



NEWSLETTER

A PUBLICATION FOR MEMBERS
OF THE DISABLED AMERICAN VETERANS
DEPARTMENT OF NEW YORK

September 2016

COMMANDER'S REPORT

*By Tony Lee
Department Commander*

Hello to the members of our great organization - the Department of New York. I want to thank you for electing me as your commander for 2016-2017. The past two months have been an exciting learning curve. First, I was able to meet our DAV National Commander, at the Department of New York's annual Rehab Cruise. Moses McIntosh was our guest of honor along with his family. They along with all of us, enjoyed the sightseeing from Flushing Bay to the Statue of Liberty in New York City harbor via the East River. The weather was a typical beautiful July day.

Next, I was off to Cold Spring, Kentucky where I attended the 19th Annual State Commanders and Adjutant Association Orientation at DAV National Headquarters. It was a very informative event. The purpose of this event is to provide, first hand, information about the DAV- our mission and capabilities to help disabled veterans of our nation. There were three and half days of training and meeting the national staff in our Cold Spring, Kentucky National Headquarters.

The last event I attended was the 95th National DAV Convention in Atlanta, Georgia from July 30 to August 3, 2016. Our Commander in Chief, President Barack Obama was our guest speaker. President Obama announced:

- That there will be no privatization of the VA health care system under his watch.
- The claim backlog will be reduced.
- Homeless veteran population will be reduced.
- The appeal process will be fast tracked under a fully developed claim system.
- The VA has reduced the claim backlog by 90% over the past three and half years.
- Most importantly, the VA will continue exist to help veterans to achieve his or her readjustment to society.

The summer is ending. The fall is beginning. Remember November 11, 2016, It is Veterans Day. Let us honor a veteran by thanking him or her for his service.

ADJUTANT'S REPORT

*By Donald A. Sioss, PNC, PDC
Department Adjutant*

It seems as though the summer just started and Labor Day is already upon us. The Department of New York has been busy!

We, of course, held our annual convention at the Hudson Valley Resort in Kerhonkson. There was a decent turnout of members, but there could have and should have been many more. Many chapters chose not to send a delegate. I don't understand why. The convention is one of the highlights of the DAV year. Your delegate(s) would get to hear reports from various DAV officers and committee chairman. Of particular interest are the reports from the Finance Committee Chairman, the Department Treasurer and the Resolutions Committee. Why are these important? The Finance Committee formulates the budget for the department for the current fiscal year. They decide how much of the department's funds are spent on which of our various programs: running headquarters, the Transportation Program, the DSO program, the Rehab Cruise, etc. It is important for you and your chapter members to know how our funds are being allocated. The treasurer reports on how the funds were actually expended. Also included is a financial report from our accountants for those interested in the numbers. The resolutions committee recommends resolutions sent in by the chapters and forwarded to the National Convention where they can be included in the DAV's national legislative program. That is how your idea can become law!

The joint opening session with the auxiliary includes a number of VA officials. This year, it included the VISN director as well as several hospital directors. They share their thoughts about the VA with us. Lastly, we elect a slate of officers to lead the DAV Department of New York, this year lead by our new Department Commander Tony Lee. Our full slate of officers is located elsewhere in this bulletin. Most importantly, you would have an opportunity to meet the Department officers as well as old friends and make new friends. Talking to other DAVers, you might find out about a benefit you didn't know about. It has happened! Think about sending a delegation to the 2017 convention!

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ADJUTANT'S REPORT *(continued)*

And then, it was on to the Rehab cruise. This is a signature event for the Department and this year did not disappoint. Our special guest this year, was National Commander Moses McIntosh! We embarked from the World's Fair Marina in Flushing, Queens on a four-hour cruise. We floated past LaGuardia Airport and on into the East River. We cruised along the east side of New York City enjoying the sights and under the Brooklyn Bridge to the lower harbor, where we stopped by the Statue of Liberty. Then, we turned around and returned to the marina. Along the way, we enjoyed a sumptuous buffet, unlimited drinks and entertainment on the upper deck by the New York Exceptions Band - who played 50's and 60's music. If you missed it, you missed a great day. The weather was delightful. Watch for the announcement for next year's cruise and put it on your calendar for next year!

