

VAanguard

U.S. Department of Veterans Affairs

May/June 2009



Outreach Initiatives

VA and the Stimulus Package

Wii-habilitation

Emergency Management



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On the cover

Sara Meyd, a social worker with the polytrauma program at the VA Maryland Health Care System, was among the VA staff from Baltimore, Washington, D.C., and Martinsburg, W.Va., working a Post Deployment Health Reassessment (PDHRA) event with the Maryland National Guard at the Baltimore VA Medical Center on May 30. The VA staff provided on-site enrollment and medical appointments for Guard members who recently returned from Iraq. *photo by Robert Turtill*

WWI Memorial Needs Nation's Attention

Recently, I had the opportunity to visit Washington, D.C., on a work assignment and, when I had time after work, I went to see some of the museums and monuments.

I wanted to see the National World War II Memorial and, because one of my first assignments for the VA involved World War I veterans, I wanted to see any national monument to World War I.

Only a few steps from the magnificent World War II memorial, I saw the District of Columbia World War I Memorial, partially hidden by a grove of trees. I only found it because I actually looked for it.

I learned then that there is no national memorial to World War I anywhere in Washington.

The memorial is an open-air Doric structure that commemorates the 499 veterans from the District of Columbia who died in World War I.

Maintained by the National Park Service, it was completed and dedicated Nov. 11, 1931, by President Herbert Hoover. The memorial is 40 feet in diameter and large enough to hold the 80 members of the U.S. Marine Corps Band.

It is located in West Potomac Park and is the only local memorial on the National Mall. Funds to construct it were provided by the contributions of both organizations and individual citizens of the District.

In 2003 and 2006, the memorial was named as one of the most endangered places in Washington by the District of Columbia Preservation League, a nonprofit organization that promotes historic preservation in the capital.

While younger veterans from the Vietnam and Korean

wars wanted their service to be remembered, while many decried the lack of a World War II memorial as thousands of World War II veterans died every day, the veterans of “the Great War” silently left us. Any renovations or shrine-building will come too late for these brave souls.

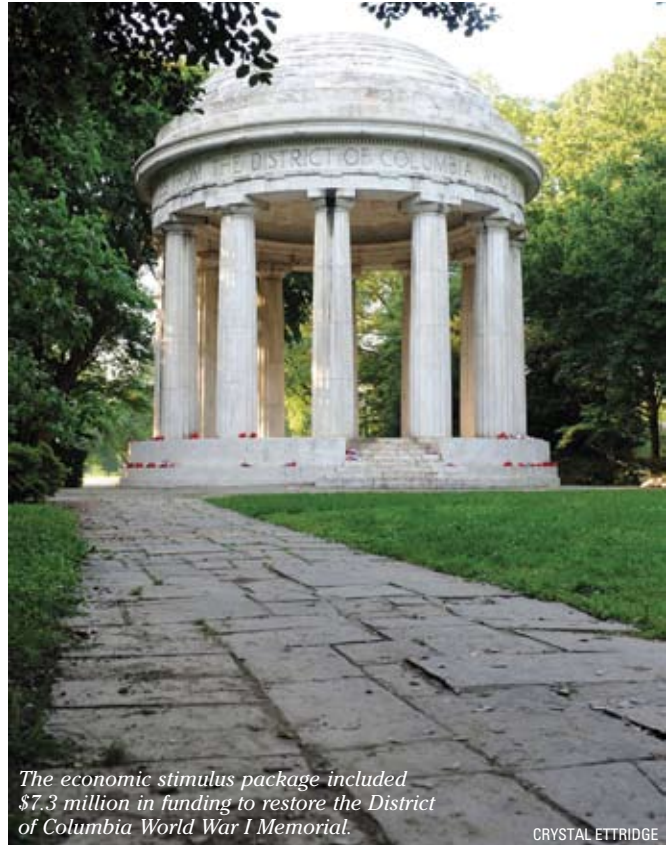
Recently, Rep. Ted Poe (R-Texas), introduced the Frank Buckles World War I Memorial Act to renovate the D.C. memorial and rededicate it as a national shrine in 2018, when America observes the 100th anniversary of the end of the “War to End All Wars.” The act is named after the last surviving American World War I veteran.

As I stood before the memorial, then walked up the steps to peer at the inside of the dome, it did look a little shabby, especially compared with the other monuments. It seemed lonely and overlooked and there were no crowds walking around it. But it was also quiet and more reflective. It seemed as if I stood on sacred ground.

I'm hoping that if they do renovate it, they will include a place to sit. It seems like a place to ponder those who were lost in the Great War, but also to feel their spirits there.

Pamela R. Wills
Public Affairs Specialist
OPA Regional Office
Los Angeles

Editor's note: Since Pam Wills' visit to the District of Columbia World War I Memorial, resolutions have been proposed in Congress to create a national memorial honoring U.S. World War I veterans using the current D.C. memorial as its core structure. And in April, the Department of the Interior announced that the National Park Service will



The economic stimulus package included \$7.3 million in funding to restore the District of Columbia World War I Memorial.

CRYSTAL ETRIDGE

spend \$7.3 million in American Recovery and Reinvestment Act funds to restore the current memorial. In 2017, the United States will commemorate the centennial of its entry into World War I.

Nearly 5 million Americans served during the war, and 116,516 died in defense of democracy overseas—the first time American soldiers went abroad to defend foreign soil against aggression. While the later conflicts of the 20th century—World War II, the

Korean War and the Vietnam War—rightfully have national memorials on the National Mall, there is no such memorial to veterans of “the Great War,” even though more Americans gave their lives in World War I than in Korea or Vietnam.

Fundraising is currently underway to pave the way for such a memorial. For more information, go to the World War I Memorial Foundation Web site at www.wwimemorial.org. VA

We Want to Hear from You

Have a comment on something you've seen in *Vanguard*? We invite reader feedback. Send your comments to vanguard@va.gov. You can also write to us at: *Vanguard*, Office of Public Affairs (80D), Department of Veterans Affairs, 810 Vermont Ave., N.W., Washington, D.C., 20420. Include your name, title and VA facility. We won't be able to publish every letter, but we'll use representative ones. We may need to edit your letter for length or clarity.



Securing and Protecting VA's Sensitive Information

K. Adair Martinez

Deputy Assistant Secretary for Information Protection and Risk Management

Twenty years ago, VA was elevated to Cabinet-level status. This was a monumental step in demonstrating the nation's resolve to support those who defended our great nation and way of life. It was also a time when records were paper-based, the Internet was barely existent, and cyber security was a phrase used in science fiction.

Today, VA serves more than 25 million veterans, and is expected to support an additional 500,000 veterans by 2013. To meet this challenge, VA is not only automating records, but also looking to connect them to other agencies, hospitals and facilities. The Internet remains the primary source for information-sharing in the new millennium, and as a result, cyber security has become a household term.

Each day, more than 278,000 employees, contractors and volunteers access VA's information and information systems to support the department's mission. This includes medical staff accessing patient information to heal our wounded, and benefits administrators handling beneficiary information to sustain the livelihood of veterans and their families.

Although accessing this information may appear as simple as entering a password, the password is just one element of the information protection process. VA has both the honor and added responsibility of supporting a growing number of veterans through such programs as the Post-9/11 GI Bill. The increase in records, personal information,

and network and system usage tests VA's ability to truly protect the department's stored sensitive information.

According to Javelin Strategy & Research, 8.4 million adults in the United States were targets of identity theft in 2008. While that number is staggering, it is reflective of our nation's current information protection posture. With cyber crimes on the rise, how does VA allow properly authorized access to medical and beneficiary information, while protecting sensitive information?

Balancing legitimate and necessary access to information with the responsibility to secure and protect this information is one of the essential tasks that the VA Office of Information Protection and Risk Management (IPRM) faces on a daily basis. IPRM enacts strong information protection and risk management policies, processes and procedures and is charged with ensuring information is accessible to those who need it, while protecting it from those who should not have access. Additionally, IPRM anticipates future information protection challenges and asks the question, "What if?" by offering risk management solutions.

Since its creation in 2007, IPRM has made extraordinary progress in securing VA's network and systems to protect sensitive data. These efforts

have led to several significant accomplishments, including publishing VA Directive and Handbook 6500, the first-ever comprehensive information security handbook for VA; leading VA's campaign to "Stomp Out the Unnecessary Use of the Social Security Number;" and working to mitigate and close deficiencies reported by the Inspector General and the Government Accountability Office.

To comply with the Federal Information Security Management Act of 2002, IPRM completed the certifica-

ensure the smooth transfer of information. For example, VA works with the Department of Homeland Security's United States Computer Emergency Readiness Team to support the federal government's ability to deter, defend against and respond to any cyber attack on the federal civil executive branch. VA has partnered with the Department of Defense to establish the Trusted Partnership Working Group—a group formed to share protected health information more rapidly, even while enhancing the security of that PHI and

Each day, more than 278,000 employees, contractors and volunteers access VA's information and information systems to support the department's mission.

tion and accreditation of 100 percent of VA information technology systems to ensure they maintain the proper security controls. The office also encrypted more than 20,000 laptops to reduce the risk of information loss in the event of another data incident. IPRM worked to integrate incident response tracking into one communication stream to assist in management decision-making, and helped to secure flexible work arrangements and consistent communications through the use of Remote Enterprise Security Compliance Update Environment. To improve responsiveness and transparency while balancing business needs, VA has begun to implement an automated Freedom of Information Act tracking system.

IPRM also works closely with other federal agencies to

mitigating cyber threats.

Information protection and risk management is as much about people and behavior as it is about policy and technological solutions. While IPRM continues to address information protection challenges, VA employees can do their part by understanding the rules and regulations, knowing what to do in case of a data breach, and knowing who to contact with questions about information protection.

The work we do today will lay the foundation for how we will meet the responsibilities of tomorrow. Visit the Office of Information and Technology Web site for more information on VA's Information Protection Program: www.va.gov/oit. ^{VA}

For more information, go to www.va.gov/oit.

Deputy Secretary, First Assistant Secretary Are Officially Sworn In

W. Scott Gould, a retired naval reservist and senior executive with experience in the federal government and the private sector, was sworn in as Deputy Secretary of Veterans Affairs on April 14.

“I look forward to working with President Obama and Secretary Shinseki to serve our nation’s veterans,” Gould said. “The key to transforming a large organization like the VA will be innovation and col-

Prior to IBM, he was chief executive officer of The O’Gara Company, a strategic advisory and investment services firm, and chief operating officer of Exolve, a technology services company.

Gould’s previous service in the federal government includes positions as the chief financial officer and assistant secretary for administration at the Commerce Department and, later, as deputy

bachelor’s degree from Cornell University, and a master’s in business administration and a doctorate in education from the University of Rochester.

VA’s first confirmed assistant secretary in the Obama administration, L. Tammy Duckworth, took the oath of office on May 20 as the department’s chief spokesperson at Walter Reed Army Medical Center, a key site in her recovery from wounds suffered in Iraq.

Secretary Shinseki presided over the swearing-in ceremony as Duckworth, a major in the Illinois National Guard, became VA’s assistant secretary for public and intergovernmental affairs. “Tammy has traveled a unique path to be here today,” said Shinseki, “a journey far from over with

missions in Iraq in 2004 when she suffered grave injuries after her helicopter was struck by a rocket-propelled grenade, and she lost both legs and partial use of one arm. She spent 13 months at Walter Reed.

Duckworth chose the Army site for her swearing-in to recognize the facility’s role in her recovery and to encourage other disabled service members and veterans.

“Walter Reed is where I first saw how effective the DoD-VA partnership in caring for our veterans can be,” she said. “My VA coordinator had an office there, and I saw her on a weekly basis even before I was discharged to VA care.”

Duckworth comes to VA from Illinois state government, where she had been director of the state veterans office in Il-



With his wife, Michèle Flournoy, and family looking on, W. Scott Gould takes the oath of office as VA Deputy Secretary, administered by Secretary Eric K. Shinseki.

ROBERT TURTIL

laboration. I look forward to working with VA employees and stakeholders in transforming the agency. Under Secretary Shinseki’s leadership, we will become a veteran-centric, results-oriented and forward-looking department.”

As a naval reservist, Gould served at sea aboard the guided missile destroyer Richard E. Byrd and was assistant professor of naval science at Rochester University. He was recalled to active duty for both operations Noble Eagle and Enduring Freedom as a naval intelligence officer.

