



COMMONWEALTH of VIRGINIA

Department of Veterans Services

Vincent M. Burgess
Commissioner

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December 14, 2007

The Honorable Timothy M. Kaine
Governor

The Honorable William J. Howell
The Speaker of the House of Delegates of Virginia

The Honorable John H. Chichester
President Pro Tempore of the Senate of Virginia

Re: Department of Veterans Services 2007 Annual Report

Dear Governor Kaine, Delegate Howell, and Senator Chichester:

I am pleased to submit the Annual Report of the Department of Veterans Services (DVS). This report summarizes the Department's activities during state fiscal year 2007 (FY07).

The report begins with my comments, followed by comments from the chairmen of the three citizen boards that work hand-in-hand with DVS in serving Virginia's veterans. The Department's mission, vision, and values are outlined, followed by an overview of DVS and its organization.

The core of the report summarizes the mission, services, organization, and activities of the Department's four service-delivery sections – Benefit Services, Cemetery Services, Care Center Services and the State Approving Agency for Veterans Education and Training. For each service-delivery section, tables are used to highlight section activities for FY07. A brief discussion of the Department's support element, the Administrative Services section, follows.

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900 East Main Street, Richmond, Virginia 23219

www.virginiaforveterans.com

Governor Kaine, Delegate Howell, Senator Chichester

December 14, 2007

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The report concludes with a summary of the veterans-related legislation and budget allocations passed by the 2007 General Assembly, program highlights, and a brief look at the future.

It is my privilege to serve the citizens of the Commonwealth of Virginia. I believe that this report demonstrates that DVS is maximizing available resources in the service of Virginia's veterans.

Sincerely,

A handwritten signature in cursive script that reads "Vincent M. Burgess". The signature is written in black ink and is positioned above the printed name.

Vincent M. Burgess

Enclosure

VIRGINIA DEPARTMENT OF VETERANS SERVICES

COMMISSIONER'S 2007 ANNUAL REPORT

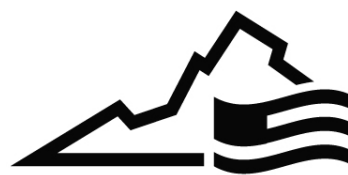
TO

GOVERNOR TIMOTHY M. KAINE

AND

THE VIRGINIA GENERAL ASSEMBLY

December 1, 2007



Serving those who served.

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Commissioner's Message

I take great pride in submitting this annual report on behalf of the men and women of the Virginia Department of Veterans Services (DVS). We are privileged to serve those who stood on the front line of freedom. From Omaha Beach to the mountains of Afghanistan, from the Fulda Gap to the Korean DMZ, Virginia's veterans have earned the lasting tribute of a grateful nation and Commonwealth. It is the mission of DVS to ensure that these honored veterans receive the benefits, support, quality care, and recognition they have earned through service and sacrifice.

Numbering approximately 727,000, veterans represent almost 10 percent of Virginia's population, and continue to serve our Commonwealth and our communities as they once served our nation. I am pleased to report that in fiscal year 2007 (FY07) DVS continued to make substantial progress in serving Virginia's veterans. In FY07, the department:

- Improved the financial security of Virginia's veterans by filing 21,303 disability compensation claims, a 4.3 percent increase over FY06. Approximately 65 percent of these claims were approved by the U.S. Department of Veterans Affairs
- Served the memorial needs of Virginia's veterans by performing 738 burials at Virginia's two state veterans cemeteries, a 4.1 percent increase over FY06.
- Increased access to long-term and domiciliary care at the Virginia Veterans Care Center by providing 83,463 patient days of care, an increase of two percent over FY06..
- Provided greater access to post-secondary educational opportunities by increasing the number of approved educational programs from 748 in FY06 to 780 in FY07.

These great strides would not have been possible without the strong, bi-partisan support of the executive and legislative branches of our government; without the guidance of the Board of Veterans Services, the Joint Leadership Council of Veterans Service Organizations, and the Veterans Services Foundation; and, especially, without the forceful advocacy of Virginia's veterans. DVS will continue to work with this broad-based coalition to better meet the needs of Virginia's veterans.

Fiscal year 2008 marks the fifth year of operation for the Department of Veterans Services. A year from now, I look forward to reporting to you on the operation of the Sitter & Barfoot Veterans Care Center, progress on implementation of many of the recommendations in EO 19, development of TurboVet™, development of a wounded warrior mental health initiative which will provide behavioral health services to veterans and their families, especially those returning from the Global War on Terror, and the continued delivery of quality service to our veterans.

Vincent M. Burgess
Commissioner

Comments from the Chairman, Board of Veterans Services

Overall, 2007 was a good year for the Department of Veterans Services. Following a very successful General Assembly session, the Department received nearly everything it requested. There are several reasons for that, typified by the comment heard from a veteran Virginia delegate, "so many veterans, so much need, so few dollars."

Despite that, the Department did very well and received adequate funding to begin to re-build its service officer base. Major funds were allocated for training new hires to ensure that they can reach their potential quicker than before. The two service agents at McGuire VA Medical Center (VAMC) in Richmond have had full calendars since being located there.

Our cemeteries are on track with the Southwest cemetery in Radford on schedule and the study on meeting the memorial needs of Virginia's veterans complete and showing where future cemeteries should be located.

The Sitter & Barfoot Veterans Care Center dedication in Richmond was a major event featuring the Governor, Secretary of Public Safety, the Commissioner and basically every party in Virginia interested in veterans and their needs. Under the "all dressed up and nowhere to go" syndrome, the Care Center awaits decisions by several government licensing agencies before it can begin to accept residents.

The Governor held one of his Road Trip Cabinet sessions at the Virginia Veterans Care Center in Salem and made several favorable comments about the Department, the facility and the favorable prospects for several more such care centers. The third center is in the planning stages and will be co-located with the Hampton VAMC.

A personal highlight of the year for the Chair was the enthusiastic endorsement of his proposed TurboVet™ initiative, a concept wherein the difficult process of filing a disability claim through the VA is made somewhat easier by using technology similar to TurboTax™. Instead of forcing a veteran or the veteran's agent to page through 800-page manuals, required information would appear where needed. Information, once entered, would not need to be duplicated. The error rate is expected to be lowered significantly resulting in higher first-time approval rates. An initial pilot program to develop a demonstration of the theory was successful and is being followed up with final program design.

Of interest is that many states are following Virginia's lead and it appears that some type of consortium is being formed that should keep down the development costs. TurboVet™ is an exciting concept whose time has come. For the record, the Chairman has been fighting for such a program for more than ten years and is personally gratified that it has been so thoroughly embraced by the Board of Veterans Services, the senior executive staff, and Governor Kaine.

The Board of Veterans Services had many meetings throughout the Commonwealth and all were well-attended. A quorum was present for all and several key items of business were discussed. Public comment was vociferous but helpful and the Department received significant feedback on its activities.

The Joint Leadership Council of Veterans Service Organizations (JLC), representing 23 veterans service organizations, once again came up with seven priority items on which all agreed. The Governor's office and legislators agreed that this "getting our act together" was a significant reason that veterans issues fared so well in 2007. The group represents about 250,000 members and, consequently, has much more impact than the individual organizations. Army Col. (retired) Sam Wilder is to be commended for his efforts to lead this process and personally author several concise point papers that were used to accomplish the JLC's mission.

Veterans Services Foundation (VSF) activities were centered mainly on finding its proper operating mode to raise funds and help the Department accomplish its mission.

In summary, the Department is doing well thanks in large part to the dedication of its staff, headed by Commissioner Vince Burgess. The support staff in Roanoke keeps the engine fueled and the many service officers are helping to increase the number of Virginia's veterans filing claims.

In all, 2007 has been a good year.

Paul Galanti, Richmond
November 28, 2007

Comments from the Chairman, Joint Leadership Council

I. VETERAN'S ISSUES

The Joint Leadership Council of Veterans Service Organizations (JLC) has become The Voice of the Veterans of Virginia. Representing a combined membership of more than 250,000 members, the 23 veterans service organizations (VSOs) have joined together to let our policy makers know what issues are of most concern to the veteran and military communities of the Commonwealth. The JLC is organized by Virginia statute to represent the concerns of all 786,000 veterans in Virginia. However, we have found that some policy makers are still not aware of who we are or what we do. We believe that the JLC best represents veterans' issues for our Virginia veterans.

II. LEGISLATIVE OBJECTIVES PRIORITIZED

The JLC receives grass-roots inputs from its member organizations. Then council members carefully research the issues, debate them, and after much discussion, vote on whether or not to adopt them as priority legislative objectives. The JLC is very mindful that requests of the Governor and the General Assembly must be reasonable, justified, and well articulated. Furthermore, they must be prioritized. The JLC has done that! We are also very aware that we are dealing with limited resources, and so we carefully distinguish between those items that are must-haves for our veterans and those that are nice-to-have. Our list of legislative objectives is published in priority order. Additionally, this year for the first time in our history, the JLC was able to not only decide on our prioritized list of legislative objectives, but also to develop detailed position papers for each objective by the end of August 2007.

III. A MOST EFFECTIVE ADVOCATE

Armed with our prioritized legislative agenda and the accompanying position papers, members of the JLC's veteran organizations began in September to contact their own delegates and senators to begin advocating for the JLC agenda. All members of the different veteran service organizations (e.g. American Legion, VFW, MOAA, etc.) have been meeting with their legislators and all have been advocating for the same priority objectives. All JLC veterans organizations are speaking with one voice. While the JLC supports all legislation beneficial to veterans and the military community, it advocates most strongly for the prioritized legislative agenda that has been agreed to by all of its members.

IV. ADVICE TO THE GOVERNOR

In addition to advocating with the General Assembly, the JLC has coordinated and worked with all other governmental boards to advise on veteran/military issues. In fact, the JLC has been the leader in promoting a legislative agenda with agencies such as the Board of Veterans Services (BVS), the Citizen Soldier Support Council (CSSC), the Virginia Military Advisory Council (VMAC), the Veteran Services Foundation (VSF). The JLC also provides vital input to the Key Military/Veterans Groups meeting which combines all recommendations and provides direct input to the Governor.

Respectfully,
Colonel Samuel D. Wilder, Jr., US Army (Ret)
Chairman

 Joint Leadership Council of Veterans Service Organizations – as of December 1, 2007

Veterans Service Organization	JLC Member	Alternate
Air Force Association	Mason S. Botts	Jeff Platte
American Ex-Prisoners of War	Robert O. Gray	
American Legion	Cornelius T. O'Neill	Dale Chapman
AMVETS	Jim Aucoin	John R. Cooper
AUSA	Samuel D. Wilder, Jr.	Philip Stoneman
Disabled American Veterans	Daniel T. Miller	David K. Martinez
Fleet Reserve Association	Thomas J. Snee	
Korean War Veterans Association	John J. Dozier	James P. Jones, Jr.
Legion of Valor of the US, Inc.	Richard J. Rinaldo	Jack Hilgers
Marine Corps League	John C. Bonnell, Jr.	Russell Fenn
Military Order of the Purple Heart	Norman J. Jasper, Jr.	
MOAA		Wes Edwards
NAUS	David A. Ellis	Paul Hamaker
Navy Seabee Veterans of America	R. Goodwin Sacra	
Non Commissioned Officers Association	Richard C. Schneider	
Paralyzed Veterans of America	John T. Jackson	David R. Coffield
Reserve Officers Association	Thomas M. Stephen, Jr.	Carmen D. Gentile
Roanoke Valley Veterans Council	Frank L. Sherman	Dan Karnes
Veterans of Foreign Wars	Daniel Boyer	Kim A. DeShano
Virginia National Guard Association	Kenneth W. Smith	John D. Velleca
WAVES	Michala Smith	Mary Freeman
Women Marines Association	Jenny Holbert	Marie Juliano

Comments from the Chairman, Veterans Services Foundation

The Veterans Services Foundation (VSF) worked in 2007 to provide effective, timely oversight of the Veterans Services Fund (the Fund), making funds available to supplement Department of Veterans Services (DVS) activities. The majority of the funding opportunities revolved around the Virginia Veterans Care Center.

The VSF worked in 2007 to build on the close working relationships with the Board of Veterans Services (BVS) and the Joint Leadership Council of Veterans Service Organizations (JLC).

In April 2006, the Board of Trustees held a Strategic Planning Session Retreat, facilitated by Greg Brittingham of Virginia Commonwealth University's Office of Public Policy. In addition to all members of the Board of Trustees, the Chairman of the JLC, and DVS staff members participated in the retreat.

While the retreat provided a good opportunity to review past accomplishments and to identify current activities, the focus was on the future, particularly on identifying potential opportunities for VSF action and developing a road map for the future. Nine action strategies were developed for execution.

Throughout 2007 the VSF has been hard at work implementing these action strategies. Measures have been recommended to the Commissioner. Necessary legislative actions have been developed for support and implementation. Staff and volunteer support have been engaged, as necessary. In addition, several new members have been appointed to the VSF Board of Trustees.

