STATEMENT OF RENEE OSHINSKI DEPUTY UNDER SECRETARY FOR HEALTH FOR OPERATIONSAND MANAGEMENT (ACTING) VETERANS HEALTH ADMINISTRATION (VHA) DEPARTMENT OF VETERANS AFFAIRS (VA) BEFORE THE SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS COMMITTEE ON VETERANS' AFFAIRS U.S. HOUSE OF REPRESENTATIVES

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Good morning Chairman Pappas, Ranking Member Bergman, and Members of the Subcommittee. Thank you for the opportunity to discuss VA's current and future policing strategy. I am accompanied today by Kevin Hanretta, the Principal Deputy Assistant Secretary for Operations, Security, and Preparedness (OSP), and Frederick Jackson, the Executive Director for the Office of Security and Law Enforcement.

Introduction

VA police officers are Federal law enforcement officers who serve a critical role in securing VA property and protecting patients, visitors, and employees. These officers provide security and law enforcement services at all VHA Medical Centers and at Veterans Benefits Administration (VBA) offices that are co-located with VHA facilities. These officers are also sometimes responsible for providing security and law enforcement services at VA national cemeteries.

Ensuring physical security at VA Medical Centers (VAMC) can be complicated because VA police must balance safety and security concerns with providing an open and welcoming health care environment to our nation's Veterans.

To address physical security issues, VAMCs have implemented: panic buttons, badge restricted access to certain areas, limited guest hours, security camera monitoring, emergency preparedness training, and more. In addition to physical security enhancements, VA facilities have also increased police presence on VA campuses.

To accurately allocate resources, Physical Security and Vulnerability Assessments are performed at the local level every two years to identify risk at each VAMC as requirements may differ. For example, what works in a rural hospital may not make sense

in an urban setting. The one crucial, consistent requirement at all VAMCs is collaboration between law enforcement and health professionals when responding to violent incidents or police calls for service in the field. It is VA's goal to ensure health care providers and police personnel work collaboratively while protecting the safety of our unique Veteran population.

The Office of Security and Law Enforcement (OSLE) is responsible for ensuring that VA has an effective program in place for the protection of Veterans, staff, and visitors who use VA facilities. Through an active program of policy reviews and development, along with researching and applying the most modern of police techniques, OSLE works to ensure that VA facilities have highly effective VA Police programs. Further, Special Agents/Inspectors within OSLE have responsibility for certain regions of the country and provide direct technical and logistical support to VA Police Chiefs and VHA facility management within their assigned regions. These Special Agents/Inspectors are in regular contact with their respective Police Chiefs and facilities and are available to respond as needed when situations arise.

Structure and Accountability

The primary responsibilities of the VA Police are to deter and prevent crime, maintain order, and investigate crime (ranging from misdemeanor to felony offenses), that may have occurred within the jurisdiction of the Department. VA Police are also our frontline staff with each Veteran. How VA Police handle law enforcement/safety issues is a critical component of the customer service culture instilled at each individual facility. As such, police/law enforcement staff are some of our most important customer service ambassadors.

Currently, VA police forces fall under the organizational structure and management control of VHA with each local police unit being aligned under the Medical Center Director's office. VA Police are organizationally structured as an administrative service line within the Medical Center, but they are matrixed to OSLE for all matters related to criminal activity or specific to law enforcement. OSLE, organizationally located within OSP, has tacit oversight of all VA Police units in the field through issuance of VA policy, inspections of police programs, and the training of VA police officers.

Oversight and accountability for law enforcement activities is the responsibility of the Chief of Police at each Medical Center. The Chief of Police is directly accountable to the

Medical Center leadership and, for all matters related to criminal activity, use of force, or investigations, to OSLE.

VA does not have a centralized budget line for VA Police. The budget for police services is allocated by facility leadership based on their unique needs and requirements. Annually, as with all services lines, the Chief is responsible for formulating a budget and presenting their budget requirements for the following fiscal year to the Chief Financial Officer at the VAMC.

Federal Law Enforcement Best Practices

Other Federal agencies with law enforcement responsibilities similar to VA have a centralized program office that oversees operations as well as some oversight functions. These agencies include, for example, the Department of Homeland Security's Federal Protective Service, the Department of Interior's National Park Service, and the Army Military Police Corps.

