

Chairman Patty Murray

Senate Veterans' Affairs Committee  
United States Senate  
Hearing: VA Mental Health – Addressing Wait Times and Access to Care  
November 30, 2011

Welcome to today's hearing to examine the barriers our veterans are facing in seeking mental health care.

Today's hearing builds upon our July hearing on the same subject.

At that hearing, the Committee heard about two servicemembers, who – even after attempting to take their own lives – had appointments postponed and difficulties cutting through the red tape in order to get care.

I know that, like me, many on this Committee were angered and frustrated by those stories. And I'm glad that today we'll have the opportunity to both get more information and answers on why these delays persist.

Today, we will hear from providers about the challenges they face in getting patients into care – including from Michelle Washington who has been brave enough to come forward to give us a true sense of the daily frontline barriers at our VA facilities.

We will also hear about the critical importance of access to the right type of care - delivered on time - by qualified mental health professionals.

At our hearing in July I requested that VA survey their frontline mental health professionals about whether they have sufficient resources to get veterans into treatment.

The results that came back to me shortly after were not good. Of the VA providers surveyed, nearly 40 percent said they cannot schedule an appointment in their own clinic within the VA mandated 14 day window, 70 percent said they did not have adequate staff

(Over)

or space to meet the mental health care needs of the veterans they serve, and 46 percent said the lack of off-hour appointments prevented veterans from accessing care.

The survey not only showed that our veterans are being forced to wait for care and also captured the tremendous frustration of those who are tasked with healing veterans.

That hearing also identified wide discrepancies between facilities in different parts of the country – including the difference between access in urban and rural areas.

And it provided a glimpse at a VA system that 10 years into war is still not fully equipped for the influx of veterans seeking mental health care.

VA can and must do much better. And I'm pleased to say that since I asked for the survey, they have taken some steps in the right direction.

VA has worked to hire additional mental health staff to fill vacancies, increased their staffing levels at the Veterans Crisis Line and the Homeless Call Center, and made VISN directors accountable for more standards of access to care.

These are positive steps, but there is much more to be done – as we will undoubtedly see today.

You know, just yesterday, before this hearing, I looked through the most recent statistics on PTSD that VA had provided my office.

They showed what we all know – this problem isn't going anywhere.

As thousands of veterans return from Iraq and Afghanistan – you can see the number of PTSD appointments steadily rise each quarter.

And with another announcement yesterday of 33,000 troops coming home by the end of next year from Afghanistan - the demand for care will only swell.

This should not come as shock to VA.

And it should not cause the waiting line for care to grow.

Especially at a time when we are seeing record suicides among our veterans – we need to meet the veteran's desire for care with the immediate assurance that it will be provided – and provided quickly.

We cannot afford to leave them discouraged that they can't find an appointment.

We cannot leave them frustrated.

We cannot let them down.

We need to fix this now.

VA has had a decade to prepare.

Now is the time for action and for effective leadership.

I look forward to hearing from all our witnesses today and I hope that this hearing is another step to increased accountability of our efforts to provide timely mental health care.

And with that, I turn it over to Ranking Member Burr.