Several of the senior officers travelled to National Headquarters in Cold Spring Kentucky for the Commanders and Adjutants Orientation. This is a chance for us to learn more about the DAV's programs and our various staff members at both National Headquarters and the National Service and Legislative Headquarters. This was an informative experience. We also have an opportunity to discuss what we do with commanders and adjutants from across the country.

Next it was on to Atlanta for the 2016 National Convention. The opening session saw New York's own Matilda Brooks presented with the Outstanding Volunteer of the Year Award. It was a great day for Mathilda and the New York. Congratulations to Matilda! There were numerous awards and speeches by veteran dignitaries. Ford Motor Company presented a free Ford Flex to the Syracuse Hospital's Transportation Program. The next few days were filled with meetings and seminars. You can learn everything you ever wanted to know about the DAV and the National Organization. This year, some of us were treated to a preview of a new movie about one of our members. It is entitled "*Hacksaw Ridge*" and is scheduled to be released in early November. Directed by Mel Brooks, it tells the story of a conscientious objector (CO) who enlists in the Army to be a medic to save lives. He saved a large number of soldiers' lives in the fight for Okinawa and was the first CO to be awarded the Congressional Medal of Honor. Only three CO's were awarded the Medal of Honor in World War II! It is quite graphic but is an excellent movie and should be seen by all to appreciate what some of us went through on the battlefield! The medic was ultimately wounded, lost a lung and became a life member of the DAV.

Our guest speakers included President Barack Obama, as well as VA Secretary Bob MacDonald. The seminars and reports continued and at Fun Night, we were treated once again to a performance by Gary Sinese's Lt. Dan Band. Gary Sinese played a soldier who lost both legs in Vietnam in the movie *Forest Gump*. He was presented an award at the 1994 National Convention for his portrayal of the amputee veteran. He is an active supporter of the DAV.

The culmination of the convention and the highlight was the election of officers for the National Line for 2016-

2017. Our own Donald Day was nominated for and elected to the office of National 3rd Junior Vice Commander. He will be the next National Commander from New York State. This was a great honor for Donald as well as an honor for the Department of New York. He will be looking for your support in the coming months and years and I hope that you will support his candidacy!

Now, as we return to normal operations, we will continue to focus on the DAV's mission: ***Fulfilling our promises to the men and women who served.*** We can only fulfill the mission if we are all working together for success. Whether you are volunteering at a VA Hospital, driving a van to transport veterans, working as a DSO or helping veterans in your community. There are a wide range of opportunities for you to help us fulfill our mission. If any of your members are volunteering to help veterans in your community (e.g. taking a veteran to shop, mowing his lawn, etc.), you can get credit under the LVAP program. You don't need to be an official Department of Veterans affairs volunteer to get credit under the LVAP program. Chapters should collect monthly hours for their members and submit them to Department Headquarters. All we need is the name, membership number and last four of their social security number, their volunteer task and their time and we can enter it into the LVAP system. Get credit for your efforts, and let's show the VA what we do in New York!

As the fall rolls around, the Commander will begin to make his hospital visits. We will of course, continue to support our DSO's and the transportation programs at the various hospitals. If you are contemplating purchasing a van for your hospital's transportation program, you will need to secure the funding before the end of November.

There was a major change in the National Constitution and By-Laws. Previously, your chapter had to do your Forget-Me-Not drive on seven (7) continuous days. Now, as a result of a By-Law change in Atlanta, chapters may conduct Forget-Me-Not drives on any seven days in the fiscal year. For instance, you could do three days Labor Day week-end, two days at Veterans Day and two days on Memorial Day week-end or whenever you want to throughout the year. This new change gives you much more flexibility. It is also less of a burden on your members because it's generally always the same ones who volunteer and volunteering a couple of days here and a couple of days there is better than volunteering seven days in a row. Hopefully, this change will result in a greater return for your efforts.