At its meeting on November 15, 2007, the VSF Board adopted the following mission statement:

The Virginia Veterans Services Foundation will administer and develop resources to provide supplemental, sustainable revenue for the Veterans Services Fund for Veterans' services and programs, and work with the Department of Veterans Services and supporting organizations to assure veterans' services programs are enhanced.

Thus, the two main objectives for the VSF in the coming years will be to raise funds to support veterans services programs and to administer those funds in a proper and equitable manner.

Frank G. Wickersham, III
Chairman of the Board of Trustees
Veterans Services Foundation

Veterans Services Foundation – as of December 1, 2007

Frank G. Wickersham, III – Chairman

Leroy P. Gross – Vice-Chairman

Supriya Christopher

Margaret L. Eure

Adam Harrell, Sr.

Frederic Leigh

Raymond D. Smoot, Jr.

Kathleen Wilder

Paul E. Galanti, *ex officio*

Vincent M. Burgess, *ex officio*

Mission, Vision, and Values

Mission

Serve Virginia's veterans and their dependents by ensuring they receive the benefits, support, quality care, and recognition they have earned through service and sacrifice

Vision

Become the benchmark for the delivery of quality veterans programs at the state level and help ensure Virginia veterans receive the federal benefits to which they are entitled

Values

- **Service:** *Deliver the best service possible to Virginia veterans – they deserve no less*
- **Dedication:** *Bring an unflinching commitment to helping all of Virginia's veterans*
- **Excellence:** *Continually strive to be the best at what we do*
- **Involvement:** *Involve all stakeholders – veterans, veterans service organizations, department staff, policy makers, and legislators – in developing and implementing top flight veterans programs*
- **Innovation:** *Constantly seek new and/or better ways to deliver service to our veterans*
- **Openness and honesty:** *Deal with all stakeholders in a direct and sincere manner*
- **Accountability:** *Create a climate of ownership at the lowest level possible*
- **Flexibility:** *Encourage our front-line managers to use their initiative and experience to accomplish the mission*

Department Overview

Since 1942, Virginia has shown its respect and honor to veterans by serving them as effective advocates. Prior to 2003, veterans services in Virginia were fragmented among the former Department of Veterans Affairs, which operated the benefits and cemeteries programs; the Virginia Veterans Care Center, which was operated by a series of contractors under the supervision of a Board of Trustees; and the Department of Education, which oversaw the activities of the State Approving Agency for Veterans Education and Training. In 2003, these services were consolidated under one agency, known as the Department of Veterans Services (DVS).

DVS is organized into four service delivery branches – benefits, cemeteries, care centers, and veterans education – plus an administrative section. Integral components of the Department of Veterans Services team are the Board of Veterans Services, the Joint Leadership Council of Veterans Service Organizations, the Veterans Services Foundation, and the Veterans Care Center Advisory Committee which work collaboratively to support the effective delivery of services to Virginia's veterans.

The Benefit Services section assists veterans and their dependents in obtaining compensation and pension benefits from the U. S. Department of Veterans Affairs. DVS operates 22 field offices throughout the Commonwealth.

Virginia's veterans cemeteries provide burial and perpetual care services to veterans and eligible dependents. The Virginia Veterans Cemetery, in Amelia, is a 127-acre facility. The Albert G. Horton, Jr. Memorial Veterans Cemetery, in Suffolk, is a 74-acre facility.

The Virginia Veterans Care Center, located adjacent to the Salem VA Medical Center, is a 240-bed facility that provides long-term skilled care and assisted living services to veterans. The dedication ceremony for the 160-bed Sitter & Barfoot Veterans Care Center, located adjacent to the McGuire VA Medical Center in Richmond, was held on September 26, 2007. The facility will begin accepting residents in early 2008.

The State Approving Agency for Veterans Education and Training (SAA) reviews and approves post-secondary education programs operating in the Commonwealth, ensuring the programs meet strict federal qualification guidelines. Veterans may use their G.I. Bill and other educational benefits only at programs approved by the SAA.

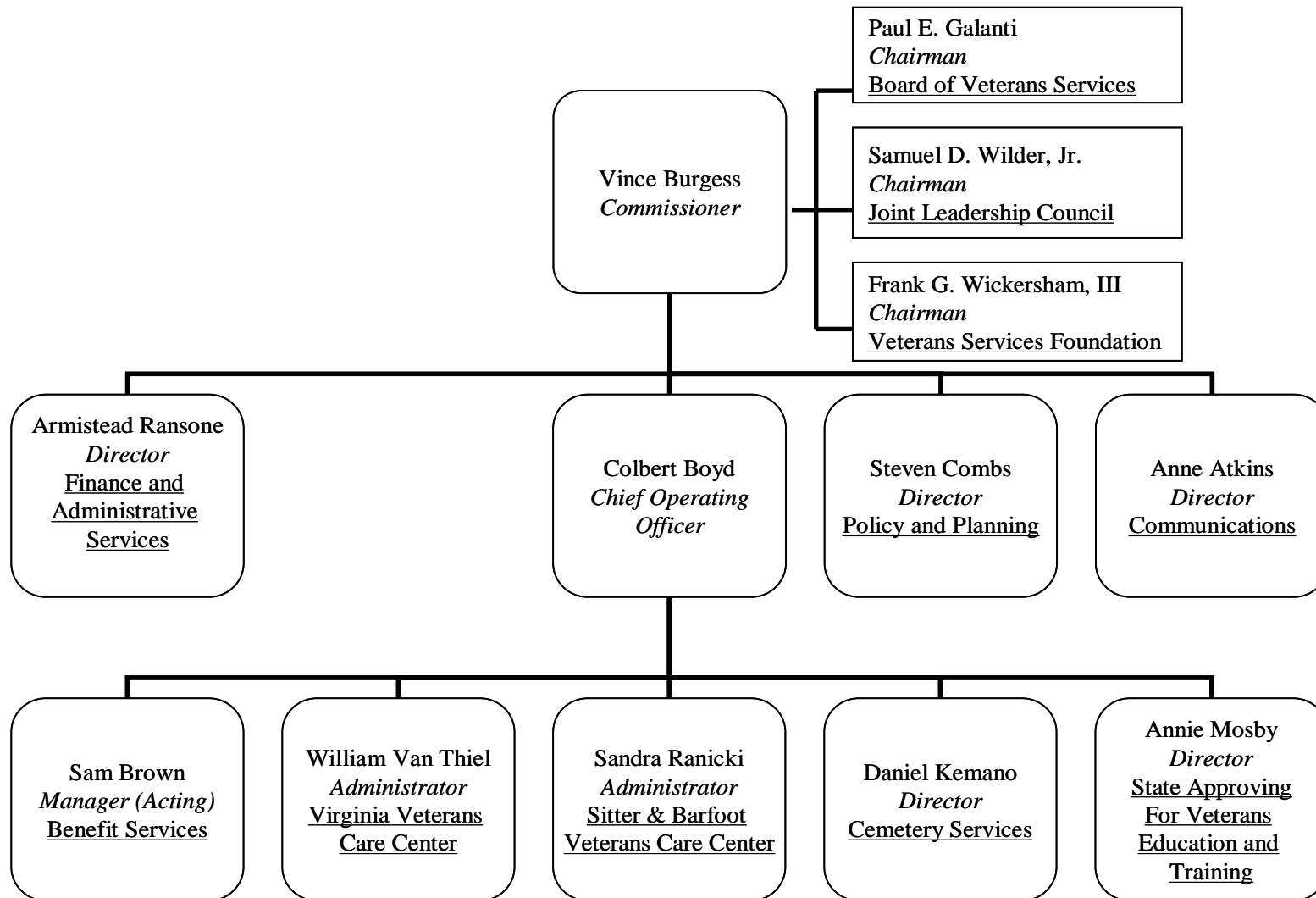
The Board of Veterans Services (BVS) is responsible for formulating policies, developing procedures, reviewing department budget submissions, and making recommendations for the efficient and effective delivery of veterans services, as well as studying all matters affecting the welfare of Virginia's veterans.

The Joint Leadership Council of Veterans Service Organizations (JLC) advises DVS on matters of concern to veterans and their families.

The Veterans Services Foundation (VSF) is responsible for administering the Veterans Services Fund and for working with the Department to identify additional revenue sources for veterans programs.

The Veterans Care Center Advisory Committee advises the DVS Commissioner on matters pertaining to the administration of veterans care centers.

**Virginia Department of Veterans Services
Organization as of December 1, 2007**



Benefits Services

Mission

Assist Virginia's veterans and their dependents in obtaining benefits to which they are entitled under federal, state, and local laws.

Services and Organization

The federal government, through the United States Department of Veterans Affairs (USDVA) provides many benefits and services to those who served this nation in times of war and peace. Among these benefits and services are compensation for service-connected disability or death, income-based pensions, medical care, educational benefits, and home purchase assistance.

The Benefits Services section of the Virginia Department of Veterans Services (DVS) assists Virginia's veterans in gaining access to the benefits to which they are entitled through their service and sacrifice. While veterans service representatives (claims agents) are able to help many veterans over the phone, much of the assistance takes place at a field office or itinerant contact point. During these face-to-face contacts, veterans service representatives guide veterans through the myriad steps required to file a USDVA claim.

Developing a solid claim is more than a matter of completing the application. Supporting documents, sometimes decades old, must be retrieved from federal and state archives. The process is labor-intensive. A veterans service representative may spend an hour visiting with a veteran, but then spend 20 hours or more in finding records and completing the necessary supporting documentation. All of this hard work pays off if the USDVA approves the claim.

In FY2007 the Benefit Services section operated 22 field offices across the Commonwealth, in Accomac, Alexandria, Big Stone Gap, Bristol, Cedar Bluff, Charlottesville, Danville, Fairfax, Front Royal, Hampton, Lynchburg, Norfolk (2 offices), Quantico, Richmond, Roanoke, South Hill, Staunton, and Wytheville, plus offices co-located at each of the three VA Medical Centers in Virginia (McGuire, Salem and Hampton VAMCs).

The field offices were staffed by 28 full-time veterans service representatives, 13 full-time administrative assistants, and 3 part-time administrative assistants. Service areas are detailed in Table 1. The number of veterans service representatives and administrative assistants assigned to each field office is dependent on available resources and the number of veterans expected to be served.

In addition to serving veterans at the 22 field offices, the Benefit Services section also assists veterans at itinerant service points. The itinerant service points are, in effect, satellite field offices, with space provided by federal, state, and local government agencies and private organizations, including veterans service organizations like the Veterans of Foreign Wars. Because the organizations often provide the space at no charge, the itinerant service points allow DVS to reach and serve a greater number of veterans without incurring the cost of fixed operating facilities. Beginning July 1, 2005, all veterans service representatives were required to provide itinerant service at least one day per week.

The Benefit Services section is headed by the benefits services manager, who is assisted by regional managers who provide guidance and supervision to the field offices. The benefits services manager and regional managers also provide assistance during the claims appeals process. Finally, the Benefit Services section maintains an office in Washington, D.C. to represent clients before the Board of Veterans Appeals, part of the United States Department of Veterans Affairs.

Resources

	FY06	FY07	FY08
Budget	\$2,473,206	\$3,213,454	\$3,415,343
Positions	51	58	69

Activities

The Benefits Services section helped Virginia veterans file 21,303 claims in FY07, of which 65 percent were approved by the USDVA. If approved by the USDVA, a claim results in two types of award – monthly compensation based on the level of disability and a retroactive award back to the claim date.

While most retroactive (or retro) awards are relatively small, some exceed \$50,000 and can even reach the six-figure level. Sixty-one retro awards exceeded \$50,000 in FY07, for a total value of \$5.25 million. Fourteen awards exceeded \$100,000 for a total value of \$2.26 million. In FY07, a total of 1,296 retro awards for Virginia veterans were approved by the USDVA, representing almost \$22 million. Claims activity is shown in Tables 2 and 3.

Veterans service representatives and administrative assistants had 135,378 contacts with Virginia veterans in FY07. This number does not reflect the number of individual veterans served, since individual veterans often have multiple contacts with veterans service representatives, but gives an indication of the level of contact the section has with veterans. Sixty-two percent of the contacts took place over the phone, 32 percent occurred in one of the 22 field offices, with the remaining six percent taking place at one of the itinerant service points. Contact activity is shown in Tables 4 and 5.

As noted above, helping a veteran file a claim can be a lengthy process. Thirty minutes spent with a veteran during a walk-in visit may translate to several hours spent gathering necessary documents and completing required forms. Though some phone contacts can be handled rather quickly, such as a referral to another office or source of information, most involve questions about pending claims or possible entitlement to benefits. While inquires into the status of pending claims may require little time with the client, significant time is often required to obtain a response from the U.S. Department of Veterans Affairs. A five-minute phone conversation with a veteran can easily translate into thirty minutes or more spent obtaining the information the veteran has requested.

If a phone call concerns possible entitlement to federal benefits, the complexity of benefit eligibility rules means that a veterans service representative can spend significant time on the phone with a client obtaining the information necessary to determine potential eligibility. Frequently, a veterans service

representative will complete the entire claims process over the phone and through the mail, as some clients suffer from poor health or lack the transportation needed to reach a field office or itinerant point.