As VA continues to modernize its police force, we will continue to incorporate the very best evidence-based practices from Federal and private industries. To incorporate those best practices, VA will need to look to private sector health care organizations and our university affiliates who use armed police services in addition to those best practices from Federal entities. VA has a unique responsibility to provide a healing environment while balancing the need to provide safety and security to Veterans, staff, and visitors.

VA Police Officer Training

VA police officers' encounters and methods of law enforcement are often unique because their work is conducted in and around a clinical or medical setting. Enhanced methodology and incident solutions (including advanced interpersonal communication, conflict resolution, and problem-solving skills) are required to be successful. VA Police also often encounter trained military Veterans suffering from medical and psychological traumas. Due to the unique policing environment, all VA police officers receive specialized training at the VA Law Enforcement Training Center (LETC).

Located in North Little Rock, Arkansas, the VA LETC is accredited by the Federal Law Enforcement Training Accreditation Board and is recognized as meeting the highest

standards in Federal law enforcement training. The VA LETC embraces a 21st century policing framework to teach new police officers how to respond in a Veteran-centered environment unique to VA. It is the sole Federal government provider of a training program that emphasizes the use of non-physical techniques to ensure the safety of patients, visitors, and staff while maintaining order at VA facilities. VA police officers are taught the necessary skills to resolve incidents in a humane, respectful manner.

At the VA LETC, VA police officers go through a 10-week basic training course where they receive 30.5 hours of classroom training specific to de-escalation and conflict management techniques with a new special focus on suicide awareness and prevention. Officers also complete nearly 24 hours of practical based scenarios in which they are expected to successfully employ and utilize de-escalation skills to affect positive outcomes in real-life scenarios. VA leadership will continue to focus on providing security education that incorporates issues specific to health care. As our police officers play an active and vital role in the clinical arena, security training with an emphasis on health care will enable our police officers to use their independent judgement to assess situations and determine appropriate responses to our unique Veteran population.

VA police officers also receive continuous in-service and specialized training beyond the basic training course. Moreover, other government agencies use the VA LETC as a training site due its reputation for excellence. These agencies include the Department of the Air Force Police, Navy Master of Arms, National Institute of Health, National Geospatial Institute, and the Federal Bureau of Prisons.

VA Police Officer Staffing Statistics

VA recognizes that the Department has a shortage of 700 police officers and needs to do a better job with the hiring process. VA has initiated changes to the hiring process for facility level chiefs. A recent best practice identified a large private sector organization in Missouri that includes two interview panels, one comprised of law enforcement personnel and the other of hospital leaders, to ensure the organization is hiring "an individual that can operate in both worlds." The use of two interview panels will ensure VA hires police that are a good fit with our health care environment and the Veterans we serve. Policing in a health care environment is different from traditional policing. VA currently employs nearly 4,200 police officers. The average yearly growth rate from fiscal years (FY) 2014-2018 was 3.1

percent. There were 402 net gains (increases above losses) for a total of 12.3 percent growth since 2014. Despite the 3.1 percent growth, VA believes there is a need for additional staff. The average age of VA police officers is 45 years and their average tenure is 12 years. Many of our VA police officers are currently retirement eligible or working with the Agency as a second career. The average salary for this occupation is approximately \$53,000 for FY 2019. The median salary cited by the Bureau of Labor Statistics is slightly over \$63,000 for police and detectives nationwide.

Total loss rates from FY 2014 - FY 2018 range between 7.5 percent and 10.3 percent, and voluntary quit rates range between 4.9 percent and 6.7 percent. In 2018, 32.4 percent of VA police officer turnover was due to transfer to another Federal agency; 20.6 percent transferred to state and local government agencies; and 13.2 percent of police left VA employment for the private industry or self-employment. The remaining 33.8 percent of the turnover was due to retirements, resignations without explanations, and removals.

VA recognizes the need to improve retention of these officers. The VA Exit Survey provides 15 possible responses as reasons for leaving VA. For analysis, these reasons are consolidated into six thematic categories: advancement, personal/family, workplace issues, compensation/benefits, retirement, and no response. Recognizing lack of opportunity and compensation are key reasons for loss, VA is currently working on a structured career ladder and assisting facilities in submitting special pay rates where VA police officers are compensated below the prevailing rate in the surrounding community.