Always remember that department Headquarters is here to serve you. If you have a question about the By-laws, fundraising, something going on at your meetings or at the VA, don't hesitate to call us. We are open during normal business hours and if I'm not available when you call, leave your name and a brief message as to why you are calling and I will definitely get back to you. I don't have all the answers, but if I don't know the answer, I will call national and get you the answer.

Enjoy the fall and help our veterans!

MILLION VETERAN PROGRAM IS NOW LARGEST GENOMIC DATABASE IN THE WORLD

Program Enrolls 500,000th U.S. Veteran

WASHINGTON — The Department of Veterans Affairs' Million Veteran Program (MVP) has reached an important milestone when an Army Veteran from Montgomery, Alabama, became the 500,000th to voluntarily enroll in the research database program — making MVP the largest genomic database in the world.

Launched in 2011, and part of the White House Precision Medicine Initiative, participants donate blood from which DNA is extracted. A baseline and periodic follow-up surveys track Veterans' military experiences, health and lifestyles. Researchers believe the information contained in the database could hold the key to preventing and treating diseases.

“Our Veterans continue to demonstrate their selfless sacrifice, and the nation has yet another reason to owe them a debt of gratitude,” said VA Secretary Robert A. McDonald. “Many of our Veterans have saved lives on the battlefield and because of their participation in MVP, their participation has the potential to save countless lives — now and for generations to come.”

As part of the program, participating Veterans grant researchers secure access to their electronic health records and agree to be contacted about participating in future research. Samples and data used are coded to protect participants' identification and privacy.

Research using MVP data is already underway, studying a range of medical issues like mental illness and heart and kidney diseases. The program also has rich data on various health conditions that are common in Veterans.

Approximately 62 percent of MVP enrollees report a current or past diagnosis of high blood pressure and about a third report tinnitus. Also, nearly a third or 32 percent of Veterans present with a history or current diagnosis of cancer. “We believe MVP will accelerate our understanding of disease detection, progression, prevention and treatment by combining this rich clinical, environmental and genomic data,” said Dr. David J. Shulkin, VA Under Secretary for Health. “VA has a deep history of innovation and research. MVP will allow the nation's top researchers to perform the most cutting-edge science to treat some of the nation's most troubling diseases.”

For more information about MVP, including how to participate, visit www.research.va.gov/MVP/. For information about the 52 VA sites currently enrolled in the program, visit www.research.va.gov/MVP/all-clinics.cfm.

COMMISSION ON CARE REPORT

WASHINGTON — Recently, Secretary of Veterans Affairs Robert A. McDonald released the following statement on the Commission on Care final report.

“On behalf of the Nation's 22 million Veterans and the Department of Veterans Affairs, I thank the members of the Commission on Care for their hard work over the past year. The Commission has produced a wide-ranging set of recommendations on reforming the Veterans Health Administration, and VA looks forward to reviewing and considering these recommendations as we ensure that we remain true to our mission to serve and honor the men and women who are America's Veterans.

“While we will examine the report closely over the coming weeks and respond in a more detailed fashion, I am pleased to see that many of their recommendations are in line with our MyVA efforts to transform the VA into a Veteran-centric organization. Necessary transformational progress has been under way for the past two years, increasing access to health care and improving the Veteran experience of VA. This past March, VA set a new record for completed appointments: 5.3 million inside VA, 730,000 more than in March 2014. We also issued twice as many authorizations for care in the community than in March 2014. Clinical workload is up 11 percent in the past two years. Nearly 97 percent of appointments are now completed within 30 days of the Veteran's preferred date; 22 percent are same-day appointments; average wait times are five days for primary care, six days for specialty care, and two days for mental health care. Nearly 90 percent of Veterans surveyed say they are “satisfied or completely satisfied” with the timeliness of their appointments.

