

RECORD VERSION

STATEMENT BY

MAJOR L. TAMMY DUCKWORTH
UNITED STATES ARMY

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SEAMLESS TRANSITION FROM ACTIVE DUTY TO VETERANS' STATUS HEARING

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Mr. Chairman and distinguished members of the Committee, thank you for the opportunity to come before you today to discuss the care of wounded service members injured in Operations Enduring Freedom(OEF) and Iraqi Freedom (OIF) and our efforts to facilitate the transition between the Military and Department of Veteran Affairs (VA) Health Care Facilities and between military and veteran status.

I feel that a core component of Seamless Transition is our nation's investment in its finest citizens, the past and present members of the military. I believe we must continue to fund and support Walter Reed Army Medical Center, Brooke Army Medical Center, National Naval Medical Center at Bethesda and other major Military Treatment Facilities. We must also ensure that the VA receives adequate funding to enable that organization to continue to enhance the care it provides for our veterans. It would be difficult for either agency in the Seamless Transition to participate as a full partner if it is unable to meet the current superior level of care due to lack of resources.

The medical efforts of Walter Reed Army Medical Center, as well as the medical team at Landstuhl Regional Medical Center, the Combat Support Hospitals and the in-theater MEDEVAC helicopter crews have been extraordinary. In any previous conflict I would not be alive. It is a testament to the superior protective equipment that I was wearing and to the medical care pipeline from the front lines that I can be here today.

Military Treatment Facilities (MTFs) are a crucial part of the integrated medical system, which has performed so well during this conflict. The medical personnel who we have pushed so far forward in the effort to save our warriors' lives during the 'Golden Hour' are trained at stateside MTFs. If in a 'cost saving' effort we were to dismember this integrated system, and outsource both the care and training provided by the MTFs,

we would cripple the training of medical personnel in blast injuries, gunshot wounds, theater specific bacterial infections and other injuries peculiar to the war wounded. I owe my life to Doctors and Nurses at the Combat Support Hospital who are highly trained in caring for, and operating on, those types of injuries. I know that this same training gave my surgeons at Walter Reed the expertise to save my arm when many feared that it would need to be amputated. The care provided to our wounded once they reach stateside MTFs is spectacular, and I do not believe that it can be duplicated at a civilian hospital at any price.

The presence of the peer group of wounded at Walter Reed, and especially amputees, is a huge factor in my recovery. Because we are concentrated in large MTFs and recovering together, it is a very positive environment. The patients and most of the medical staff are military and share a mission focused mind set. I am not isolated at Walter Reed, as I would be in a civilian hospital where the staff is unlikely to have experience with as large a concentration of amputees from blast injuries as at Walter Reed or Brooke Army Medical Centers.

I would urge you to think of the efforts of Army Medical Department and the VA as a force multiplier for two reasons. First, these organizations can help us retain good Soldiers, Marines, Airmen and Sailors who would have otherwise not been able to continue to physically accomplish their missions and remain in the service of the United States. These wounded have already been trained at great expense, as well as been tested and gained invaluable experience in the crucible of combat.

Secondly, our warriors must be able to focus completely and single-mindedly on the mission at hand, serving the people of the United States of America. When that mission

is to close with and destroy our nation's enemies I believe that we want our warriors to be secure in the knowledge that, when they are hurt we will take care of them. The frontline Soldier should not expend a moment of time to worry about a fallen comrade. We must ensure that he knows, 'my buddy made to Walter Reed, he will be ok, they have the best doctors, and cutting edge technology there'. We will maintain the optimal morale and performance from our Soldiers through ensuring that these medical facilities are adequately funded.

I have experienced first hand the excellence of the Army's medical system for the combat wounded. Because of the type of injuries, and the geographical location of my home, I have been treated at Walter Reed. Had I been burned badly, or if my home been in the western part of our nation, I would have been sent to a different facility, and I believe it is just as important to fund all of those facilities, also.

As disabled soldiers transition to veteran status, we will look to the VA to provide continued access to healthcare, health technology, assisted living devices and social services. The VA will have to face the challenge of providing care at the high level set by the military healthcare facilities. This is a challenge that the VA can meet if it is given enough resources and if it listens to the disabled service member and puts forth the effort to meet our needs.

