

Veteran Community Partnerships

Fiscal Year 2019
Annual Report



VA



U.S. Department
of Veterans Affairs



VETERAN COMMUNITY PARTNERSHIPS

Vision

To ensure Veterans choice in their access to care, services, and benefits through organized VA and community partnerships.

Mission

To empower collaborative action between VA and community partners to develop and expand personalized options for Veterans.

Foreword

Veteran Community Partnerships (VCPs) advance many of VA's strategic priorities – from customer service to implementation of the MISSION Act to improving access to care for Veterans.

VCPs are a way to bring Veterans Health Administration (VHA) and community organizations together to work on common goals of improving access to care for Veterans. The number of VCPs keeps growing because they work – providing opportunities for VHA staff to build relationships with staff at community organizations, gain information about resources and collaborate on joint initiatives to address needs – and lead to a united community to serve Veterans.

For over 10 years, VCPs, in ways unique to the needs of their communities, have striven to provide better and more seamless, coordinated care to Veterans and their families. This report highlights the work done by VCPs across the nation in 2019.

Sherri DeLoof

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Sherri S. DeLoof, LMSW

Program Analyst, VHA Coordinator for Veteran Community Partnerships
Geriatrics and Extended Care (10NC4)

As a Veteran and a professional working in people's homes, I daily come across Veterans who are unaware of what benefits they have available to them.

My involvement with the VCP has allowed me to gain additional knowledge and supports to be able to better serve our nation's Veterans.

This knowledge is then passed on into my community, allowing Veterans an opportunity for additional supports that they truly need. The VCP is making it possible for Veterans to gain a better way of life, a sense of belonging, a sense of acknowledgement and bring back the pride of having served our Nation.

The dedication of the VCP members is motivating and heartfelt.

Jodi Wiltenburg
Veteran, United States Navy
Altoona, PA

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2019 SNAPSHOT

Event themes:
VA benefits,
education,
health fairs,
enrollment
and outreach

1



**7,700 Veterans,
13,000 total, attended
124 VCP-sponsored
events**

14 different
VA Service Lines
support VCP
with
249 VA staff
participating
nationwide



2

61

VA FACILITIES
TRAINED, TO DATE



3

**194 VCP meetings focused
on partnership building,
event preparation and
strategic planning**

**Nationally, more
than 40
community organizations
collaborated with a
VCP in 2019**



Overview

History and Background

Over 10 years ago, VCPs, modeled after the successful Hospice-Veteran Partnership initiative, were piloted by the Office of Geriatrics and Extended Care. Early efforts were successful, so VA contracted with the National Hospice and Palliative Care Organization from 2012 to 2018 to expand the VCP model and ensure its sustainability.

Rationale

While VA operates the largest integrated healthcare system in the U.S., streamlined coordination of the access to services for Veterans can be a challenge, as:

- There are over 22 million Veterans in the U.S.; only 9 million Veterans are enrolled with the VA for health care but 50% are over the age of 65
- Elderly Veterans tend to have more interacting diagnoses and medications, more functional dependence and more caregiver needs and challenges and,
- About 70% of VA patients over 65 use one or more non-VA health care service – yet there is no systematic linkage among providers/services, which leads to discontinuities in care and documentation, and redundant or missed services.

Neither VA nor community agencies can provide all the services a Veteran may need, so **there is a great need for strong partnerships** to be developed and nurtured among VA and community providers and organizations to deliver the coordinated quality healthcare that Veterans and their families deserve.

How VCPs Help Build and Sustain Partnerships

VCPs can provide a proven model that is innovative, flexible and relevant to help VAs and community organizations address a broad range of needs. Veterans and their caregivers are the main targets of VCP efforts and the VCP model is applicable to all Veteran populations. Indeed, VCPs have been tailored to address specific issues, populations, topics, or programs, including homelessness, community re-integration, mental health, end-of-life care, caregivers, dementia, and more.

VCPs support Veterans, their caregivers, and families. The VCP model of collaboration – Veterans, caregivers, VA health facilities, community health providers, non-governmental organizations, individuals and non-VA agencies is a coalition working together to integrate knowledge and action for the combined mutual benefit of all involved. It continues to be a low-tech, high-touch, Veteran-centric, easily replicated and readily adapted approach to optimizing civilian services for Veterans.

VCP Leadership and VCP Advisory Council

Leadership Team

The leadership team, formed in May 2018, prior to the retirement of VCP founder, Dr. Ken Shay, consists of representatives from VHA's Offices of Geriatrics and Extended Care, Community Engagement/Center for Compassionate Innovation, Rural Health and a VCP Coordinator:

Sherry DeLoof, VCP Coordinator and Program Analyst for Geriatrics and Extended Care, serves as the national administrative lead.

Dr. Jamie Davis represents the Office of Community Engagement and serves as the national lead for VCP collaborative activities with other VA program offices.