A comparison between FY06 and FY07 shows an increase in client contacts in FY07--130,320 in FY06 versus 135,378 in FY07, a four percent increase. The number of claims filed on behalf of Virginia's veterans also increased in FY07, with 21,303 claims filed in FY07 versus 20,429 filed in FY06, more than a four percent increase. The number of employees dedicated to Benefit Services increased from 53 employees in FY06 to 69 in FY07.

In FY07, veterans service representatives visited approximately 71 different itinerant locations, making 7,682 contacts, compared with 7,240 contacts made at itinerant points in FY06, more than a six percent increase.

Table 1**Benefit Services Section Field Office Service Area – FY2007**

<u>Field Office</u>	<u>Counties Served</u>	<u>Cities Served</u>
Accomac	Accomack and Northampton	
Alexandria	Arlington and Fairfax	Alexandria
Big Stone Gap	Dickenson, Lee, Scott and Wise	Norton
Bristol	Russell, Scott, Smyth, and Washington; Sullivan, TN	Bristol, VA and Bristol, TN
Cedar Bluff	Buchanan, Russell, and Tazewell	
Charlottesville	Albemarle, Culpeper, Fluvanna, Greene, Louisa, Madison, Nelson, and Orange	Charlottesville
Danville	Henry, Patrick, and Pittsylvania	Danville
Fairfax	Fairfax and Loudoun	Fairfax, Falls Church, Manassas and Manassas Park
Front Royal	Clarke, Fauquier, Frederick, Page, Rappahannock, Shenandoah, and Warren	Winchester
Hampton and Hampton VA Medical Center	Charles City, Gloucester, Isle of Wight, James City, Mathews, and York	Hampton, Newport News, Poquoson, and Williamsburg
Lynchburg	Amherst, Appomattox, Bedford, Buckingham and Campbell	Bedford and Lynchburg

McGuire VA Medical Center (Richmond)	Amelia, Chesterfield, Cumberland, Dinwiddie, Essex, Goochland, Hanover, Henrico, King and Queen, King William, Lancaster, New Kent, Middlesex, Powhatan, Prince George, Richmond, and Surry	Colonial Heights, Hopewell, Petersburg, and Richmond
Norfolk	Southampton and Sussex	Chesapeake, Franklin, Norfolk, Portsmouth, Suffolk, and Virginia Beach
Quantico	Arlington, Caroline, King George, Northumberland, Prince William, Spotsylvania, Stafford, and Westmoreland	Fredericksburg
Richmond	Amelia, Chesterfield, Cumberland, Dinwiddie, Essex, Goochland, Hanover, Henrico, King and Queen, King William, Lancaster, New Kent, Middlesex, Powhatan, Prince George, Richmond, and Surry	Colonial Heights, Hopewell, Petersburg and Richmond
Roanoke	Alleghany, Botetourt, Buchanan, Craig, Floyd, Franklin, Henry, Patrick, Pulaski, and Roanoke	Covington, Martinsville, and Roanoke
Salem VA Medical Center	Henry, Patrick, Moneta	Martinsville, Salem
South Hill	Brunswick, Charlotte, Greensville, Halifax, Lunenburg, Mecklenburg, Nottoway, Prince Edward, Southampton, and Sussex	Emporia
Staunton	Augusta, Bath, Highland, Rockbridge, and Rockingham	Buena Vista, Harrisonburg, Lexington, Staunton, and Waynesboro

**Tidewater
(Norfolk)**

Southampton and Sussex

Chesapeake, Franklin, Norfolk,
Portsmouth, Suffolk, and
Virginia Beach

Wytheville

Bland, Carroll, Giles, Grayson,
Montgomery, Pulaski, Smyth
and Wythe

Galax, Radford, and Wytheville

Table 2
Claims Submitted to USDVA - Sorted by Month

MONTH	NEW			REOPEN			21-8416			EVR			TOTAL CLAIMS		
	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07
JULY	1,035	1,167	1,326	333	208	365	60	16	37	26	7	14	1,454	1,398	1,742
AUGUST	1,094	1,208	1,393	232	300	380	26	15	16	22	7	13	1,374	1,530	1,802
SEPTEMBER	1,148	1,065	1,324	258	239	343	24	19	23	11	6	10	1,441	1,329	1,700
OCTOBER	1,117	1,136	1,348	217	227	360	26	18	17	9	21	16	1,369	1,402	1,741
NOVEMBER	1,046	1,057	1,181	213	284	315	23	38	23	11	15	14	1,293	1,394	1,533
DECEMBER	923	1,026	1,014	209	255	292	59	42	34	20	15	8	1,211	1,338	1,348
JANUARY	1,203	1,462	1,301	297	345	358	417	532	428	221	280	231	2,138	2,619	2,318
FEBRUARY	1,149	1,331	1,181	273	336	320	353	393	320	236	230	190	2,011	2,290	2,011
MARCH	1,412	1,546	1,453	273	380	347	105	154	65	40	58	65	1,830	2,138	1,977
APRIL	1,198	1,356	1,232	218	262	328	63	69	55	28	28	17	1,507	1,715	1,632
MAY	1,162	1,213	1,376	242	280	330	26	28	32	15	11	10	1,445	1,532	1,748
JUNE	1,201	1,326	1,378	252	365	340	17	37	23	7	14	10	1,477	1,742	1,751
TOTALS	13,688	14,893	15,507	3,017	3,481	4,078	1,199	1,361	1,073	646	692	598	18,550	20,427	21,303

Terms used in table:

New: A first-time claim.

Reopen: Reopen a denied claim or make a modification to an existing claim, such as for a new medical condition or disability or an increase in an established disability.

21-8416: The VA Form 21-8416 is used to report a claimant's medical expenses for the previous year, so that the claimant may claim partial reimbursement for medical expenses. Veterans service representatives frequently assist claimants in completing this form.

EVR: Eligibility Verification Report. Submitted annually by some pension recipients to verify income and continuing eligibility. Veterans service representatives frequently assist pension recipients in completing this form.

Table 3
Claims Submitted to USDVA - Sorted by Field Office

MONTH	NEW			REOPEN			21-8416			EVR			TOTAL CLAIMS		
	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07
ACCOMAC	375	381	377	2	3	25	41	34	27	27	35	15	445	453	446
ALEXANDRIA		110	357		69	263		5	6		0	0		184	627
BIG STONE GAP	1,080	609	729	156	86	107	131	67	65	60	44	29	1,427	806	922
BRISTOL	736	1,201	1,024	69	57	70	103	154	137	54	75	87	962	1,487	1,334
CEDAR BLUFF	957	1,105	953	0	120	306	69	99	83	38	49	45	1,064	1,373	1,394
CHARLOTTESVILLE	311	375	292	107	19	25	65	59	56	32	31	35	515	484	411
DANVILLE		463	371		31	19		27	35		22	35		543	459
FAIRFAX		53	128		16	37		0	2		0	3		68	167
FRONT ROYAL	534	737	465	42	244	98	12	12	21	21	18	14	609	1,009	599
HAMPTON VAMC			60			16			1			0			76
HAMPTON	1,791	1,771	1,638	598	633	683	41	41	23	23	21	18	2,453	2,465	2,362
LYNCHBURG	374	446	489	27	39	51	169	162	132	82	76	65	652	723	741
MCGUIRE VAMC		251	333		215	453		2	0		3	10		471	797
NORFOLK			213			31			1			0			245
PORTSMOUTH			0			0			0			0			0
QUANTICO	716	779	439	121	133	89	9	18	3	16	15	2	862	945	532
RICHMOND	758	496	329	229	249	217	55	37	29	17	11	16	1,059	793	594
ROANOKE	561	455	500	254	89	115	73	78	16	43	47	9	931	669	640
SALEM VAMC			74			31			4			0			110
SOUTH HILL	502	357	430	112	128	132	137	128	116	87	79	79	838	730	758
STAUNTON	949	949	1,014	152	144	150	195	196	172	92	77	69	1,388	1,791	1,418
TIDEWATER	4,021*	4,127*	4,440	1,148*	1,182*	1,142	99*	121*	78	54*	64*	42	5,322*	5,008*	5,705
WYTHEVILLE	23	228	852	0	24	18	0	121	66	0	34	25	23	394	966
TOTALS	13,688	14,893	15,507	3,017	3,481	4,078	1,199	1,361	1,073	646	692	598	18,550	20,427	21,303

* Includes claims activity for the Norfolk Benefits Office

Terms used in table:

New: A first-time claim.

Reopen: Reopen a denied claim or make a modification to an existing claim, such as for a new medical condition or disability or an increase in an established disability.

21-8416: The VA Form 21-8416 is used to report a claimant's medical expenses for the previous year, so that the claimant may claim partial reimbursement for medical expenses. Veterans service representatives frequently assist claimants in completing this form.

EVR: Eligibility Verification Report. Submitted annually by some pension recipients to verify income and continuing eligibility. Veterans service representatives frequently assist pension recipients in completing this form.

Table 4
Client Contacts - Sorted by Month

MONTH	WALK-INS			PHONE			ITINERANT POINTS			TOTAL CONTACTS		
	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07
JULY	2,910	2,590	3,828	6,976	5,952	7,802	347	432	837	10,233	8,974	12,467
AUGUST	2,935	3,586	3,751	6,947	6,875	7,728	306	309	444	10,188	10,770	11,923
SEPTEMBER	2,904	2,715	3,572	5,976	6,693	6,981	287	398	377	9,167	9,806	10,930
OCTOBER	2,895	2,925	3,898	5,835	6,542	7,101	321	622	548	9,051	10,089	11,547
NOVEMBER	2,620	2,689	3,228	6,344	5,989	7,010	252	648	310	9,216	9,326	10,548
DECEMBER	2,330	2,648	3,082	6,694	5,758	6,021	216	563	229	9,240	8,969	9,375
JANUARY	3,385	4,190	3,676	7,707	7,644	7,363	451	477	935	11,543	12,311	11,974
FEBRUARY	2,956	3,789	3,541	5,549	7,275	6,598	424	877	791	8,929	11,941	10,930
MARCH	3,083	4,274	4,061	7,270	8,261	7,172	432	778	723	10,785	13,313	11,901
APRIL	2,631	3,648	3,497	6,553	7,182	6,650	521	841	751	9,705	11,671	10,888
MAY	2,717	3,277	3,758	6,289	6,948	6,945	410	458	631	9,416	10,683	11,334
JUNE	2,786	3,828	3,731	6,408	7,802	6,724	429	837	1,106	9,623	12,467	11,561
TOTALS	34,152	40,159	43,623	78,548	82,921	84,095	4,396	7,240	7,682	117,096	130,320	135,378

Terms used in table:

Office Walk-Ins: Number of clients who visit a DVS field office

Phone: Number of phone calls received by DVS field offices

Itinerant Point: Number of clients who visit an itinerant service point

Table 5
Client Contacts - Sorted by Field Office

	WALK-INS			PHONE			ITINERANT POINTS			TOTAL CONTACTS		
	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07
ACCOMAC	1,032	1,083	1,136	3,283	3,314	3,077	61	183	196	4,376	4,582	4,409
ALEXANDRIA		303	914		756	1,871		73	288		1,130	3,030
BIG STONE GAP	3,721	1,552	2,270	3,261	2,849	3,261	0	260	294	6,982	4,661	5,825
BRISTOL	1,613	2,319	2,142	2,379	3,193	3,407	0	111	107	3,992	5,623	5,656
CEDAR BLUFF	2,613	2,661	2,835	1,993	2,926	2,923	0	180	186	4,606	5,767	5,944
CHARLOTTESVILLE	994	1,274	1,239	784	2,695	2,267	0	100	88	1,778	4,069	3,594
DANVILLE		1,332	1,241		1,270	1,222		208	234		2,810	2,697
FAIRFAX		85	213		248	877		37	133		370	1,223
FRONT ROYAL	717	1,615	1,141	1,051	2,250	1,759	0	0	198	1,768	3,865	3,098
HAMPTON VAMC			211			323			0			236
HAMPTON	4,706	4,329	4,523	6,701	5,879	2,793	220	320	230	11,627	10,528	7,844
LYNCHBURG	1,411	1,359	1,386	4,811	3,446	3,357	126	291	239	6,348	5,096	4,982
MCGUIRE VAMC		1,443	2,623		465	1,864		22	43		1,930	4,573
NORFOLK			314			232			40			586
PORTSMOUTH			0			0			0			0
QUANTICO	1,025	758	1,020	3,753	4,016	3,122	202	440	178	4,980	5,214	4,320
RICHMOND	1,930	2,345	1,730	5,228	5,426	8,606	648	1,057	983	7,806	8,828	11,319
ROANOKE	1,439	873	1,269	5,624	4,455	4,547	78	228	159	7,141	5,556	5,965
SALEM VAMC			201			351			63			615
SOUTH HILL	934	747	688	1,563	1,836	1,715	489	490	386	2,986	3,073	2,789
STAUNTON	2,750	2,837	2,741	2,993	3,272	3,314	456	431	534	6,199	6,540	6,589
TIDEWATER	9,196*	11,601*	12,302	35,097*	31,267*	31,436	2,116*	2,519*	3,048	46,409*	45,417*	46,774
WYTHEVILLE	61	1,643	1,484	27	3,358	1,771	0	290	55	88	5,291	3,310
TOTALS	34,152	40,159	43,623	78,548	82,921	84,095	4,396	7,240	7,682	117,096	130,292	135,378

* Includes contact activity for the Norfolk Benefits Office

Terms used in table:

Walk-Ins: Number of clients who visit a DVS field office

Phone: Number of phone calls received by DVS field offices

Itinerant Point: Number of clients who visit an itinerant service point

Cemetery Services

Mission

Provide a dignified final resting place for veterans and eligible dependents at the Virginia Veterans Cemetery in Amelia and the Albert G. Horton, Jr. Memorial Veterans Cemetery in Suffolk.