“However, until all Veterans say they are satisfied, I won't be satisfied. Nobody at VA will be satisfied. But our progress so far proves that VA's current leadership, direction, and momentum can produce the necessary transformation, as VA has already demonstrated in reducing the backlog of disability compensation claims by 90 percent since 2013.

“We know we can't complete the job without help from our partners. For that reason, I look forward to continuing to work with Congress, Veteran advocates, and Veterans themselves to identify further ways to improve VA.

“There are some things that can be done right now to help us continue our progress. Congress must act on our proposals to consolidate our Community Care programs, modernize and reform the claims appeals process, and pass the bi-partisan Veterans First Act. The window of opportunity is closing fast, but if Congress acts before leaving town this month, 2016 will be the year the nation turned the corner for Veterans.

“In the meantime, as we review the recommendations of the Commission, we will continue to look for other ways to build on the progress we've made to date and ensure we are doing everything possible to faithfully serve those who have served this country.”

VA SCHEDULES 2 MILLION APPOINTMENTS USING VETERANS CHOICE PROGRAM

Improvements made in increasing access to Community Care, but more work to be done

WASHINGTON — The Department of Veterans Affairs' (VA) Veterans Choice Program (VCP) has reached a key milestone in improving access to health care for Veterans. More than two million appointments have been scheduled through the program. "While two million appointments have been scheduled using the Choice Program and we are making progress, we will not rest until all Veterans who choose VA to be their healthcare provider are receiving the care they need, when they need it," said VA Secretary Robert McDonald. "We will continue to make strides towards an integrated care network, and I urge Congress to enact our Plan to Consolidate Community Care so we can continue to build upon our progress."

The Choice Act, which included the VCP, was passed in August 2014 to help Veterans access timely health care both within VA and the community. VA was required to implement a new, national program in just 90 days, with new requirements that complicated the way VA provides community care. VA recognized many of these challenges very early in the implementation of the program and VA and all our stakeholders have been working together to make needed changes while implementing this new nationwide program.

VA has outlined a path to improve community care and create a program that is easy to understand, simple to administer, and meets the needs of Veterans, community providers, and VA staff. VA submitted this plan to Congress in October 2015.

Within the Plan are several legislative proposals that VA and Congress need to work on together to improve the experiences for Veterans and community providers.

- The first proposal would increase Veterans' access to community care providers by allowing VA to enter into agreements with local community providers.
- The second would streamline when and how much VA pays for health care services by having VA be the primary payer.
- The third fix would allow VA to more accurately account for healthcare purchased in the community.
- Finally, the last request is for funding and funding flexibility to improve access to care, reimburse the cost of emergency treatment, and create value-based payment models to best serve Veterans that need community care.

"VA is developing innovative ideas and solutions to enhance the Veterans experience and strengthen partnerships with community providers" said Dr. Baligh Yehia, Assis-

tant Deputy Undersecretary for Health, Community Care. "The Choice Program of today is a very different program than the one rolled out in November 2014. Many improvements have been made and we continue to work to deliver care to Veterans where and when they need it."

VCP PROGRESS TO DATE

- Over 2 million appointments scheduled using the VCP significantly increases Veterans access to care.
- Since the start of VCP we have seen a dramatic increase in utilization. From October 2015 to March 2016 VCP authorizations for care have increased 103 percent.
- Over the course of the last 12 months, the Choice Provider Network has grown by 85 percent. The network now has over 350,000 providers and facilities.
- Improved timeliness of payments to community providers by removing the requirement that VA receive the Veteran's entire medical record prior to payment.
- Reduced administrative burden for medical record submission for community providers by streamlining the documentation required.
- To enhance care coordination for Veterans, we have embedded contractor staff with VA staff at select locations.
- Created dedicated teams from across the county to deliver community care improvements.
- VA has also partnered with Congress to change laws to improve the community care experience by:
 - Removing the enrollment date requirement for Choice, allowing more Veterans to receive community care.
 - Implementing criteria of 40-mile driving distance from medical facility with primary care physician to increase number of Veterans accessing the program
 - Implementing the unusual or excessive burden criteria to increase access for Veterans that do not meet other eligibility criteria.
- Expanding the episode of care authorization from 60 days to up to one year to reduce the administrative burdens of Veterans, community providers, and VA staff.