Deborah (Deb) Goral works as the VA VISN 4 Palliative Care Program Manager, is Pittsburgh VCP Coordinator and serves as the national education lead.

Dr. Bret Hicken works for the Office of Rural Health in the Veterans Rural Health Resource Center – Salt Lake City and serves as the national evaluation lead.

Dr. Marianne Shaughnessy, Director, Geriatric Research Education and Clinical Centers, Geriatrics and Extended Care, oversees the VCP national program.

VCP National Advisory Council

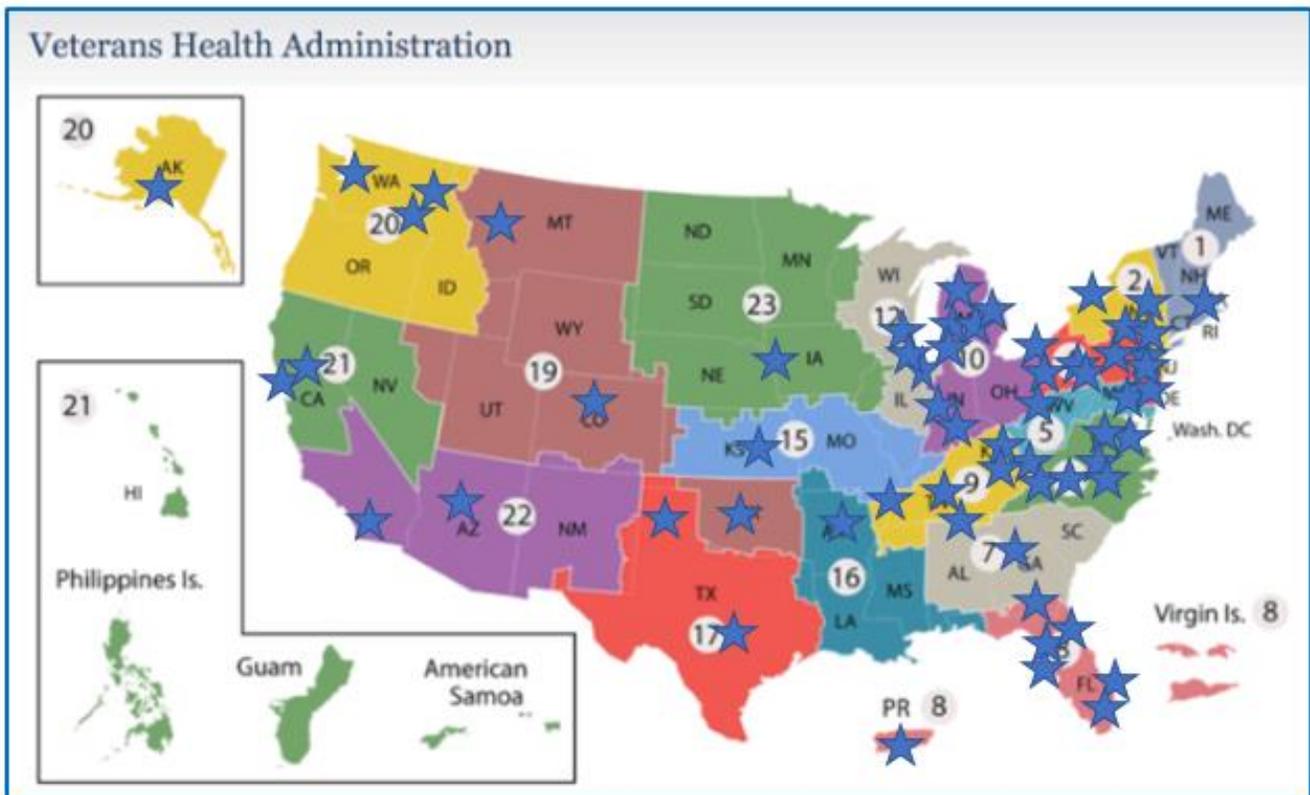
The National Advisory Council, established in FY 2011, meets quarterly and provides guidance for VCP's strategic plan. It includes subject matter experts from VHA along with ex officio* involvement from national non-VA organizations:

- **Administration for Community Living***
- **Disabled American Veterans***
- **Leading Age***
- **National Association for Area Agencies on Aging***
- **VA Office of Veteran Experience**
- **VHA Hospice-Veteran Partnership Workgroup**
- **VHA Office of Care Management and Social Work**
- **VHA Office of Community Engagement/Center for Compassionate Innovation**
- **VHA Office of Geriatrics and Extended Care**
- **VHA Office of Nursing Services**
- **VHA Office of Rural Health**
- **VHA Office of Voluntary Service**

VCPs in Action

What began with three pilot sites in FY 2011 has had steady growth over the past eight years to include sites in 61 VA Medical Centers (VAMCs) in all 18 Veterans Integrated Service Networks (VISNs) in 28 states (Alaska, Arizona, Arkansas, California, Colorado, Delaware, Georgia, Florida, Illinois, Indiana, Iowa, Kansas, Kentucky, Maryland, Michigan, Montana, Nebraska, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Tennessee, Texas, Virginia, Washington and West Virginia) and Puerto Rico.