Gould recently served as vice president for public-sector strategy at IBM Global Business Services, where he also founded and led IBM’s Global Leadership Initiative.

assistant secretary for finance and management at the Treasury Department. As a White House Fellow, he worked at the Export-Import Bank of the United States and in the Office of the White House Chief of Staff.

A fellow of the National Academy of Public Administration, Gould is a former member of the National Security Agency’s Technical Advisory Group and the Malcolm Baldrige National Quality Award Board of Overseers. He was awarded the Department of Commerce Medal, the Treasury Medal and the Navy Meritorious Service Medal.

Gould is the co-author of *The People Factor: Strengthening America by Investing in Public Service*. He holds a



L. Tammy Duckworth is sworn in as VA assistant secretary for public and intergovernmental affairs at Walter Reed as husband Brian Bowsbey looks on.

ROBERT TURTIL

many, many contributions yet to be made.”

“I am so honored to serve the Obama administration by helping to care for our veterans,” Duckworth said. “They are our nation’s greatest treasure and deserve the best care available. I fully support Secretary Shinseki as we work to provide that care.”

Duckworth was an Army helicopter pilot flying combat

missions since 2006.

Her previous managerial experience includes coordinating the Center for Nursing Research at Northern Illinois University in DeKalb, and managing clubs and districts for Rotary International’s Asia-Pacific region. She earned a bachelor’s degree from the University of Hawaii and a master’s from George Washington University. [VA](#)



Counselors Kevin Elphick, left, and Roger Cheney were involved in the rescue of a soldier in Iraq.

DAN RYAN

Lives on the Line

Counselors working the VA Suicide Prevention Lifeline have prevented thousands of suicides since the hotline was launched nearly two years ago.

Since its inception in July 2007, the VA Suicide Prevention Lifeline has counseled more than 120,000 veterans and their loved ones. The counselors who come to work in Canandaigua, N.Y., each day to save lives all across the country have also directly prevented more than 3,000 suicides.

In nearly two years of operation, the counselors have talked with veterans from almost every state in the

union and every state of mind. But on the night of April 7, Kevin Elphick, one of the counselors on duty, had

the chance to save the first American life overseas, and he did it while the soldier's mother watched the rescue

over the Internet.

"First of all, it would be completely wrong to say that I was alone in preventing this suicide," Elphick said. "There was a team of counselors helping me the entire time, and the parents of the soldier had a lot of skills and a deep connection with their son. Without those skills and that connection, the rescue wouldn't have gone as well as it did."

It was 10:30 p.m. when Elphick first received the call from a mother telling him her son was in Iraq with a pistol in his mouth. The parents had been using an Internet service to talk with their son over webcams, but that evening their son had told them that his wife back in the states had filed divorce papers that day. Distracted, the soldier broke a framed photo from his wedding, slicing his hands on the glass. Then he put the barrel of his weapon in his mouth and threatened to kill himself.

Fortunately for the soldier and his family, the mother had seen information on VA's Suicide Prevention Lifeline and had the number, 800-273-TALK. The mother excused herself from the room while the father continued talking with his stepson. She quickly called the Lifeline and Elphick soon found himself trying to keep the mother calm and on the line while he and a team of fellow counselors tried frantically to do something they had never tried before, without any prepared resources.

"I was a little panicky at first," said Roger Cheney, a fellow counselor who worked the logistics of the soldier's rescue. "I had to think outside the box to get this done. We didn't have the resources readily lined up for an overseas, active duty prevention. We rarely ever deal with active service members. It's mostly veterans and always someone in the states."

Under standard operating procedures, the Lifeline counselors use 911 and local law enforcement to effect preventions anywhere in the states. After an hour has passed, the team

follows up with 911 to find out if the veteran was taken to a hospital or deemed to be otherwise safe.

There is also always a referral issued to the local suicide prevention coordinator stationed at every VA medical center. The suicide prevention coordinator will then visit the veteran to offer a consult, so that the veteran is evaluated not only in a hospital, but by a local VA representative who can bring troubled veterans under the umbrella of VA's extensive care services. While that system has worked well over the past two years, it wasn't an option this time for Elphick and Cheney.

"I think we were all alarmed when we heard that this was happening in Iraq and it was all very tenuous connections, through the mother, through the Internet. It wasn't even clear what base the soldier was on over in Iraq," Elphick said. "It took

"I think we were all alarmed when we heard that this was happening in Iraq and it was all very tenuous connections, through the mother, through the Internet."

quite a bit of research just to identify where he was."

In fact, while Elphick was calmly talking to the mother on the line, trying to get the needed information, his fellow counselors were busy on the floor of the call center trying to find where the soldier was located and how they would stop the suicide once they knew.

Quick thinking led Cheney to the Department of Defense's Military One Source, an online resource center for military members and spouses to access military services. Military One Source directed Cheney to the Red Cross.

Eventually Elphick helped the mother remember that the soldier's grandmother used regular mail to stay in touch with him and that she would know the base location. The mother called the grandmother on another

phone and Cheney relayed the information about the soldier and his location to the Red Cross.

Within minutes, Elphick could hear the mother on the other end of the line describing how military police were entering the room and stopping the suicide attempt. The entire prevention took only half an hour thanks to his team's dedication.

"I wish I could say it was a moment of sweet relief for all of us when we heard the Army had stopped the suicide," Elphick said. "However, when the officer entered his room, the son's immediate reaction was to come to the monitor and sardonically thank his mother. It was clear he was upset, so the mother was left with very mixed feelings, struggling with the essential nature of the rescue and her son's anger or sense of betrayal that the intervention had taken place."

Elphick stayed on the line to

counsel the mother and reassure her that she had done the right thing. He also let her know what she could expect to happen with her son in the future.

"That was another unique aspect of this intervention," said Lifeline supervisor Letisha "Tish" Osearo. "Normally the family is not there for a rescue and we counsel the rescued veteran directly. Kevin had to effect an intervention without ever having contact with the person actually threatening suicide. It was all done through family and the military. Kevin did an amazing job keeping the parents calm, and staying calm himself while we were constantly over his shoulder trying to get more information."

At 6:30 p.m. the next day, Elphick phoned the mother again for a follow-up on her and her son's well-

being. The son had been taken to a military hospital, where he was getting one-on-one observation with a therapist and a chaplain. The mother herself was happy to hear Elphick's voice again.

"She was very thankful," Elphick said. "Her family had rallied around her so she felt she had a lot of support. She also had time to process the whole event for herself and realize that her son was now in a safer situation. She expressed her gratitude several times for VA and the Lifeline."

On a typical day, the Lifeline will average 250 calls to the center. With three shifts of eight responders each to keep the Lifeline operating 24 hours a day, one responder will average around 10 calls a day. Talking to 10 suicidal people every night may seem like an incredible load to carry, but Elphick and his fellow counselors have found their work to be inspiring.

"There's people who are very thankful, very grateful, and by the end of an intervention, you feel very uplifted by their comments and the fact you were able to provide some sort of intervention or support for them. That's a great feeling to get every day," Elphick said.

"There are also frustrating experiences where the individual is intoxicated or drugged, and that is just part of the landscape we work in. But you take the good experiences and live for them. Let the bad ones just roll off your back."

Fortunately for the staff at the Lifeline and the veterans they are serving, those bad experiences are far outweighed by the good they know they are doing. Each counselor also knows what they are doing before they are trusted with the phone.

Each is hired with a background in addiction therapy, social work or nursing. They also go through a two-day training program called Assist followed by 40 hours of observation before going on to actually answer phones. Additionally, they receive extensive phases of continued train-



ROBERT TURTEL

The transit campaign was piloted in Washington, D.C., last summer. The number of calls to the suicide prevention hotline in that area doubled.

Transit Campaign Moves to More Cities

VA's Transit Authority Suicide Prevention (TASP) campaign moves to Spokane, Wash., in May, where it will run through Aug. 8. Ads will be displayed on city buses in combinations of king-size posters, taillight displays and interior cards.

Spokane is the first of seven cities targeted in Phase 2 of TASP. The other cities are Dallas, Las Vegas, Los Angeles, Miami, Phoenix and San Francisco. The locations were selected in consultation with the Office of Mental Health Services, based on suicide rates and the availability of trained suicide prevention coordinators to handle potential increases in workload.

TASP was piloted in Washington, D.C., last summer. During that campaign, the number of calls to the suicide prevention hotline (800-273-TALK) from the campaign area doubled.

In the meantime, the VA-produced and distributed suicide prevention public service video featuring actor Gary Sinise has aired more than 8,000 times over commercial television stations since its release last October. The House Committee on Veterans' Affairs has posted the video on its Web site at veterans.house.gov/spotlight/mentalhealth.shtml.

ing, ranging from provisional six-day Lifeline training to more observation and one-on-one counseling.

"The talents and sheer determination of our counselors is incredible," Osearo said. "Each of them knows that every day is a new day with more people to save. It is a very exciting but draining job. I've been working with suicidal clients for about 20 years, but

it was always local.

"The Lifeline is new and different, a more in-depth opportunity to help veterans. Now that we are virtual, we can reach across the country and even overseas to have a deeper impact and take our service to the next level." VA

By Ryan Steinbach

VA received more than 25,000 Post-9/11 GI Bill applications in the first two weeks; veterans and service members are being encouraged to apply early.



A Popular New Benefit

COURTESY OF COMSTOCK

The department received more than 25,000 claims for education benefits during the first two weeks that veterans and service members could apply online for the new Post-9/11 GI Bill.

With the large numbers of veterans and service members expected to apply for the new program, VA projects a 20 to 25 percent increase in the total number of participants in VA's education programs.

"We are very pleased with the tremendous interest in the Post-9/11 GI Bill," Patrick W. Dunne, VA's under secretary for benefits, said. "The number of applications submitted in the first two weeks clearly shows the value and importance of this new benefit for veterans."

The Post-9/11 GI Bill, passed by Congress last year, is the most extensive educational assistance program authorized since the original GI Bill

was signed into law in 1944. It provides eligible individuals with tuition payments to assist them in getting a college education.

Many participants will also receive a housing allowance while they're studying and a stipend for books and supplies. Under the new GI Bill, certain members of the armed forces may transfer benefits to a spouse or dependent children.

Being pre-certified as eligible for the Post-9/11 GI Bill will make it easier to complete the enrollment process later this summer when the program is fully launched. Early enrollments also will allow VA to smooth a process that is expected to have more than 450,000 people apply for college benefits in the first year of the program.

Qualified applicants will receive a "Certificate of Eligibility" and information about their benefits under the Post-9/11 GI Bill. Applicants can expect to receive their certificate within 24 days of submission. Everyone who

continued on page 11

A Message for Veterans

VA Assistant Secretary for Public and Intergovernmental Affairs L. Tammy Duckworth is a disabled Operation Iraqi Freedom veteran with a mission. She is personally committed to ensuring VA's outreach program reaches all veterans with information about VA benefits they can use to improve their lives and achieve their potential.

One of her first acts at VA was to videotape a personal message about the "new" Post-9/11 GI Bill education benefits program that goes into effect Aug. 1. The two-and-a-half-minute message is posted on VA's new YouTube site to, as Duckworth said, "... put a face of another veteran out there telling other OIF vets, 'You have earned these ben-

continued on page 11

Shinseki Examines Processing System for Education Claims

One of Eric K. Shinseki's first trips outside the Beltway as the new Secretary of Veterans Affairs took him to the VA regional office in Muskogee, Okla., where a growing staff is engaged in the initial phase of processing applications for the "new" GI Bill education program for Post-9/11 veterans.

The Post-9/11 GI Bill, passed by Congress last year, is the most extensive educational assistance program authorized since the original GI Bill was signed into law in 1944. Due to the increase in benefits included in the Post-9/11 GI Bill and an influx of newly discharged veterans, a high number of applications are expected to roll into Muskogee and the other regional offices.

Muskogee is one of the largest regional offices and the largest of VA's four education regional processing offices, with a staff of more than 1,100 employees. Along with the St. Louis, Atlanta and Buffalo regional offices, Muskogee began processing Post-9/11 GI Bill claims on May 1.

Veterans may receive a certificate of eligibility now, and beginning Aug. 1, tuition and fees will be paid by VA directly to the schools. In

addition, housing allowances can be issued to the veteran after enrollment certification has been received from the school.

