

Army touts success of Warrior Transition Units

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WASHINGTON, Oct. 7, 2008 – Before a major newspaper shed light on the sub-par outpatient conditions at Walter Reed Army Medical Center here, the hospital had appointed one soldier to track the recoveries of 200 wounded troops, an Army official said.

But now, some 20 months after publication of the provocative series, the Army has three dozen Warrior Transition Units across the country dedicated to nurturing the wounded back to health and even into civilian life, Army Brig. Gen. Gary H. Cheek, director of the Warrior Care and Transition Program, said today.

"If you compare this to Walter Reed and the organization we had in place in February 2007 when the articles from the Washington Post came out, we had one noncommissioned officer responsible for a couple hundred soldiers," he said. "That soldier, in fact, was also a cancer patient."

The key to the 36 transition units across the country is what the Army calls its "triad" of care. One primary-care manager is assigned to 200 soldiers, a nurse case manager is responsible for 20 soldiers, and each squad leader monitors 10. Medical personnel provide individual attention at every turn and coordinate closely to ensure no detail falls through the cracks, officials said.

"Warrior Transition Units [allow us] to house and manage and lead all the soldiers that are going through medical treatment to either return them to the force or to civilian life if necessary," Cheek told an audience at the Association of the U.S. Army conference.

The general also addressed how the Army has mitigated the chaotic bureaucracy that families faced while attempting to visit the injured servicemember they love. Thanks to the Soldier Family Assistance Center, he said, connecting wounded troops and family members is far easier than in the past.

"When the Walter Reed articles were first written, families would have to go all over the place on the Army installation just to get some of these things taken care of," he said.

But now, imagine that a soldier who hails from Wisconsin is hurt while on deployment in Iraq. He is medically evacuated to Landstuhl Regional Medical Center, Germany, en route to the hospital here.

"What we can do with the Soldier Family Assistance Center is assist that family in their travel to Walter Reed, accommodations when they get there [and with] expectations of what their family member's going to go through," Cheek said. "We basically help them with any issue or problem they have in a single place and focus where they can go."

In addition to these initiatives, the Army has invested \$350 million into upgrading its facilities to comply with Americans with Disabilities Act strictures. And with an increase in numbers, some 3,200 medical personnel now are committed to helping wounded warriors heal from the moment they "inprocess" to the time they transition back to civilian life.

Army Col. James Rice directs the Army Wounded Warrior Program, which signed a memorandum of agreement with the National Organization on Disability to help increase the rate that disabled Americans are hired. He said that while some employers are reticent to hire recovering troops, others are eager.

"Companies – large and small – will come to organizations like the Army Wounded Warrior Program and say, 'We want to hire wounded warriors,'" he said today. "And that's great, and we want to help them do that."

Echoing Rice's comments, Cheek emphasized the role of employment in a wounded warrior's recovery. "If a soldier is employed, suddenly he begins to heal a lot faster," Cheek said.