Services and Organization

The Cemetery Services section of the Virginia Department of Veterans Services (DVS) operates Virginia's two state-owned veterans cemeteries – the Virginia Veterans Cemetery and the Albert G. Horton, Jr. Memorial Veterans Cemetery. The cemeteries provide veterans and eligible family members with a dignified and honorable final resting place.

The cemeteries accommodate three types of interments: in-ground burial of casketed remains, in-ground inurnment of cremated remains, and above ground inurnment of cremated remains in a columbarium. Cremated remains are inurned in the same manner and with the same honors as casketed remains.

In-ground burials of casketed remains at the Virginia Veterans Cemetery are marked with upright marble headstones, with one garden section having flat granite markers. At the Albert G. Horton, Jr. Memorial Veterans Cemetery, casketed remains are marked with upright granite headstones. Ground inurnments are marked with flat granite markers at both cemeteries, while above ground (columbarium) inurnments are marked by an inscribed marble niche cover at the Virginia Veterans Cemetery and by an inscribed granite niche cover at the Albert G. Horton, Jr. Memorial Veterans Cemetery.

Any member of the U.S. armed forces who dies on active duty, anyone retired from military service, or any veteran discharged under conditions other than dishonorable or undesirable is eligible for interment in a Virginia veterans cemetery provided that they are a legal resident of Virginia at the time of their death, or were a legal resident of Virginia at the time of initial entry into the armed forces. Also eligible for burial, if they meet certain requirements, are members of the reserve forces and the National Guard, commissioned officers of the National Oceanic and Atmospheric Administration, some American merchant mariners, and some others.

Dependents, including the legal spouse (or widow or widower) and/or an unmarried minor child under age 21, are also eligible to be buried in a Virginia veterans cemetery. In addition, an unmarried adult child, who, before the age of 21, became permanently incapable of self-support because of physical or mental disability, may also be interred.

There is no charge for the gravesite/columbarium or necessary interment services for a qualified veteran at a Virginia veterans cemetery. The Commonwealth furnishes the gravesite, opens and closes the grave, orders a grave marker from the U.S. Department of Veterans Affairs (USDVA), places the grave marker, and furnishes perpetual care of the gravesite without charge. The veteran and his or her dependents, however, must purchase a casket and a vault or grave liner for in-ground

burials, or a plastic, stone (marbleized) or metal urn for cremated remains. Wooden urns are acceptable for above ground placement.

For each veteran buried in a state-operated veterans cemetery, DVS receives a \$300 reimbursement, called a plot allowance, from the USDVA. Dependents are charged an amount equal to the USDVA plot allowance. These monies, representing from 25 to 30 percent of the section's annual budget, are used to fund both current operations and maintenance projects. The bulk of the section's budget comes from the Commonwealth's General Fund.

To eliminate any administrative difficulties that may occur at the time of death, veterans are encouraged to complete a pre-application for burial in a Virginia veterans cemetery. While DVS will not assign a specific gravesite when a pre-application is submitted, the pre-application process ensures that all required paperwork has been submitted and verified. At present, 1,312 pre-applications are on file at the Virginia Veterans Cemetery, while the Albert G. Horton, Jr. Memorial Veterans Cemetery has 1,860 pre-applications on file. The pre-application process is free of charge.

The Cemetery Services section is led by the cemeteries director, who also serves as the on-site superintendent of the Albert G. Horton, Jr. Memorial Veterans Cemetery. Administrative duties at the Albert G. Horton, Jr. Memorial Veterans Cemetery are accomplished by two full-time administration coordinators. Plans are underway for the cemetery superintendent position to be filled in FY08.

While department staffing guidelines call for a groundskeeping staff of six, at present the cemetery groundskeeping staff consists only of a grounds supervisor and four funeral team leaders. A sixth grounds worker will be hired in FY08. During peak periods, the cemetery superintendent and administrative staff provide assistance to the groundskeeping staff. Finally, there is one full-time mechanic on the cemetery staff, who maintains the equipment at both cemeteries.

The Virginia Veterans Cemetery, located southwest of Richmond in Amelia County, has a staff of five. A full-time superintendent and a full-time administration coordinator are responsible for all administrative duties. The grounds staff consists of a full-time grounds supervisor and two full-time funeral team leaders.

Resources

	FY06	FY07	FY08
Budget	\$441,502	\$676,395	\$797,060
Positions	9	14	16

Activities

The Virginia Veterans Cemetery was dedicated in May of 1997, with the first burial service conducted on June 17, 1997. The Virginia Veterans Cemetery currently has 28 acres developed with an additional 99 acres – representing three additional phases – available for future development. The average annual burial/inurnment rate at the Virginia Veterans Cemetery has been approximately 150 burials per year, with 231 burials performed in FY06 and 228 burials in FY07. If the average burial rate remains between 200 and 250 burials per year, the Virginia Veterans Cemetery should be in full operation for another 80 years.

Phase One of the Albert G. Horton, Jr. Memorial Veterans Cemetery was dedicated on November 1, 2004, and encompasses 29 of 74 acres available on this site. The first burial service was conducted on December 13, 2004. Construction of three additional phases will be completed as needed. The annual burial/inurnment rate at the Albert G. Horton, Jr. Memorial Veterans Cemetery has averaged 500 burials per year. If this rate remains relatively constant, the Albert G. Horton, Jr. Memorial Veterans Cemetery should be in full operation for approximately sixty years.

Both cemeteries host Memorial Day services sponsored by local veterans groups. The cemeteries hold Open House events on Veterans Day designed to inform veterans, family members, friends, and members of the public of the burial benefits available to veterans and eligible family members. Cemetery tours and assistance with completing pre-application documents are provided during business hours, Monday, through Friday. The cemeteries are staffed on holidays (Easter, Mother's Day, Father's Day, Memorial Day, and Veterans Day) to assist families who may be visiting a loved one's gravesite.

The Virginia Veterans Cemetery performed 228 burials in FY07, while the Albert G. Horton, Jr. Memorial Veterans Cemetery performed 510 burials in FY07. Table 7 shows burial activity from FY97 through FY07. Also included are burial figures for the first four months of FY08.

Table 7: Cemetery Burials FY1997 – FY2007

Virginia Veterans Cemetery

	FY97	FY98	FY99	FY00	FY01	FY02	FY03	FY04	FY05	FY06	FY07	FY08
July	N/A	5	6	8	9	13	16	14	18	16	26	17
August	N/A	9	8	12	13	15	9	14	17	16	17	13
September	N/A	11	3	9	5	17	10	10	16	20	17	15
October	N/A	5	8	9	13	19	14	23	17	15	22	25
November	N/A	7	7	8	6	13	18	11	20	18	22	
December	N/A	14	7	7	8	16	16	19	18	14	18	
January	N/A	7	8	10	12	11	19	17	16	19	20	
February	N/A	9	6	12	12	11	13	15	11	25	18	
March	N/A	12	9	11	12	18	18	13	16	21	19	
April	N/A	9	8	12	10	12	8	15	12	23	18	
May	N/A	3	9	17	12	16	12	13	11	23	13	
June	2	4	12	9	9	14	16	15	16	21	18	
Total	2	95	91	124	121	175	169	179	188	231	228	70

Albert G. Horton, Jr. Memorial Veterans Cemetery, Suffolk

	FY05	FY06	FY07	FY08
July	N/A	42	40	54
August	N/A	40	39	31
September	N/A	39	32	35
October	N/A	28	29	49
November	N/A	35	37	
December	34	37	41	
January	47	36	48	
February	29	51	47	
March	40	43	58	
April	44	40	38	
May	28	46	50	
June	33	41	51	
Total	255	478	510	169

State Approving Agency for Veterans Education and Training

Mission

Enable access to post-secondary education opportunities for veterans and eligible family members.

Services and Organization

Operating under a contract with the U.S. Department of Veterans Affairs, the State Approving Agency for Veterans Education and Training (SAA) reviews, evaluates, and approves post-secondary education and training programs offered by educational institutions, businesses, and industries in the Commonwealth of Virginia. After a program has been approved, veterans and other persons eligible for benefits under Titles 38 and 10 of the U.S. Code may enroll and receive financial assistance from the U.S. Department of Veterans Affairs. The SAA ensures compliance with state and federal regulations through on-site visits to active institutions and establishments.

The SAA has a secondary mission of making veterans and eligible family members aware of veterans education and training programs. Outreach activities are conducted at job fairs, military bases in the Commonwealth, and at veterans events hosted by DVS.

With just seven full-time employees, the SAA is the smallest section in DVS, but has responsibility for providing supervision and support for 780 education and training institutions. While some institutions only offer one program, in many cases an institution offers multiple programs, each requiring separate approval. The institution with the most approved programs is George Mason University with 360 programs.

Resources

	FY06	FY07	FY08
Budget	\$473,194	\$603,936	\$617,619
Positions	5	7	7

Activities

As part of its mission to review, evaluate, and approve post-secondary education and training programs, the SAA performs two types of approval actions – program approval and other approval. Program approval actions deal with initial or revised approval of an educational program, while other approval actions focus on revisions to a previously approved publication or document containing program or policy information.

The SAA performed 4,710 program approval actions between October 2006 and September 2007, with 4,311, or 91 percent, being approved, and 399 being disapproved. During the same period,

SAA handled 876 other approval actions, of which 772, or 88 percent, were approved and 104 were disapproved. Table 8 shows program approval actions, while Table 9 details other approval actions. Data is presented for federal fiscal year 2007 since SAA activity is tracked on that basis.

A key element of the review, evaluation, and approval process is the supervisory visit, in which an SAA official visits the educational institution and meets with key staff members. SAA's contract with the USDVA called for visits to 296 (80 percent) of the 370 active institutions in FFY07. The SAA exceeded this goal, making supervisory visits to 326 facilities (88 percent). Supervisory visit activity is detailed in Table 10.

Table 8
State Approving Agency for Veterans Education and Training
Program Approval Actions: FFY05, FFY06, FFY07

	IHL			NCD			APP			OJT			LIC/CERT		
Oct - Dec	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006
Number of Applications Received	1,053	1,197	1,148	358	558	560	1	6	6	3	8	4	0	0	2
Number Approved	1,052	1,163	1,078	338	464	502	1	6	6	3	8	4	0	0	2
Number Disapproved	1	34	70	20	94	58	0	0	0	0	0	0	0	0	0
Percentage of Applications Approved	99.9%	97%	93.9%	94%	83%	89.6%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%

	IHL			NCD			APP			OJT			LIC/CERT		
Jan - Mar	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	682	526	409	565	251	134	1	6	6	2	7	4	0	0	0
Number Approved	669	464	377	539	225	88	1	6	6	2	6	4	0	0	0
Number Disapproved	13	62	32	26	26	46	0	0	0	0	1	0	0	0	0
Percentage of Applications Approved	98%	88%	92.2%	95%	90%	65.7%	100%	100%	100%	100%	85%	100%	N/A	N/A	N/A

	IHL			NCD			APP			OJT			LIC/CERT		
Apr - Jun	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	544	436	509	513	614	417	1	2	0	8	12	0	0	12	3
Number Approved	496	402	491	443	534	396	1	2	0	8	12	0	0	12	3
Number Disapproved	48	34	18	70	80	21	0	0	0	0	0	0	0	0	0
Percentage of Applications Approved	91%	92%	96.5%	86%	87%	95%	100%	100%	N/A	100%	100%	N/A	N/A	100%	100%

	IHL			NCD			APP			OJT			LIC/CERT		
Jul - Sep	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	521	464	839	363	485	659	6	2	10	4	11	0	3	35	0
Number Approved	498	448	769	337	450	575	6	2	10	4	11	0	3	34	0
Number Disapproved	23	16	70	26	35	84	0	0	0	0	0	0	0	1	0
Percentage of Applications Approved	96%	97%	91.7%	93%	93%	87.3%	100%	100%	100%	100%	100%	N/A	100%	97%	N/A

	IHL			NCD			APP			OJT			LIC/CERT		
	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07
Totals for Federal Fiscal Year															
Number of Applications Received	2,800	2,623	2,905	1,799	1,908	1,770	10	16	22	17	38	8	3	47	5
Number Approved	2,715	2,477	2,715	1,657	1,673	1,561	10	16	22	17	37	8	3	46	5
Number Disapproved	85	146	190	142	235	209	0	0	0	0	1	0	0	1	0
Percentage of Applications Approved	97%	94%	93.5%	92%	88%	88.2%	100%	100%	100%	100%	97%	100%	100%	98%	100%

