

## VETERANS SERVICE ORGANIZATIONS POLICY

**1. PURPOSE:** This Veterans Health Administration (VHA) Directive establishes VHA policy concerning the Department's interface with the Veterans Service Organizations (VSOs).

### 2. BACKGROUND

a. VSOs are the primary non-government advocate for veterans. The Federal Government and specifically VHA interact with these organizations on issues concerning veterans as a whole or on specific issues. Attention should be placed on concerns and observations submitted by VSOs in order to improve patient satisfaction. It is important that VHA work closely with the VSOs in identifying the health care and benefit needs of their memberships (see Att. A).

b. Attachment B provides a modified flow chart showing the resolution process.

**3. POLICY:** It is VHA policy that the Under Secretary for Health maintain an "open communication" policy with each VSO and respond to all reasonable requests for information.

### 4. ACTION

a. The Director, Voluntary Service Office (10C2), is the principal staff advisor to the Under Secretary for Health for coordination and monitoring interactions between the Department and VSOs; and, when appropriate, provides information on issues and initiatives so that the VSOs may provide their membership a factual picture of the issues. This policy relates equally to each of the VSOs.

b. The Deputy Under Secretary for Health (10A), the Executive Assistant to the Under Secretary for Health (10E), the Assistant Deputy Under Secretary for Health (10N) the Medical Inspector (10MI), the Chief Officer of Quality and Performance (10Q), the Chief Officer for Patient Care Services (11), the Chief Officer for Research and Development (12), the Chief Officer for Public Health and Environmental Hazards (13), the Chief Officer for Academic Affiliations (14), the Chief Financial Officer (17), the Chief Information Officer (19), and the Chief Officer for Policy and Planning (105) are responsible for:

(1) Alerting the Director, Voluntary Service Office, on all VHA issues and programs that impact VSOs.

(2) Informing the Director, Voluntary Service Office, of all VHA-sponsored meetings and discussions that include the VSOs. *NOTE: Invite the Chief Communications Officer (10C), as appropriate.*

(3) Providing the Director, Voluntary Service Office, with approved VHA information for release that could be of interest to the VSOs.

(4) Reporting all significant VSO contacts to Director, Voluntary Service Office, through normal VHA channels.

**THIS VHA DIRECTIVE EXPIRES FEBRUARY 28, 2007**

**VHA DIRECTIVE 2002-025**

**April 22, 2002**

(5) Providing the Director, Voluntary Service Office, with a copy of all controlled correspondence to VSOs (see Att. A).

*NOTE: Deputy Under Secretary for Health, the Assistant Deputy Under Secretary for Health Director, all Chief Officers, and the Medical Inspector will attend the Under Secretary for Health monthly VSO meeting, as appropriate.*

c. Network Directors must implement the Secretary of Veterans Affairs' and the Under Secretary for Health's VSO policies.

d. VA medical center Directors must:

(1) Carry out the policies of the Secretary of Veterans Affairs, the Under Secretary for Health, and Network Directors.

(2) Cooperate with and provide appropriate support to VSO survey teams.

**5. REFERENCE:** MP-1, Part II, Chapter 37.

**6. FOLLOW-UP RESPONSIBILITY:** Director, Voluntary Service Office (10C2), is responsible for the contents of this directive.