VA's police workforce response rate on the exit survey is low at 18 percent (68 responses out of 375 losses in FY 2018). Of those that responded, the most frequently cited reasons for leaving VA were: (1) workplace issues; (2) lack of opportunities for advancement; and, (3) compensation/benefits.

In 2016, OSLE introduced a VA Police Officer Staffing Model initiative that has been piloted at select facilities. When completed, this model will establish Department-wide staffing requirements for VHA, VBA, and the National Cemetery Administration by determining the optimal number of police officers using demographic information from local facilities.

Medical Center Director

VA Handbook 0730, Security and Law Enforcement provides requirements for security and law enforcement at VAMCs. Medical Center Directors are required to provide for the protection of persons on Department property in accordance with the standards set forth in Handbook 0730; provide for the protection of government property; ensure law enforcement activities are accomplished in a legally and technically correct manner; maintain and equip a sufficient number of VA police officers to ensure the protection of persons and property; and ensure that law enforcement and security measures are sufficient to meet such requirements.

Additionally, the Joint Commission, the organization that accredits over 21,000 U.S. health care organizations and programs, sets standards and expectations at a leadership level for the Medical Center Director. At a minimum, the Medical Center Director is responsible for assessing and addressing security risks associated with the environment of care that could affect patients, staff, and other people coming to the hospital's facilities and controlling access to and from areas identified as security sensitive. The Medical Center Director is also responsible for identifying and implementing procedures related to security incident responses at a medical facility, training staff on security procedures, and orienting all staff to both the procedures to be followed during a security procedures will affect responsibilities of staff, including orienting staff to how such security procedures will affect staff, patients, and visitors.

Medical Center Directors, in conjunction with Chiefs of Police, OSLE, OSP, and the VA LETC collaborate and build community partnerships aimed at addressing specific medical and security issues relevant within the Veteran community. For instance, the VA LETC in conjunction with VHA clinical leaders, developed community training to bolster suicide prevention initiatives. The training provides guidance on identifying individuals who may be "at risk" for suicide and identifies prevention measures that can be implemented. The collaborative training emphasizes recognition of the warning signs of suicide and encourages individuals to assist in bringing "at risk" individuals to VA facilities for care before they reach a point of crisis.

Office of the Inspector General (OIG) and Government Accountability Office (GAO) Reports

VA appreciates the reviews done by both OIG and GAO as these reports, though critical, have strengthened VA's police service. In February of 2019, the VHA Executive In-Charge directed the Veteran Integrated Service Networks (VISN) to assign a full-time police chief to each VISN office. Each Network currently has a VISN Chief that oversees facility police operations on a full-time basis. The VISN Chiefs' function is to improve processes and address deficiencies, identify facilities that need assistance with requesting special pay rates for officers, implement mitigation plans for facility specific physical security vulnerabilities, examine trends in the police program's evaluations, develop systematic strategies to address challenges, and to work closely with OSLE and Human Resources to develop an appropriate and overdue career ladder for VA officers. In keeping with the advances made at the VISN level, VA is also looking at ways to improve the governance structure at the Department-level to ensure better accountability, proper application of policy, and to allow for rapid deployment of assets, as needed.

VHA has also expanded oversight of the police service by hiring a VHA Senior Security Officer, developing a New Chief Orientation Guide, working with OSLE and VA LETC to train hospital leaders overseeing police services, developing national mitigation strategies based on findings from inspection reports and physical security vulnerabilities assessments, developing enhanced communication reporting to ensure VHA senior leadership are aware and responsive to critical incidents and security risks, and by instituting daily communications between VHA senior leadership and VISN Chiefs.

Conclusion

We look forward to this opportunity for our improvement efforts to further restore the trust of our Veterans and continue to improve access to care inside and outside VA. Our objective is to give our Nation's Veterans the top-quality care they have earned and deserve while keeping them safe within our walls. Chairman Pappas, we appreciate this Subcommittee's continued support and encouragement in identifying and resolving challenges as we find new ways to care for Veterans.

This concludes my testimony. My colleagues and I are prepared to respond to any questions you may have.