

**NATIONAL EXECUTIVE COMMITTEE
OF
THE AMERICAN LEGION
INDIANAPOLIS, INDIANA
OCTOBER 17 – 18, 2012**

Resolution No. 30: Standardize Care for Recovering Warriors

Origin: National Security Commission

Submitted by: National Security Commission

WHEREAS, Combat operations during the Global War on Terror have resulted in thousands of casualties among our military servicemembers; and

WHEREAS, Advances in medical treatment have resulted in the savings of thousands of lives that would otherwise have been lost; and

WHEREAS, The military services have assumed the responsibility of bringing their wounded, ill and injured members to an state of optimum recovery before discharge or return to duty; and

WHEREAS, Optimum recovery for many of those wounded, ill and injured involves long periods of recovery and rehabilitation; and

WHEREAS, The wounded, ill or injured servicemember is told that their primary mission is recovery with many, particularly active duty Army and Marines, being assigned to a Warrior Transition Unit (WTU) whose unit mission is recovery of the members of the unit; and

WHEREAS, Not all branches of service subscribe to the WTU concept and for various reasons, those branches with WTUs do not assign all their wounded, ill and injured to those units; and

WHEREAS, For those wounded, ill and injured not assigned to a WTU, conflict inevitably arises between the servicemember's duty to the unit mission and their assigned personal mission of recovery; and

WHEREAS, While it is recognized that family involvement enhances and speeds recovery, those wounded, ill and injured in the reserve component forces are often isolated from family members in comparison to active component servicemembers whose families are moved to be close to the recovering warrior; and

WHEREAS, These discrepancies in treatment environment create additional obstacles to recovery for those not assigned to a WTU and those isolated from their family thereby delaying recovery; now, therefore, be it

RESOLVED, By the National Executive Committee of The American Legion in regular meeting assembled in Indianapolis, Indiana, on October 17-18, 2012, That The American Legion urges the Department of Defense (DoD) to standardize treatment environments for their wounded, ill and injured across all branches and components of service; and, be it further

RESOLVED, That as part of this standardization all wounded, ill and injured servicemembers be evaluated as to the projected period to reach optimum recovery; and, be it further

RESOLVED, That for those wounded, ill and injured judged to have a recovery period exceeding 90 days that without exception:

- 1. A wounded, ill or injured service member from the active component be assigned to a Warrior Transition Unit-type unit with permanent change of station orders;**
- 2. A wounded, ill or injured servicemember from the reserve component be offered placement on Title 10 orders with assignment to a Warrior Transition Unit-type unit and authorized movement of immediate family members to the location of assigned unit at DoD expense; and**
- 3. For those wounded, ill or injured servicemembers assigned to a Community Based Warrior Transition Unit, centralized case management should be established; and, be it finally**

RESOLVED, That for those wounded, ill or injured servicemembers whose initial evaluation indicates a recovery period of less than 90 days and who are assigned to regular units, that follow-up evaluations be made every 30 days to monitor recovery progress and if recovery progress is judged to be impeded by unit assignment, that assignment to a Warrior Transition Unit-type unit be authorized.