VCP Sites



Success Stories from the Field

These “success stories from the field,” taken from the FY 2019 assessment, describe the value and impact of VCPs for Veterans, caregivers and their VA and community partners.

Connecting Long-Distance Caregivers in Colorado to a Kentucky Veteran

Uncertain about where to turn to assist a Colorado family seeking assistance for their WWII Veteran father living alone in Kentucky, staff from Joining Community Forces, an agency member of a Veteran Community Partnership in Denver, contacted their local VCP Coordinator, Courtney Bauers, MSW, LCSW.

After checking the national roster of VCPs, Courtney called the VCP Coordinator in Kentucky who reached out so the family could receive **guidance about the process to access resources** for their father who needed help with medication management and other activities of daily living.

It is difficult to quantify the benefits of building relationships, easing worry and answering questions like: who to call and how to help? Sometimes VCPs do it one Veteran at a time.

For *this* Veteran and *this* family, a VCP made a difference.



Coordinated and Compassionate Care for a Pennsylvania Veteran

The VA Erie hospice team received a call about an independent, strong-willed Vietnam Veteran who was alone and suffering – nearing the end of his life. Apparently, he was involved with both a VA and a community behavioral health team.

With the Veteran’s permission, using employer-provided iPhones and the Face Time app, a VA behavioral health team member joined the Veteran in his hospital room to connect with *both* the community behavioral health team member and the hospice team to do a hospice evaluation.

The Veteran’s VA care manager and staff at the community agency were members of the Erie VCP. Familiar with one another and the goals of VCP, they were able to assist this Veteran in obtaining the services, support and care he needed.

Because of VCPs there was an awareness of who to call to get the process started.

Changes in Practice

At VCP trainings, participants are asked to identify elements that they can directly and immediately apply to their job role, or practice, within a month. The stories below highlight changes in practice documented by local VCPs.

Focusing on Hospice Care – VCP in Pittsburgh, Pennsylvania

Awarded a Congressionally mandated initiative to improve the care of Vietnam-era Veterans on hospice, the Pittsburgh Veteran Community Partnership answered the challenge. They created an interdisciplinary team of Palliative Care and Mental Health trainers who successfully reached 19 agencies in 14 counties in Pennsylvania and 1 county in Ohio to offer training to 176 providers – 69 in a face-to-face format and 107 using a train-the-trainer model.

Participants shared their intentions to take at least one action to change their professional practice or performance in areas related to screening, post-traumatic stress disorder (PTSD), moral injury and suicide prevention.

Providers who serve Veterans in this region have pledged to **improve screening efforts**, including using open-ended questions, existing tools such as pocket cards and assessments and educating colleagues about VA Mental Health, Telehealth and Hospice services to meet needs and optimize care plans.

They have committed to **be more intentional about considering PTSD** as a criterion for referral or a potential cause for behavioral issues, considering cultural factors when assessing PTSD, recognizing that some medications may exacerbate PTSD and creating a Veteran PTSD resource for hospice families.

To **address moral injury issues**, they've reaffirmed practices to slow down, meet Veterans where they are at, focus on the Veterans' story and "sit in the silence" – not jumping in to fix things as well as realizing that some things cannot be fixed.

And, to **support suicide prevention efforts** they vowed to educate staff about VA support systems, including specialized care for patients expressing suicidal ideology over the phone, accurate care planning for mental health needs and recognizing that as a group, Veterans have complex needs.



Expanding Options for Cancer Care – VCP in Walla Walla, Washington

Honoring and supporting Veteran’s choice has been easier for both community oncology services providers and staff at the Jonathan M. Wainwright Memorial VA Medical Center in Walla Walla, Washington.

Through the efforts of their VCP they’ve **built a networking relationship** to help all Veterans know their options and seek compassionate cancer care in a timely manner.

Members of this VCP have **increased their knowledge** about the expertise, roles and services in their community – from pharmacy, to behavioral health, to the cancer navigation team, to the consult management team – resulting in changes in practice that benefit Veterans and their caregivers.

Transforming End-of-Life Care – VCP in San Antonio, Texas

The San Antonio Veteran Community Partnership works with health care professionals, clinicians, community partners, clergy, volunteers and other leaders to expand, enhance or initiate programs and practices aimed at bringing care and support to Veterans and their families, particularly when confronted by a life-limiting illness.

Together, they promote a better appreciation of the end of life, teaching patients what to expect and what to ask in clinical settings.

A \$30K grant, “Empower Staff and Community Hospices in the Care of Vietnam-era Veterans” resulted in a collaborative project that included nine San Antonio hospice partners to provide outreach and training in the areas of PTSD, moral injury and suicide prevention, specifically for Vietnam Veterans receiving hospice care.

