



Warrior Care and Transition Program: Making Good on a Promise

We can never do enough in our mission to provide care and support to our wounded, ill, and injured Soldiers and their families.

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Introduction

The U.S. Army is fully committed to caring for its Soldiers (active Army, Army National Guard and Army Reserve) and their families in these challenging times. It continues to improve upon that care through a patient-centered health care system, Soldier and Family Assistance Centers and improved Warrior Transition Unit (WTU) facilities. Programs such as the Warrior Care and Transition Program help wounded, ill and injured Warriors return to duty or transition to civilian life.* These Warriors in Transition have only one mission—to heal and rehabilitate.

Helping Warriors in Transition

During the past 19 months, the Army has made major strides in its effort to transform Soldier and family care and support. Legacy Medical Hold and Holdover units that were in large part staffed with recovering Soldiers have been replaced by 36 WTUs. These stand-alone units provide dedicated command, control, support and care management for more than 10,000 wounded, ill and injured Soldiers who require comprehensive care management as they recover. In addition, nine community-based WTUs provide similar care management for approximately 1,500 reserve

component Soldiers at locations throughout the United States, permitting these Soldiers to recover near where they live. More than 3,200 permanent cadre and staff provide the care and support. Moreover, the Army has established Soldier and Family Assistance Centers at all locations with WTUs to provide Warriors in Transition and their families dedicated assistance with any requirements from ID card issues to information and education services, Traumatic Servicemembers' Group Life Insurance counseling and assistance in applying for and receiving VA services and benefits.

As a result of this concentrated effort, Soldier satisfaction with WTUs has increased from the 60-percent range in July 2007 to approximately 80 percent in one year. While these percentages indicate significant improvement, work remains to be done to reach the high level of care and support the senior Army leadership envisions for its Warriors in Transition.

Assessing and Improving Services

In its comprehensive efforts to reach out to all Soldiers, the Army permitted Soldiers with routine medical issues

* For more information, see *2008 Army Posture Statement*, Addendum I: Warrior Care and Transition, available online at http://www.army.mil/aps/08/addenda/addenda_1.html; and AUSA Defense Report 07-2, "Army Medical Action Plan," June 2007, and Defense Report 07-3, "Supporting Those Who Have Given So Much: Army Medical Action Plan Update," September 2007, both available online at http://www.ausa.org/about/ilw/ilw_pubs/DR/Pages/default.aspx.



to join the WTU while recovering, instead of remaining with their parent unit. This created unforeseen growth in the Warriors in Transition population, to the detriment of those wounded Soldiers who require extensive care. To correct this situation, the Army refined the entry and exit criteria for WTUs and implemented procedures to allow Soldiers with routine medical issues to remain with their parent units. This effort, albeit only a few months old, has focused and prioritized medical care and case management to those with the most need.

The number of Soldiers with mental health care requirements has significantly increased during the past year. The Army has addressed this important area with the development of a new approach to improving and maintaining good mental health—the Comprehensive Soldier Fitness program. This comprehensive endeavor, debuting in October 2008, emphasizes the importance of maintaining mental health as well as physical health.

Processes that support Warriors in Transition, although improved, continue to frustrate Soldiers and their families. Administrative and medical board processes, for example, are time-consuming and complex. While efforts by the Secretaries of Defense and Veterans Affairs continue to define the disability evaluation system of the future, the Army has undertaken an independent effort to identify best practices from the installation level and implement them Army-wide. General Frederick M. Franks, Jr., USA Ret., former commanding general of U.S. Army Training and Doctrine Command as well as commander of VII Corps

in Operation Desert Storm, leads the effort to streamline the Medical Evaluation and Physical Evaluation Boards processes.

The Way Ahead

The Army, in conjunction with the Department of Defense and Congress, continues to improve living facilities for Warriors in Transition. They have priority to receive the best available housing on Army installations. To date, nearly \$500 million dollars has been either spent or designated to improve access to and quality of barracks. The Army continues to work with Defense Department leadership and Congress to fund military construction projects including the development of Warrior Transition complexes that will serve both Warriors in Transition and their families.

In the future, WTUs will receive an increase in the number of nurse case managers, squad leaders and platoon sergeants who provide care to Warriors in Transition. While staffing of support and cadre positions is now at or above current staff ratios, recent studies have identified that reducing the number of Warriors in Transition for whom individuals in these positions are responsible significantly enhances care.

As the Army shifts the weight of its effort from building WTUs to improving their performance, senior Army leadership remains committed to helping Soldiers and their families manage their expectations during the healing and transition process by continuing to provide the very best care and support possible.

Key Points

- The Army has developed an effective network of Warrior Transition Units for almost 12,000 active and reserve component Warriors in Transition and their families.
- Warrior Transition Units are supported by Soldier and Family Assistance Centers providing everything from housing to assistance with receiving benefits and services from the Department of Veterans Affairs.
- Soldier satisfaction within Warrior Transition Units has increased to nearly 80 percent during the past 12 months.
- Entry and exit criteria have been refined and procedures implemented to allow Soldiers with routine medical issues to remain with their parent units.
- In October 2008, the Army is implementing its new Comprehensive Soldier Fitness program to help Soldiers and families maintain good mental health.
- The Army is conducting an external review to identify best practices for supporting Soldiers and families with the Medical and Physical Evaluation Board processes.
- Nearly \$500 million has been spent or designated in the past two years to improve Warriors in Transition housing and begin development of Warriors in Transition complexes.
- Additional nurse case managers, platoon sergeants and squad leaders are being added to WTU staff to provide more one-on-one care and support to Warriors in Transition.