

"Standing Strong for Veterans"

Hospital

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HOSPITAL PROGRAM GOALS

Volunteer Recruitment/Recognition and Support
Valentines for Veterans
Women Veterans Health Care Education
Honors Escort

Shake it UP: Non-Traditional Holiday Celebrations! Christmas and Valentines Day our Veterans are recognized by many Veterans Service Organizations (VSO). I am asking you to celebrate a little known holidays like National Popcorn Day (Jan 19), Hug a GI Day (Mar 4), Donut Day (June 2), World Chocolate Day (July 2), or any other fun day. You pick one and celebrate! There is an award in each membership group for the most outstanding activity or event. Report form is in MALTA and must be sent to me by March 31, 2024.

Department Hospitalized Veterans 6nd Annual Lake Good Hope Fishing Derby. October 6, 2023 is the date for this fun filled and well received event at the North Little Rock VA (Towbin/Ft Roots). Every Auxiliary is asked to make a donation by sending a check to Department Treasurer and earmark it to the Fishing Derby. I am pleased to report that Arkansas Fish and Game will be stocking Lake Good Hope for VA fishing derbies. We will fish in the morning and serve a meal in the recreation center in the afternoon.

Outstanding Hospital Volunteer of the Year. Sadly we have not been using this opportunity to recognize our volunteers. There is a Department Outstanding winner and a National Outstanding Volunteer of the Year. Use the form provided and get it submitted to me by **March 1, 2024**. Letters of recommendation from the hospitals or facilities where the nominee volunteers should be sent with the form.

Where We Serve: Whether it is in the VA Hospitals, local hospitals, Veteran's homes, nursing homes, their homes, VA and non-VA medical centers and clinics, you are needed.

Who Can Serve: Volunteers are on the front line and are in short supply. Recruiting new volunteers is critical and there are awards for this. New volunteers are needed every day. Volunteering saves the VA and other facilities millions of dollars every year. Members, non-members, youth and families. We create a friendly and caring atmosphere no matter where we volunteer. A smile, a kind word, a short visit.

What we can do: Arkansas Department of Veterans Affairs and the VA have a (MUA), Mutual Understanding Agreement. This means that if you volunteer by placing flags in cemeteries for Veterans (State and National) those hours and dollars can be reported through the VA. Other things you can do is read to them, write a letter for them. stop by to check on them. All of these small gestures can go a long way. Please Volunteer when you can and where you can.

Awards

1. Outstanding Performance Awards to one (1) Auxiliary in each membership group. Citation to runner-up.
2. Outstanding Performance Award, award to a nominated Outstanding Department Hospital Volunteer based on quality of service and timeliness of report submission.
3. Citation in each Membership Group for the best Celebrating Non-Traditional Holidays for Veterans in a hospital or long term care facility.
4. Citation in each Auxiliary that provided support for the Department Fishing Derby.

"Supporting Our Veterans, It's A Forever Thing"

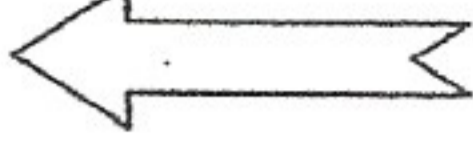
HOSPITAL

Aux. # _____ District # _____ City _____ Membership Group _____
Chairman's Name: _____ Phone #: _____

Always use additional paper if necessary to provide details of your project or program
Report Deadlines: November 15, 2023 and April 15, 2024. Date of this report: _____

A minimum of 2 reports about the promotion of the program is required for an Outstanding Award. Receipts and/or copies of checks MUST be included for donation or purchases. You MAY also include photos, news clippings and social media announcements to document the information provided.

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 Send to: _____

1. How many members volunteered in a VA Medical or non-VA Medical facilities? _____

The Chief of Voluntary Service can provide hours. Only count member once for the year.