IHL = Institute of Higher Learning

NCD = Non-College Degree Program

APP = Apprenticeship Program

OJT = On the Job Training Program

LIC/CERT = Licensing/Certification Program

Table 9
State Approving Agency for Veterans Education and Training
Other Approval Actions: FFY05, FFY06, and FFY07

	IHL			NCD			APP			OJT			LIC/CERT		
Oct - Dec	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006
Number of Applications Received	108	370	63	71	125	55	6	6	23	36	13	69	0	2	2
Number Approved	99	354	52	70	111	46	6	6	23	34	13	69	0	2	2
Number Disapproved	9	16	11	1	14	9	0	0	0	2	0	0	0	0	0
Percentage of Applications Approved	92%	96%	82.5%	99%	89%	83.6%	100%	100%	100%	94%	100%	100%	N/A	100%	100%
Jan - Mar	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	83	51	29	107	49	43	7	5	22	51	9	0	0	0	0
Number Approved	81	43	25	98	43	36	7	5	22	51	8	0	0	0	0
Number Disapproved	2	8	4	9	6	7	0	0	0	0	1	0	0	0	0
Percentage of Applications Approved	98%	98%	86.2%	92%	92%	83.7%	100%	100%	100%	100%	89%	N/A	N/A	N/A	N/A
Apr - Jun	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	109	70	87	111	86	72	17	2	13	44	15	53	3	4	3
Number Approved	101	56	52	102	68	66	17	2	13	44	15	53	0	4	3
Number Disapproved	8	14	35	9	18	6	0	0	0	0	0	0	3	0	0
Percentage of Applications Approved	93%	80%	59.8%	92%	79%	91.7%	100%	100%	100%	100%	100%	100%	0%	100%	100%
Jul - Sep	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Applications Received	76	51	75	103	84	117	9	9	39	25	52	62	2	3	0
Number Approved	72	42	64	92	70	96	9	9	39	25	52	62	2	3	0
Number Disapproved	4	9	11	10	14	21	0	0	0	0	0	0	0	0	0
Percentage of Applications Approved	95%	82%	85.3%	90%	83%	82.1%	100%	100%	100%	100%	100%	100%	100%	100%	N/A

	IHL			NCD			APP			OJT			LIC/CERT		
	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07
Totals for Federal Fiscal Year	05	06	07	05	06	07	05	06	07	05	06	07	05	06	07
Number of Applications Received	376	542	254	392	344	287	39	22	155	134	89	184	6	9	5
Number Approved	353	495	193	363	292	244	39	22	155	132	88	184	2	9	5
Number Disapproved	23	47	61	29	52	43	0	0	0	2	1	0	3	0	0
Percentage of Applications Approved	94%	94%	76%	93%	93%	85%	100%	100%	100%	99%	99%	100%	40%	100%	100%

IHL = Institute of Higher Learning

NCD = Non-College Degree Program

APP = Apprenticeship Program

OJT = On the Job Training Program

LIC/CERT = Licensing/Certification Program

Table 10
State Approving Agency for Veterans Education and Training
Supervisory Visits: FFY05, FFY06, and FFY07

	IHL			NCD			APP			OJT			LIC/CERT		
Oct - Dec	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006
Number of Visits	4	6	35	6	11	9	0	2	4	1	1	3	N/A	N/A	N/A
	IHL			NCD			APP			OJT			LIC/CERT		
Jan - Mar	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Visits	33	33	13	31	19	18	6	6	6	3	1	13	N/A	N/A	N/A
	IHL			NCD			APP			OJT			LIC/CERT		
Apr - Jun	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Visits	63	94	81	41	52	32	11	5	9	26	23	19	N/A	N/A	N/A
	IHL			NCD			APP			OJT			LIC/CERT		
Jul - Sep	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007	2005	2006	2007
Number of Visits	47	36	40	59	27	21	3	5	18	13	6	5	N/A	N/A	N/A
	IHL			NCD			APP			OJT			LIC/CERT		
Totals for Federal Fiscal Year	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07	FFY 05	FFY 06	FFY 07
Number of Visits	147	169	169	137	109	80	20	18	37	43	31	40	347	327	326

IHL = Institute of Higher Learning
 NCD = Non-College Degree Program
 APP = Apprenticeship Program
 OJT = On the Job Training Program
 LIC/CERT = Licensing/Certification Program

Virginia Veterans Care Center

Mission

Provide affordable, high quality, and comprehensive nursing and domiciliary care to Commonwealth of Virginia veterans residing in the Virginia Veterans Care Center.

Services and Organization

Opened on Veterans Day, 1992, the Virginia Veterans Care Center (VVCC) provides state-of-the-art long-term health care for up to 240 veterans in 120 semi-private rooms. Of the facility's 240 beds, 180 are dedicated as skilled nursing care beds, including 60 dedicated to the care of Alzheimer's patients. There are 60 beds serving assisted-living (domiciliary care) patients.

The Care Center provides on-site physical therapy, respiratory therapy, and podiatry care, as well as many other ancillary health care services. The Care Center also offers amenities such as a wheelchair accessible nature trail and deck, library, chapel, barbershop, billiard room, and wood working shop.

The Virginia Veterans Care Center is located adjacent to the Salem VA Medical Center, a 288-bed facility that provides a wide range of health care services.

With 254 authorized positions in FY07, the Care Center is by far the largest section in the Department of Veterans Services (DVS). The Care Center's largest operating divisions are the nursing, housekeeping, and dietary sections.

Volunteers play an important part in Care Center operations, assisting in many areas of patient care. The facility interacts with approximately 30 veterans service organizations (VSOs) and more than 120 individual volunteers, who, in addition to donating generously of their time, also donate both money and materials to improve the welfare of Care Center residents.

Working in conjunction with the VSOs and individual volunteers, staff members hold numerous activities for VVCC residents, including two carnivals for residents and their families. Attendance at each of the carnivals exceeds 400. The VVCC was pleased to again host a stop-over and dinner for more than 350 veterans on their way to Washington D.C. as part of the annual Run-For-The-Wall event. The bikers visited with VVCC residents, shared experiences, and showed off their bikes.

Each year, the VVCC conducts Operation Holiday Spirit (OHS) and raises approximately \$20,000 in donations to purchase Christmas gifts for all Care Center residents. As of November 30, 2006, OHS has a balance of approximately \$17,000. The funds will provide gifts and activities for the residents, and will ensure that every resident receives something for Christmas.

The Virginia Veterans Care Center receives no operating monies from the General Fund, operating entirely on revenues produced through caring for veterans. Revenue sources include Medicaid, Medicare, per diem payments from the U.S. Department of Veterans Affairs (USDVA), and private

funding sources. Per diem payments from the USDVA accounted for approximately 27 percent of VVCC revenues in FY07. Of the balance, 34 percent of the funding for care was provided by Medicaid, 26 percent by private funds, 12 percent by Medicare, and one percent by Hospice Medicare.

The Virginia Veterans Care Center provided 63,315 patient days of nursing care and 20,098 patient days of assisted living care to Virginia veterans in FY07. The patient day measure is used for billing purposes and to track occupancy. A patient day is one day spent by one patient in the Care Center. Dividing the number of patient days in a given month by the number of days in that month gives the average occupancy for the period in question.

Resources

	FY06	FY07	FY08
Budget	\$12,914,745	\$16,264,000	\$16,264,000
Positions	225	254	254

Activities

The Virginia Veterans Care Center had a 95 percent average occupancy level in FY07 – with an average of 96 percent of the nursing care and 92 percent of the assisted living beds being occupied. In FY07, the Care Center provided 915 (1.46 percent) more days of nursing care than in FY06 but 588 fewer days of assisted living care than in FY06 (2.84 percent). The annual occupancy rates for nursing care and assisted living units for FY06 were 95 percent and 94 percent, respectively. Table 11 shows Care Center patient days and occupancy levels.

In July 2006, the USDVA conducted the annual survey/inspection of all of the departments of the Virginia Veterans Care Center. The Care Center was found to be in full compliance with all 158 USDVA standards.

On November 6 through November 9, 2007, the Virginia Department of Health, Office of Licensure and Certification conducted the annual unannounced standard survey of the Virginia Veterans Care Center. Deficiencies cited ranged from level 1, “deficiencies that constitute no actual harm with potential for minimal harm,” to level 2, “deficiencies that constitute no actual harm with potential for more than minimal harm that is not immediate jeopardy.” There were no substandard quality of care citations.

This year the facility completed a \$1 million construction/renovation project as part of the USDVA’s State Home Construction Grant program. In addition to completion of a 3,600 square foot storage/maintenance building and in-house resident clothing laundry facility, the Care Center completed the first phase of a major face-lift that encompassed everything from flooring to wallpaper to furniture. This was the facility’s first major renovation since its construction in 1992.

Table 11
Virginia Veterans Care Center
Patient Days and average occupancy level - FY05, FY06, and FY07

MONTH	PATIENT DAYS NURSING			AVERAGE # OF NURSING BEDS OCCUPIED			OCCUPANCY LEVEL: NURSING			PATIENT DAYS ASSISTED LIVING			AVERAGE # OF ASSISTED LIVING BEDS OCCUPIED			OCCUPANCY LEVEL: ASSISTED LIVING		
	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07	FY05	FY06	FY07
July	5,303	5,034	5,362	171	162	173	95%	90%	96%	1,757	1,735	1,691	53	56	55	94%	93%	91%
August	5,292	5,053	5,419	171	163	175	95%	91%	97%	1,775	1,737	1,680	51	56	54	95%	93%	90%
September	4,984	4,980	5,184	161	166	173	92%	92%	96%	1,707	1,655	1,619	50	55	54	95%	92%	90%
October	5,207	5,275	5,456	168	170	176	93%	95%	98%	1,758	1,737	1,705	49	56	55	95%	93%	92%
November	5,002	5,245	5,261	161	175	175	93%	97%	97%	1,769	1,739	1,674	50	58	56	98%	97%	93%
December	5,279	5,327	5,404	170	172	174	95%	95%	97%	1,816	1,812	1,606	51	58	52	98%	97%	86%
January	5,191	5,341	5,473	167	172	177	93%	96%	98%	1,650	1,734	1,620	51	56	52	89%	93%	87%
February	4,792	4,957	4,874	155	177	174	95%	98%	97%	1,504	1,648	1,513	53	59	54	90%	98%	90%
March	5,263	5,415	5,387	170	175	174	94%	97%	97%	1,664	1,853	1,690	56	60	55	89%	100%	91%
April	4,984	5,244	5,120	161	175	171	92%	97%	95%	1,773	1,723	1,718	58	57	57	99%	96%	95%
May	5,099	5,415	5,237	164	175	169	91%	97%	94%	1,788	1,731	1,838	58	56	59	96%	93%	99%
June	4,896	5,114	5,138	158	170	171	91%	95%	95%	1,627	1,582	1,744	57	53	58	90%	88%	97%
Annual Maximum Capacity	65,700	65,700	65,700	180	180	180	100%	100%	100%	21,900	21,900	21,900	60	60	60	100%	100%	100%
Total Patient Days	61,292	62,400	63,315							20,588	20,686	20,098						
Monthly Average	5,108	5,200	5,276	168	171	173	93%	95%	96%	1,716	1,724	1,675	56	57	55	94%	94%	92%

Sitter & Barfoot Veterans Care Center

Services and Organization

DVS dedicated the state's second long-term care center for veterans on September 26, 2007. The Sitter & Barfoot Veterans Care Center (SBVCC), a single-level facility, features 160 single-occupancy rooms in three nursing units and is located on the campus of the McGuire VA Medical Center in Richmond. The care center has two 60-bed skilled nursing care units and one 40-bed Alzheimer's/dementia unit with enclosed courtyards.

The design of SBVCC reflects the latest in health care facility design and research. All rooms are single occupancy to limit the spread of infectious diseases and assure residents a level of privacy essential to their mental well-being. Each room has a floor-to-ceiling window, private bath and walk-in shower. The Alzheimer's unit features a wander garden and interconnected hallways allowing residents to move around freely in a safe and secure environment.

The facility will provide physical, occupational, and speech therapy, as well as therapeutic recreation, social and spiritual activities, and other amenities such as an on-site pharmacy, a fully equipped barber and beauty shop, activity and game rooms, resident lounges in each nursing unit, courtyards and an outdoor walking trail. Veterans may be admitted as long-term residents, or may also be admitted on a short-term basis for rehabilitation as they transition from hospital care to home.

The 114,000-square foot facility was built using a combination of funds provided by the U. S. Department of Veterans Affairs and the Commonwealth of Virginia. The U. S. Department of Veterans Affairs put up 57 percent of the construction cost and the state funded the remainder. Total cost for the facility was \$25,866,000.

To be eligible for admission, a veteran must have an honorable discharge and must be a Virginia resident at the time of admission. Veterans may also qualify if they were Virginia residents at the time they entered the military or if Virginia is listed as their official home of record on their military records.