"VA needs Congress's continued support to keep driving progress forward," added VA Secretary Robert McDonald. "Several legislative barriers remain which inhibit improvements outlined in our Plan to Consolidate Community Care Programs."

TRI-AGENCY PARTNERSHIP WORKING TO TAILOR CANCER CARE BASED ON GENES, PROTEINS

VA, DoD and NCI Create Nation's First Targeted Screening Program for Cancer Patients

WASHINGTON – The Department of Veterans Affairs (VA) is partnering with the Department of Defense (DoD) and the National Cancer Institute (NCI) to tailor cancer care for patients based on the genes and proteins associated with their tumors. The tri-agency program will create the nation's first system in which cancer patients' tumors are routinely screened for gene and protein information, with the goal of finding targeted therapies for each individual patient. The process will also continually generate new information to boost clinicians' ability to treat the disease.

This new program, the Applied Proteogenomics Organizational Learning and Outcomes consortium, or APOLLO, is part of the wider national Cancer Moonshot initiative. APOLLO will initially focus on lung cancer in patients at VA and DoD medical centers, with plans to eventually include other forms of cancer. Some 8,000 Veterans are diagnosed with lung cancer each year in the VA system alone.

“APOLLO will create a pipeline to move genetic discoveries from the lab to VA clinics where Veterans receive cutting-edge cancer care,” said VA Secretary Robert A. McDonald. “This is an example of how we are striving to be an exemplary learning health care system. We are proud to join our federal partners in this exciting initiative, and we expect it will lead to real improvements in the lives of those affected by cancer.”

APOLLO complements other Cancer Moonshot initiatives involving VA. One is a partnership between VA and IBM, in which IBM's supercomputer Watson will help interpret the results of tumor sequencing by recommending therapies and clinical trials. Also in the works is a partnership between VA and the Department of Energy (DoE, known as MVP CHAMPION (Computational Health Analytics for Medical Precision to Improve Outcomes Now), in which researchers will leverage DoE's high-capacity computing network to help analyze data from VA's landmark Million Veteran Program. Prostate cancer is among the health conditions to be targeted in the early phases of that work. The new effort centers on “proteogenomics”—a blend of genomics (the study of genes and their role in health) and proteomics (the downstream effects of genes). that has recently been demonstrated in NCI's Clinical Proteomic Tumor Analysis Consortium (CPTAC). CPTAC's

“proteogenomics” approach was successful in demonstrating the scientific benefits of integrating proteomics with genomics to produce a more unified understanding of cancer biology and possibly therapeutic interventions for patients. APOLLO researchers and clinicians will classify Veterans' lung tumors based on changes in genes in the tumors, and in the levels of proteins. They will use the findings to recommend targeted therapies or refer patients to appropriate clinical trials. The proteogenomics approach promises more precision than looking at genes alone. As the knowledge base grows, it will be widely shared with clinicians and the global cancer community such as through NCI's Genomic Data Commons to help them learn how to better treat cancer patients in the future.

The APOLLO partnership will leverage the strengths of each agency involved. NCI has cutting-edge expertise in proteogenomics, a relatively new field in science. DoD has a well-established pathology network for receiving and analyzing tissue samples—including DNA and RNA sequencing to identify genes and proteins. VA, as the nation's largest integrated health care system, offers clinical research expertise and infrastructure plus a large pool of patients with cancer.

Among the benefits of APOLLO are targeted therapy and referrals to clinical trials as part of a larger learning health care system. Once a Veteran's molecular signature is known—basically, the genes and proteins found in the tumor—he or she could be matched with available clinical trials targeting that signature with an experimental drug.

As part of APOLLO, VA medical centers will expand their participation in NCI's network of clinical trial sites. They will also partner with other sponsors of clinical trials testing targeted therapies. This will improve Veterans' access to new therapies through clinical trials.