VA is developing a new system to process Post-9/11 GI Bill benefits. The existing education benefits system was configured to process claims for benefits such as the Montgomery GI Bill and is not capable of processing the Post-9/11 GI Bill claims. Keith Wilson, director of Education Service in VA Central Office, explained the processing differences and projected solution to the Secretary.

"The Chapter 33 (Post-9/11 GI Bill) processing engine will be similar, but far more complex than the existing process-

ing system," said Wilson. "The target date for automated processing of Chapter 33 is December 2010. While other benefit programs will be included in the new automated system, it's expected that Chapter 33 will be the predominant benefit chosen in the years after 2010."

Muskogee Education Liaison Representative Rusty Young demonstrated the existing processing system to Secretary Shinseki, who visited Muskogee to get a better understanding of how VA education claims are handled prior to the new Post-9/11 GI Bill. He explained to the Secretary how electronic enrollment certifications are processed directly from approved schools using the computer system known as VAOnce.

schedule to maintain the level of quality to which veterans have become accustomed.

To help expedite the claims process, the Veterans Benefits Administration is spending about \$150 million to hire nearly 1,500 temporary claims processors necessary to ensure the prompt delivery of the Post-9/11 GI Bill. Some of these positions have been allocated at Muskogee, which has an excellent and readily available labor pool of qualified candidates, according to Samuel Jarvis, director of the Muskogee VA Regional Office.

"We live in a rural community that, for the most part, has individuals who are underemployed," said Jarvis. "It

hasn't been uncommon to offer 50 jobs and have 600 applicants. Not only do people really want to work at this regional office, they have the bonus of serving veterans."

In addition to education, the Muskogee VA Regional Office processes claims for disability and vocational rehabilitation, but is unique among VA regional offices.

"We are significantly different from any other regional office because we

are also the home of three national call centers," said Jarvis. "We handle the nation's calls for education and direct deposit, and are one of eight national call centers handling compensation inquiries. We are also a resource center working on disability claims from other regional offices around the nation."

After touring the facility and being briefed on claims processes, Secretary Shinseki was presented an official certificate, signed by Muskogee Mayor John T. Hammond, declaring him an honorary citizen, as Merle Haggard's "Okie from Muskogee" played in the background.

- By Jim Becker



Wenee Garvin discusses education claims processing with VA Secretary Eric Shinseki during his visit to the Muskogee VA Regional Office.

The Electronic Certification Automated Processing (ECAP) program converts the claims received through VA-Once into a document ready for action. As more schools enroll in VAOnce, the number of veterans claims processed continues to increase. By comparison, for the first and second quarters of fiscal year 2009, Muskogee has received 243,000 certifications for ECAP, as compared to 231,000 for the same period during fiscal year 2008.

In the meantime, Muskogee and the other regional processing offices have trained their staffs to process Post-9/11 GI Bill claims manually and have incorporated recurring training into their

Message (cont.)

efits, this is going to start in August,' and encouraging them to get more information so they can decide if this is right for them." Here's her message:

"Hello, my name is Tammy Duckworth, and I am a Black Hawk pilot and Iraq war veteran. In 2004, my helicopter was struck by a rocket-propelled grenade just north of Baghdad, and I lost both of my legs. Thanks to my heroic crew, who would not leave a fallen comrade behind, I survived. Back home, along with other wounded warriors, I began to fight for veterans' rights.

"I am now currently serving you, America's latest generation of veterans, as an assistant secretary for the Department of Veterans Affairs. Today, I am here to tell you about a very important benefit that you all have earned through your own personal sacrifices.

"As many of you know, the Post-9/11 Veterans Education Assistance Act of 2008 will be implemented on 1 August 2009.

This is also known as the Post-9/11 GI Bill. This is a historic piece of legislation that will ensure that our generation of veterans will have the same opportunities for success as

the Greatest Generation of WWII.

"For most veterans who served in uniform after September 11th, 2001, the Post-9/11 GI Bill will help to pay for your education at colleges and universities all across America. The debt the citizens of this nation owe to you for your sacrifices can never truly be repaid, but President Obama, Secretary Shinseki, and all of us here at VA are committed to doing our part.

"In addition, some individuals will be able to transfer unused GI Bill benefits to their spouses or children. This is truly landmark legislation that will define how history views our nation's commitment to those that have sacrificed so much.

"In the words of the new Secretary of Veterans Affairs, Secretary Eric Shinseki, 'America's veterans are the heartland of our national landscape—25 million strong today, they represent the abiding truths of democracy and the soaring dreams of liberty.' I encourage all of you viewing this to help

live that dream that you gallantly fought to defend—sign up for the Post-9/11 GI Bill now at www.gibill.va.gov. Thank you, and thank you for defending our freedoms."



VA Assistant Secretary for Public and Intergovernmental Affairs L. Tammy Duckworth joined Sen. John Warner (R-Va.), left, Student Veterans of America representative Brian Hawthorne and others at George Washington University to announce the university's intent to participate in the new GI Bill's Yellow Ribbon Program.

ART GARDINER

Benefit (cont.)

applies online and provides a specific e-mail address will receive an e-mail acknowledging receipt of their claim.

Documents required to complete an online application at www.gibill.va.gov may be uploaded electronically. Applications are also accepted at VA regional processing offices in Muskogee, Okla., Atlanta, St. Louis and Buffalo.

"Because of the large number of applications expected to be received, we encourage veterans interested in attending school this fall to apply early online," said Dunne.

Under federal law, VA cannot pay benefits until Aug. 1. The new education benefit is for veterans, service members, reservists and National Guard members who have served on

active duty since Sept. 11, 2001.

While the Post-9/11 Veterans Educational Assistance Act expands VA education benefits to include covering tuition expenses at the eligible veteran's highest public in-state undergraduate tuition rate, an additional provision—the Yellow Ribbon GI Education Enhancement Program—allows degree-granting institutions of higher learning to voluntarily enter into an agreement with VA to fund tuition expenses that exceed the highest public in-state undergraduate tuition rate.

A few days before the Veterans Benefits Administration began receiving applications from veterans for pre-certification for enrollment under the new GI Bill on May 1, VA Assistant Secretary for Public and Intergovern-

mental Affairs L. Tammy Duckworth joined George Washington University President Steven Knapp, one of the Post-9/11 GI Bill authors Sen. John Warner (R-Va.), and Student Veterans of America representative Brian Hawthorne on the GWU campus in Washington, D.C., to announce the university's intent to participate in the Yellow Ribbon Program. Many private schools are signing on to ensure veterans can enroll in their programs even though the VA benefit may not cover their higher tuitions.

More information about the new program and VA's other educational benefit programs is available on the Web site, or by calling 888-GIBILL-1 (888-442-4551). [VA](http://www.va.gov)

By Gary Hicks

American Recovery and Reinvestment Act Stimulus Funds: Already at Work for Veterans

The American Recovery and Reinvestment Act (ARRA) of 2009 is already having an impact on VA and the veterans it serves.

Signed into law by President Obama in February, the act is providing VA with more than \$1.4 billion for projects that will improve medical facilities and national cemeteries, provide grants to assist states with nursing homes, and hire and train temporary claims processors, as well as invest in Internet technology and “green” energy projects.

“The funding provided through the American Recovery and Reinvestment Act will allow us to take the first steps in fulfilling President Obama’s vision of transforming our department so it will be well-positioned to serve veterans throughout the 21st century,” said VA Secretary Eric K. Shinseki. “Through ARRA we have begun much-needed improvements to existing facilities and have allocated funds to forward-looking projects such as green energy, as well as developing the IT infrastructure necessary to better deliver benefits and services to America’s veterans.”

The Veterans Health Administration has been allocated \$1 billion, of which \$601 million is being used for non-recurring maintenance projects to correct, replace, upgrade and modernize existing infrastructure and utility systems for VA medical centers. Projects include, but are not limited to, patient privacy, life safety, facility condition, utility system upgrades, and improvements related to mental health care.

“Five ARRA projects have been obligated as of May 4,” said Brandi Fate, director, Capital Asset Management and Planning Service. “Most of the projects will have some activity

in fiscal year 2009, even though it might be small in regards to the full project. These activities include studies and designs. So while the number of projects moving forward for initial obligation is relatively high in FY 2009, the significant piece will be the obligations in FY 2010.”

Two advantages of Recovery Act funding are receiving the money earlier, allowing projects to begin about six months sooner than normal, and being able to dedicate funds to safety, security, infrastructure deficiencies,

department will have a multifaceted impact, not only for VA, but also for local communities. VA will benefit over time by decreasing its dependence on fossil fuels, reducing energy costs and leaving a lighter carbon footprint on the environment. Local communities will see an economic impact as contractors are hired and labor and materials are purchased to install renewable energy and energy efficient systems.

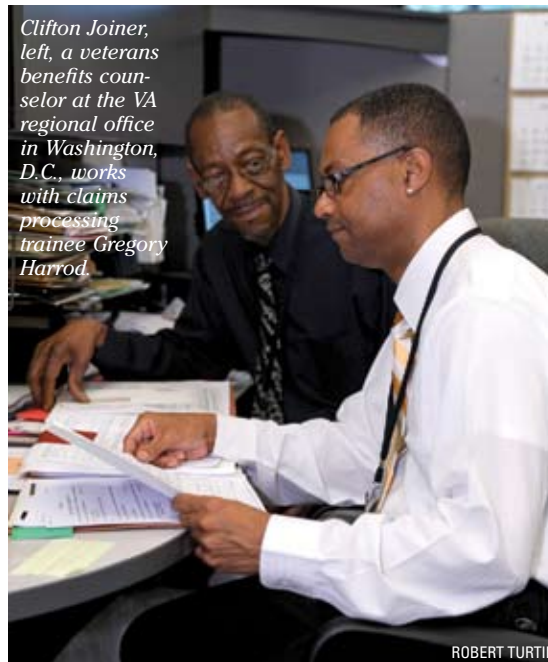
“There are several good things about the energy projects,” said Fate. “The additional funding ... allowed several initiatives to be funded sooner than expected and moves VA in the best ‘green’ direction to take care of the environment and meet the legislative requirements.

“The energy projects themselves will help medical centers reduce utility costs, generate additional utility capacity, and assist their communities by being a leader for energy conservation.”

VHA is also making \$150 million available in the form of grants to assist states in constructing or acquiring nursing home, domiciliary or adult day health care facilities. Under the grant program, VA may contribute up to 65 percent of the cost of construction, acquisition or renovation of existing state-run homes.

Similar to non-recurring maintenance and energy projects, the grant program will help local communities by jump-starting the economy in 23 states, creating and saving construction jobs. Under this program, 49 new construction and renovation projects for state veterans homes are planned.

VHA is not the only administration charged with being stewards of ARRA funding. The National Cemetery Administration will spend \$50



Clifton Joiner, left, a veterans benefits counselor at the VA regional office in Washington, D.C., works with claims processing trainee Gregory Harrod.

ROBERT TURTL

and a substantial number of energy initiatives that would otherwise be kept waiting for subsequent budget appropriations, Fate explained.

VHA’s remaining \$399 million will target energy priorities—projects incorporating energy efficiencies and renewable energy. These green projects will encompass all stages of energy development, from detailed feasibility studies through construction.

The development and implementation of green energy projects by the

million to help maintain its cemeteries as national shrines in honor of the final resting place of veterans.

NCA maintains more than 2.9 million gravesites at 128 cemeteries in 39 states and Puerto Rico, as well as 33 soldiers' lots and monument sites. NCA will use ARRA funds to: raise, realign and clean headstones and markers; repair sunken graves, roads and buildings; purchase equipment; conserve energy and water through the use of wind, solar and other natural renewable resources; and repair historic monuments and memorials at national cemeteries.

The timing of the ARRA funding couldn't have been better for the Veterans Benefits Administration; it will spend about \$150 million to hire nearly 1,500 temporary claims processors necessary to ensure the prompt delivery of Post-9/11 GI Bill benefits beginning Aug 1.

VBA will also receive an estimated \$500 million for Veteran Economic Recovery Payments—one-time payments of \$250 to eligible veterans and survivors to help mitigate the effects of the current economy. VA is working in coordination with the Social Security Administration, the Railroad Retirement Board and the Department of the Treasury to make these payments, beginning in June.

The Office of Information and Technology will receive \$50 million, primarily to provide software development, staff and associated equipment to help deliver the Post-9/11 GI Bill benefits. Currently, VBA does not have a system in place to process Post-9/11 GI Bill claims, which require much more data to process than Montgomery GI Bill claims.

