Purpose

- Highlight VAVS Accomplishments over the past year
- Reinforce VHA’s Blueprint for Excellence (BPE)
- Link the VAVS strategic direction to BPE
- Pave the way forward
- Celebrate and recognize the valuable partnership of the NAC in VA’s mission to serve Veterans.
“What we call little things are merely the causes of great things.”
-Henri Frederic Amiel

“Sometimes when I consider what tremendous consequences come from little things. I am tempted to think there are no little things. “
-Bruce Barton

“It has long been an axiom of mine that the little things are infinitely the most important.”
-Sir Arthur Conan Doyle

“Don't be afraid to give your best to what seemingly are small jobs. Every time you conquer one it makes you that much stronger. If you do the little jobs well, the big ones tend to take care of themselves. “
-Dale Carnegie
What is the Blueprint for Excellence?

The *Blueprint for Excellence* is Secretary McDonald's plan for improving VHA health care through four major themes:

- Improving performance,
- Promoting a positive culture of service,
- Advancing health care innovation for Veterans and the country, and
- Increasing operational effectiveness and accountability

The document sets forth strategies for each theme to position VHA as Veterans' best health care choice by providing **both** excellent health care and an excellent **experience** of care.
What is the purpose of the Blueprint for Excellence

- The *Blueprint for Excellence* is a guide for action that unifies and clarifies major strategies for improved health care performance moving forward. It provides guidance for the alignment of resources and describes steps we will take to transition to an increasingly Veteran-centric, value-driven culture of care. The document provides references to demonstrate how each transformational action supports the overall VA Strategic Plan and the VHA Strategic Plan. It provides concrete examples of how VA can put into practice the four over-arching themes that will place Veterans first.

“If you don’t know where you’re going, almost any road will take you there.”
VAVS Strategic Goals

**LEADERSHIP**
Identify leadership/management competency gaps and facilitate continuous training & development.

**COLLABORATION**
Sustain and build internal and external strategic partnerships.

**IMPACT**
Development of programs and partnerships that focus on support of VA and VHA strategic goals.

**RESULT:**
A VA culture that values the strategic engagement of volunteers/community partners, and the professionals who facilitate their involvement.
Strategy 1

Operate a healthcare network that anticipates and meets the unique needs of enrolled Veterans, in general, and the service disabled and most vulnerable Veterans, in particular.

**Leadership:** Professionally managed, strategically designed programs (LCI)

**Collaboration:** NAC, Using services within VA facilities, “Veterans serving Veterans”

**Impact:** Enhancement of the Veteran experience, unique opportunity to support spirit of camaraderie among Veterans, supplement clinical operations

**Accomplishments:**
- 69th annual NAC Meeting
- Programs and services for women, children & families
- Creation of unique innovative assignments
- Ongoing ability to support VA’s National Programs & Special Events
Strategy 2

Deliver high quality, Veteran-centered care that compares favorable to the best of private sector in measured outcomes, value, access and patient experience.

**Leadership:** Sustained board and committee involvement with Association for Healthcare Volunteer Resource Professionals

**Collaboration:** Shared training and best practices

**Impact:** Professional Development, Certification (CAVS); Highlight VA’s programs

**Accomplishments:**
- Certification exam preparation
- Ongoing VAVS representatives on AHVRP board and committees
- Award for Excellence presented to Mr. Joe Dooley, Bedford, MA.
**Strategy 3**

*Leverage information technologies, analytics, and models of healthcare delivery to optimize individual well-being and population health outcomes.*

* (Leverage IT and best practices)

**Leadership:** Task Group for the re-design of Volunteer Services Timekeeping System (VSS)

**Collaboration:** VA Office of Information & Technology (OI&T) for system re-design, VHA Communications, Office of Public & Intergovernmental Affairs (OPIA)

**Impact:** Funded VSS, outreach and recognition for VAVS programs and volunteers (social media)

**Accomplishment:**
- Plan for upgrade to VSS
- VAVS presence on websites, Facebook, Twitter
- Incorporation of Leadership Development Portal for collaboration and training
Strategy 4

Grow an organizational culture, rooted in VA’s core values and mission, that prioritizes the Veteran first, engaging and inspiring employees to their highest possible level of performance and conduct.

