VAVS Representative
&
Deputy Representative

TRAINING GUIDE

2019-2020

Military Order of the Purple Heart

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Source for much of this information is the VHA Handbook 1620.1
Department of Veterans Affairs, Veterans Health Administration, Washington D.C.
Please provide me with comments on this training guide. Without your comments, it is very difficult to make meaningful changes to our VAVS Training. Thank you.

NAME: 

TITLE: 

TELEPHONE: 

EMAIL: 
ABOUT THIS TRAINING GUIDE

The purpose of this Guide is to provide practical information on how to perform successfully as a VAVS Representative [Reps] or Deputy Representative (Deps). Although general in nature, this information should be shared with all of our Patriots. The information will be helpful to your Reps/Deps as they perform their duties.

If you have specific questions, you are encouraged to contact Greg “Doc” Lutes, our National VAVS Director. As a Representative or Deputy, you have a responsibility to be knowledgeable about the rule, policies and programs of the Military Order of the Purple Heart (MOPH) VAVS Program and the Department of Veterans Affairs Voluntary Service. This information is provided to help you acquire this knowledge.

I. The VAVS Program:
The Veterans Affairs Voluntary Service (VAVS) Program, under the management of the Department of Veterans Affairs (VA), provides for community participation in the VA Program of Care and Treatment of Veteran patients.

Through this program, community volunteer efforts and resources are combined to serve America’s Veterans and their families with dignity and compassion. VAVS Volunteers assist Veterans by augmenting VA Staff in such settings as hospital wards, nursing homes, ambulatory care, domiciliaries, community-based volunteer programs, end of life care programs, veterans outreach centers, national cemeteries and limited assistance in veterans' home.

II. Goals:
The VAVS goals are to:

a. Ensure that the VAVS Program is supportive of the VA’s mission.

b. Provide veterans served by the VA with a comprehensive range of services, which are supplemental to budgetary appropriations.

c. Provide supplemental services in a timely manner through a Volunteer Program Manager. This is done in cooperation with individuals,
veterans' service organizations, businesses, educational institutions and community organizations through human resources, gifts and donations.

d. Ensure all volunteers are informed of the VA's primary responsibilities.

e. Provide a working environment that is safe, clean and comfortable.

f. Promote cooperation among employees and volunteers.

g. Earn the respect and gratitude of those served.

h. Ensure volunteers are given assignments that provide satisfaction, utilize knowledge and skills and offer opportunities for learning.

i. Maintain a volunteer recognition system to ensure that volunteers are appropriately recognized.

j. Maintain interaction of volunteers with patients in ways that foster the healing process.

k. Ensure that all volunteers serve under the supervision of VA compensated employees in authorized assignments, which meet identified needs.

l. Ensure that participation in the VAVS Program does not discriminate on the basis of age, sex, race, religion, non-disqualifying handicap and national origin.

III. National VAVS Advisory Committee:
The VAVS National Advisory Committee (NAC) was established by VA Circular No: 117, dated May 17, 1946 and became a federally chartered advisory committee on February 5, 1975.

The Committee advises the Under Secretary for Health on matters pertaining to the participation of volunteers in VA medical facilities. Committee membership is open to all national organizations that provide volunteers or donations to VA medical facilities and meet or exceed minimum criteria established by the NAC.

A “Service Member” (voting) must maintain the provision of volunteers and VA recognized participation on local VAVS Committees at a minimum of thirty VA facilities.
IV. **Medical Center VAVS Committee:**

Each medical center has a VAVS Committee made up of organizations whose members participate at the local level in the VAVS Program for Veteran patients. Each organization may certify one Representative and up to three Deputy Representatives to the medical center’s VAVS Committee.

The actual certification of the MOPH VAVS Representatives and Deputies is done by our National Certifying Official, upon the recommendation of the respective Department Commander.

**NOTE:** Local Representatives and Deputy Representatives may represent more than one local VAVS Committee “if” the Facility Director believes accepting the appointment is in the best interest of the facility. An individual may only represent “one” organization.

Organizations will be removed from the VAVS Committee when none of the certified members is in attendance for at least three consecutive meetings. Membership though, can be renewed with a letter of certification to the Facility Director indicating that the attendance requirement “will” be met.

**NOTE:** Notification to our National VAVS Director and National Certifying Official is required when our organization is removed from a local VAVS Committee.

Notification is to be in writing and submitted in a timely manner, with a copy to the Director, Voluntary Service Office and to the Facility Director.

The VAVS Committee serves first in an advisory capacity to medical center management in coordinating on a local level, the established plans and policies for volunteer participation of the committee’s respective organizations, chapters, departments and resources in the VAVS Program. Each member of the committee will keep medical center management advised about their organization’s policies and procedures for volunteer assistance and will provide guidance within their membership for appropriate participation in the VAVS Program.
Quarterly meetings of the VAVS Committee must be scheduled each fiscal year. It is recommended, but not required, that one evening meeting is held each quarter to accommodate working VAVS members.