**7. RESCISSIONS:** VHA Directive 10-94-080 is rescinded. This directive will expire on February 28, 2007.

S/ Dennis H. Smith for  
Robert H. Roswell, M.D.  
Under Secretary for Health

Attachments

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**ATTACHMENT A**

**GUIDELINES FOR RESPONDING TO SITE SURVEY REPORTS  
OF THE VETERANS SERVICE ORGANIZATIONS**

1. Networks or facilities are to review the incoming correspondence and to immediately determine whether there are matters of special concern or interest that require referral to the Department of Veterans Affairs (VA) Central Office. If input from VA Central Office is required to respond to an issue raised in the report, networks are to contact the appropriate VA Central Office element and obtain the necessary input for incorporation in the proposed response.
2. Issues raised will be responded to in writing in a manner that provides a complete, detailed, timely, accurate assessment of the situation and the actions taken to resolve the concerns. Generic phrases, such as "will be considered within existing resources," should be avoided. Networks will obtain concurrences in the response from Assistant Deputy Under Secretary for Health; the Director, Voluntary Service Office; and any other Veterans Health Administration (VHA) offices as necessary before forwarding the response to VHA Central Office for review and signature by the Secretary or Under Secretary for Health, as appropriate.
3. Director, Voluntary Service Office, maintains liaison with the Veterans Service Organizations (VSOs) and serves as the Under Secretary's principal staff contact point with the VSOs.



**ATTACHMENT B**

**VETERANS SERVICE ORGANIZATIONS (VSOs) RESOLUTION  
RESPONSE PROCESSING**

1. Veterans Service Organizations (VSOs) submit a Resolution to the Department of Veterans Affairs (VA).

**(008A)**

2. The Office of Deputy Assistant Secretary for Program and Data Analyses (008A) has the agency lead.

3. (008A) makes an assignment to the VHA Office of Executive Correspondence (101B) in the Electronic Document Management System (EDMS) to provide input and/or responses on Veterans Health Administration (VHA) issues.

4. A Resolution involving legislative initiatives is typically routed through General Counsel and does not require a VHA response. If the Resolution has been responded to in the past, (008A) provides a copy of the previous Resolution response to (101B).

**(101B) REVIEWER**

**5. The (101B) Reviewer (assigned to handle 008A packages for VHA) verifies special instructions or requirements with (008A) and then makes an assignment to Voluntary Service (10C2) in EDMS to prepare the final response to each Resolution. NOTE: At the end of this attachment is a sample of the correct format of a VSO Resolution and response.**

6. (101B) will keep (008A) informed of additional involvement required from offices outside of VHA. For example, if a Resolution is determined to be outside of VHA jurisdiction or requires collaboration with another office outside of VHA, (101B) promptly notifies (008A), who makes the appropriate reassignment or tracks the additional input, as needed.

**(10C2)**

7. (10C2) prepares a cover memo for the Under Secretary for Health's signature addressed to (008A), transmitting the VHA responses to VSO Resolutions and adhering to the guidelines provided by (008A) and the (101B) reviewer.

a. (10C2) makes EDMS assignments to the applicable VHA offices to provide input.

b. Special instructions should be clearly communicated to the VHA offices at the time the assignments are made. For example, the Resolution should precede the response in each instance and be attached as a word document in the EDMS electronic folder.

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c. As standard procedure, the title and number of each Resolution need to be typed in **BOLD** print and *the Resolution in italics*—with the response, in a 12-pitch Arial font, inserted below the italicized resolution.

d. Resolutions requiring legislation are returned to (008A) with an annotation that the Resolution requires legislation, and the Office of Legislative Programs and Policy Review (10C1) is provided with a copy of any Resolution that involves VHA legislation.

e. (10C2) monitors the EDMS assignments and all VHA activity, following up, if necessary, to ensure timely, complete and properly formatted responses within VHA.

f. (10C2) collects and organizes the responses to include as hardcopy attachments to the cover memo.

g. (10C2) compiles the final package for the Under Secretary for Health's signature.

h. (10C2) assigns the final package to 101BREV in EDMS for review and submits the hardcopy folder to (101B).

### (101B) REVIEWER

8. The (101B) Reviewer reviews the VHA response package.

9. The finished product is taken to mail call, signed by 10, and forwarded via EDMS to (008A). The hardcopy folder with VHA's response to (008A) is returned to (10C2) where it is held in a pending file.

### (008A)

10. (008A) compiles the agency response to all of the VSO Resolutions.