**Leadership:** “Living” the I CARE values, orienting volunteers to VA’s core values

**Collaboration:** Training for volunteer supervisors, employee volunteerism

**Impact:** Enhanced volunteer experience, employee engagement and motivation

**Accomplishments:**
- Reinforce I CARE values for staff (VAVS Academy), volunteers, and NAC
- NAC recommendation for incorporating VAVS orientation into New Employee Orientation and leadership development programs
- Foundation that has been established through Presidential Management Fellows program, and Leadership VA
- VACO employee involvement in Sep 11 & MLK Day of Service activities/ I CARE Challenge
Strategy 5

Foster an environment of continuous learning, responsible risk-taking, and personal accountability.

**Leadership:** Technical Career Field (TCF), VAVS Academy, AHVRP

**Collaboration:** Professional associations, volunteer supervisors, facility leadership, Healthcare Talent Management Office

**Impact:** Improved performance and better-managed programs, health outcomes for Veterans through unique program design, ultimately leading to program growth

**Accomplishments:**
- Addition of leadership training to NAC
- Redesign of VAVS Academy
- Faculty Training
Strategy 6

Advance a model of healthcare that is personalized, proactive, and patient-driven, and engages and inspires Veterans to their highest possible level of health and well-being.

Leadership: VAVS Program Management and the strategic integration of volunteers and donations

Collaboration: National Programs & Special Events, National Volunteer Task Force, VHA program offices (Homeless Veterans, Office of Rural Health, Office of Health Equity, Care Management & Social Work), Communications and Outreach, NAC & other community organizations

Impact: Veterans Serving Veterans, Veterans Peer Mentoring, Volunteer Caregiver Respite, Volunteer Transportation Network, Warrior to Soul Mate and No Veteran Dies Alone Programs- (Access/Veteran Experience/Outreach to Families, Opportunities for community engagement)

Accomplishments:
• VSO’s continue to represent 50% of volunteer workforce
• National Volunteer Taskforce under President Obama
• Evaluation process for Volunteer Caregiver Respite Program
• Partnership with Walter Reed
VAVS Statistics and Impact

2014 VAVS Impact

Value Added

$250,895,855 + $70,799,635 = $321,695,490

Volunteer Contribution
(based on Independent Sector’s value of $22.55/hour)

Donations
(monetary and non-monetary, taken from VSS)

TOTAL

Costs to VA

$63,460,063

Includes salaries, benefits, supplies, travel, and volunteer meals for field and VACO based on 2014 figures.
Strategy 8

Support innovation in health services through academic affiliations, information exchange, intergovernmental, public-private, and community-based initiatives.

Leadership: NAC, EC, National Task Force, VISN Liaisons

Collaboration: NAC Member Organizations, Corporation for National & Community Service (CNCS), Schools/Universities, Business & Corporate Entities

Impact: Volunteers and Donations for VA programs and services

Accomplishments:
- Robust NAC and EC committee, addition of Adhoc Subcommittee
- Youth volunteer work group
- Expanding relationship with CNCS (National Task Force, Volunteer Caregiver Respite)
- New relationships with a number of new organizations, including IRS, American Airlines, Dream Foundation
Strategy 9

Operate and communicate with integrity, transparency and accountability to earn and maintain the trust of Veterans, stewards of the system (Congress, Veterans Service Organizations) and the public.