“A third benefit of APOLLO may be early detection, or even prevention,” said VA Under Secretary for Health David J. Shulkin. “As researchers and clinicians learn more about which gene and protein signatures are associated with cancer, they may be able to do blood tests to screen at-risk patients. Early detection would help ensure treatment is given as soon as possible.”

VA PROVIDES SERVICE DOG BENEFITS TO VETERANS WITH MENTAL HEALTH DISORDERS

WASHINGTON – The Department of Veterans Affairs (VA) announced today that it is piloting a protocol to implement veterinary health benefits for mobility service dogs approved for Veterans with a chronic impairment that substantially limits mobility associated with mental health disorders.

“We take our responsibility for the care and safety of Veterans very seriously,” said VA Under Secretary for Health, Dr. David J. Shulkin. The Department of Veterans Affairs (VA) is committed to providing appropriate, safe and effective, compassionate care to all Veterans. Implementing the veterinary health benefit for mobility service dogs approved for Veterans with a chronic impairment that substantially limits mobility associated with mental health disorders may prove to be significantly beneficial for some Veterans. The Service Dog Benefits Pilot will evaluate this premise.”

VA has been providing veterinary benefits to Veterans diagnosed as having visual, hearing or substantial mobility impairments and whose rehabilitation and restorative care is clinically determined to be optimized through the assistance of a guide dog or service dog. With this pilot, this benefit is being provided to Veterans with a chronic impairment that substantially limits mobility associated with a mental health disorder for whom the service dog has been identified as the optimal way for the Veteran to manage the mobility impairment and live independently.

Service dogs are distinguished from pets and comfort animals because they are specially trained to perform tasks or work for a specific individual with a disability who cannot perform the task or accomplish the work independently. To be eligible for the veterinary health benefit, the service dog must be trained by an organization accredited by Assistance Dogs International in accordance with VA regulations.

Currently, 652 Veterans with approved guide or service dogs receive the veterinary service benefit. This Pilot is anticipated to provide the veterinary service benefit to up to 100 additional Veterans with a chronic impairment that substantially limits mobility associated with a mental health disorder.

The VA veterinary service benefit includes comprehensive wellness and sick care (annual visits for preventive care, maintenance care, immunizations, dental cleanings, screenings, etc.), urgent/emergent care, prescription medications, and care for illnesses or disorders when treatment enables the dog to perform its duties in service to the Veteran.

Additional information about VA's service dog program can be found at <http://www.prosthetics.va.gov/ServiceAnd-GuideDogs.asp>

VA CONDUCTS NATION'S LARGEST ANALYSIS OF VETERAN SUICIDE

WASHINGTON – The Department of Veterans Affairs (VA) has undertaken the most comprehensive analysis of Veteran suicide rates in the U.S., examining over 55 million Veteran records from 1979 to 2014 from every state in the nation. The effort extends VA's knowledge from the previous report issued from 2012, which examined three million Veteran records from 20 states were available. Based on the 2012 data, VA estimated the number of Veteran deaths by suicide averaged 22 per day. The current analysis indicates that in 2014, an average of 20 Veterans a day died from suicide.

“One Veteran suicide is one too many, and this collaborative effort provides both updated and comprehensive data that allows us to make better informed decisions on how to prevent this national tragedy,” said VA Under Secretary for Health, Dr. David J. Shulkin. “We as a nation must focus on bringing the number of Veteran suicides to zero.” The final report will be publicly released later this month. Key findings of the analysis will include:

- 65% of all Veterans who died from suicide in 2014 were 50 years of age or older.
- Veterans accounted for 18% of all deaths from suicide among U.S. adults. This is a decrease from 22% in 2010.
- Since 2001, U.S. adult civilian suicides increased 23%, while Veteran suicides increased 32% in the same time period. After controlling for age and gender, this makes the risk of suicide 21% greater for Veterans.
- Since 2001, the rate of suicide among US Veterans who use VA services increased by 8.8%, while the rate of suicide among Veterans who do not use VA services increased by 38.6%.
- In the same time period, the rate of suicide among male Veterans who use VA services increased 11%, while the rate of suicide increased 35% among male Veterans who do not use VA services.
- In the same time period, the rate of suicide among female Veterans who use VA services increased 4.6%, while the rate of suicide increased 98% among female Veterans who do not use VA services.