The Care Center is named for two Congressional Medal of Honor recipients: Colonel Van T. Barfoot and Colonel Carl L. Sitter. Barfoot was awarded the Medal as a Sergeant in the U.S. Army for extraordinary heroism in the face of point blank fire on May 23, 1944, near Carano, Italy. Sitter received the Medal as a Captain in U.S. Marines where he was the commanding officer in action against enemy aggressor forces at Hagaru-ri, Korea, on November 29 and 30, 1950.

Resources

	FY07	FY08
Budget	\$787,100	\$11,630,339

Positions	233	233
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Activities

As of November 30, 2007, DVS was in the process of obtaining state licensure for the care center as well as Medicare, Medicaid, and U. S. Department of Veterans Affairs certifications.

Administrative Services

Mission

Support the delivery of quality services to Virginia’s veterans.

Services and Organization

The Administrative and Support Services section provides accounting, budget, human resources, information technology, payroll, contracting/procurement, and marketing and communications support services to the four service-delivery programs.

During FY07, the Administrative and Support Services section was comprised of 19 authorized positions. Fifteen of these positions are currently filled; five are part-time positions.

The functions of the two vacant positions (chief financial officer and procurement director) are currently being performed by part-time staff. An on-loan position and two of the part-time positions performed communications, outreach and web development functions for the agency. Since DVS is in growth mode, use of part-time personnel for some positions best fits the agency’s long range goals.

Resources

	FY06	FY07	FY08
Budget	\$1,522,085	\$1,778,034	\$2,662,373
Positions	18	19	19

Budget and Legislative Highlights

Veterans issues continued to enjoy the strong, bi-partisan support of the executive and legislative branches in Fiscal Year 2007. Budget and legislative highlights of FY07 include:

- The appropriation of \$583,000 to address the costs associated with acquisition of land for the Southwest Virginia Veterans Cemetery. The land is expected to be transferred from the Department of Defense to the Virginia Department of Veterans Services in Spring 2008
- The appropriation of \$1,000,000 for the Virginia Military Survivors and Dependents Education Program (VMSDEP) to provide a stipend of up to \$1,500 per student to offset the costs of room, board, books, and supplies. As of October 31, 2007, there were 523 students receiving VMSDEP benefits
- The strengthening of the Commonwealth’s veterans preference law in state hiring
- The appropriation of \$3.5 million in General Funds for the Virginia War Memorial Education Wing. The additional funding is contingent on \$2 million in private donations being raised
- The creation of a Service-Disabled, Veteran-Owned, Small Business (SDVOSB) program to facilitate the participation of businesses owned by special disabled veterans in state procurement transactions

Resources

	FY06	FY07	FY08
Budget	\$17,824,732	\$22,189,709	\$32,845,562
Positions	308	402	602

Program Highlights

Long-Term Care Feasibility Study: Quality Care They Earned

A study conducted by the Schroeder Center for Healthcare Policy at the College of William & Mary identified the need for up to three new veterans care centers to meet the projected long-term care needs of Virginia veterans. The report, titled "Long-Term Care Feasibility Study: Quality Care They Earned," identifies the need for as many as 600 additional long-term care beds for veterans.

The study, completed in September, examined current and future long-term care needs of Virginia veterans and makes recommendations for new facilities and services. The findings support placing veterans care centers in Northern Virginia, the Danville City area, and either Southwest Virginia, Southside Virginia, or the Eastern Shore. These locations would be near the largest veteran population centers currently without a veterans care center. Virginia has two existing centers in Roanoke and Richmond. A third is in the planning stages for Hampton. An expansion of the Richmond center is also in the planning stages.

In addition to the specific recommendations regarding future facilities, the study recommends that the state begin to develop a continuum of long-term care encompassing seven basic categories of services: extended inpatient care (nursing home, special unit and assisted living), acute inpatient care, ambulatory care, home care, outreach, wellness and housing. With approximately 728,000 veterans, Virginia's veterans population is the 11th largest in the nation.

Construction of new veterans care centers, as well as additions or improvements to existing centers, are financed through a federal/state partnership, with the U.S. Department of Veterans Affairs (USDVA) paying up to 65 percent of construction costs. The USDVA also provides per diem payments to offset the costs of caring for veterans in state veterans care centers. According to a USDVA formula, the Commonwealth of Virginia may apply for federal assistance for the construction and operation of facilities with up to 1,312 beds. With 400 beds already constructed – 240 in Richmond and 160 in Richmond – and another 200-300 beds planned for Hampton Roads and the future expansion of the Richmond care center, Virginia may apply for federal grant funding for care centers with an additional 600+ beds.

The planning districts with the largest number of veterans 65 years or older include Hampton Roads (47,681), Northern Virginia (41,654), Richmond Regional (27,146), Fifth (12,058), and West Piedmont (10,202). These five planning districts account for more than 60 percent of all veterans in the state aged 65 and older.

The USDVA estimated that there were 728,755 veterans in Virginia on September 30, 2007, of whom 229,314 – or 31 percent – were aged 65 and older. The USDVA forecasts that Virginia's veteran population will drop to 500,199 by 2033, of whom 216,571 – or 43 percent – will be aged 65 and older.

The report is available at www.wm.edu/publicpolicy/schroederhome.php.

Meeting the Memorial Needs of Virginia Veterans: An Analysis of Existing and Proposed Cemetery Sites

A study conducted by the Weldon Cooper Center for Public Service at the University of Virginia recommends that Virginia should establish the goal of placing a national or state veterans cemetery within 50 miles of at least 90 percent of its veteran population. The report, titled "Meeting the Memorial Needs of Virginia Veterans: An Analysis of Existing and Proposed Cemetery Sites" also recommends that the state plan for the future deactivation of Culpeper National Cemetery and that the state begin planning for a fourth state veterans cemetery in west-central Virginia to meet the long-term memorial needs of Virginia's veterans.

The study, completed in November, identifies Nelson County as the optimal location for a fourth state veterans cemetery. The Commonwealth of Virginia operates two state veterans cemeteries: the Virginia Veterans Cemetery, in Amelia, and the Albert G. Horton, Jr. Memorial Veterans Cemetery, in Suffolk. A third state veterans cemetery, to be located in Dublin, is in the planning stages and is expected to open in summer 2010. Three national cemeteries – Arlington, Culpeper, and Quantico – serve the memorial needs of veterans in northern Virginia. Culpeper National Cemetery is expected to be closed to new casketed burials sometime in the next 20 years.

The U.S. Department of Veterans Affairs uses a 75-mile service area radius when planning a new national or state veterans cemetery, but experience at Virginia's two state veterans cemeteries has shown that the vast majority of the burials were drawn from within 50 miles of the cemeteries. The study notes that distance to a veterans cemetery and proximity to family are key considerations in choosing to be buried in a veterans cemetery. The study therefore recommends the adoption of the 50-mile service area. At present, approximately 586,000 of Virginia's 728,000 veterans – or 82 percent – live within a 50 mile radius of a state or national veterans cemetery. The opening of the Dublin cemetery will extend coverage to 89 percent of Virginia's veterans, while a cemetery in Nelson County would ensure that 92 percent were served by a national or state veterans cemetery.

The study notes that after Culpeper National Cemetery is closed to new casketed burials, a state veterans cemetery in Nelson County will be well placed to fill the gap left by the closure of the Culpeper cemetery, and that the Nelson County cemetery would ensure that coverage remained above the 90 percent level. The report notes that land acquisition for a veterans cemetery in Nelson County should be part of a long-term plan, as development pressures in the region are not high. The Nelson County cemetery would be expected to serve approximately 150 veterans per year.

The report examined the effect of lifting residency requirements for burial in a state veterans cemetery. At present, burial in a state veterans cemetery is restricted to veterans who were Virginia residents at the time of death, or to veterans who were Virginia residents when they entered the military. The report found that removing these eligibility requirements is projected to have a relatively small effect on state cemetery interment volumes.

Finally, the report recommends ways to strengthen outreach and marketing efforts.

The report will be available on the Department of Veterans Services website in the near future.

Benefits Services Conference

On October 1 through 4, 2007, DVS held a training conference for the benefit services representatives and administrative support personnel. More than 65 staff attended the conference which was held in Virginia Beach. Benefit services representatives spent three and a half days receiving training on a range of topics, from PTSD and stressor verification, to traumatic brain injury and special monthly compensation. Administrative support staff attended the conference for one and a half days and received training on procurement, travel voucher processing, and standardizing office procedures.

As part of the conference, benefit services representatives and administrative support personnel participated in a facilitated workshop on process improvement. Participants developed process improvement recommendations for office information management, staff development and training, information processing and routing, claims processing, administrative staff job functions, standards for office equipment and tools, and file management. These recommendations will be used as a technical development and process improvement tool for management and to enhance benefit services operations.

The agency anticipates holding the next training conference for benefit service personnel in October 2008.

Agency Outreach

Events

DVS actively participates in numerous events throughout the year—veterans service organization conventions, community events for veterans, stand downs for homeless veterans, dedication ceremonies, and a variety of other events. In many cases, benefit services representatives attend these events as well as personnel from the Virginia Veterans Care Center, the cemeteries, and the State Approving Agency for Veterans Education and Training. During FY 07, the agency was represented at 211 events. The Commissioner participated in nearly 30 special events, speaking at approximately 10 of these events.

During FY07, DVS hosted five townhall meetings (described under the EO 19 initiatives), held open houses at the Virginia Veterans Cemetery and the Albert G. Horton, Jr. Memorial Veterans Cemetery on both Memorial Day and Veterans Day, co-hosted the Virginia Salute to Heroes with the Virginia War Memorial, co-hosted the Virginia is for Heroes Conference with the Mid-Atlantic Addiction Technology Transfer Center, hosted the dedication ceremony for the Sitter & Barfoot Veterans Care Center, and held a variety of activities at the Virginia Veterans Care Center, including a visit from Governor Kaine and his cabinet.

Table 12
DVS Participation in Outreach Events—FY07

Month	Number of events attended	Month	Number of events attended
July 2006	5	January 2007	24
August 2006	12	February 2007	27
September 2006	8	March 2007	20
October 2006	6	April 2007	29
November 2006	8	May 2007	27
December 2006	23	June 2007	22

Media relations and publications

Between July 2006 and June 2007, the agency issued 20 news releases and fielded approximately 60 media calls. The agency received significant positive coverage about the two veterans cemeteries following issuance of a news release about the cemeteries. The agency also received good coverage from a release on the findings of the long-term care study conducted by the College of William & Mary.

During the past year, DVS has been engaged in a process to develop an agency brand. The agency has held several sessions with a cross-section of DVS employees to discuss agency image, values, veteran needs and perceptions, challenges, competition, and agency messages. Following this work, the agency contracted with LM&O Advertising and this ad agency has developed a logo, templates for print materials, the design for a lapel pin, and is finishing up the contract by developing logo usage guidelines.

DVS has also developed two professional-quality brochures: an agency brochure and a brochure for the cemeteries. The agency brochure provides information about all DVS services as well as contact information for all offices. The brochure is uniquely sized to fit in a wallet so that veterans can easily keep DVS information and have it when they need to contact the agency. The cemetery brochure provides detailed information about both cemeteries and eligibility requirements. An envelope was produced so that the brochure and pre-application can be distributed as a packet.

Outreach to incarcerated, homeless, and severely wounded veterans

DVS hired an outreach coordinator in February 2007 to focus on issues related to incarcerated veterans, homeless veterans, and seriously wounded veterans from the Global War on Terror. The coordinator has established working relationships with agencies addressing these veterans issues as well as outreach personnel at McGuire VA Medical Center, the Healing Place, Home Again, and the Richmond-area Homeward program. The Homeward held an event for homeless individuals on November 29, called Project Homeless Connect, and DVS staff participated in this event. The agency has participated in several stand downs for homeless veterans held at locations around the state.

The Outreach Coordinator has coordinated and participated in presentations at Fluvanna Correctional Center for Women, Powhatan Correctional Center, Coffeewood Correctional Center, and the Lawrenceville Correctional Center. The Virginia Department of Corrections has entered into a memorandum of understanding with the U. S. Department of Veterans Affairs which will allow qualified VA physicians to conduct compensation and pension exams on inmates incarcerated in Virginia prisons. This agreement will facilitate filing claims for incarcerated veterans.

Additionally, the Outreach Coordinator has visited the homes of two seriously wounded veterans and contacted four other seriously wounded veterans. In these cases, the Coordinator provides assistance by identifying and contacting various offices that can provide the veteran and his or her family members with needed services.

Direct Mail

In April 2007, DVS began sending letters to all military service personnel recently discharged in Virginia. The agency receives copies of the DD214 for nearly all discharged personnel and is obtaining address information from these forms. Since April, the agency has sent more than 8,000 letters. The letters thank the military service personnel for their service, describe the services provided by DVS and are signed by the Commissioner. An agency brochure is included with each letter.

EO 19 Report

Executive Order 19, signed by Governor Timothy M. Kaine on June 16, 2006, directed DVS to prepare a comprehensive report on the status of state programs and services for veterans. The Order required DVS and other state agencies to find ways to offer new, expanded or customized services that will meet the educational, health care and social service needs of Virginia's veterans, giving special attention to disabled veterans. In addition, it directed all state agency heads to renew their commitment to giving veterans preference when hiring.