The Office of Inspector General will receive \$1 million to audit and investigate applicable VA programs, grants and projects receiving ARRA funds and perform necessary oversight.

All VA projects initiated under ARRA must follow the same acquisition practices and procedures as those being completed under the normal

budgeting process. However, under the President's Transparency in Government Initiative, the expenditure of ARRA funds follows a stricter process and will be made readily available to the public for review.

"The extra steps to show transparency are vast," Fate said. "For starters, the list of non-recurring maintenance projects is posted on the Recovery.gov Web site, as well as VA's Web site linking to recovery efforts for view-

ing by the entire public. In addition, planned and actual obligations are being announced weekly for all projects as well as key milestones.

"Finally, most contracting activity is viewable by the public via the Recovery.gov Web site, where solicitations are displayed as well as contracting obligations and FTEE (full-time equivalent employee) reporting." **VA**

By Gary Hicks

Filling VBA Stimulus Jobs With Veterans

The Veterans Benefits Administration has nearly 1,500 temporary claims processor positions to fill to ensure prompt delivery of the Post-9/11 GI Bill benefits by Aug. 1. The Veterans Employment Coordination Service is doing its part not only to help fill those positions, but also edge toward its goal of employing more veterans in VA's workforce.

"We are passing along those job announcements to our regional veterans employment coordinators as soon as they are posted on USAJobs.Gov," said VECS Director Dennis May. "We are always aggressively recruiting veterans into the VA workforce and this is an opportunity for us to help a few more veterans."

The 1,500, mostly temporary, positions are being filled with funds allocated under the American Recovery and Reinvestment Act of 2009. Signed into law by President Obama in February, the act is providing VA with more than \$1.4 billion for projects ranging from medical facility improvements to grants to assist states with nursing homes. One hundred-fifty million of those dollars are allocated to hire and train individuals as claims processors.

May and his nine regional coordinators across the country are already helping veterans put their best foot forward when applying for these VA positions. "We forward these announcements all across the country," he said. "You never know where that perfect match is going to be."

While the bulk of these positions are temporary, May sees them as opportunities and possibly launching pads for an even better career. "In this economy, just having a job is extremely positive," he said. "These jobs will not only provide them with a pay check and training, but also an opportunity to gain experience and prove themselves."

If, in the future, any of these positions become permanent, veterans could have a head start on landing one. "If a position becomes permanent, and a veteran has proven themselves and becomes a known quantity, there are special appointing authorities we can use to bring them on board with little or no competition," May explained.

As a regular function of the office, VECS works closely with VA managers and human resources offices to ensure supervisors are aware of programs that make it easy to hire veterans, such as the use of non-competitive appointments.

The Veterans Employment Coordination Service operates under the Office of Human Resources with a goal to boost the number of veteran employees in VA's workforce from 30 percent to 33 percent. They assist veterans with job applications, KSAs and other specifics unique to the federal employment process.

To learn more about VECS, visit www.va.gov/VECS.

“Nice pickup!”
 “You were robbed!”
 “Don’t worry, he’ll get it!”

The sounds of a rowdy crowd at a bowling alley? Not even close—a group of patients at the VA Pittsburgh Healthcare System.

Welcome to the Nintendo Wii bowling tournament at the H. John Heinz III VA Progressive Care Center. With recreation therapists serving as sideline cheerleaders and other staff as spectators, the patients eagerly await their turn at the virtual bowling lane in front of them.

The newest trend in rehabilitation, commonly referred to as “Wii-habilitation,” has marked a therapeutic revolution across the VA landscape. At VA, the Wii is being used in occupational, recreational and rehabilitation therapy, as well as in several community living centers, for stroke, dementia, polytrauma and traumatic brain injury patients.

The Wii’s popularity stems from its use as a physical, cognitive and social tool, in addition to helping patients with concentration, quickness and response times. By using whole body movements, the games also help with fine motor skills and hand-eye coordination.

Introduced in 2006, the \$250 Wii gaming console uses a sensor bar that works with remotes, determining the location and distance of the TV screen to the player. Consisting of a wireless, motion-activated controller, the remote’s functionality allows it to be used as a steering wheel, a tennis racket, a baseball bat or boxing glove, from up to 10 feet away. The slightest hand movements can make a bowling ball curve towards a strike, help a batter hit a home run, or create a “Guitar Hero” out of anyone, including those with limited mobility.

Willie Benison, 51, Army veteran and Community Living Center resident in Tuscaloosa, Ala., enjoys the Wii even from his wheelchair. “It’s good exercise and takes your mind off

Patient Stanley Sadowki, assisted by nurse Lisa McDade, competes in a Wii bowling tournament hosted by the VA Pittsburgh Healthcare System at its H. John Heinz III VA Progressive Care Center in March.



Wii-habilitation

The popular system isn't just fun and games—it's serious therapy, too.

GLENN HANGARD

of being in a wheelchair because you just focus on the game,” he says. “The games are pretty easy to play, but being in a chair, you have to position it so your hand and arm are free to guide the ball or swing the bat.”

The games, which include the popular baseball, tennis, golf, bowling and boxing, have been joined by Wii Fit, which adds yoga elements such as balance and posture, and Guitar Hero, which allows players to imitate their favorite songs via a virtual guitar.

“We’re looking at a younger generation,” says Jamie Kaplan, recreation

therapist at the James A. Haley Veterans’ Hospital in Tampa, Fla. “This is not your father’s Army that came back from World War II and was satisfied doing model and craft projects and playing bingo. This generation is more computer and tech savvy.”

Unlike traditional therapy methods, patients often forget the Wii is really therapy. During sessions ranging from 15 minutes to an hour, therapists typically split half of the patient’s therapy time on the Wii system and the other half on traditional rehab methods, such as repetitions, lifting

weights and stretching.

"The Wii has proven useful for patients with a variety of functional limitations, such as those with amputations who need to improve strength and balance skills in their remaining limbs," says Stacy Flynn, physical therapist at the Michael E. DeBakey VA Medical Center in Houston.

Erinn Raimondi, occupational therapist at the VA medical center in Providence, R.I., says although the system is beneficial, it should be used appropriately. "The Wii is not for every patient," she cautions. She believes therapists should use it in conjunction with other methods, not as a replacement for traditional therapy.

"For example, we'll use Wii Big Brain Academy for someone suffering from TBI. In those patients, it's important to help them with cognitive skills and re-education of tasks. That game helps them memorize up to six sequences in a row, teaches them how to sort things, to remember five to seven different items, and helps with skills such as basic math," says Raimondi, who recently developed a Wii treatment plan, complete with criteria and protocol, for her facility's patients.

The VA medical center in Cheyenne, Wyo., which uses the Wii for recreation therapy in the long-term care unit, plans to implement it in the OEF/OIF program, specifically the TBI clinic. "It improves chronic pain by increasing the level of activity and giving the veteran confidence that he can be more active," according to Dr. Christine O'Brien, of the Cheyenne VAMC. "It helps with isolation and withdrawal by giving the veteran a forum to interact with others while having fun. Sometimes just being able to be competitive again is a huge plus."

Typically thought of as a young person's pastime, the Wii's popularity spans generations. In fact, several facilities have found the activity appeals most to those who can no longer participate in the sports they once loved, because of arthritis, injury or illness.

Katy Ryan, recreation specialist

and assistant director of the Voluntary Community Resource Service at the Minneapolis VA Medical Center, has seen the older generation happily embrace the latest technology. "I'm amazed by the technological advances older veterans have tuned into using the high-tech gadgets. It's trans-generational—there is a carryover value once the veterans go home, too, since their children or grandchildren often have the games and systems."

Many veterans are more than happy to play the Wii against family and friends. "With this system, it's more about their abilities than their disabilities," says Ryan, whose Minneapolis facility is one of VA's four poly-trauma regional center sites, resulting in a lot of younger patients.

Raimondi agrees, adding, "This generation, my generation, under 35, we grew up with video games. In occupational therapy, games have historically been used. But a 27-year-old does not want to play a game of checkers with you."

The Wii's major benefit has proven to be its flexibility of use in multiple health care units. In cold weather climates, the Wii has provided veterans the chance to stay physically and mentally fit even though they can't get outside.

The Wii's growing popularity led to a unique match-up between veterans at the John D. Dingell VA Medical Center in Detroit and several Detroit Tigers players earlier this year. A competitive Wii baseball tournament was held at the end of January, pitting patients against the professional athletes. The top four veterans from the tournament then played against the athletes for the championship. Tigers pitchers Nate Robertson and Edwin Jackson, and outfielders Ryan Raburn and Cleto Thomas, were no match for the expert patients—the pros went down in defeat.

In late 2007, only seven VA facilities reported having a Wii system on their campus. By late 2008, more than 80 facilities reported having at least

one Wii, with the remaining facilities hoping to receive units in 2009. Several facilities now hold weekly Wii bowling leagues or monthly tournaments, complete with t-shirts and refreshments.

The majority of Wii systems at VA facilities have come from donations, according to Laura Balun, director of the VA Voluntary Service Office in headquarters. The Military Order of the Purple Heart has been one of the largest contributors to date, with more than 50 systems donated.

Recently, a \$10,000 grant from the MOPH foundation was used to fund the purchase of Wii systems, games and controllers, along with several iPods, with the help of the Veterans Canteen Service. According to Tanya Gent, VCS chief financial officer, "VCS receives an e-mail from Voluntary Service and we take it from there—we order the merchandise, deliver it to the medical centers, and the veterans are taken care of. It's that easy."

Other donations have come in from local veterans service organizations, school fundraising drives, and individual contributions. Balun is happy to see the systems come to VA. "I'm a user myself," she says. "I use Wii Fit every day. I'm a firm believer in it and it's a valuable tool."

John Pinigis, recreation assistant with the VA Pittsburgh Healthcare System, said his facility began using the Wii a couple of months ago. "Guys that didn't participate in other activities, guys that didn't get out of bed, everyone now comes out to play," he says. "They get hooked. Many of them say they're going to buy these for their grandkids, but I know they just want one that they can play with."

Therapists also cite increases in patients' self-esteem and socialization skills. "Patients who were never smiling now are smiling," says Ryan. "It goes beyond the physical improvement." **VA**

By Amanda Hester

Band members (left to right) David DeJesus, Joe Ramage, Damon Hobson, Eric Clauson, Michael Henry (seated), and Rocco Vasile.

The Music Within Them

Once homeless and hopeless, the members of the band Mass Exodus are spreading their message of redemption.

It was an unlikely place to find the music within them. On most Thursdays, though, you can hear them practice to a beat all their own—a beat that livens both the place and the inner soul. There's Michael Henry on drums, Damon Hobson on keyboards, Rocco Vasile on guitar and Eric Clauson on bass. There's David DeJesus on congas and Joe Ramage on vocals. Ramage is the bandleader who composes, arranges and plays lead guitar.

There was a time when this scene would have played out in bars and nightclubs. But on this night, the scene is on the stage of an empty theater at the Edith Nourse Rogers Memorial Veterans Hospital in Bedford, Mass. And the stars of the band, Mass Exodus, are formerly homeless veterans, all in their 40s and 50s, with a past history of drug and alcohol abuse.

Two Bedford VA employees, Marc Gustafson and Dan Oliver, the glue behind the idea, saw something in this group of recovering veterans they had not seen before—talent and a willingness to work with one another to show off that talent.

“It was like a coming together of the perfect storm,” Oliver said of the way this music group started.

“We had been trying to bring the message to other vets to let them know this is not your father’s VA,” Henry said. The band became that message. “You know, vets would rather sleep under a bridge than deal with bureaucracy. We want people to know there is a good VA experience.”

Getting their brainchild off the ground wasn’t always easy, as both veterans and staff readily admit. There were the usual bureaucratic obstacles like initial skepticism by some staff and lots of regulations and standard operating procedures. After all, these veterans had been in treatment to overcome serious issues that led them to homelessness. The treatment requires certain formulas for success. And until now, those formulas didn’t include a band belting out rhythm and blues, soul and reggae.

Back in 2002, Gustafson, an occupational therapist, and Oliver, a recreation therapist, conceived the idea of a music program designed for homeless veterans as a therapeutic intervention. But with all the programs’ requirements at that time, it was too difficult to find the time for music.

Until 2007, that is. That’s when VA began to use a more collaborative approach known as the psychosocial rehabilitation model, a methodol-

ogy driven by the veteran’s needs and strengths, Gustafson and Oliver explained. It became one of the links that led to eventual success.