Please also see our Suicide Prevention Fact Sheet at the following link: http://www.va.gov/opa/publications/factsheets/Suicide_Prevention_FactSheet_New_VA_Stats_070616_1400.pdf

VA ANNOUNCES PARTNERSHIP WITH NON-PROFIT ORGANIZATION, LEANIN.ORG

WASHINGTON – The Department of Veterans Affairs' (VA) Center for Women Veterans today announced a partnership with LeanIn.org, the nonprofit organization founded by Facebook Chief Operating Officer, Sheryl Sandberg, to empower women to achieve their ambitions. Building on the successful launch of LeanIn.org circles within the Department of Defense, VA is following the same model to increase support to women Veterans.

The VA initiative is called the LeanIn.org Women Veterans' chapter. The Women Veterans Chapter is comprised of two distinct pilot programs: the Veteran-to-Veteran program, a virtual program, which allows any woman Veteran to participate, no matter where she is located; meetings will be moderated and attended by women Veterans throughout the United States. The second is a face-to-face pilot circle. The face-to-face program is created in partnership with the existing LeanIn.org chapter in Seattle, WA. This circle is an innovative hybrid of women Veterans and non-military members providing an environment for both to learn and share leadership skills.

"We are thrilled to have LeanIn.org as our collaborative partner," said Kayla M. Williams, Director of VA's Center for Women Veterans. "For many years, women Veterans have expressed to us that they need to have a mechanism to engage with their fellow women Veterans to make a difference in their community and we believe this is the perfect match. VA is pleased to be a part of these two pilot programs."

"Women are the fastest growing population of our nation's Veterans and through this Circles program, these women will have the peer support and community they need to reach their goals," said Ashley Finch, LeanIn.org, Head of Partnerships. "LeanIn.org is proud to be a part of this groundbreaking and important initiative." For more information about the LeanIn.org Women Veterans' chapter, visit LeanIn.org/womenvets or <http://leaninseattle.org/veterans>.

VA IS UNDERTAKING NEW MEASURES TO PREVENT SUICIDE

The VA is aggressively undertaking a number of new measures to prevent suicide, including:

- Ensuring same-day access for Veterans with urgent mental health needs at over 1,000 points of care by the end of calendar year 2016. In fiscal year 2015, more than 1.6 million Veterans received mental health treatment from VA, including at over 150 medical centers, 820 community-based outpatient clinics and 300 Vet Centers that provide readjustment counseling. Veterans also enter VA health care through the Veterans Crisis Line, VA staff on college and university campuses, or other outreach points.

Using predictive modeling to determine which Veterans may be at highest risk of suicide, so providers can intervene early. Veterans in the top 0.1% of risk, who have a 43-fold increased risk of death from suicide within a month, can be identified before clinical signs of suicide are evident in order to save lives before a crisis occurs.

- Expanding telemental health care by establishing four new regional telemental health hubs across the VA healthcare system.

- Hiring over 60 new crisis intervention responders for the Veterans Crisis Line. Each responder receives intensive training on a wide variety of topics in crisis intervention, substance use disorders, screening, brief intervention, and referral to treatment.

- Building new collaborations between Veteran programs in VA and those working in community settings, such as Give an Hour, Psych Armor Institute, University of Michigan's Peer Advisors for Veterans Education Program (PAVE), and the Cohen Veterans Network.

- Creating stronger inter-agency (e.g. Substance Abuse and Mental Health Services Administration, Department of Defense, National Institutes of Health) and new public-private partnerships (e.g., Johnson & Johnson Healthcare System, Bristol Myers Squibb Foundation, Walgreen's, and many more) focused on preventing suicide among Veterans.

