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July 31, 2025

The Honorable Doug Collins
Secretary
U.S. Department of Veterans Affairs
50 Irving Street NW
Washington, D.C. 20422

Dear Secretary Collins:

I write today to inform you that the Department of Veterans Affairs (VA) is the most recent recipient of my Golden Fleece Award. I am giving this award to the VA regarding inadequacy in the Veteran's Crisis Line (VCL), which handles the veterans' suicide hotline and operations. Such shortcomings include: inadequate training, data shortfalls on VCL interactions, and a lack of responders in the "customers with complex needs (CWCN)" unit. Poor VCL operating practices can lead to ineffective interactions with veterans contemplating suicide.

As you know, veterans in the United States suffer a disproportionately high rate of suicide. According to a 2024 VA report on National Veteran Suicide Prevention, an average of 17.6 veterans committed suicide per day in 2022.¹ These statistics represent real people who selflessly served our nation. Their service and memories exist beyond tragic statistics – as well as their families who mourn them. As I am sure you and your Department would concur, our commitment to the warfighter goes beyond their time of enlistment. As such, I am pleased that the VA is working to prevent veteran suicide.² Veteran suicide prevention is an important goal, and one I hope we can work together to achieve to protect the lives of veterans who bravely served our country.

¹ 2024 National Veteran Suicide Prevention Annual Report

² VA2022

I am concerned about recent reports stating that VCL procedures and operating practices may counter the work to end veteran suicide. Reports state that the CWCN unit is understaffed, sending CWCN calls to the primary call line where responders may not be trained. In addition, responders are sometimes expected to “handle up to two interactions concurrently, as demand requires.”³ According to a June 2025 GAO report, nearly half of VCL responders surveyed stated they “often or always” must handle two interactions.⁴ Additionally, while responders are allowed to take time to document call interactions after they finish, they are not given this same agility in documentation for either text or chat interactions. As customer interactions have increased by nearly 40 percent between fiscal year (FY) 2021 through FY 2024, the documentation policy may cause responders to be overwhelmed as they must manage multiple tasks simultaneously.

Unfortunately, VCL is not aware of how previously mentioned concerns may affect the quality of its digital interactions with veterans. Due to a lack of awareness, the VCL has not assessed such risks or adjusted procedures or algorithms to address the workload of responders. Similarly, while the VA has acknowledged a lack of CWCN staff, they have yet to properly make staffing or training adjustments.

The VA recently withdrew the VCL procedure policy, which outlined which VCL interactions would warrant disclosure and the overall disclosure process. While the VA made this determination on the basis of VCL responders being “non-clinical,” meaning not a health provider, clinician, or other health care professional, according to the above-mentioned GAO report, there is no “Veterans Health Administration (VHA) policy outlining a disclosure procedure for non-clinical services within VHA.”⁵ VCL officials were unsure whether any such disclosure procedure or policy would be implemented. The VA should be accountable for actions within the VCL related to a veteran’s suicide. The policy change allowing the VCL not to track these actions showcases a lack of accountability to our veterans and their families.

I am pleased the VA concurred with the recommendations from the June 2025 GAO report. Those recommendations include “performing an assessment comparing CWCN calls answered by trained CWCN responders to calls answered by main phone line responders” and assessing digital services by October 2025, as well as “convene a workgroup of subject matter experts to discuss disclosure policies for non-clinical VA services.” However, I remain concerned that these efforts will be undertaken thoroughly and comprehensively in such a short time frame.

³ [GAO-25-108411, VETERANS CRISIS LINE: Actions Needed to Better Ensure Effectiveness of Communications with Veterans](#)

⁴ [GAO-25-108411, VETERANS CRISIS LINE: Actions Needed to Better Ensure Effectiveness of Communications with Veterans](#)

⁵ [GAO-25-108411, VETERANS CRISIS LINE: Actions Needed to Better Ensure Effectiveness of Communications with Veterans](#)

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Arkansas's Second Congressional District is home to approximately 40,000 veterans – each of whom should be able to access high quality care should they need it.⁶ I remain committed to our veterans, and we must ensure that veterans and their families receive the benefits they have so bravely fought for. As such, I encourage the VA to provide the assessments noted in the June 2025 GAO report are completed in a timely fashion, but also comprehensively and with the veteran and their family in mind. These updates are needed to ensure that veterans are receiving the best care possible, even for those services considered "non-clinical."

Should you require any additional authority from Congress to address these concerns, I urge you to notify me as soon as possible. I would also welcome any technical assistance you could provide to Congress to correct statutory issues that may have contributed to this problem. Thank you for your consideration, and I look forward to working with you to address this vital issue.

Sincerely,



French Hill
Member of Congress

⁶ My Congressional District