The first, most easily identified need that the VA will have to support is continued access to technology. Disabled veterans will require access to evolving technology as they age and as the available technology undergoes innovation and changes. The VA will need to track ongoing changes in medical technology such as in prosthetics research and inform the veteran of the availability of this new technology.

I am certain that while the American people are focused on injured Soldiers from the Global War on Terrorism, the funds to aid those Soldiers will continue to be forthcoming. I am concerned that during peacetime, funds for research such as in the field of prosthetics will be reduced. The VA needs to continue to support the cutting edge research that is underway as a result of the current conflict's wounded. In order to do so, the VA itself will need continued funding earmarked for this purpose.

Second, as I look around at the other wounded Soldiers, it is clear that the majority of them are young with long lives ahead of them. Whether we will continue to have the honor of serving in uniform, or return to productive civilian lives, we will require continued access to technology as we age. The VA will need to support this need over the long term as currently wounded Soldiers will be making use of its services over a lifetime.

Third, disabled soldiers will need access to assisted living devices such as:

- 1- High tech prosthetic care.
- 2- Orthopedic care.
- 3- Home modifications i.e. ramps, thresholds, lifts and wide doors.
- 4- Vehicle modifications/hand controls.
- 5- Specialty equipment such as wheelchairs (racing), bathroom equipment, hand cycle, adaptive sports equipment.
- 6- Specialty equipment for blinded soldiers such as talking appliances or computers.
- 7- Smart home technology.

Fourth, the VA will need to provide access to social services such as job counseling and psychological support. Many of the young wounded Soldiers today need advice on which jobs or educational programs will be most suited to them. Such career counseling will allow the Soldier to maximize the educational and job training benefits provided by the VA. Additionally, those that sustained brain injury as well as those that develop psychological trauma will need long term counseling and support.

Fifth, it does the disabled veteran no good if he or she is unable to access the various programs provided by the VA. While still assigned to Walter Reed I have immediate access to the prosthetics care that is part of my recovery process. This access will continue for me through the new amputee center. However, for disabled veterans living in areas far from VA Hospitals and facilities, travel itself is a significant obstacle to their continued care. These disabled veterans will need regular, easy transportation support from the VA.

I can only hope and implore that the VA steps up to receive disabled veterans as we transition into its care from the military medical system. In order to do so, the VA will have to identify and develop specific programs and those programs will have to be funded into the future. I also ask that a system such as a checklist be created to give to injured soldiers or their next of kin to give them a road map to follow as they move from the military medical system into the VA.

While I currently cannot comment from personal experience on the quality of care available in veterans' hospitals, I have been witness to the outreach efforts of the VA. These efforts have been highly personal, and as a result, my concept of the VA is not that of a faceless bureaucracy. At this point the face of the VA is a veteran and

amputee that befriended my husband and mother even as I lay unconscious in the Intensive Care Unit. The VA is a former Army Ranger and his wife who came to visit me and all the other wounded in our hospital rooms. The VA is a vet who wheels in to check on the condition of my wheelchair and tells me from his personal experience the importance of a good seat cushion.

I applaud the VA and Department of Defense (DOD) partnership that assists military service members who have served in combat and aims to provide them with a seamless transition to civilian life and veteran status.

Those select individuals from amongst the American people who would willingly serve in the armed services are a limited resource. Our warriors are expensive, and indispensable. I believe we must jealously guard this resource; retaining as many as possible in the service, and sparing little in the effort to return one of them to service. The investment in training dollars represented by even one junior Non-Commissioned Officer could easily be several hundred thousand dollars over the course of 5-6 years. Such are the expensive assets that Walter Reed is in the business of fixing and maintaining and I believe the American people's tax dollars are well spent there.

Additionally, once out of the military, our veterans make up a highly trained and disciplined pool of workers ready to add to the productivity of the civilian workforce. Veterans supported by the VA and able to lead productive lives are valuable contributors to the economy. The cost of providing wheelchairs or prosthetics to veterans through the VA system is an investment recouped through taxes paid by those same veterans who can now work as a result of these devices.

Finally, on behalf of our injured, wounded or ill Service members and their

families, I thank members of this great institution for this opportunity to address their concerns for medical care of our nation's Veterans, Soldiers, Marines, Sailors and Airmen.