Many of these efforts were catalyzed by VA's February 2016 Preventing Veteran Suicide—A Call to Action summit, which focused on improving mental health care access for Veterans across the nation and increasing resources for the VA Suicide Prevention Program. Suicide is an issue that affects all Americans. Recent Centers for Disease Control and Prevention (CDC) data reported in April 2016 that from 1999 through 2014 (the most recent year with data available from CDC), suicide rates increased 24 % in the general population for both males and females. VA has implemented comprehensive, broad ranging suicide prevention initiatives, including a toll-free Veterans Crisis Line, placement of Suicide Prevention Coordinators at all VA Medical Centers and large outpatient facilities, and improvements in case management and tracking. Immediate help is available at www.VeteransCrisisLine.net or by calling the Crisis Line at 1-800-273-8255 (press 1) or texting 838255.

Congratulations to

DONALD DAY

National 3rd Jr. Vice Commander

2016-2017

PDC SIDNEY SILLER 1926 - 2016

The Department of New York announces the loss of PDC Sidney Sillier. Comrade Siller passed away on August 8, 2016 at this home on Florida. Please remember him and his family in your thoughts and prayers.

PDC Siller served in the US. Army from December 14, 1944 through December 14, 1946. Upon his separation from the service, Mr. Siller enrolled in Brooklyn College, graduating with a B.A. in the class of 1949. He obtained his JD (law degree) from Brooklyn Law School in the class of 1951. He was admitted to the bar in 1952 and was licensed to practice law in New York City for over 64 years. He specialized in matrimonial, divorce, family law and civil litigation.

After a conversation with his father, he embarked on a campaign and eventually got New York State to change its divorce laws. Along the way, he wrote for *Penthouse Magazine* for 15 years, started the National Organization for Men, and was the defense attorney in the West Point cheating scandal. At one point in his life, he considered buying the New York Yankees.

Sidney Siller joined the DAV's Bronx County Chapter No. 23 shortly after his separation from the service. He became active with Chapter 23, holding various chapter offices including chapter commander. He also became active in the Department of New York and in June of 1956 was elected to serve as Department Commander for 1956-1957. He would ultimately be elected to serve as a DAV National Line Officer for one year. In 2002, PDC Siller was appointed Adjutant of the Department of New York, where he served until retiring in October of 2012.

Expressions of sympathy may be sent to:

Mrs. Shirley Siller
7417 Lahana Circle
Boynton Beach, FL 33437-7172

DAV NATIONAL LINE OFFICERS 2016-2017

Commander David Riley, AL
Sr. Vice Commander Delphine Metcalf-Foster, CA
1st Jr. Vice Commander Dennis J. Nixon, TX
2nd Jr. Vice Commander Stephen Whitehead, MN
3rd Jr. Vice Commander Donald Day, NY
4th Jr. Vice Commander Andrew Marshall, FL
Nat'l Judge Advocate Michael E. Dobmeier, MN
Nat'l Chaplain Michael Dover, GA



DAV DEPT. OF NEW YORK 2016-2017 OFFICERS

Commander Tony Lee
Sr. Vice Commander Israel Rivera
Jr. Vice Commander Joseph J. Pennell
Jr. Vice Commander Rachel K. Fredericks
Jr. Vice Commander George A. Sander
Jr. Vice Commander Michael A. Martin
Chaplain Harry Sterns
Judge Advocate Keith A. Robinson, PDC
Treasurer Donald Day, PDC
Adjutant Donald A. Sioos, PNC, PDC
Executive Director Prospero Sodano

MEMBERSHIP STATUS

...as of 8/31/16

TRIAL MEMBERS: 463
PART LIFE MEMBERS: 1,598
FULL LIFE MEMBERS: 40,834
TOTAL MEMBERS: 42,895

GOAL FOR FULL LIFE MEMBERS: 576

DISABLED AMERICAN VETERANS

Department of New York

Tony Lee, Commander

Donald A. Sioos, PNC, PDC, Adjutant

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