As result of event feedback, the VCP discovered that many of the hospice agencies did not know the range of services provided by VA, nor where or how to access these services. They seized this opportunity to re-engage with community hospice partners by offering training and education in end-of-life care or Life Sustaining Treatment.

Over the next five years, the **VCP’s goals are to:**

- **Help transform the way their community cares for Veterans with a life-limiting illness**
- **Ensure Veteran choice in their access to care, services and benefits**

VCP Spotlight

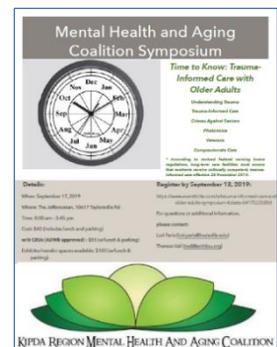
The VCP “spotlight story” showcases the results of the sustained efforts of a large VCP meeting the needs of Veterans and caregivers in their communities.

Tripling in Size More Than Triples the Benefits – VCP based in Louisville, Kentucky.

This VCP has been active over the past four years. In 2019, it tripled in size with the formation of the Kentuckiana Veteran and Community Integration Coalition. It includes a large coverage area of seven counties in Kentucky and six plus counties in Indiana.

Accomplishments in FY 2019 include:

- VA and the local Area Agency on Aging (KIPDA) traveling to Nashville, Tennessee to present on the mental health and aging focus in their community and **demonstrate the importance of partnerships.**
- Finishing a grant received from the Kentucky Cabinet for Health and Family Services in 2017 to **develop online mental health and aging modules.**
- Receiving \$10K from the Kentucky Cabinet for Health and Family Services to **focus on trauma-informed care for older adults throughout their community.**
- Planning a Stand Down, which was the largest in several years (reaching over 100 Veterans). The event also incorporated programs throughout the day to **educate Veterans about VA and community services.**



Kentuckiana Veteran & Community Integration Coalition
Kentuckiana Regional Planning & Development Agency (KIPDA)
Department of Veterans Affairs – Caretaker Social Work
Institute of Sustainable Health & Optimal Aging

ASK THE QUESTION

"HAVE YOU OR A LOVED ONE EVER SERVED IN THE MILITARY?"

There are countless individuals in our community who served in the military and been awarded VA benefits, yet may they may not be aware that they are eligible or may not claim they are eligible. For VA's mission, subject to the President's Council on on-Veterans Affairs, the Care for America's Veterans, subject to the President's Council on on-Veterans Affairs, the Care for America's Veterans who has been the battle and for his/her widow and orphans." The VA, Healthcare and benefits officers are here to assist eligible veterans and/or their families in obtaining the benefits they have earned. To do that, we need your help. Please ask the question, "Have you or a loved one ever served in the military?" This is the best way to identify if someone might be a veteran who could be eligible for services or benefits.

"ARE YOU CURRENTLY RECEIVING VA BENEFITS OR ENROLLED IN HEALTHCARE?"

If you do identify that the person you are working with may be a Veteran, ask the question, "Are you currently enrolled in VA healthcare or do you receive VA benefits?" If they are enrolled in VA healthcare, they will have an assigned Primary Care Physician. If they have a service connected disability, they will receive medical monetary benefits. With this information, you can know that they might have resources they are aware and should be directed to discuss needs with their primary care physician and/or social worker. If they are they are not enrolled or receiving benefits, please provide them with information and urge them to do so.

Together, we can ensure that our Veterans and families have access to all of the VA and Community benefits and resources they deserve. If you have any questions or need assistance, please contact the local VA Medical Center or go to <http://www.va.gov/oliva/> to explore services and contacts.

RESOURCES LIST

Rollins VA Medical Center (MARI) 502-387-4000
Gentry, Suburbanites & Extended Care Main Plaza East 502-235-5555
Tucker VA Medical Center 502-235-5555
WV Center (Morehead, W. Va.) 502-235-5555
VA Regional Office & Community 502-235-5555
Kentuckiana Regional Planning and Development Agency 502-582-1624 www.kipda.org
Institute for Sustainable Health and Optimal Aging 502-582-1624 www.instituteisho.org