V Qualifications for VAVS Representatives:
The caliber of participation by an organization in the VAVS Program can be largely judged by the caliber of leadership provided by its VAVS Representatives. The following qualifications have been suggested by VAVS Leadership, MOPH Leadership and medical center staff.

1. Willing and able to participate in the orientation provided by the Voluntary Service Officer.
2. Physically capable of performing regularly schedules (RS) hours of service and have a source of transportation.
3. The ability to attend committee meetings regularly. If MOPH is not represented by a Representative or a Deputy Representative at three consecutive meetings, MOPH may be dropped from the VAVS Committee.
4. The ability to recruit volunteers of all ages, both from MOPH membership and the community at large.
5. The ability to work effectively with members of his or her own organization, with representatives from other organizations on the VAVS Committee and with VA staff.
6. A genuine desire to serve on the VAVS Committee and a full realization of his or her responsibility and the work to be done.

VI VAVS Representatives' and Deputies' Responsibilities

A. VAVS Representatives will be responsible for the following functions:
1. Recruitment of Volunteers:
2. Coordination of the volunteer resource of MOPH and all aspects of their participation in the VAVS Program at the medical center.
3. Interpretation of policies and procedures of MOPH to the VAVS Committee and appropriate VA staff.
4. Annual evaluation of MOPH participation in the VAVS Program with the leadership of MOPH and the VA. (Annual Joint Review scheduled with the Chief of Voluntary Services or Program Manager).

5. Establishment of procedures for keeping all participating elements of MOPH informed of ongoing medical center programs and needs.

B MOPH may have up to three deputy representatives to share the duties of the representative. Their responsibilities include:

1. Attending VAVS Committee meetings in the absence of the representative.

2. Attending meetings with the VAVS Representative in order to be fully knowledgeable of the work of the committee and to be able to represent MOPH effectively when the representative is unable to attend.

Note: When medical center management determines the need for VAVS support at satellite clinics for which they have administrative responsibility, MOPH may appoint an additional Deputy Representative for the satellite outpatient clinic (a clinic situated at a distance from the medical center). However, this will be determined on a case by case basis. The appointment is to the parent (medical center) VAVS Committee.

VII. Associate Representative / Deputy Representative:
Organizations represented on the NAC may appoint one VAVS Associate Representative and one VAVS Deputy Associate Representative from adjacent states / Departments to the facility, if MOPH has members in an adjacent Department participating in that particular VAMC.

A. Associate Representative’s duties (except for voting privileges, which may be delegated in the absence of the representative) are the same as a representative, but limited to the adjacent department. The Associate Representative must hold membership in MOPH, in the adjacent Department.

B. Associate Deputy Representative’s duties consist of those assigned by the Associate Representative. Deputy Associate Representatives may participate fully in discussions at facility VAVS Committee meetings.
and may be appointed to subcommittees and task groups. The Deputy Associate Representative must hold membership in MOPH, in the adjacent Department.

VIII. General Information:
A. Recruitment of volunteers is “the” most important responsibility of an MOPH VAVS Representative and is to be accomplished through your Chapter and/or Department.

1. Representatives may invite VA staff to MOPH meetings to discuss the volunteer program and assist in recruitment. MOPH leadership may attend VAVS meetings, medical center briefings and tours to better understand the VAVS Program.

2. VA staff members may effectively assist you in planning your recruitment by determining worthwhile volunteer assignments, preparing effective volunteer assignment guides and utilizing the media to enhance the recruitment efforts for both MOPH members and non-members.

3. Voluntary Service Staff is available to discuss Representatives new recruitment methods and techniques, effective utilization of medical center services and effective use of the media.

B. Classification of Volunteers:
1. Regularly Scheduled (RS) volunteers are individuals who participate in the VAVS Program on a regularly scheduled assignment under VA supervision. A formal orientation is required and in some medical center a TB test is required. These volunteers are considered “without compensation” employees. Their hours are recorded and awards may be presented according to the number of service hours volunteered.

2. All other volunteers, serving either through MOPH or independently, are designated Occasional Volunteers. MOPH receives credit for service given rather than individually as sre (RS) volunteers. No individual records are maintained for occasional volunteers.
3. Student volunteers under the age of 18, but over 14 or those that satisfy the state’s definition of underage, must have written parental or guardian approval to participate in the VAVS Program and authorization for diagnostic and emergency treatment if injured while volunteering.