11. Once (008A) produces a consolidated response to the VSO Resolutions, (008A) makes an assignment in EDMS to (101B) for VHA concurrence on the final agency response.

12. (008A) advises (101B) if there are and what changes have been made to the initial VHA submission.

a. If (008A) has made **no changes** to VHA's initial submission—no additional internal VHA concurrences are needed from program offices. Final concurrence from the Under Secretary for Health (10) may still be required; however, (008A) will make that determination.

b. If (008A) has made **changes** to VHA's initial submission—new concurrences are required from the affected VHA program offices before (10)'s final concurrence.

### (101B) REVIEWER

13. (101B) Reviewer makes an assignment to (10C2) to finalize package for 10's concurrence.

**(10C2)**

14. (10C2) is responsible for reviewing both the initial VHA submission and the final versions prepared by (008A) of VHA's Resolution responses.
15. If there are **no changes** to VHA's initial submission, (10C2) prepares the hardcopy package for final 10 concurrence. Both hardcopy versions of the Resolution responses are provided to the (101B) Reviewer, with an assignment to 101BREV for (10)'s concurrence.
16. If there are **changes** to VHA's initial submission, (10C2) makes assignments to the appropriate VHA program offices for review and concurrence.
17. (10C2) monitors all of the necessary internal VHA concurrences and prepares the hardcopy package for final (10) concurrence.
18. Both hardcopy versions of the Resolution responses are provided to the (101B) Reviewer, along with all of the additional VHA concurrences and review comments from the affected VHA program offices.
19. (10C2) makes an assignment in EDMS to 101BREV for (10)'s concurrence.

**(101B) REVIEWER**

20. The (101B) Reviewer ensures the full package is presented at mail call for the Under Secretary for Health's concurrence.
21. The (101B) Reviewer and (10C2) work together to resolve any pending issues that may develop as a result of the Under Secretary for Health's review at mail call.
22. (101B) sends VHA's concurrence to (008) via EDMS and closes VHA assignments. Hardcopy folders are returned to (10C2).

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**SAMPLE VETERANS SERVICE ORGANIZATION (VSO)  
RESOLUTION AND RESPONSE**

Resolutions Adopted by the delegates of The American Legion's Eighty-Third National Convention in San Antonio, Texas, August 28-30, 2001.

**RESOLUTION: 127  
PROJECT "SHIPBOARD HAZARD and DEFENSE"**

***BE IT RESOLVED**, by the American Legion in National Convention assembled in San Antonio, Texas, August 28-30, 2001, That the American Legion National Organization support the Department of Veterans Affairs in their quest for information from the Department of Defense, all information requested and the immediate release of the names of the units and veterans involved in Project SHAD; and*

***BE IT FURTHER RESOLVED**, that the Department of Veterans Affairs immediately provide wide spread dissemination of information to all service organizations and Veterans Affairs facilities the names of the units and veterans involved as provided by the Department of Defense; and*

***BE IT FINALLY RESOLVED**, that the Department of Veterans Affairs reopen all cases involving veterans of these units to determine any long term effects from exposure to chemicals, biological or nuclear agents during these tests and that these veterans be granted compensation and benefits for their unwitting participation in the Project.*

Veterans Health Administration (VHA) Under Secretary for Health's Information Letter IL 10-2001-015 was issued on December 31, 2001, and provides updated information about Project Shipboard Hazard and Defense (SHAD). Copies of this letter were provided to all Veterans Service Organization (VSO)'s in addition to Department of Veterans Affairs (VA) health care facilities. VA plans to send individual notification letters to known SHAD veterans for whom current mailing addresses can be obtained. VA also plans to ask the Department of Defense (DOD) to declassify and provide information about other SHAD tests and participants.

VHA, the Veterans Benefits Administration (VBA), and DOD are working together to address the issues of, locating veterans who were involved in these tests, chemicals and other agents utilized and appropriate compensation and benefits.