VA COUNCILMENT CLINICS

<p>VA Healthcare Center, Albany 200 Third St. Albany, GA 31703 Location: 317-432-2120 Phone: 302-249-2000 Fax: 302-249-2000 VA Healthcare Center 301-942-0222</p>	<p>VA Healthcare Center, Dayton 401 Dayton Drive Dayton, OH 45424 Phone: 937-233-6888 Fax: 937-233-6888 VA Healthcare Center 937-387-8767</p>	<p>VA Healthcare Center, Dayton 401 Dayton Drive Dayton, OH 45424 Phone: 937-233-6888 Fax: 937-233-6888 VA Healthcare Center 937-387-8767</p>	<p>VA Healthcare Center, Dayton 401 Dayton Drive Dayton, OH 45424 Phone: 937-233-6888 Fax: 937-233-6888 VA Healthcare Center 937-387-8767</p>
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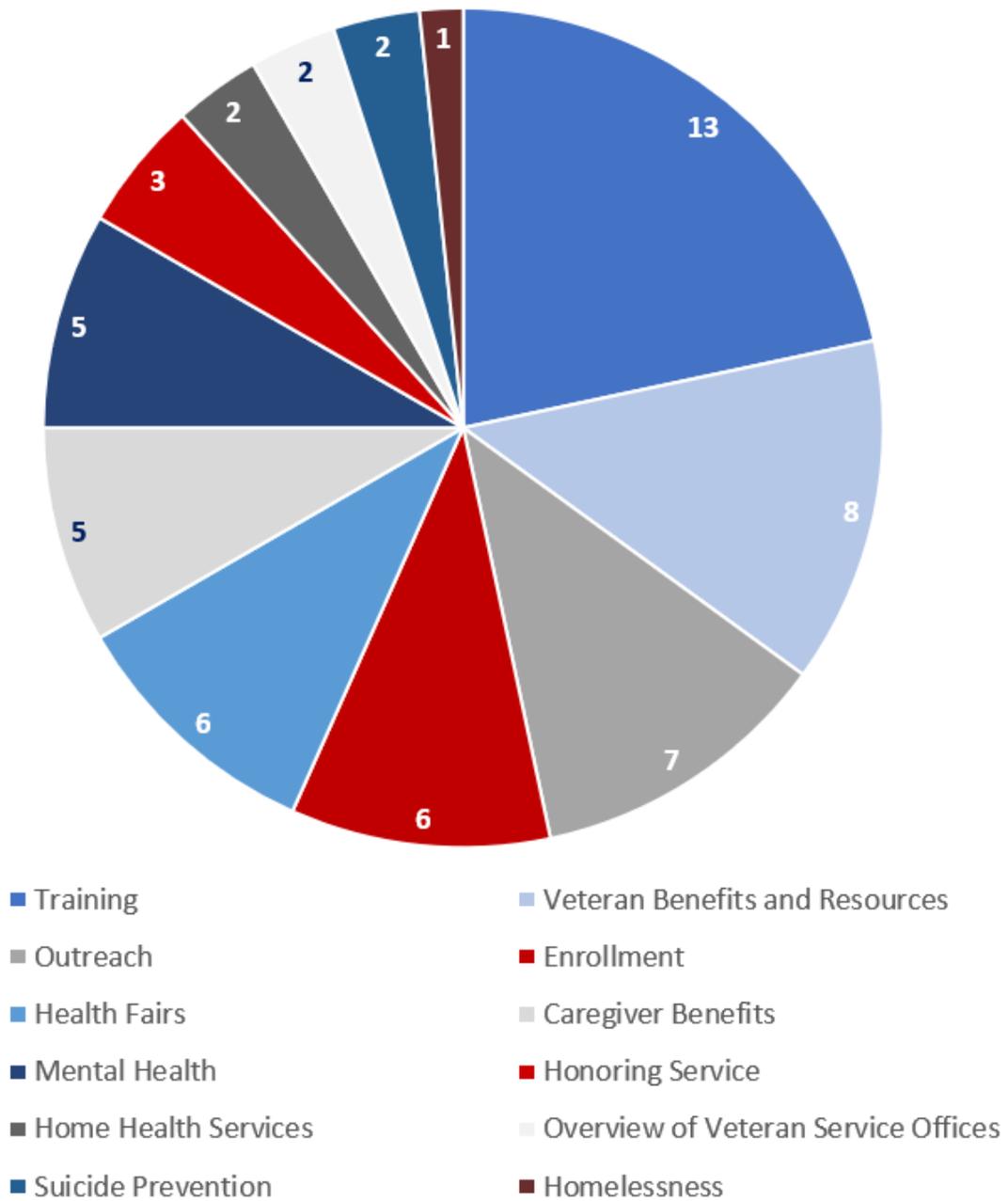
VA Healthcare Center, Dayton
401 Dayton Drive
Dayton, OH 45424
Phone: 937-233-6888
Fax: 937-233-6888
VA Healthcare Center 937-387-8767

- Highlighting the partnership at four conferences:
 - Council on Social Work Education (November 2018)
 - Optimal Aging Conference in Louisville, Kentucky (June)

- National Association of Social Work Conference in Indianapolis, Indiana (September)
- Southeast Area Agency on Aging Conference in Nashville, Tennessee (September)