2. How many hours did your Auxiliary members volunteer at any VA Medical or non-VA Medical facilities? Total Hours _____

3. How many hours did Sponsored Volunteers and/or student volunteers under the VFW Auxiliary sponsorship and supervision volunteer at any VA and or non-VA medical facility? _____

4. Did your Auxiliary promote, participate or host any activity listed below?

- Honors Escort. What did you do? _____
- National Salute to Veteran Patients-Veterans -Valentines for Veterans. What did you do? _____
- Veterans' Health Care (VHA). What did you do? _____
- Women's' Veterans Health Care Program. What did you do? _____

5. Did your Auxiliary promote, participate or co-host with your VFW Post any activity listed below?

- Honors Escort. What did you do? _____
- National Salute to Veteran Patients-Veterans -Valentines for Veterans. What did you do? _____
- Veterans' Health Care (VHA). What did you do? _____
- Women's' Veterans Health Care Program. What did you do? _____

6. Total dollar amount spent on all Hospital Program related items and/or projects. \$ _____

7. Did your Auxiliary plan and host a Non-traditional Holiday? Explain: _____

8. Did your auxiliary submit a nomination for Outstanding Hospital Volunteer of the Year? _____
Who did you submit? _____ Where did the volunteer? _____

9. Did you request/present Volunteers with Hospital Volunteer Service Pins. _____ How Many? _____

10. Did your Auxiliary donate or Volunteer at the Department Fishing Derby.? _____ \$ _____

11. Describe the best activity you Auxiliary did to promote the Hospital Program. (use additional paper)

HOSPITAL

Outstanding Volunteer Nomination Form

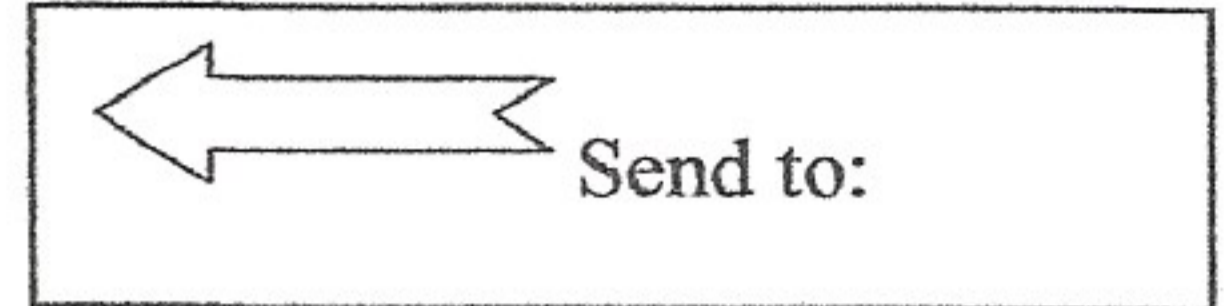
Aux. # _____ District # _____ City _____ Membership Group _____
Chairman's Name: _____ Phone #: _____

Always use additional paper if necessary to provide details of your project or program

Nomination Deadlines: March 1, 2024 Todays Date: _____

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Every Auxiliary should select ONE **"Outstanding Hospital Volunteer"** from the Auxiliary. Chairman should fill out this form and return it to the Department Chairman so it is received by March 1, 2020. The **"Hospital Volunteer"** may be any Auxiliary Member who serves as a VFW Auxiliary Hospital Volunteer, in ANY of the Medical Facilities (VAMC, Military, Community, Children's Hospitals, Nursing Homes, Therapy Centers, or Clinics. This can include Hospital VAVS Representatives and Deputy Representatives. If you do not wish to make a decision on the award, ask your Auxiliary President to select a committee to do the judging, **BUT SEND THE ENTRY TO ME!**

THE CRITERIA MUST BE FROM March 1, 2023 THROUGH February 28, 2024

Name of Outstanding Hospital Volunteer _____

Address: _____
(Include City, State, Zip)

Medical facility where she serves: _____

1. How long has she been a VFWA Hospital Volunteer? _____

2. Total volunteer hours she served during 3/1/18-2/28/19 _____

3. Total hours served as a Hospital Volunteer (lifetime)? _____

4. What weekly or monthly Hospital programs has she participated in? _____

5. What are her Volunteer assignments? _____

COMMENTS; PLEASE ATTACH ANY LETTERS OR RECCOMENDATIONS OR INFORMATION ON WHY THIS AUXILIARY MEMBER IS AN "OUTSTANDING HOSPITAL VOLUNTEER". THIS IS IMPORTANT!! REQUEST LETTERS OF RECCOMENDATION FROM THE FACILAITY (S) WHERE MEMBER VOLUNTEERS.

Signed by _____ Title _____