

VETERAN WARRIORS'

AFTER ACTION REPORT:

FAC: VETERANS' FAMILY, CAREGIVER, AND SURVIVOR MEETING

2023 JAN 25-26



CAREGIVER SUBCOMMITTEE PROVIDED 4 RECOMMENDATIONS:

- Collect full caregiver demographics (age, gender, race, religion, etc)
 - **FACT:** Unsure on the point of this? info is included in the caregiver application
- VA to explain a plan on how they intend to provide outreach and to explain program criteria and application process
 - **FACT:** Unsure of the point of this? VA has provided an outreach plan repeatedly, sent letters, Dr. Richardson and Mr. Jobin have provided updates in multiple forms. Website is clear. Process is clear.
- VA should update stakeholders on implementation of electronic health record
 - **FACT:** This is improperly placed as it should fall under a veteran-centered faca.
- VA should improve care coordination so veterans have ready access to services/programs (recommends flexible case mix tool, mentions aid and attendance)
 - **FACT:** There's a difference between improving access to care and providing a choice of care. Restrictions limit choice. Furthermore, the committee shows clear ignorance of the fact that aid and attendance is listed under this category for the Case Mix Tool. The Case Mix Tool is used by VHA, under Patient Care Services, which CSP falls under with VDC and others. A&A falls under VBA, not VHA. A&A is not, and should not be, considered as access to care because it is not care.

CONCLUSION:

\$535,000 is the standard annual operational budget for this FACA..The facts are irrefutable. A caregiver said it best Wednesday, **"do better or resign your seat."**