

Hospital

“MY HEART REVS FOR HEROES”

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

Honors Escort: The Honors Escort Program is an opportunity to honor each Veteran in a respectful and open manner and provides an opportunity for a Veteran’s family and friends, other Veterans and medical staff to participate in a display of high regard and reverence for the Veteran at time of death.

National Salute to Veteran Patients: The week of February 14 (Valentines) is a great opportunity to say you care and thank you to the Veterans we support. It’s a time to also make the community aware of the VA’s role at the medical centers, pay tribute to Veterans, and encourage new volunteers. All VA’s in Arkansas will have special programs that week and ways that you can be involved.

Women Veterans Health Care Program: Women make up more than 10% of the military yet their services thru the VA are often lacking. Let’s take time this year to understand this issue and be an active voice to ensure timely, equitable service for these Veterans.

Volunteer Recruitment, Recognition and Support: New volunteers are needed every day. Volunteering saves the VA and other facilities millions of dollars every year. We will focus on increasing our Volunteers this year.

Veterans’ Healthcare: Sometimes the only attention and support come from the Volunteers. Whether it is in the VA Hospitals, local hospitals, Veteran’s homes, nursing homes, their homes, VA and non-VA medical centers and clinics Volunteers are on the front line.

Who Can Serve: 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: Every VA has its own unique needs. The best place to start is by asking a VA Department Representative how you can get involved . The same holds true for CBOC volunteers. There are so many ways to help. You can read to them, write a letter for them. Stop by to check on them. Do they have what they need? All of these small gestures can go a long way. Volunteer when you can and where you can.

What can we earn: The VFW Auxiliary has Hospital Volunteer Service Pins that can be ordered from the VFW STORE. Your Auxiliary Hospital Chairman should track the hours of members and non-members volunteering and submit an application for pins. We are also able to send the name of one outstanding volunteer to National to be eligible for Hospital Volunteer of the Year.

Military Suicide Awareness: Share the Veterans Crisis Line on all social media and everywhere you promote other VFW and Auxiliary programs. You can find logos, ads, and other materials at www.veteranscrisisline.net. The number for Veterans in Crisis is **1-800-273-8255 press 1 or text 838255**

Hospitalized Veterans Writing Program: Started in 1946 and is a therapeutic writing program that helps Veterans express themselves and be creative. You can help by writing, recording or typing for Veterans. Training is available at www.veteransvoices.org or call 913-432-1214.

Department Hospitalized Veterans 4th Annual Lake Good Hope Fishing Derby. October 16, 2020 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. All members are encouraged to volunteer on the 16th. As plans are finalized for this year we will make you aware.

New last year: The Veterans Administration and Arkansas Department of Veterans Affairs have signed an agreement that now allows Veterans Home volunteer hours to be reported through the VA.

Awards

1. Outstanding Performance Awards as outlined on page 13 of this program book. Citation to the runner-up
2. Outstanding Performance Award, award to the Outstanding Department Hospital Volunteer based on quality of service and timeliness of report submission.
3. Citation in each Membership group to the Member who recruited the most new Hospital Volunteers.
4. Citation in each Membership Group for the best Valentine Event or Activity and submits National form before March 31, 2022 showing hand delivered Valentines as part of the event. Form is found at www.vfwauxiliary.org/resources
5. Citation to every Auxiliary that provides outreach education about the Honors Escort Program. National Citation – Criteria and Entry form available at www.vfwauxiliary.org/resources. Forms must be sent to Department Hospital Chairman by March 31, 2022
6. Citation to each Auxiliary that provides support for the Department Fishing Derby.

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, 2022 Today's 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, 2022. 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, 2021 THROUGH February 28, 2022

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 3/1/21-2/28/22 _____

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 _____

HOSPITAL

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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, 2021 and April 15, 2022. Date of this report: _____

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1. How many members volunteered in a VA Medical or non-VA Medical facility? ___ Total Hours? _____
2. Number of new volunteers recruited. Adults _____ Youth _____
List Members who recruited: _____ How many new? _____
List Members who recruited: _____ How many new? _____
3. What publicity and or media did your VFW Auxiliary use to recruit volunteers and involve the community in the Hospital program? _____
4. Did you make Auxiliary volunteers feel recognized throughout the year, Certificates, How Many _____? How any pin presentations _____ Did you request and present Volunteers with Hospital Volunteer Service Pins. _____ How Many? _____
5. Did you submit a nomination for Outstanding Hospital Volunteer of the Year? _____
6. Did your Auxiliary use the Hospital Program Guide? _____
7. Did your Auxiliary sponsor/conduct an event or activity in any VA or non-VA medical facility? _____
8. Did your Auxiliary participate in the Salute to Veteran Patients week in February? _____
Did you host a Valentines for Veterans party? _____ Did you deliver Valentines or send to Veteran Patients? _____
9. Did your Auxiliary educate members about Women Veteran Health? _____
10. Did your Auxiliary host or participate in events for Women Veterans Health? _____
11. Total amount spent on all Hospital projects this report: (Copy of Receipts/Check attached) \$ _____
12. Did your Auxiliary donate or Volunteer at the Department Fishing Derby.? _____ \$ _____
13. Number of Auxiliaries that participated in or educated VA and/or non-VA facilities about the Honors Escort Program _____

Attach any media used to support these activities.

Total Projects For this report	Number of Members Participating	Total Hours Worked	Total Number of Miles	Total Value or Dollars Spent