfast with a media heavy. Two weeks ago it was the executive director of American Association of Retired Persons, who as a result wants to work with us on several areas in which VA is a leader, and we should get ink in their magazine, which leads the nation in circulation.

Last week you may have seen a USA Today article about VA's leadership in prescription drug costs. A journalist who breakfasted with the Secretary and then toured the Baltimore VAMC with him a couple months ago wrote it.

So we took advantage of the credibility and position of our Secretary to enable him to communicate key messages, build bridges, further enhance his credibility, and get good ink.

You can do this too. Your media wants access to your director or your chief surgeon or your chief information officer or your chief nurse. Everyone has to eat; they might as well eat with your boss.

For you VBA communicators here in Dallas, your team is doing a great job cutting that claims backlog down to the Secretary's goal of 250,000 and making quality decisions in the bargain. You now have a great story to tell, over breakfast or over the phone.

By the way, that USA Today article also reported the surge in enrolments since 1998. It cited President Bush's historic VA budget increases and echoed Secretary Principi's commitment to our core-constituency veterans, those in priority groups one through six, both key messages. If we only could have gotten them to tout our solid progress in reducing the health care waiting list . . .

Consider using technology to extend your reach. We realized that editorial boards are powerful, but tough to arrange because travel schedules and editorial schedules often don't match up. But nearly every conference room in America has one of those phone conference microphone spiders. So now we are pitching and getting, telephonic editorial boards. I think the Secretary has one with the Detroit Free Press in a day or so, his second so far. The Austin American Statesman is in the lineup too.

We will do more of this. In my role I will continually seek ways to enhance the credibility of senior VA executives and position them with leading national media. I urge you to do the same with your leaders and your media.

We've talked a little about goals and how they support end states. We've revisited the past and reviewed some of the problems and the progress.

Now for the future, the promise. We will go faster, penetrate wider and farther, and achieve ever-increasing impact. We will do it using a constantly improving blend of high-tech/high-touch.

The most powerful new tool we have is technology — web-based communications specifically. The 2001 National Survey of Veterans tells us that 62 percent of veterans report having access to the Internet and that data is now two years old, a lifetime where the Internet is concerned. My 80-year-old World War Two pilot father is more at home on the Net than I am, and it's driving my mother nuts. Further, the survey tells us that about 67 percent of veterans turn to VA itself for information about their benefits.

That doesn't mean media stories are unimportant, they help create perceptions among taxpayers that either help or hinder us. It does mean however that what we say matters. Directly.

If today we have a list server and have begun to web-stream VA News, tomorrow — almost literally tomorrow — that will be ancient history. VA is now fielding a system-wide capability to bring video to every desktop; Gabe Palkuti and Kim Luoma are here and can tell you all about it.

Tomorrow, perhaps waiting rooms will have big screens connected to PCs so that patients (who have already read VAnguard) can watch our VA public affairs programming. They may watch your director talking about patient safety or Secretary Principi discuss a new regulation that eases the ability to get prescription drugs or actress Jennifer Love Hewitt tell America about her new role as National Honorary Spokesperson for Veterans Day.

I know that not everyone has high-speed Internet. As surely as veterans are turning to the web though, VA and government itself is going there too. Over time, your connection will only get faster. And as we move in this direction, look for our effectiveness to explode.

One new vehicle under development is VA community access TV programming. All across America, people watch community access TV. And at the darnedest hours too!

Already DoD sends programming to hundreds of these stations, hungry for content. They will not have the field to themselves. Two weeks ago a small team at CO began a six-week project to develop a pilot 20-minute, broadcast-quality segment.

That pilot will be used to get funding for a monthly program designed to inform veterans. A handful of facilities are already doing this and we'll learn from them too, and what we do will complement their effort.

While this programming is designed for TV, it will be adapted and re-purposed to support our goals in ways I cannot now imagine. That is the destiny of information.

To support the explosive power of web-based information, we will reconfigure staff a little at OPA to allow our trained web developer, Toby Norris, to focus on managing the presentation of our information over the web.

To provide him material, the entire OPA staff will begin to develop creative content with the web in mind. When Matt Bristol or Karen Fedele writes a piece, they'll choose key phrases that should be hot-linked, and they'll provide the links. This will be an integrated approach.

At the same time, we must retain high-touch. For that, we rely especially on you. And this brings us back to the balance I spoke about in the beginning.

Technology is everyone's game, I know because I see and use the clips you send by email; but no one can touch constituents like you can. If OPA can get the Secretary in the Washington Post, you get your director in the local paper read by your veterans every day. If OPA can link Dr. Mackay or Under Secretary Cooper with big-shot reporters, you link your leaders with community leaders and build the enduring relationships that are indispensable.

One thing that two years inside the Beltway has taught me: what you do in your facilities and communities matters enormously.

When you tell the VA story as that PAO at McGuire did, when you help keep your fellow employees and your veterans and their families informed, when you work with your veterans service organizations, when you bring the community into the VA through councils and visits and event partnerships, when you do those things the effect is a rippling up of support and understanding that enhances the Secretary's ability to work with lawmakers in Congress and help the President get the support for veterans they earned.

In an age of information, there simply is no unimportant public affairs activity.

The last two years represent really a sliver of VA history and are much less time than many of you have given in service to our country. But they have been important years to me. I have been privileged to take part in your good work. And it is a renewed privilege to continue serving with you on this most fulfilling mission, in these most exciting times.

Thank you for what you do for our nation's veterans and those who love them.

Have a great conference. Learn a lot.

Enjoy the fellowship of your colleagues.

And – this is Texas, y'all — don't leave hungry!

God Bless America!