Gustafson has a music studio in his basement where he plays drums and works on production for other groups. When the pieces began to fall into place for a band of veterans, Gustafson and Oliver said they were so excited they began to come back in to work after hours to make the effort that finally led to the birth of the group Mass Exodus.

“This has been wonderful for me,” Gustafson said of his VA career. “It gave me a whole new life.”

That sentiment was echoed by others involved with the band, too.

Oliver noted that there have been other music therapy programs, “but this is different. This is a partnership between staff and vets. It is veterans who have a desire to get their lives moving in a good direction, matched with staff who could help.”

And there is a message that goes along with that, he added. The band markets the message of homelessness in original songs written by members.

“Those of us that have found ourselves homeless are not deficient in intelligence, skill or talent,” Henry said. “Many of us have worked for ‘Corporate America’ and in government service, but did not find our voice until we found music and song.”

In a booklet describing the project that was written by members of the band, Hobson stopped playing keyboards long enough to reflect on homelessness in a phrase he wrote to include in the book: “We are veterans who did not fully understand how beautiful life could be, how rewarding self-realization was, until we came together on this project.”

“What began as therapy,” Oliver said, “became a powerful tool, and has resulted in bearing fruit separate from therapy.”

Gustafson added that there are many therapeutic benefits to the project, including stress reduction and a

sense of empowerment.

They say that the time was exactly right and support for the project was increasing. Members are quick to point out the importance of support from Bedford VA’s leadership. And working alongside Gustafson and Oliver were Recreation Therapy employees Courtney Doelger and Leah Sullivan, and Occupational Therapy employee Lisa Boyajian. Part of what band members call the “Dream Team” of VA support also includes Margaret Henderson, chief of Mental Health Service Line for Community-based Programs and Specialized Services; Martin McNamara, chief of the domiciliary; Bonnie Porreca, education specialist; William Alexander, a psychologist; and Alice VanOrmer, a clinical psychologist.

The members of the band have all “graduated” from the Homeless Domiciliary Program at the Bedford VA and are living in nearby communities or the single residency housing on the grounds of the facility. The band is in an ever-fluid state, Oliver explained. Other members will come on and some may leave, but he hopes Mass Exodus will be the inspiration for others to start up their own groups of music makers.

Air Force veteran Ramage is now a carpenter. He spent more than 19 years with the U.S. Postal Service before getting “into a hole due to stupidity” which eventually led to homelessness.

Henry always had music in his blood. He served in the Marine Corps, and then “a series of bad decisions and substance abuse” landed him in a state of homelessness, too.

But today, they are employed, living in private housing and making music. They have a Web site, www.thebandmassexodus.com, where visitors can hear their original songs, learn more about their efforts to raise awareness of the plight of homeless veterans, and watch a video about them. VA

By Karen Kubik

2009 Excellence in Nursing Awards Honoring the Department's Top Nurses

Secretary Eric K. Shinseki paid tribute to the department's top nurses and medical professionals during the Secretary's 2009 Excellence in Nursing and the Advancement of Nursing Programs Award Ceremony held May 12 at VA Central Office. The Secretary's Award is given to individuals nominated by their colleagues for outstanding service to veterans and VA.

The awards program coincided with the 2009 National Nurses Week, themed, "Nurses: Building a Healthy America." This theme reflects the commitment nurses make every day for their patients, communities and country.

"Nurses are the heart and soul of our organization," said Steven P. Kleinglass, director of the Minneapolis VA Medical Center. "They are among the first to see our patients and the last to see them out. They care for the veterans and their families and work with the staff to ensure the highest quality care."

Kleinglass received this year's Advancement of Nursing Programs Award in the Medical Director category for his support of nursing in areas ranging from evidence-based training to acquisition that give nurses the tools they need to provide high-quality health care. He said the impact nurses have is obvious from the feedback he receives on a daily basis.

"I receive countless letters from veterans and their families praising the care they received," he said. "The vast majority of that praise is due to our nurses."

Nurses receiving 2009 awards:

■ Margaret A. Mikelonis, of the

James A. Haley Veterans' Hospital in Tampa, Fla., was presented the top award in the Registered Nurse Expanded Role category. She serves as Women Veterans Program manager and also provides direct care for women in a primary care setting.

"It's truly a humbling experience and honor to receive this award," she said. "It means a lot to me personally, but I also see it as a collaborative award for my mentors and managers, who have taught me so much over the course of my career with VA."

Mikelonis is one of about 7,000 nurses who served in Vietnam. She

would be very difficult to get me away from there. One day, as my career progresses, I may move to management, but right now, I love what I am doing and I'm going to continue doing it the best that I can."

■ Michael A. Martinez, of the VA Eastern Colorado Health Care System in Denver, was presented the top award in the Licensed Practical Nurse category for his work as the orthopedic clinic manager.

Martinez, a Gulf War veteran and former combat medic, joined VA in 1991 after serving 10 years in the Army. He said he uses his experience to provide the best possible care he can.

"As a combat veteran, I can relate to them," he said. "The faces I see at VA are the same faces I saw on the front lines in Iraq, so I sympathize with them and I feel responsible to help them get the care they deserve."

■ La'Shon Rivera, of the VA medical center in Wilmington, Del., brought home top honors

in the Nursing Assistant Role category for her work as the health technician in the facility's busy hematology and oncology clinic, which provides outpatient chemotherapy.

"I am in good company," she said, referring to the peers who nominated her for the award. "I work with a great team, from the director and nurse managers all the way down. We give all that we can to our veterans and their families and look for ways to learn, improve, and make a difference in their lives, which is very important."

■ Cecilia McVey, of the VA Boston Healthcare System, won the



Secretary Shinseki greets the award recipients in his office (left to right): Margaret Mikelonis, La'Shon Rivera, Anieta Morgan, Cecilia McVey, Michael Martinez and Steven Kleinglass.

EMERSON SANDERS

served in theater with the 3rd Surgical Hospital from 1971 to 1972 and began her career with VA after returning to the states.

■ Anieta Morgan, of the James J. Peters VA Medical Center in the Bronx, won in the Registered Nurse Staff Role category. Morgan started her VA career as a student nurse and currently works in the facility's 20-bed intensive care unit.

"I love what I do," she said. "In the Bronx, we have a very diverse group of veterans and it's interesting to learn about them and very rewarding to care for them. I can't picture myself doing anything else and it

A Message from Chief Nursing Officer Cathy Rick



My greatest privilege and responsibility as chief nursing officer is to advocate for our 75,000 VA nursing staff and provide resources to enhance all levels of professional practice, advance the application of evidence-based nursing practice, and foster an interdisciplinary team approach to provide patient-driven care for our veterans.

VA Nursing Service has a notable history of bringing leadership, innovation and dedication to the nursing profession in its effort to provide safe, effective, efficient and compassionate care for our nation's heroes. Working in the world's largest integrated health care system, VA nursing personnel face unique challenges and opportunities.

VA nursing is focused on developing creative solutions to enhance efforts for retention and recruitment, common challenges within national and global health care communities. We will continue to advance nursing practice in a rapidly changing health care industry.

Caring for men and women spanning multiple generations calls for new approaches and perhaps some revamping of our unique programs. The number of older veterans will

increase dramatically as the baby boom generation enters their "golden years," and we will attend to the special needs of the younger generation of veterans, as well. We've developed key initiatives to meet the special needs of the men and women from Operation Enduring Freedom and Operation Iraqi Freedom.

In 2008, VA Nursing Service launched our 2008-2012 National Nursing Strategic Plan with four overarching goals: leadership excellence; career development and workforce management; evidence-based practice; and nursing practice transformation. Critical components supporting each of the strategic goals are: informatics/technology; data management; research; and advanced practice.

Examples of early efforts related to the strategic goals include:

- began a pilot at eight facilities for registered nurse residency programs to recruit and retain staff registered nurses;
- piloted staffing methodology for VA nursing personnel at 40 facilities to support a national process to systematically measure the impact of staff levels and staff mix on patient care outcomes;
- implemented real time electronic exchange of information between VA polytrauma centers and DoD military treatment facilities;
- implemented a national clinical practice program to provide guidance on specialty clinical nursing practice and to support field-based operations as well as organizational priorities;
- expanded the Clinical Nurse Leader program to nearly 140 facilities;
- increased VA Nursing Academy partnerships from 10 to 15 sites to increase

nurse faculty and recruit nursing students; and

- increased nurse certification across VA to promote specialty certification.

We've also launched several other national initiatives to create a magnet-like culture at all facilities.

I am confident that the VA nursing community is excited and willing to support Secretary Shinseki's priorities to enhance our efforts to be veteran-centric, results-driven and forward-looking. As VA transforms our health care system, it is vital that nursing engagement and contributions be recognized. Our VA nursing talent will contribute significantly to veteran and staff satisfaction, successful efforts at retention and recruitment of the most qualified nursing staff, and, most importantly, outstanding care for our veterans.

Finally, to our VA nursing staff, I say I am proud to boast about your contributions and "can do" attitude. You've demonstrated that "Knowing is not enough; we must apply. Willing is not enough; we must do!"

VA nurses share a sense of curiosity and a desire to do something about it. This "built-in" sense of curiosity is the "WHY" chromosome that VA nursing staff build their practice on. I thank you for all that you do to design, deliver and teach safe, effective, efficient and compassionate health care for our veterans. The Office of Nursing Services will continue to support your efforts and celebrate your achievements as your "bright lights" in many corners across VA shine the way to move forward.

Advancement of Nursing Programs Award in the Nurse Executive category. McVey has served as the associate director for nursing and patient services for the last 10 years and has seen a lot of changes in VA over the course of her career.

"VA has always been a wonderful place, and I've seen it grow into a world-class health-care provider," said

McVey, who started as a nursing assistant 40 years ago. "It makes me proud to represent the nurses of my facility and those across the country. It's an honor."

VA has one of the largest cadres of nurses of any health care system in the world. Numbering more than 75,000 nationwide, the VA nursing team—composed of registered nurses,

licensed practical nurses/licensed vocational nurses, and nursing assistants—provides comprehensive, complex and compassionate care to the nation's veterans, helping them prevent health problems, maintain or regain health, and live with disabilities. **VA**

By Gary Hicks

Welcome Home events, like this one hosted by the New Mexico VA Health Care System at a ballpark in Albuquerque, have proven to be an effective way to reach veterans and their families with information about VA benefits and services.



NMVAHCS

Welcoming Them Home

Outreach to returning veterans is critical to delivering VA benefits and services.

The department provides numerous benefits and services to veterans, their dependents and surviving spouses. These benefits and services range from disability payments and health care to home loan guarantees and burial benefits, with scores of others in between. But what good are these benefits and services if veterans don't know they exist?

VA has eight advisory committees working to improve outreach activities with one goal in mind: inform veterans of VA health care services and other benefits. Most importantly, veterans need to know how to find the services they need at the right

time and place, and using new technology such as social media.

"If we are to really meet the needs of these returning service members, we have to ensure that we provide them with all of the information that we can in terms of eligibility for VA health care and services that have been expanded since they have returned from combat," said John Brown, director of the Veterans Health Administration's OEF/OIF Outreach Office.

"Once they receive that information and know how to access these services, they have a choice to come to VA or other alternatives. We

want them to choose VA as their first choice for health care."

The OEF/OIF Outreach Office is where ideas become reality. They take ideas and turn them into successful initiatives that reach veterans and their families. To date, the office has implemented several robust initiatives to identify interventions for OEF/OIF veterans and family members.

"This is very serious business for the health of those service members who have deployed and come back and in some cases have deployed several times," said Brown, a retired Army officer. "Most of the employees here in the office have either served,

or are the spouses of veterans, or have touched the military in some shape or form. It's not only an important job, but also one close to the heart. They want to make a difference in the lives of our new veterans and their families."

Currently, the OEF/OIF office has 11 outreach programs underway. One of the more recently implemented programs is the Reserve Components Demobilization Initiative. VA field staff members are at the "choke point" when combat veterans are undergoing the demobilization process at more than 61 sites.

The VA team presents information on health care, vet centers and benefits. Service members actually enroll in VA health care while on site and still on active duty.

"We designed the presentation to be short and to the point so we wouldn't lose their attention," said Brown. "After a brief overview and some discussion, we walk them step-by-step through the health care eligibility form 1010EZ. Once they enroll in the health care system, all they have to do is show up at our door."