C **Training of Volunteers:**
1. The Voluntary Service Office is responsible for providing general user-friendly orientation to regularly scheduled volunteers about the role of the VAVS Program, including policies and procedures, eg: the Privacy Act, infection control, fire and safety, etc.
2. Additional orientation in the specific assignment to which the volunteer has been assigned and necessary on-the-job instruction will be provided by the assignment supervisor.

NOTE: Every effort should be made to ensure volunteers have access to orientation and assignments that accommodate their schedules.

D **Supervision of Volunteers:**
The Regular Scheduled (RS) volunteer receives multiple, but not conflicting, supervision.
1. First there is supervision exercised by the VAVS Representative of MOPH.
2. Second, general supervision must also be maintained by the Voluntary Service staff.
3. Finally, there is supervision by VA staff in the work assignment area.

E **Recognition of Volunteers:**
1. Every April, during National Volunteer Week, each VAMC normally sponsors a Volunteer Recognition and Awards Ceremony at which a variety of awards are presented to eligible volunteers. Awards are based on the number of cumulative hours each award recipient has served through the preceding fiscal year.
2. MOPH also accepts nominations, annually, from the Chiefs of Volunteer Services or Program Managers and Departments for MOPH Special VAVS Awards.
F Volunteer Benefits:
1. Meals may be furnished without charge to (RS) volunteers provided the scheduled assignment extends over an established meal period and to occasional volunteers when appropriate.
2. Emergency medical treatment is provided if a volunteer is injured or incapacitated while in his or her volunteer assignment. All uncompensated volunteers are considered employees and are eligible for injury compensation benefits. In all cases of accident or illness, report immediately to your supervisor who is responsible for contacting the Voluntary Service Office.
3. Volunteers are accorded the same privileges as employees in their patronage of the Canteen. The Canteen includes a cafeteria and a retail store which offers items at discounted prices.
4. The office of Voluntary Service will furnish letters of reference to regularly scheduled volunteers upon request.

G Termination of (RS) Volunteers:
The Voluntary Service Officer, Chief or Program Manager, may remove a VAVS Volunteer for unsatisfactory performance, inability to perform the assignment, or violation of established policy and/or procedures.

IX. Annual Joint Reviews:
A Joint Review of the VAVS Program will be made annually during each fiscal year by the VAVS Representative and the Chief of Voluntary Services or Program Manager.

The purpose of this review will be to make an annual inventory of MOPH participation in the VAVS Program and to jointly develop goal and plans for the next year. A strategy is to be developed to assure the most effective use of MOPH volunteers.

All Annual Joint Reviews will be completed during the month of October. When these reviews are completed, they will be signed by the VAVS Representative and the Voluntary Service Officer completing the review. The original is retained by
the Voluntary Service Office with copies sent to the MOPH National VAVS Director / Representative and the local VAVS Representative.

In instances when the office of Voluntary Service is unable to arrange a meeting with the VAVS Representative, reviews can be conducted by telephone or mail. If Annual Joint Reviews are not completed, a report to that effect must be submitted by the Voluntary Service Officer and sent to the MOPH National VAVS Director.

X. Gifts and Donations:
All requests for and acknowledgement of gifts and donations should be cleared through the Voluntary Service Office. This procedure pertains to VA personnel, individual donors and all organizations.

Gifts and donations accepted through VAVS channels will be for the sole purpose of meeting particular needs and requirements for the welfare and comfort of veteran patients. Always consult the Voluntary Service Office before bringing any items to the medical center to be sure they are needed and can be used.

When MOPH plans to undertake a specific volunteer project at the medical center, it is important that you thoroughly understand the scope, ramifications and responsibilities involved.

Both VA staff members and the Voluntary Service Officer concerned should, through a common understanding and planning of the project, make every effort to ensure that the best interests of the Veterans and the VAVS Program are served.

General Post Funds are special accounts established at the medical centers to support the needs of the Veteran patients through volunteer donations. All contributions to the General Post Funds should be earmarked at the bottom of the check to the appropriate medical center fund.

XI. Automated Information System Records:
Voluntary Service is required to record hours and visits of all volunteers each month. The processing of this data will be accomplished by utilizing the Voluntary Service System (VSS).

All volunteer information will be entered into the VSS - this information, including any addition and / or changes, will be recorded and retains as part of the permanent record.

Monthly, semi-annual and annual reports are printed directly from the VSS - these reports are made available to our National VAVS Director.

When a volunteer transfers to another VA facility, upon the volunteer’s request, hours of service, awards and other pertinent data should be transferred to the new VA facility. Transferred hours are creditable at the new location towards awards not previously received.

XII. Regulatory Guidance:

- All VA regulatory guidance governing Voluntary Service procedures is contained in VHA Handbook 1620.1.

- Copies of all VHA Handbooks / Guidelines are available on the VA’s website (http://www.va.gov/vhapublications).

- This document was prepared by the MOPH National VAVS Director.