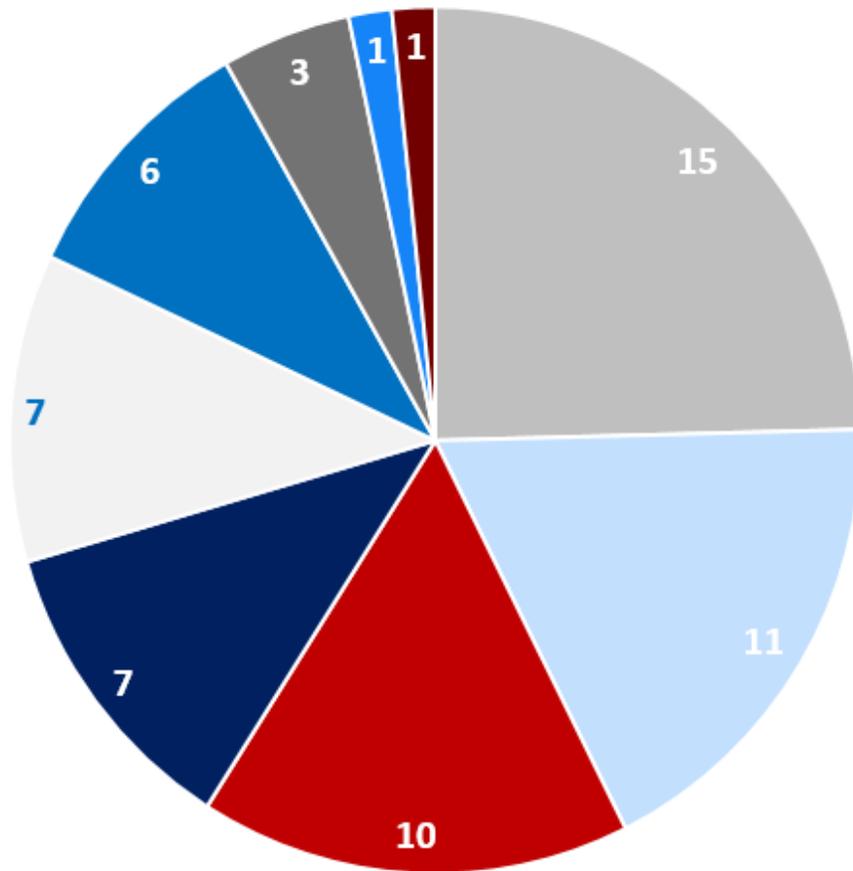
Types of VCP Events

VCP events are Veteran-focused activities to increase access to services and benefits.



Types of VCP Meetings

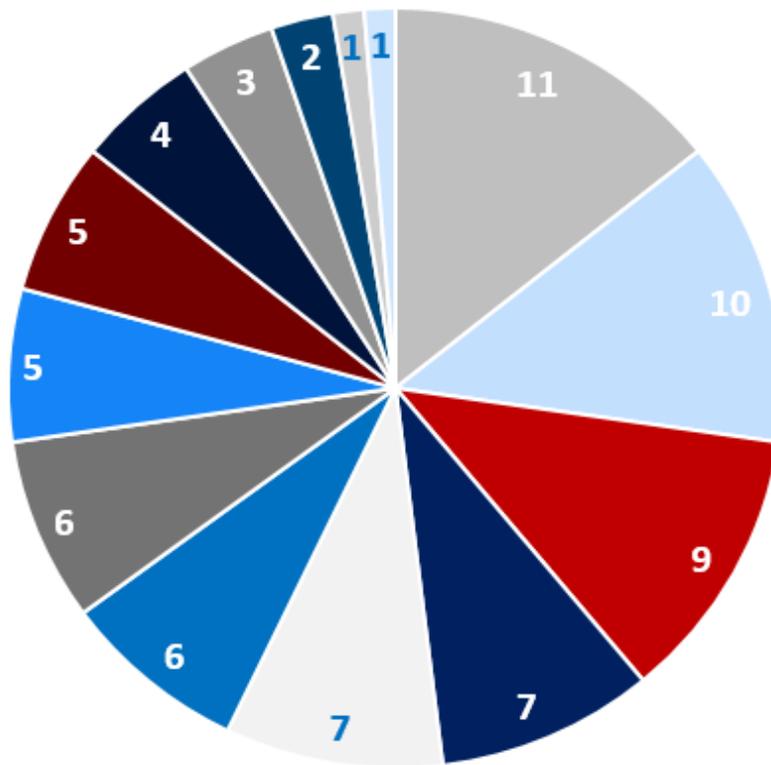
Collaboration is the guiding force in all types of VCP meetings – for building relationships, assessing needs, planning, education and more.



- Monthly/Quarterly Meeting
- Partnership Building
- Education
- Orientation for new Partners
- Telehealth
- Event Planning
- Strategic Planning
- Welcome Meeting
- Needs Assessment

Types of VA Services Involved in VCPs

A broad cross-section of VA staff – 149 in 2019 from 14 different service lines – support local VCPs to improve the Veteran experience within and outside of VA.