The only hiccup in the initiative has been that some of the National Guard members and reservists have leave saved during their deployment, and their DD-214 cannot be issued until separation. But that problem was quickly resolved with a "veterans first" solution.

"Many of those returning remain on active duty for up to 60 days, but we can register them at this time," said Brown. "They are given a watermark document that shows they have

been registered in VA health care and are awaiting their discharge from active service. When they present themselves to a VA facility, a specialist can look into the system and see that they have been registered and are waiting for their DD-214. This allows them to receive care at VA facilities until their DD-214 is issued."

Since May 2008, VA health care and benefits experts have talked to more than 41,000 troops, with more than 39,000, or about 94 percent, completing the 1010EZ to apply for health care.



"They want to make a difference in the lives of our new veterans and their families," John Brown says of his staff in the OEF/OIF Outreach Office.

To reach out to returning service members who may need VA care and coordination of services, the OEF/OIF Outreach Office created a Combat Veteran Call Center. The Combat Call Center was charged with calling returning veterans who served in combat from October 2002 through December 2007 to inform them of their new, expanded VA services, and also to ensure they are receiving the care they need from OEF/OIF care managers at VA medical centers.

"We hired and trained contract

staff to establish the call center and initially target two distinct veteran populations," said Brown.

The first group of 15,600 consisted of those who were sick or injured while serving in Iraq or Afghanistan. The second group of 550,000 consisted of combat veterans who have been discharged from active duty, but have not contacted VA for services.

To date, the Combat Call Center has contacted 652,300 service members and made 35,000 referrals for health care, counseling or other VA benefits and services.

Other outreach initiatives being conducted by the OEF/OIF Outreach Office include reaching out to those undergoing the disability evaluation process; the Transition Assistance Advisor Program (VA and National Guard state partnership); Post-Deployment Health Reassessment (3-6 months post-deployment); Wounded Warrior Resource Call Center; Wounded Warriors in Transition; and the Yellow Ribbon Reintegration Program.

To learn more about these programs initiated by the OEF/OIF Outreach Office, visit www.oefoif.va.gov. The "Returning Veterans" Web site is designed to welcome home veterans of the Iraq and Afghanistan conflicts and their families while focusing on their information and VA access needs. The Web site has an easy-to-navigate format, and features videos, veteran stories, and a blog where veterans can post feedback. **VA**

By Gary Hicks

The 'Quiet Warriors'

Getting the VA health care system ready to respond to all hazards.

Over the past three decades, the Emergency Management Strategic Health Care Group (EMSHG), one of five Strategic Health Care Groups under the Veterans Health Administration's Office of Public Health and Environmental Hazards, has been known by many names—Emergency Services Office, Emergency Facilities Operations and Office of Emergency Management among them. A video produced in the 1990s dubbed them the “Quiet Warriors.”

From its origins in the late 1970s, the core functions of the office have not changed. EMSHG now, as then, continues to function as the VHA office that coordinates wartime support to the Department of Defense under the VA-DoD Contingency Plan, and emergency and disaster support to the nation through the National Disaster Medical System (NDMS).

In 1986, to support the NDMS, Congress authorized a field staff comprised of emergency managers and support staff that were, and still remain, assigned at VA medical facilities that have NDMS coordination responsibilities.



VA has been involved in numerous emergency and disaster support efforts around the nation, such as assisting with patient evacuations at the Dallas Federal Coordinating Center during Hurricane Ike in September 2008.

In the late 1980s, a third function was added: support to the nation under the Stafford Disaster Relief and Emergency Assistance Act and its implementing document, the Federal Response Plan, now known as the National Response Framework. This is the mechanism under which VA, as well as other federal departments and

agencies, receives requests for assistance to state and local communities.

Since the majority of these requests are for medical support, EMSHG, in cooperation with the VHA Office of the Deputy Under Secretary for Operations and Management, plans and coordinates VA's response

continued on page 24

Red River Rising: Shoring Up Defenses as the Flood Waters Crest

When rising water driven by rain and snow melt threatened the VA medical center in Fargo, N.D., employees from all over the region pitched in to help.

The Fargo VA Medical Center is located adjacent to the Red River and is protected by a concrete dike 45 feet high. But the north and south ends of the property are vulnerable because there is no permanent city flood protection system to meet the VA dike. Staff members joined together to shore up the flood defenses, care for and transfer patients, and watch the dike, clay levees and sandbag embankment to ensure the safety of patients, staff and the facility itself.

On March 23 and 24, nearly 100 VA staff members volunteered to fill sandbags. VA medical center and regional office employees, from clerks to physicians, participated in the effort. More than 6,500 sandbags were filled and used to join the north side of the dike to the city's line of sandbags protecting neighboring homes.

On March 27, predictions of a record-setting crest in the river of 43 feet—well above flood level—led the facility to transfer inpatients to the VA medical centers in St. Cloud, Minn., Minneapolis, and Sioux Falls, S.D. When first-class passengers on the early morning flight to Minneapolis learned the passengers coming on board were being evacuated from the Fargo VA Medical Center, they offered their seats to the veterans and VA staff who accompanied them.

The Fargo VAMC suspended all medical services on March 28. Beginning on March 31, primary care services were provided to veterans through a mobile clinic staffed by Fargo VA physicians and nurses. The mobile clinic was housed in two new, specially configured, 38-foot long outreach vehicles loaned by the Fargo Vet Center.

The clinic, opened on the campus of Innovis Health, a local hospital located far from the river that remained fully operational throughout the flood, offered

primary care services for scheduled patients and walk-ins. The mobile clinic was in operation for a week, until it became safe to resume operations at the Fargo VA Medical Center.

Innovis Health provided ancillary services for the patients as well as emergent care needs. Chemotherapy infusion treatments were also provided by Fargo VA physicians and nurses at a nearby Innovis Health clinic. Dozens of patients were able to receive quality, timely care during a challenging time.

Back at the Fargo VAMC, teams made up of four engineering staff moni-

tored the dike, its connecting clay levees and sandbag embankment around the clock to ensure there were no leaks or problems. Police Chief and Emergency Management Coordinator Robert Gard and the VA police worked to keep the buildings and grounds safe and secure.

The emergency room and walk-in clinic re-opened on April 3. Outpatient services, along with medical, surgical, ICU and psychiatric inpatient services, re-opened on April 6. The Community Living Center re-opened on May 13, after undergoing previously planned renovations. - *By Mia Briggs*



MIA BRIGGS



MIA BRIGGS

Top and above: A 45-foot-high dike protected the Fargo VA Medical Center from the 41-foot wall of water, but staff volunteered to sandbag the vulnerable north and south ends of the property.

Warriors (cont.)

efforts under the National Response Framework. In a disaster or emergency, requests for VA assistance are passed through the Office of the Assistant Secretary for Operations, Security and Preparedness and sent to VHA for action.

If resources are available—often medical staff—they are identified, mobilized and deployed when and where needed, as part of a joint federal medical response. To more easily facilitate interagency coordination and planning at the federal regional level, EMSHG recently added regional emergency managers to its field staff. Collectively, the support for DoD and NDMS, and for federal response in disasters and emergencies, essentially comprise what has become known as VA's "Fourth Mission."

As part of its response under the National Response Framework, EMSHG serves as the program office managing the Disaster Emergency Medical Personnel System (DEMPS), VHA's deployment program for emergency and disaster response in the nation's communities. The DEMPS Program, which originated in 1997, has gone through major enhancements and as a result, VHA was able to meet all mission assignments from the Department of Health and Human Services during the 2008 hurricane season.

VHA, through the DEMPS Program, was able to deploy more than 500 volunteers in support of disaster response and recovery related to Hurricanes Gustav and Ike. The program was also involved in the Red River flooding response in Fargo, N.D. VHA was able to deploy 54 volunteers to support that effort. The program currently has approximately 6,500 volunteers, VHA staff who have signed on to assist in emergencies.

DEMPS is a very active and evolving program. The program's success is based upon the fact that all of its volunteers are trained with specific knowledge and skills. The ability to

identify and roster volunteers in a response or recovery associated with an emergency or disaster is contingent upon their availability. As VHA progresses as a leader in emergency management, the DEMPS Program will play an integral role as part of the VHA Comprehensive Emergency Management Program.

An additional area that EMSHG has focused on through the years has been Continuity of Operations (COOP). EMSHG serves as the program coordinating office for VHA COOP today, as it did for the entire department during the response to the 9/11 terrorist attacks. EMSHG still maintains COOP plans and site preparedness for VHA, continues to coordinate support under the VA-DoD plan and NDMS, and works with other federal departments and agencies in the provision of VA medical support requested under the National Response Framework.

Most recently, EMSHG has been assigned to serve as the program office for the VHA Comprehensive Emergency Management Program, or CEMP. This program, under the oversight of the newly established VHA Central Office Emergency Management Coordination Group, led by the deputy under secretary for health, focuses on mitigation, preparedness, response and recovery efforts under an "all hazards" umbrella. Unlike the external focus of the Fourth Mission, the CEMP is internally focused to ensure that emergency operations plans, procedures, equipment and other necessary program elements are in place at all levels of VHA: medical centers, VISN offices and Central Office.


In 2007, VHA revised its policy governing how it was organized for dealing with emergencies and disasters. CEMP assigns responsibilities to Central Office, VISN offices and medical centers for mitigation, preparedness, response and recovery activities. As part of that process, policymakers asked the question, "Are We Ready?"

While some data existed from a

2005 Web-based survey of VISNs and VAMCs, VHA officials determined that additional data needed to be collected through on-site surveys. EMSHG, working with an independent contractor, designed the survey and the process of conducting it at VA facilities and continues to manage the implementation of this program. Design of this in-depth assessment process included subject matter experts from VHA and other federal agencies and involved two VAMC and three VISN office pilot visits.

The VHA "Capability Assessment Program" involved the development of a set of emergency management target capabilities, evaluation methods, and a scoring process that would accurately and reliably identify the status of the existing VAMC or VISN office CEMP. The assessment teams are staffed with subject matter experts such as retired VHA health care executives, clinicians and engineers.

Each site gets a report that identifies the status of its CEMP, including exemplary practices and areas for improvement. VHA also receives aggregated data on all VAMCs and by VISN. This information is being used to support strategic planning and a national performance improvement program. All 153 VAMCs, 21 VISN offices, and VHA headquarters program offices will go through the Capability Assessment Program by the end of fiscal year 2010.

Today, some three decades after it was established, EMSHG's Quiet Warriors continue to ensure the health and safety of patients, staff and visitors to VA medical facilities, as well as provide for continuity of essential medical services and timely restoration of all services in the event of an emergency or disaster. For more information, go to www.publichealth.va.gov and click on "Emergencies and Disasters." 

By Michael T. Feeser and
Patricia A. Kinder

Snapshots from the Rockies


The 23rd National Disabled Veterans Winter Sports Clinic

At the opening ceremonies for the 23rd National Disabled Veterans Winter Sports Clinic in Snowmass, Colo., on March 29, VA Secretary Eric K. Shinseki congratulated the 370 veteran participants for making their way to the top of the mountain. "I think you will do things this week some of you thought you would never do again," Shinseki told the veterans.

His words rang true for many longtime participants who recalled the apprehension and fear they felt their first time up the mountain. They were now prepared to share their advice with the younger, more recently injured veterans, many of whom would be skiing for the first time since their injuries.

Hosted by VA, and co-sponsored by the Disabled

American Veterans, the Clinic is an annual rehabilitation program open to U.S. military veterans with traumatic brain injuries, spinal cord injuries, orthopedic amputations, visual impairments and other disabilities, who receive care at a VA medical facility or military treatment center.

These photographs offer just a glimpse of the adaptive winter sports disabled veterans can pursue at the Clinic. For information, visit www.wintersportsclinic.va.gov. 

By Matt Bristol



Vietnam veteran David Farris, a patient at the VA medical center in Leavenworth, Kan., runs the gates on Race Day.

APRIL EILERS



David Norris, an Army veteran who served in Iraq, snowboards at the Clinic.

APRIL EILERS



Navy veteran Harry Jackson, left, a patient at the VA Greater Los Angeles Healthcare System.

APRIL EILERS



Navy veteran Evan Graver, a patient at the Cleveland VA Medical Center, uses a monoski.