In response to EO 19, DVS staff members met individually with numerous state agencies to discuss existing services for veterans and possible partnerships for new services. The agency also hosted a number of meetings that brought together agency heads from several agencies to discuss common veterans issues and strategize ways to address them.

During March 2007, DVS held five town hall meetings to gather input from veterans and their family members and to start a productive dialog between Virginia's veterans and state government. Meetings were held in Fredericksburg, Suffolk, Abingdon, Roanoke, and Richmond. In the meetings, veterans were asked to talk about what is working well and what is not working well, and they were asked to offer solutions. In each of the meetings, veterans commented on DVS, the need for better communication about benefits, veterans health care, the need for improved benefits at the state level, and the need for support for spouses and family members. One message that came through loud and clear was the need for a single voice to speak out for veterans and address issues with the USDVA, Congress, and other policy makers.

Twenty-seven initiatives were presented in a report to Governor Kaine on May 1 and are categorized as technology, workforce development, outreach, or quality of life. Work on nine of them is already in progress and updates on several of these initiatives are provided in this section of the annual report. (Refer to Appendix 1 for a summary of the report.)

While this report was the final component of Governor Kaine's Executive Order 19, it is the first step in creating an integrated service delivery system that will support and honor Virginia's veterans. The initiatives in the report represent a roadmap for the work that lies ahead, and the report is a living document that will be constantly revisited and enhanced. DVS anticipates providing an annual update on the progress of the initiatives proposed in this report as well as new initiatives that will further enhance Virginia's service to veterans.

Technology

The technology initiatives will broaden veterans' access to innovative solutions for filing and processing claims. DVS has partnered with Stratizon Corporation® to develop and pilot a TurboTax®-type software application (TurboVet™) that will assist both veterans and benefit service representatives in preparing and submitting claims to the U.S. Department of Veterans Affairs (VA). Such a software application will positively impact Virginia's veterans and their families by delivering claims that are complete, accurate, and ready to rate. This will speed up the claims adjudication process, increase the claims approval rate, and increase the per-claim award. Additionally, as the application matures, it will pave the way for electronic submission of claims, further expediting claims processing and receipt of benefits. In 2007, DVS successfully piloted TurboVet™ and is now seeking resources to implement the project statewide.

In preparation for statewide implementation of TurboVet™, DVS has begun a project to consolidate a myriad of benefit services databases housing veterans claims application data into one consolidated system. Files in the Richmond and Tidewater offices have been converted to electronic formats, but further consolidation is on hold pending identification of resources for full conversion of the records.

After successfully testing the conversion of paper files to electronic images (document imaging) in the Richmond and McGuire VA Medical Center benefit services offices, DVS' largest office, located in Tidewater, has been working with Virginia Correctional Enterprises to digitize a massive amount of documents in this office. When this document imaging project is completed, documents in nearly 80 standard file cabinets will be digitized and stored on CDs. Office personnel are being trained to scan all new files in order to reduce future conversion costs. Net gains include immediate availability of additional office space, a reduction in future space needs which will lower leasing costs, and easier storage, recovery and access to documents.

Workforce Development

The need for reintegration of veterans of the Global War on Terror and previous conflicts to their families, homes and communities is a major policy issue facing the Commonwealth. Military service provides unique skill sets that can and must be adapted to civilian employment. In April, 2007, DVS convened a mini-symposium for state agencies to present information about their employment and workforce training programs for disabled veterans, exchange ideas, and explore

possible partnerships. A major recommendation of the mini-symposium was the need for a statewide Task Force to bring attention to the issues of employment for veterans in Virginia and to develop integrated solutions that leverage the resources of the public and private sectors to match veterans with employers who need their skills and services.

In November 2007, the Secretary of Public Safety and DVS established the Virginia Veterans Workforce Development Task Force to design a comprehensive workforce development initiative for veterans in Virginia, with special emphasis on veterans with disabilities and those returning from the Global War on Terror. The membership of the Task Force includes the Governor's Senior Advisor for Workforce, the Governor's Senior Advisor for Disability Issues and Concerns, state legislators, members of the Board of Veterans Services, relevant federal, state and local agency representatives, representatives of the veterans services organizations, disabled veterans, representatives of the corporate sector, and other public and private partners. The Task Force also includes representatives from the Virginia Committee for Employer Support of the Guard and Reserve (ESGR) and the U.S. Department of Labor (DoL). The Task Force will consider model employment programs such as the ESGR 5 Star Employer Program and the U.S. DoL Hire Vets First Program as a part of its review. The group is charged with developing solutions to (1) effectively match veterans with employers and positions, (2) encourage public and private sector employers to hire veterans, (3) encourage public and private sector employers to hire veterans with disabilities, and (4) develop a more comprehensive technological approach to better inform veterans on where and how to obtain job and training opportunities in the private sector. A comprehensive report, including legislative and budgetary recommendations will be completed on or before September 1, 2008.

In addition, this year the Departments of Veterans Services (DVS), Rehabilitation Services (DRS) and the Virginia Employment Commission partnered with TecAccess, a small, woman-owned technology firm, to develop a training and employment program for disabled veterans. The Disabled Veteran Training and Employment Program (DVET) is identifying, accommodating, training and hiring 16 veterans over a 12-month period. Program participants are being trained and employed as information technology (IT) accessibility consultants, trainers, and testers. The program received \$200,000 in Governor's Discretionary funds from the Workforce Investment Act, administered by the Senior Advisor to the Governor for Workforce Development, and is being implemented through a memorandum of understanding between the Department of Veterans Services, the Department of Rehabilitative Services, the Virginia Employment Commission, and TecAccess. A representative of TecAccess will serve on the Veterans Workforce Development Task Force to ensure a focus on employment for veterans with disabilities. In addition, DVS is employing a graduate of the DVET program to provide research and staff assistance to the Task Force.

DVS worked with the Governor and the General Assembly and the Joint Leadership Council to secure the successful passage of House Bill 2840 and Senate Bill 1033, 2007. This legislation strengthens veterans' preference in state government hiring. The Department of Human Resource Management (DHRM) is developing guidelines as an addendum to the Hiring Policy for Executive Branch agencies to provide guidance to agencies to comply with the veterans' preference requirement.

Outreach

Five Town Hall Meetings were held across the Commonwealth in March to elicit ideas and concerns about veterans services in Virginia. The meetings were well attended and resulted in a number of recommendations that were incorporated in the EO 19 Report. One of the most consistent recommendations was that veterans need an advocate that speaks with one voice, expressing veterans' interests to the General Assembly, Congressional delegation, and the U. S. Department of Veterans Affairs.

Throughout the year, DVS worked with members of the Joint Leadership Council of Veterans Service Organizations (JLC), Board of Veterans Services, Virginia Military Advisory Council, Virginia Citizen-Soldier Support Council, and the Virginia National Guard to advocate for veterans services and to develop a single legislative agenda for veteran- and military-related issues. The JLC developed seven legislative priorities for the 2007 General Assembly. Five of the seven priorities were passed or funded. The group has developed a similar legislative package for the 2008 Session. The package includes another 7 major initiatives to (1) fully fund the DVS budget and strategic plan, (2) support the Virginia National Guard, (3) establish a Wounded Warrior Outreach program, (4) provide funding for the Virginia War Memorial Education Wing, (5) provide tax relief for 100% disabled veterans, (6) provide tax relief for Virginia citizen soldiers called to active duty, and (7) permit Virginia resident service members to place a freeze on their credit files.

In addition, DVS, through the Virginia Liaison Office has advocated for resources for a number of veterans issues, including TurboVet™ and the Wounded Warriors Outreach Project.

In 2007, DVS created a communications plan and an agency brand. To increase state agency awareness, DVS contacted the Departments of Mental Health, Mental Retardation and Substance Abuse (DMHMRSAS), Social Services (DSS), Health (VDH), Aging (VDA), Game and Inland Fisheries (DGIF), and the Virginia Employment Commission (VEC). Since these agencies have offices located across the state and high volume face-to-face contact with customers, DVS has requested that staff at each agency ask customers about their veteran status. As a first step, DVS provided bookmarks listing all DVS locations and the website address for agency personnel to give to clients who are veterans.

DVS met with the DSS and VDA to determine how best to partner with their resources and information systems, Spyder and No Wrong Door, for identifying and providing services to veterans. DVS is also exploring the possibility of partnering with DSS to use their excess phone center capacity so that DVS can offer its clients a toll-free, centralized telephone number to the agency.

Quality of Life

In October, 2007, DVS partnered with the Mid-Atlantic Addiction Technology Transfer Center (ATTC), located at Virginia Commonwealth University, to host a day-long conference on polytrauma and combat stress. The conference, *Virginia is for Heroes*, was filled to capacity and participants are requesting regional conferences and more networking and training opportunities on a statewide basis. The conference planning committee continues to meet to evaluate the recommendations from the conference and to support additional training opportunities. A report on the results of the conference, including a roadmap for addressing the issues of polytrauma and combat stress for Virginia's veterans will be issued in early 2008.

Recognizing the need to address the behavioral healthcare and rehabilitative needs of veterans returning to Virginia from the Global War on Terror, in early 2007 DVS established a partnership with the Department of Mental Health, Mental Retardation and Substance Abuse Services, Community Services Boards, the Department of Rehabilitative Services' network of community brain injury services providers, and the Veterans Healthcare Administration, VISN 6. The partnership resulted in the Wounded Warrior Outreach proposal to address veterans' behavioral health and rehabilitative needs through three operational components: (1) State-level coordination, (2) community coordination activities, and (3) behavioral health and rehabilitation services. Through service expansion and coordination the partners propose to provide the level of care required to restore and sustain the behavioral and rehabilitative health needs of veterans.

The Joint Leadership Council has adopted this proposal as one of its top priorities for funding and implementation by the 2008 Session of the General Assembly. An extensive advocacy campaign is planned to promote this initiative.

Clinical Billing System

Deployment of a comprehensive clinical and billing system was a key infrastructure requirement for the Sitter & Barfoot Veterans Care Center. The procurement contract was awarded to ADL Data Systems, Inc. The system was configured and installed with the involvement of staff from the Virginia Information Technology Agency (VITA). The system will be 100 percent deployed before residents are admitted to SBVCC. Successful deployment will enable SBVCC to bill Medicare/Medicaid for services, as appropriate. The clinical portion of the system enables the staff to track clinical services required and delivered using state-of-the-art software and hardware applications. This includes wireless handheld charting of care required and provided to veteran residents. The system will also be deployed at the Virginia Veterans Care Center in early 2008.

ARMICS

In response to the Sarbanes-Oxley Act of 2002 (SOX) which was enacted after a surge in fraudulent activity in the private sector, the Virginia Department of Accounts issued the requirement for an Agency Risk Management and Internal Control Standards (ARMICS) self assessment by each agency. This requires each agency to review and/or establish and maintain internal agency controls in order to more effectively manage risk and maintain accountability. As designed, this is a three-part process in which an agency assesses its current internal control operations, identifies processes and transactions used, and develops a corrective plan of action. The assessment of current internal controls was completed and submitted on October 15, 2007. The assessment of processes and transactions is currently being performed and will be submitted on March 31, 2008. A corrective action plan will be submitted on June 30, 2008.

Audit Points

The annual audit by the Auditor of Public Accounts has been ongoing since June 2007 and the agency expects it to be concluded during the first week of December 2007. At that time, the APA will present the Commissioner with a draft of the report which will identify any existing audit points. Once the draft is issued, the Commissioner and other staff will meet with the APA to discuss the findings and to reach a consensus on the report. Following that meeting, the final report will be written and the Department will have thirty days to develop and submit a plan of correction.

The agency anticipates that some of the audit points identified this year will be a continuation of points identified in the previous audit. While not desired, this was expected since limited manpower and other factors beyond the agency's control hampered the agency's ability to fully address the issue or fully implement a correction. Most of the identification and initial preparation has been done to correct deficiencies and the required actions to resolve the deficiencies will be completed by June 2008.

Financial Management System

The Department purchased and is implementing a Mitchell Humphrey and Company Financial Management System (FMSII). FMSII is a state of the art financial management system and DVS will be using four of the system modules: general ledger, accounts payable, purchasing, and cost accounting. The major advantage of the system is the ability to exchange and transfer of relevant information between systems thus reducing the redundancy of paperwork. Also, once a transaction is posted, all relevant information is updated and current facts and figures are readily available

The system will increase managers' access to detailed and current information which, in turn, should allow for better management and use of available resources. Also the system will greatly enhance the development of biennial and other budget submission packages and eliminate the duplicate work now required to produce annual Medicaid and Medicare cost reports.

Currently the general ledger and accounts payable modules are fully operational. Development of the purchasing ledger module was conducted in November and the system should be operational by February 2008. Development of the cost ledger will begin the first of February and the system should be fully operational by July 2008.

As was anticipated when the decision was made to purchase the system, FMSII is providing the desired information but the implementation has been hampered by the challenges experienced by all agencies due to the new approach for provision of IT services through VITA/NG.