**Leadership:** Informed VAVS staff who demonstrate commitment and integrity through their work, responsive to Congressional inquiries

**Collaboration:** GPF Review Committee (GPFRC), Office of Finance, Office of General Counsel, VAVS Committees, Town Hall Meetings, VSO Meetings

**Impact:** Ongoing involvement of volunteers and commitment of organizations in support of VAVS, understanding and guidance for VAVS programs through internal partners, Public-Private Partnership (P3) work group

**Accomplishments:**
- GPF Authority to support Homeless Veterans & Stand Downs
- Update to Program Review Process
- GPFRC Construction Guidance
- P3 guidance/HHV/VSO Decision
- CO Advance Spend Plan
- Congressional Staffers Open House
## VISN 1 VAVS FY14 Metrics

### Volunteer Statistics

<table>
<thead>
<tr>
<th>Location</th>
<th>Volunteers On Rolls End of Period</th>
<th>Volunteers Recruited in Period</th>
<th>Volunteers Terminated in Period</th>
<th>Net Gain/Loss of Volunteers in Period</th>
<th>Regularly Scheduled Volunteer Hours</th>
<th>Occasional Volunteer Hours</th>
<th>Adjustment of Volunteer Hours in Period</th>
<th>Total Volunteer Hours</th>
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### Total RS Volunteers

#### VISN 1 Volunteer Data Table

- **VA Maine HCS (402)**: 362
- **White River Junction (405)**: 505
- **Bedford VAMC (518)**: 771
- **Worcester VA (631D)**: 13
- **VA Central Western MA (631)**: 678
- **Providence (650)**: 509
- **Manchester (608)**: 380
- **Newington-Connecticut (689A)**: 399
- **West Haven - Connecticut (689)**: 776
- **West Roxbury VA Boston (523C)**: 369
- **Jamica Plain VA Boston (523)**: 552
- **Brockton VA Boston (523A)**: 1,165

### Total Volunteer Hours

- **VA Maine HCS (402)**: 30,862
- **White River Junction (405)**: 41,776
- **Bedford VAMC (518)**: 35,217
- **Worcester VA (631D)**: 1,688
- **VA Central Western MA (631)**: 33,100
- **Providence (650)**: 37,997
- **Manchester (608)**: 36,255
- **Newington-Connecticut (689A)**: 44,956
- **West Haven - Connecticut (689)**: 58,188
- **West Roxbury VA Boston (523C)**: 21,619
- **Jamica Plain VA Boston (523)**: 23,186
- **Brockton VA Boston (523A)**: 38,292

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**VETERANS HEALTH ADMINISTRATION**
Strategy 10

Modernize management processes in human resources, procurement, payment, capital infrastructure, and information technology to operate with benchmark agility and efficiency.

Leadership: VAVS Task Forces/Work Groups, Handbook/Policy Updates, NAC Conference Planning,

Collaboration: VAVS Field, VAVS Partners, Corporate/Community Partners, VA internal offices (Contracting, HR, Policy & Planning, OI&T, Finance, Cross-agency collaboration (NCA/VBA)

Impact: VAVS position classification, Volunteer Transportation Network (VTN), Valentines for Veterans Concert Series

Accomplishments:
- Established work group for VAVS position classification/ VTN
- Streamline application/orientation process through online mechanisms
- Re-integrate Valentines for Veterans Concerts during National Salute & throughout the year
- Efficiency in conference approval process
LEADERSHIP
Professional Development/Training
NAC/EC
VAVS Strategic Planning
VISN Liaisons

COLLABORATION
Field
Internal VA stakeholders
Outreach
NAC Member Organizations
Community at-large

IMPACT
Internal champions
Statistics and Stories
Link to strategic direction of VA/VHA

RESULT
Long term viability of VAVS
Enhance Veterans Experience
Strong support & advocacy for Veterans
For VAVS, what remains is an insatiable desire to serve Veterans, a keen ability to match the skills and talents of others with the needs of our facilities, and a commitment to the individuals and organizations who steadily stand on their traditions of service. This is the foundation of VAVS and it is what will endure through periods of change or challenge. Stay calm.

We’re standing on very solid ground!

- Sabrina C. Clark