APRIL EILERS

Federal Recovery Coordination Program Helps Wounded Veterans

A service member lies in a VA polytrauma center with multiple physical ailments and a long road ahead—additional operations, lengthy rehabilitation, and adjustment to new realities. Along that road to recovery, service members and their families in this situation often need mental health services and counseling, guidance on VA benefits, and assistance with opportunities outside of VA and the Department of Defense as they redefine their lives.

The highly specialized care that seriously ill, injured or wounded veterans and service members require can present challenges navigating through two systems of medical care, multiple specialty providers and frequent transfers among facilities. These challenges are not unique to VA or DoD—all medical systems face the issue of providing optimum care and services in a complex environment.

To provide the necessary coordination for the nation's most seriously ill, injured or wounded veterans and service members, VA and DoD joined together to create the Federal Recovery Coordination Program.

With the nation watching, the Veterans Health Administration quickly stood up the program. A memorandum of understanding between VA and DoD was signed on Oct. 30, 2007, for joint oversight. By January 2008, VA had trained and assigned the first group of federal recovery coordinators. In recognition of the program's unique role of addressing benefits and health care issues from both the DoD and VA perspectives, the Office of the Secretary assumed authority over the program in

July 2008.

Today, this program assists recovering service members, veterans and their families with access to care, services and benefits provided through the various programs in DoD, VA, other federal agencies, states, and the private sector. Program eligibility criteria include those service members or veterans who are receiving acute care at military treatment facilities; those diagnosed with specific injuries or conditions; those considered at risk for psychosocial complications; and those self-referred or command-referred based on perceived ability to benefit from a recovery plan.

Recovering service members and veterans are referred to the program from a variety of sources, including the service member's command, members of the multidisciplinary treatment team, case managers, families already in the program, veterans service organizations, and non-governmental agencies.

Generally, those individuals whose recovery is likely to require a complex array of specialists, transfers to multiple facilities, and long periods of rehabilitation are referred. When a referral is made, a federal recovery coordinator conducts an evaluation that serves as the basis for problem identification and determination of the appropriate level of service.

Currently, 14 federal recovery coordinators are working at six military treatment facilities and two VA medical centers. They are supported by a VA Central Office staff that includes an executive director, two deputies (one for benefits and one for health), an executive assistant, and a staff assis-



ROBERT TURTIL

Federal recovery coordinators help ill, injured or wounded service members, veterans and their families navigate the web of care and benefits available to them through VA, the Department of Defense, other federal agencies, states, and the private sector.

tant. In addition, the program receives personnel support at VA Central Office from the U.S. Public Health Service and DoD, with each assigning two individuals on detail.

Federal recovery coordinators manage the delivery of services and benefits and serve as a resource for service members, veterans and their families. Within the overall framework of care coordination and each client's particular needs and goals, the coordinators work with military liaisons, members of

the services' wounded warrior programs, service recovery care coordinators, TRICARE beneficiary counseling and assistance coordinators, VA vocational rehabilitation and employment counselors, military and VA facility case managers, VA liaisons, VA specialty care managers, VHA and Veterans Benefits Administration OEF/OIF case managers, VBA benefits counselors, and others.

Learn more at www.oefoif.gov. For referrals to the program, call 877-732-4456. **VA**

By Kathleen Sullivan

VA Staff Flu Blog Launched

VA's Office of Public Health and Environmental Hazards has launched a blog for employee questions about the flu. After hearing so many concerns and questions raised in e-mails, phone calls, and meetings after the H1N1 outbreak, the office created a forum for discussion about flu (seasonal and other) with one of VA's employee public health leaders, Dr. Ebi Awosika.

Check it out at vawww.blogs.va.gov/flu. Your questions, comments and concerns about flu in the workplace are welcomed. To send a comment, click on "Send" at the bottom of the blog.

Human Resources Trains to Transform Into the 21st Century VA

Willie L. Hensley, acting assistant secretary for human resources and administration, addresses conference attendees.



COURTESY OF IMAGE TECHNICAL SERVICE

More than 600 human resources professionals gathered in Orlando, Fla., to share knowledge and best practices to help them do their part in transforming VA into a 21st century organization.

The Office of Human Resources and Administration teamed with the VA Learning University to hold a human resources professionals training conference March 16-20 under the theme “Training for Transformation.”

“Your role is critical to the success in delivering transformation,” said VA Secretary Eric K. Shinseki in a pre-recorded video for the opening ceremony. “HR professionals are central to our veteran-cen-

tric mission.”

HR professionals from coast to coast participated in intense breakout sessions over a period of three days covering a wide range of training initiatives, from performance management to worker’s compensation and e-classification.

“Our being here today signifies something to ourselves, and to those veterans we serve, about how seriously we take our mission and our role in this agency,” said Acting Assistant Secretary for Human Resources and Administration Willie L. Hensley.

The conference, featuring hands-on workshops offering real world insights, techniques and methodologies pivotal to

the increasing demands on HR professionals, offered plenty of opportunities for networking and peer discussions.

“After being wounded in combat in Iraq, it was difficult to adjust to civilian life and I struggled to find stable employment,” said Army veteran Timothy A. Blacks, a Purple Heart recipient. Blacks spent a year and a half looking for a job; his luck finally changed after meeting Dr. Annette Taylor, an HR consultant and regional veterans employment coordinator. He began working at the VA medical center in Augusta, Ga., through the Seamless Transition Center.

Dennis May, director of the Veterans Employment Coordination Service, the office that helped Blacks land a job with VA, conducted one of the many plenary sessions held during the conference. During his session, each of the nine regional veterans employment coordinators had an opportunity to highlight a particularly memorable experience working to hire veterans.

“For many of these servicemembers, working for the VA gives them the sense that their missions continue, albeit in a different way,” said Region 7 coordinator Thomas Green, who explained he experienced similar feelings when he had to leave his comrades-in-arms behind after he was wounded in Iraq.

Other sessions held during the conference included: ■ “e-Everything,” presented by Bob Baratta, director of Human Resources Information Service, focused on several major e-Government initiatives that would automate and streamline transactional HR processes.

■ Georgia Coffey, deputy as-

sistant secretary for Diversity and Inclusion, highlighted EEO legal compliance, diversity recruitment/retention, and inclusion, emphasizing the necessity of optimum contribution throughout an organization to carry out the mission. “I can think of no audience where it’s more important to understand the business and performance advantages associated with workforce diversity and inclusion than our HR community,” said Coffey. “They are integral to the success of any high-performing organization in the 21st century.”

■ Mark Goldstein, health care provider and president of Impact Presentations Group LLC, presented “Managing a Multicultural/Multigenerational Workforce.”

■ The widely anticipated VA Virtual HR Academy, a competency-focused development initiative for the department’s HR professionals, was launched.

“I felt that the launch of the HR Academy was great,” said Al SeEVERS, HR Academy program director. “I believe everyone left the conference feeling very excited about this new training opportunity.”

As the keynote speakers navigated their way through the plenary sessions, in other parts of the conference hall, attendees had the chance to participate in comprehensive workshops such as USA Staffing, Talent Management and Labor Management Relations. These workshops offered attendees the opportunity to learn state-of-the-art technology and trends in HR management. For information on next year’s conference, visit vauwv.HRConference09.va.gov. **VA**

By Raquel Thomas

VA's Ethics Program Recognized as a Model in Federal Government

Citing implementation of model practices that advanced the government ethics program beyond mere compliance with ethics law, regulations and standards, the U.S. Office of Government Ethics (OGE) presented VA with its 2008 Ethics Program Award. VA's Office of General Counsel is responsible for the Ethics Program, which is overseen by Assistant General Counsel Walt Hall, VA's designated agency ethics official, and Associate General Counsel Renee Syzala.

VA was one of only five federal departments to receive the award at OGE's annual ethics conference in Orlando, Fla. Among the model practices VA included were exhibiting leadership involvement in the ethics program,

conducting self-assessments, and developing comprehensive written procedures to ensure consistent program administration and foster effective succession planning.

Acting General Counsel Jack Thompson noted that "receiving this award is particularly significant in light of President Obama's and Secretary Shinseki's stated commitment to the highest ethical standards as evidenced by President Obama's Executive Order entitled 'Ethics Commitments by Executive Branch Personnel' and Secretary Shinseki's February 20 letter to all VA employees on adherence to highest ethical standards of government ethics."

VA's Ethics Program consists of several key elements required by the Ethics

in Government Act and OGE regulations. These include ensuring that there is an effective system for collecting financial disclosure reports from those required to file them, reviewing the reports for conflicts of interest, and resolving any potential or apparent conflicts.

In 2008, the Ethics Program reviewed more than 6,000 financial disclosure reports to identify any potential conflicts of interests. A new Web-based electronic financial disclosure system, expected to be fully implemented in calendar year 2010, will help with filing, reviewing, and the security of future reports.

Another important component of the Ethics Program is training and outreach. Every new employee is required by statute to receive initial eth-

ics orientation within 90 days of starting their employment with VA. In 2008, more than 39,000 new employees received this training.

Beyond training required by law, VA's Ethics Program also reaches out to employees by circulating information on pertinent ethics issues, such as distributing gift guidelines around the holidays, warning employees of their political activity restrictions near election time, and providing specially tailored training to groups with special ethics concerns, such as contractors and researchers.

In addition, the Ethics Program is responsible for counseling departing and former VA officials on post-employment conflict-of-interest standards. **VA**

New Federal Benefits Booklet Now Available in Print and Online

The latest edition of the federal government's best-selling booklet "Federal Benefits for Veterans, Dependents and Survivors" is now available online and in print from the U.S. Government Printing Office.

The 164-page handbook offers the latest information on

important changes in eligibility for VA medical care and benefits. It describes other federal benefits, including education, disability compensation, pension, home loan guaranty, vocational rehabilitation, life insurance and burial assistance.

Returning readers will notice the new name includes "Survivors," reflecting the effort to reach out to surviving spouses.

Other highlights of the 2009 edition include the Post-9/11 GI Bill passed by Congress last year. The new GI Bill is the most extensive educational assistance program authorized since the original GI Bill was signed into law in 1944. It provides eligible applicants with up to 100 percent tuition for a college education. For many participants, it also offers a housing

allowance and a stipend for books and supplies.

"There is no better investment than education," said L. Tammy Duckworth, VA's assistant secretary for public and intergovernmental affairs. "The Post-9/11 GI Bill will provide new opportunities that are essential to our veterans, our workforce and our economy."

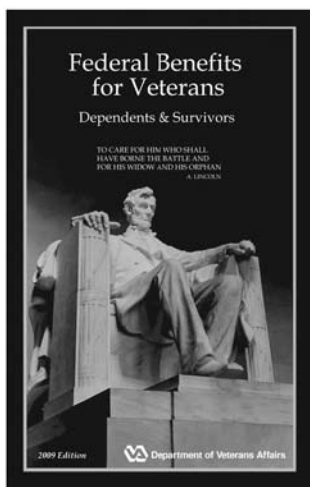
Veterans, service members, reservists and National Guard members with active duty after Sept. 10, 2001, may be eligible for this benefit. The 2009 edition of the benefits booklet has complete details on eligibility, additional information and resources for those looking to take advantage of the Post-9/11 GI Bill.

Readers will also find addresses and phone numbers for all VA medical centers,

national cemeteries, counseling centers and other facilities listed. The booklet also lists toll-free phone numbers and important Web addresses that provide information about veterans benefits and specific programs.

The 2009 edition is free for downloading online at www.va.gov/opa/feature/index.asp, or may be purchased for \$5 from GPO. To obtain copies, ask for GPO stock number 051-000-00236-9 from the Superintendent of Documents, P.O. Box 979050, St. Louis, Mo. 63197-9000. To order with Visa, Mastercard, Discover or American Express, call toll-free 866-512-1800.

"Federal Benefits for Veterans and Dependents" has ranked among the top five GPO publications in annual sales for the past decade. **VA**



VA Gaveliers: 'Celebrating 50 Years of Oratory Excellence'



Ed Marks, former member of the VA Gaveliers, explains the history of the club to the crowd gathered for the 50th anniversary celebration on April 9. Marks, who retired with 27 years of membership, ranks as one of the longest-serving members of the club.

Golden anniversaries are a milestone meant to be recognized, and on April 9, the VA Gaveliers Club 2920 held their 50th anniversary celebration at VA Central Office. Commemorating the numerous awards, banners, and recognition items the group, as well as individual members, have won over the years, the event was well-attended by past and present Gavelier members.