- Social Work
- Public Affairs
- Nursing Service
- Voluntary Service
- Womens Health
- Medicine Service
- Office of the Director
- Primary Care
- Mental/Behavioral Health
- Geriatrics and Ext. Care
- Medical Administration
- Chaplain Service
- Research
- Education Service

Types of Community Partners Involved in VCPs

Partnerships change and strengthen the way organizations and agencies work together. VCPs benefit from the insights and contributions of staff from different types of community partners, including:

- Adult Day Cares
- Aging Organizations
- Alcoholics Anonymous
- Alzheimer's Association
- Assisted Living Facilities
- Brain Injury Association
- Caregiver Services
- Colleges and Universities
- Community Mental Health Organizations
- Community Research Organizations
- County Organizations
- Departments of Health
- Faith-Based Organizations
- Food Agencies
- Funeral Homes
- Home Health Agencies
- Hospice Care Agencies
- Housing Organizations
- Legal Aid
- Military Agencies
- National Charitable Organizations
- Non-VA Hospitals
- Nursing Homes
- Other Organizations
- Senior Services
- Social Organizations
- State Agencies
- State Veterans Homes
- Veteran Experience Office
- Veteran Service Organizations
- Veterans

VCP Trainings, Technical Assistance, Tools and Resources

Trainings

Three trainings to stand up new VCPs were held in FY 2019 reaching 86 participants. They were conducted at Syracuse VA (Syracuse, New York) in April, Robert J. Dole VA (Wichita, Kansas) in August and Edward Hines Jr. VA (Chicago, Illinois) in September.

VCP training consists of interactive sessions focused on relationship building, identification of values, conducting a community needs assessment and strategic planning. Participants in VCP training include VA staff and community members interested in collaborating with the VA. Evaluations from the training sessions indicated that training goals and objectives were met or exceeded in all seven areas that were rated:

1. The training achieved its stated objectives.
2. The training was relevant to my area of practice/job function.
3. The training increased my knowledge about the subject.
4. I will be able to directly and immediately (i.e. within a month) apply what I learn in this training to my practice/job function.
5. The training was sound, credible and non-biased.
6. The teaching strategies utilized for this training were effective.
7. The faculty demonstrated expertise in the subject.

Generally, the highest scores were for increase in knowledge, effectiveness of teaching strategies used and demonstration of expertise by faculty. The lowest scores were for training achieving stated objectives and ability to directly and immediately apply what was learned into participants' practice/job function.

Attendees most often **identified these likely changes in professional practice/job function** based on what they learned:

- Improved networking
- Using connections made
- Increased collaboration
- Using strategies learned to engage female Veterans as well as Veteran spouses
- Intention to use knowledge gained about VA and community resources
- Asking each client if they are a Veteran (from community participants)



**WOMEN VETERANS
CONFERENCE & LUNCHEON**

SAVE THE DATE!

February 8, 2019
11:00 am to 3:00 pm
Gardiner Community Center
990 Old Gardiner Rd.
Sequim, WA (Gardiner)

A chance to connect
with other
Women Veterans!
A chance to increase
awareness of local
resources!

FEATURED SPEAKERS:
Jillie Alvarado-Ramos,
Director, WVA
M. J. Marino,
VA Mental Health

Free to women veterans!
Registration information to come.
Questions? Email: vetsconnect@olycap.org

The VCP trainings **provided relevant education and relationship building opportunities that will benefit Veterans served by VA and in the community:**

- Focused, interactive and educational – highly professional and beneficial
- Great training on creating partnerships and building relationships
- Also appreciated information that provided a base for moving forward

Ideas suggested for topics and presenters at future VCP trainings or events, **to optimize the impact of partnerships** included:

- Ensure wide base of community partners and include key community partners on leadership teams; communicate benefits to community partners
- Hold on-site meetings at partner member locations and offer tours
- Provide brief overview of VCPs at all meeting so newcomers are quickly brought up to speed; allow plenty of time for networking
- Share stories about what other VCPs have done to empower collaborative action between VA and community partners

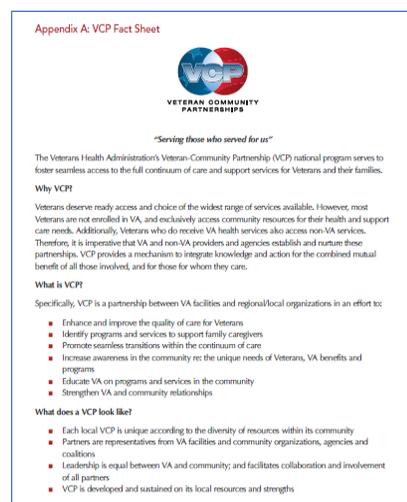
Technical Assistance, Tools and Resources

Monthly Networking Calls – Ongoing technical assistance is made available to all VCP coordinators through monthly networking and mentoring phone calls where they can share successes, challenges and lessons learned as well as seek coaching and advice. Guest speakers and periodic trainings provide additional education about issues relevant to VCPs.