Continuity of Operations Plan (COOP)

The continuity of operations plan (COOP) was finalized and submitted to the Department of Emergency Management in early November, 2007. The plan identifies the essential functions provided by DVS administrative and fiscal staff. The goal of the plan is to ensure that all agency programs will receive essential support functions to maintain operations if an emergency situation threatens the location of the administrative/fiscal functions.

In addition to a maintenance schedule to keep the COOP plan viable, it details the activation and relocation of the administrative/fiscal functions, alternate operations guidance, and a plan to

reconstitute essential functions within 12 hours of an emergency event and to maintain essential functions in an emergency situation for up to thirty days.

Looking to the Future

As evidenced by the 2006 and 2007 General Assembly sessions, the support of Governor Kaine and the General Assembly, and the cooperation of all state agencies, veterans issues have more support than they have had for several decades. During the coming year, DVS looks forward to continuing to work on implementing the recommendations in EO 19. Two key initiatives from EO 19 include further development of the TurboVet™ system and development of the Wounded Warrior mental health initiative to provide behavioral health care to veterans and their families, especially those returning from Iraq and Afghanistan. We also look forward to transfer of the land for the third Virginia veterans cemetery and plan on holding an event during Spring 2008 to commemorate the transfer. We will continue to pursue planning for a third veterans care center co-located at the Hampton VA Medical Center.

Appendix 1

Executive Order 19

Summary of Initiatives

Introduction

Executive Order 19, signed by Governor Timothy M. Kaine on June 16, 2006, directs the Virginia Department of Veterans Services (DVS) to prepare a comprehensive report on the status of state programs and services for veterans. The Order requires DVS and other state agencies to find ways to offer new, expanded or customized services that will meet the educational, health care and social service needs of Virginia's veterans, giving special attention to disabled veterans. In addition, it directs all state agency heads to renew their commitment to giving veterans preference when hiring.

In response to EO 19, DVS, the Board of Veterans Services and the Joint Leadership Council of Veterans Service Organizations submitted legislative proposals for the 2007 session of the General Assembly to the Governor, and DVS presented an interim report to the Governor in fall 2006 detailing the status of veterans services in Virginia (Appendix 2). On May 2, DVS fulfilled the final directive of EO 19 by presenting 27 initiatives that will further improve services and opportunities for Virginia's veterans.

The initiatives presented in the final report are categorized as technology, workforce development, outreach, or quality of life. A summary of each initiative follows.

Technology Initiatives

Internet Portal

DVS proposes creating an Internet portal that will provide descriptions of and links to the federal, state, and local agencies that provide services for veterans as well as to non-profit and private sector service providers. As the state's technology capabilities mature, the portal can be expanded to present a uniform assessment tool which veterans and families can complete online. The assessment tool will identify needs and services for which they qualify, and the information entered by the veteran can be transmitted to the appropriate service providers for follow-up by that agency.

TurboVet™

DVS is developing a TurboTax®-type software that will assist both veterans and benefit service representatives in preparing and submitting claims to the U.S. Department of Veterans Affairs. Like TurboTax®, TurboVet™ will use an interactive format to guide the veteran or benefits service representative through a series of questions that will complete the claims application and identify the documentation required to support the claim.

Upgrade DVS Technology Infrastructure

This multi-part initiative includes three components. First, the agency is in the process of consolidating the multiple databases used to store veterans' claims application data. These multiple databases, currently in Microsoft Access, will be consolidated into a single SQL server database. The agency also has a pilot project in process to digitize hard copy documents and correspondence stored in selected benefits service offices. Once digitized, these records will be accessible electronically by any DVS representative. DVS' third technology infrastructure initiative is to employ web-based software to deliver online training to DVS benefits service representatives.

Workforce Development Initiatives

Integrated Workforce Development

DVS recommends creation of a task force to examine how existing workforce development services can be presented to military personnel, veterans, disabled veterans, their spouses and dependents in a centralized manner, and to identify additional services needed to create a comprehensive workforce development initiative for veterans in Virginia.

Awareness Campaign for Employers

An information campaign targeting employers can raise awareness about the benefits of hiring veterans and encourage employers to grant preference to veterans when making hiring decisions. DVS recommends using the Employer Support for the Guard and Reserve 5-Star Employer Program as a model for this campaign and also recommends partnering with the U.S. Department of Labor's *HireVets First* program.

Employment Opportunities for Veterans with Disabilities

DVS recommends that a subcommittee of the task force recommended under the initiative for Integrated Workforce Development collect data on the number of disabled veterans in Virginia seeking employment and explore re-training opportunities for veterans whose disabilities make them ineligible to return to their civilian jobs.

Veterans Hiring Preference in State Government

House Bill 2840 and Senate Bill 1033, passed by the 2007 Virginia General Assembly, strengthen veterans preference in Virginia state government hiring. To support this legislation, DVS recommends creation of a new position in the Department of Human Resource Management to coordinate implementation of the new legislation and to serve as the Commonwealth's lead agent on hiring veterans within state government.

Outreach to Veteran-Owned Businesses and Potential Entrepreneurs

DVS recommends creation of a task force to make recommendations for the systematic identification of veteran-owned businesses and maintenance of a database with statistical and contact information. Additionally, this task force can be directed to conduct research on best practices, such as tax and other incentives, used in other states to cultivate and support veteran-owned businesses. Finally, this task force can make recommendations for initiatives to cultivate and support small veteran-owned businesses in Virginia.

Implement and Review Virginia's Legislation for Service-Disabled, Veteran-Owned Small Businesses (SDVOSBs)

To support Senate Bill 1145 passed by the 2007 Virginia General Assembly, DVS recommends placing a part-time position, preferably filled by a disabled veteran, in the Department of Minority Business Enterprises to assist in implementation of this legislation. The agency also recommends review of the bill's language to determine if it is advantageous to align Virginia's definition of service disability for the purpose of identifying an SDVOSB with the definition used in federal guidelines.

Outreach Initiatives

Increased Advocacy for Veterans

DVS plans to continue its active role in Virginia's legislative process, identifying veterans' issues and facilitating development of solutions by bringing together appropriate decision makers. The agency recommends working with members of the Joint Leadership Council of Veteran Service Organizations (JLC), Board of Veterans Services, and other military-related organizations to annually provide a list of veteran and military-related issues and priorities to the Governor prior to his participation in the National Governors Association Conference. DVS will also provide these issues and priorities to Virginia's Congressional representatives on a routine basis, and

ensure that they are communicated to other states through active participation in the National Association of Directors of State Departments of Veterans Affairs. The agency recommends annually communicating these issues to the Secretary for the U.S. Department of Veterans Affairs.

Increased Awareness among State Agencies about Veterans Issues and Services

To raise awareness in state agencies about veterans issues and services, DVS plans distribute brochures and posters to other agencies for display and distribution; create memorandums of understanding with other state agencies that will result in cross-training employees to be able to recommend state agency services to veterans; and to hold symposiums and workshops that will help raise awareness in state agencies about veterans issues and the services available to them.

Symposiums on Veteran-Related Issues

An effective way to raise awareness about veterans issues and to create a continuum of service model and no wrong door philosophy for veterans is by directly involving state agencies and other key players in exploring the issues, identifying resources, and making policy recommendations. This can be done through symposiums that bring decision-makers together in a collaborative setting. Symposiums can center on polytrauma and combat stress injuries, veterans issues impacting state agencies, business assistance topics for veteran-owned small businesses, and workforce development for disabled veterans.

A Dedicated Veterans Medical Resource at the Department of Health

DVS recommends placement of a dedicated medical professional in the Department of Health. This position will be responsible for increasing awareness about health issues specific to veterans in both the general public and within the medical community.

Veterans Awareness Promoted through Virginia's Museums

Virginia's museums offer a viable vehicle for raising awareness about veterans. This can be as simple as asking museums to display a counter-top poster and distribute brochures. However, it can also be much more engaging by capitalizing on the unique expertise of each museum and having them create veteran-related displays based on their areas of expertise, such as art, technology and history.

Automated Comprehensive Direct Mail/Email Program to Virginia Veterans

DVS recommends entering data from the DD214, Report of Separation, which the agency receives from the Department of Defense, into an automated system. This will provide a database which the agency can use to mail letters and postcards to veterans that correspond to life events, such as expiration of their health care benefits and GI Bill benefits. These communications will also provide information about veterans benefits and services provided by the agency.

Veteran Indicator on Virginia-Issued Driver's Licenses and ID Cards

Another way to identify and communicate with veterans is by placing an indicator on Virginia-issued driver's licenses and ID cards that recognizes the holder as a U.S. military veteran. This indicator will be captured on the customer's electronic DMV record. The veteran indicator in the DMV database will allow DVS to access names and addresses of veterans in order to conduct direct mail campaigns about issues relevant to veterans. The veteran indicator will offer an added benefit by providing an easy-to-recognize verification of an individual's status as a veteran, enabling organizations that wish to honor veterans with discounts or other recognition to easily and fairly identify qualified individuals.

Improved Veterans Communications Infrastructure

This three-part initiative recommends centralized access to resources via the Internet, centralized toll-free telephone access to DVS, and annual face-to-face interaction between DVS and the public through a series of town hall meetings.

Quality of Life Initiatives

Continuum of Service Model and No Wrong Door Philosophy

The needs of the veteran and his or her family must be addressed holistically and as a continuum—from immediate and emergency needs for shelter and acute medical care to intermediate needs for rehabilitative medical care, individual and family counseling, and job training, to long-term assistance such as housing loans, maintenance-level therapy and other forms of assistance. With a no-wrong-door approach, no matter where the veteran first touches state government, he or she will be evaluated in terms of the continuum of service model and assisted with obtaining needed services from other state agencies.

Task Force to Study Best Practices in Other States and Make Recommendations for Virginia

Best practices in the provision of benefits and services for veterans are emerging across the country. DVS' goal is for Virginia to become a leader in the provision of services to veterans. DVS recommends establishing a broad-based task force to examine innovations across the country. The agency proposes partnerships with one or more universities to conduct the required veteran-specific research and analyses.

Provision of Behavioral Health Care Services by State Resources

DVS is working with the U. S. Department of Veterans Affairs to expand and expedite health care services in Virginia through implementation of the Federal Veterans Benefits, Health Care, and Information Technology Act (S.3421) enacted in December 2006. DVS has entered into discussions with the USDVA, the Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services and the Virginia Association of Community Services Boards (CSBs) to develop an on-going contractual relationship for referral of veterans to the CSB services system for treatment of mental health and substance abuse disorders.

Implementation of the Heroes to Hometowns Program in Virginia

DVS recommends exploring with the American Legion and the National Guard how Virginia can fully participate in Heroes to Hometowns (H2H) program. This exploration will include examining H2H and similar programs in other states, developing partnerships among state agencies and veteran service organizations, and identifying roles and responsibilities to ensure that Virginia mobilizes its communities to execute the components of the H2H program.

VCU Veterans Center

Virginia Commonwealth University (VCU) proposes developing a Veterans Center that will provide life skills training, employment training and job opportunities, and training for mental health professionals about veteran-specific issues and treatment strategies. Additionally, the center will conduct research and host conferences on veteran-related issues.

Service Delivery to Incarcerated, Homeless, and Hospitalized Veterans

DVS proposes establishing an outreach and education program for the inmates of Virginia's 40 major correctional facilities and field units. The agency proposes partnering with the Prison Re-entry Coordinator for Richmond Goodwill Industries to provide veteran-specific information as part of this program. The agency also recommends developing a partnership with the Virginia Inter Agency Council on Homelessness, Virginia's Homeless Continuums of Care, the USDVA, and Virginia's veterans service organizations to develop a new, integrated model for serving Virginia's homeless veterans. The agency recommends development of a similar approach for providing outreach and education for hospitalized veterans.

Operation Greenscape

DVS and the Virginia Department of Forestry are exploring ways to enrich the landscaping at the Virginia Veterans Cemetery in Amelia, the Albert G. Horton, Jr. Memorial Cemetery in Suffolk, and the SitterBarfoot Care Center in Richmond. Under consideration are enhancement of nature trails in the cemeteries and landscaping around the catch-basis at the SitterBarfoot Veterans Care Center.

Veteran-Specific Hunting/Fishing Programs

The Virginia Department of Game and Inland Fisheries (DGIF) has proposed several exciting initiatives that will offer new, expanded, or customized services to veterans. DVS believes these programs will be especially well received, given that many veterans are avid hunters and fishermen. Some initiatives proposed by DGIF require further research and discussion to determine feasibility, costs, and benefits, while other initiatives can be pursued within current resource levels.

Real Estate Tax Exemption for Veterans with 100 Percent Disability Rating

Given the relatively small number of Virginia veterans with a 100 percent service-connected disability rating—6,401—DVS recommends that the Code of Virginia be amended to provide a real estate tax exemption for these veterans, regardless of income or financial worth.

Veteran-Specific Research

Accurate and in-depth research is essential to ensure the efficacy of Virginia's programs and services for veterans and to ensure that programs are achieving the objectives for which they were designed. DVS recommends that the task forces recommended in this report identify the most pressing needs for research and that DVS contract with universities throughout the state to conduct the research.

To read the full version of the EO 19 report, visit www.virginiaforveterans and click reports and publications.