VCP Toolkit – The [VCP Toolkit](#) (updated in FY 2017) provides step-by-step guidance on forming a VCP and links to materials that can be customized. To model the benefits of partnerships as well as meet pledges made to Congress, content from VHA’s Mental Health Summit Toolkit was integrated into the VCP Toolkit.

Online VCP Resources –

- Site Roster
- Fact Sheet
- Logo (in color and black and white)
- Templates for Action Plans, PowerPoints and VA and Communities Working Together
- VA “I CARE” Core Values and Characteristics
- Many more VA resources



Overall Benefits and Challenges

Since strengthening relationships and enhancing communication on behalf of Veterans is the major goal of VCP, it is gratifying that the benefits most frequently cited by VCP participants are exactly those:

- Developing/strengthening relationships and improving communication between VA and community organizations and agencies
- Promoting continuity of care to meet the needs of Veterans and caregivers
- Increasing referrals and support for caregivers and improving service plans for Veterans

*VCP is very important to our Veterans by educating them on their options for services available in our community. Many healthcare providers are VCP members, but **we all come together for the benefit of what we can do for our Veterans.** The value VCP brings to the community is getting the word out about Veteran support, helping to get Veterans enrolled and supporting other Veteran programs such as Veteran X.*

***VCP members bring what we are finding in the community as obstacles and needs of our Veterans and we brainstorm ways we can help and support them.** We also hold special events at the VA to recognize Veterans throughout the year to honor and thank them for their service to let them know they are appreciated and not forgotten.*

Michelle Carns, Hospice Care Consultant
Kindred Hospice
Altoona, Pennsylvania

The challenges cited most often are:

- Limits on time to devote to VCP activities; time commitment at the beginning stages of VCP development
- Lack of buy-in from supervisors on importance of VCPs
- Lack of funding for program expenses to support costs related to materials, meetings and events
- Turnover in the VCP Coordinator role



The progress of the national VCP initiative affirms the continuing need for strong and healthy partnerships among VA and community providers, agencies, and service organizations to provide coordinated quality healthcare and services for Veterans and their families.

Indeed, **VCPs support VA's expanding efforts to amplify community engagement and partnerships to optimize choice and service for those who served.**

Plans for FY 2020 and Beyond

- Refine standardized tools used to collect quarterly data about VCP progress and activities
- Study options for more rigorous evaluation of VCP impact at individual, organizational and community level
- Offer additional training on evaluation to VCP coordinators and members
- Actively solicit feedback from VCPs and review and operationalize feedback, when possible, during VCP Advisory Committee calls
- Strengthen support to existing VCPs
- Expand number of trained VCPs to 65 or more and develop strategies to move toward establishing a VCP in every medical center
- Explore adding VCP information to the *For Health Care Professionals* section of the GEC website www.va.gov/Geriatrics

We have an obligation to provide the best quality of care to those who have put their lives on the line to defend us. By sharing best practices, we can dramatically improve the experience and quality of life for Veterans in their final years. Clinicians can't do it alone.

It will take all of us working together – both VA and community partners helping Veterans live the best possible life in whatever time they have left.

Veronica Camacho, Administrative Officer
Geriatric Research, Education and Clinical Center (GRECC)
San Antonio, Texas

Acknowledgements

The Veteran Community Partnership program expresses its gratitude to:

- Leadership across the Department of Veterans Affairs
- Programs and individuals listed below for supporting the groundbreaking and important efforts of VCPs to improve care for all Veterans and their families

VHA Office of Community Engagement

- Jamie Davis, Christie Eickhoff, Tracy Weistreich

VHA Office of Caregiver Support

- Elyse Kaplan

VHA Office of Geriatrics and Extended Care

- Sherri DeLoof, Alejandra Paulovich, Marianne Shaughnessy

VHA Hospice and Palliative Care Program

- Mary Davidson, Scott T. Shreve

VHA Office of Rural Health, Veterans Rural Health Resource Center - Salt Lake City

- Byron Bair, Bret Hicken

VCP Advisory Board

- Adrian Atizado, Disabled American Veterans*
- Sabrina Clark, VHA Office of Voluntary Service
- Mary Davidson, VHA Hospice and Palliative Care Program
- Lynda Davis, VA Office of Veterans Experience
- Sherri DeLoof, VHA Geriatrics and Extended Care
- Brendan Flinn, LeadingAge*
- Lori Gerhard, Administration for Community Living*
- Bret Hicken, VHA Office of Rural Health
- Tracy Weistreich, VHA Office of Community Engagement
- Elyse Kaplan, VHA Office of Care Management and Social Work
- Michele Karel, VHA Office of Mental Health and Suicide Prevention
- Sandy Markwood, National Association of Area Agencies on Aging*
- Brenda Shaffer, VHA Office of Nursing Services
- Kevin Stanford, VHA Office of Voluntary Service

*ex officio member



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May 2020