The VA Gaveliers was chartered as a VA Toastmasters International club at head-

quarters on April 1, 1959. The club, which at that time was men only, quickly grew in attendance and popularity, eventually allowing women to join in 1973. A separate speaking group, called the VA Topic Masters, was later merged into the club.

With enrollment currently peaking at 45 active members, the VA Gaveliers group meets twice a month, as they have for the last 50 years. During their meetings, group members volunteer to


give either a five-minute mock speech or participate in Table Topics. During Table Topics, members give one- to two-minute impromptu speeches, practicing their quick-thinking skills. The goal of these sessions is to become comfortable in front of a group, improve communication and leadership skills, and receive instant constructive evaluations from peers.

Members also participate in various speech contests during the year, earning the chance to bring home a trophy. Among the latest honors the club has won are the Fall 2007 District 36 Toastmasters Area Humorous Speech Contest, Spring 2008 First Place International Speech Division B Contest, and the Spring 2008 First Place International Speech Area Contest.

To celebrate the significance of the 50th anniversary, a theme contest was held to select the new motto for the year. New member Patricia Dumas, clinical program manager at VA Central Office,

was chosen from the employee submissions for her motto, "Celebrating 50 years of Oratory Excellence."

Kristen Nicholson, past District 36 Governor and current International President, who led VA's district to number 17 in the world, was one of the featured guest speakers at the celebration. According to Nicholson, most people ask themselves, "Why join?" And her answer is simple: "Toastmasters is the only club anywhere where every person in the club wants you to be a success. It is an opportunity to step into leadership roles. When you decide to be a mentor and develop others, this program is your door of opportunity. If you don't walk through it, you'll never find the better you."

Toastmasters International, celebrating its 85th anniversary this year, is a nonprofit organization with nearly 235,000 members from 11,700 clubs in 92 countries. To find a club in your area, visit www.toastmasters.org. 

'Increase Awareness, Increase Access' for Sexual Assault Survivors

For the second year, VA's military sexual trauma coordinators capitalized on April being Sexual Assault Awareness Month by hosting events designed to increase staff and veteran knowledge of MST.

"This year's national theme was 'Increase Awareness, Increase Access,'" said Susan McCutcheon, director of Family Services, Women's Mental Health and Military Sexual Trauma in the Office of Mental Health Services, a component of Patient Care Services.

"We felt that a wide range

of events fit under this umbrella and I am thrilled with the tremendous effort and creativity our MST coordinators expended in planning events related to this theme.

"Ultimately, increasing both veteran and staff awareness of MST and VA services is key in increasing veterans' ability to access care. I'm confident that these events will continue to have an important impact throughout the rest of the year as well."

Facilities approached the theme from a variety of different angles. Seeking to engage

staff and veterans visually, Erin Daly, of the VA Boston Healthcare System, Velma Jones, of the VA Hudson Valley (N.Y.) Health Care System, Angie Tremmel, of the VA medical center in Loma Linda, Calif., and Sonja Fry, of the community-based outpatient clinic in Eugene, Ore., hosted "Clothesline Projects," whereby veterans designed shirts that reflected their experience of sexual trauma and recovery. Shirts were then hung side-by-side to bear witness to how their lives have been affected by MST.

Focusing more organizationally, Mary Mitchell, the MST coordinator at the VA medical center in Iowa City, Iowa, helped coordinate a program of "MST Champions" from every clinic and support service in the hospital. Champions examined their area's sensitivity to the needs of MST survivors and addressed any potential obstacles survivors might encounter in seeking care at the facility.

At other facilities, MST coordinators planned educational lectures, set up informa-

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Dr. Linda Mona

She doesn't have a magic lasso or an invisible airplane, but to her family and many of her co-workers, she's a real-life Wonder Woman.

Dr. Linda Mona, a staff psychologist with the VA Long Beach Healthcare System in California, is in many ways similar to other married women raising a family and holding down a full-time job. But she's also disabled.

"Living with a disability has never stopped Linda from getting what she wants. In fact, it's only inspired her to chase a goal all the more," read a passage about Mona that appeared in *Working Mother* magazine's May issue.

The mother of two young sons, Kyle, 5, and Ryan, 3, was chosen along with 29 other women as a role model for working mothers out of more than 1,000 nominations nationwide for the award of Working Mother of the Year by the magazine. The award, along with the magazine article and an appearance on NBC's "Today" show, caught Mona a little off guard.

"I was thrilled and surprised to have been selected as one of the honorees," she said. "As a disabled woman, I have confronted various attitudinal obstacles from others about the choice to parent. To be awarded for my work and the most important part of my personal life is significantly meaningful to me as a mother and as a member of the dis-

abled community."

Mona has been with VA for seven years and also completed her pre-doctoral and post-doctoral training within the VA system. She decided to begin a career with VA for a variety of reasons, including a suggestion by her mentor, Dr. Antonette Zeiss, deputy chief of Mental Health Services, in VA Central Office.

"Toni asked me if I'd thought about a career in VA," recalled Mona. "I loved my internship at VA; that, and the scope of what I could do professionally, is really what made me decide to join VA."

Another aspect of her decision to begin a career with VA was her disability.

"It's pretty well known that VA is disabled- and family-friendly," she said. "Disabled people hired into full-time positions in VA are viewed in the sense of diversity, which is an asset to the organization, not a hindrance."

According to Mona, a lot of disabled people live in fear of losing their job, and more importantly their health benefits, which they desperately need. Working for VA has eliminated that fear for her.

"We have job security, benefits and a competitive salary in one package," she said. "And then for disabled people like me, there are wonderful programs like the Voluntary Leave Transfer Program, which has saved me financially more than once, thanks to



Dr. Linda Mona talks with Shirley Bowers, a VA Long Beach Healthcare System patient she has treated for more than five years.

RICH BEAM

the generosity of wonderful co-workers and caring VA employees across the country. From that perspective alone, VA is a number-one choice."

Most of her clinical work involves serving as a rehabilitation psychologist for veterans with disabilities. She also specializes in providing education and sexual health services to veterans with disabilities. The nature of her job requires her to be at the facility the majority of the time, so telecommuting and similar options are not feasible, but she still has flexibility that she wouldn't have in the corporate sector.

"My supervisor has been extremely flexible, whether it's a chronic health problem or for family matters," she said. "And above all, I am treated and respected as a professional. I still have to perform up to expectations as any other professional, but if I need to come in a half-hour late, I just work a half-hour later."

As a psychologist, wife and mother, Mona believes balancing work and personal

lives is important for everyone. She said the goal is finding what is meaningful to you as a person and in your profession and then allocating the correct amount of time for each, which is a lot harder than it sounds.

"We can't be everything to everyone all of the time," she explained. "My children know they are my number-one priority, but they also understand that my patients need me as well."

Mona travels to advocate for the disabled or to serve as a guest speaker and presenter at American Psychological Association conferences, taking her away from her children, but she has a way to compensate so that there is no "lost" time.

"Before I go on travel, my boys and I sit down together and pick out a couple of books," she said. "While I am away, I will drop whatever I am doing at 'reading time' and call them and read the book. That way, they know that they are special to me." **VA**

By Gary Hicks

Military Sexual Trauma (cont.)

tional tables, and distributed information about MST and their role as MST coordinator via facility e-mail lists, computer screensavers, and television monitors in facility waiting areas.

Summarizing the goal of these efforts, Amy Street, director for Education & Training with the Office of Mental Health Services' MST Support Team, said, "We view Sexual Assault Awareness Month as

a platform to raise awareness about the programs and services VA has available to both male and female survivors."

Notably, VA provides free care for all mental and physical health conditions related to

experiences of MST. Veterans do not need to be service-connected and may be able to receive this care even if they are not eligible for other VA care. To learn more, visit vaww.mst.va.gov. **VA**



COURTESY OF VA OFFICE OF RESEARCH AND DEVELOPMENT

Frederick Downs Jr., director of VA's Prosthetic and Sensory Aids Service, tries the prosthetic arm developed by DEKA at the company's headquarters in New Hampshire.

VA Conducting Three-Year 'Optimization' Study of Advanced Prosthetic Arm

VA has launched a three-year study of an advanced artificial arm that easily allows those with severe limb loss to pick up a key or hold a pencil.

"This arm is a high-tech example of how VA researchers are continually modernizing the materials, design, and

clinical use of artificial limbs to meet veterans' lifestyle and medical needs," said Dr. Joel Kupersmith, VA's chief research and development officer.

In collaboration with the Defense Advanced Research Projects Agency, or DARPA, the study marks the first large-scale testing of the arm, which allows those who have lost a limb up to their shoulder joint to perform movements while reaching over their head, a previously impossible maneuver for people with a prosthetic arm.

The study is under the direction of Dr. Linda Resnik at the VA medical center in Providence, R.I. Veterans fitted with the arm will provide feedback to guide engineers in refining the prototype before it is commercialized and also made available through the VA health care system.

A unique feature of the advanced arm is its control system, which works almost like a foot-operated joystick. An array of sensors embedded in a shoe allows users to maneuver the arm by putting pressure on different parts of the foot. The current version uses wires to relay the signals to the arm, but future versions will be wireless.

The arm can also be adapted to work with other control systems, including myoelectric switches, which are wired to residual nerves and muscles in the upper body and respond to movement impulses from the brain, shoulder joysticks or other conventional inputs.

Frederick Downs Jr., director of VA's Prosthetic and Sensory Aids Service, who lost his left arm during combat in Vietnam, said he was "brought to tears" recently when the prosthetic arm allowed him to smoothly bring a water bottle to his mouth and drink. "Learning to use the controls is not difficult," he said, due in part to a sensor in the artificial hand that sends a vibration signal that tells how strong the grip is. A stronger grip causes more vibration.

VA prosthetics research also includes vision and hearing aids, wheelchairs and propulsion aids, devices to help people with brain injuries to become mobile, and adaptive equipment for automobiles and homes—"everything that's necessary to help veterans regain their mobility and independence," said Downs.

VA, DoD Researchers Collaborate on Study of Long-Term Outcomes for Veterans With Burn Injuries

A new study by researchers with VA and the Department of Defense is looking at long-term outcomes for veterans of the wars in Iraq and Afghanistan who have suffered serious burn injuries. What are their health care and social service needs months and years after their injuries? How well can they

function? There has been little research to date on the topic.

"Until a decade or two ago, there was a much greater mortality rate for people with serious burns," says study co-leader Polly Hitchcock Noel, Ph.D., of the Veterans Evidence-Based Research Dissemination and Implementation Center (VERDICT), based at

the San Antonio VA Medical Center. "With improvements in acute care, people are now surviving more severe burns. Now there is more of a population in which to study longer-term outcomes."

Lead investigator Valerie Ann Lawrence, M.D., also of VERDICT, adds: "Along with rapid evacuation for military

wounded, we are much better at acute resuscitation and innovations such as topical antimicrobials to prevent infection, and artificial skin options. Surgeons are more aggressive about removing tissue they feel won't survive and moving on to grafts earlier." She also cites the development of comprehensive,

state-of-the-art burn centers such as that of the U.S. Army Institute of Surgical Research.

Lawrence emphasizes that while the odds of surviving burn injuries are better than in the past, managing the burns is complex and may entail “extensive surgical, medical and psychological rehabilitation for years.”

The location of combat-related burn injuries on the body is also likely to be different than in the past. Due to improved body armor, troops are more likely to suffer burns to their face, hands and feet, with fewer burns to the torso. “DoD and VA are particularly interested in learning more about the

outcomes of relatively isolated hand injuries,” notes Lawrence.

Another twist of modern warfare: Burn injuries are also often accompanied by blast effects such as traumatic brain injury, which further complicates recovery.

The researchers will assess patients at discharge from the hospital and then annually for four years. They’ll administer a wide array of questionnaires covering physical, psychological and social issues: How well are patients able to handle everyday activities ranging from bathing, eating and dressing to using the telephone, shopping for groceries and doing light housework? Are they struggling with depression or

post-traumatic stress disorder? What coping strategies do they use? Do they have adequate social support? How much pain do they have, and how well can they sleep? Do they use alcohol? Are they able to return to work? How satisfied are they with the quality of their life?

Lawrence cites another long-term issue for burn patients that may figure in the study: “One thing we’ve found they struggle a lot with is scar tissue formation, which may cause deformities and contractures that limit range of motion and make patients feel physically unattractive. Even when scars are on parts of the body that are masked by clothing in public, it can involve in-

timacy problems in private.”

The researchers say San Antonio is the ideal site for studying burn outcomes. The city is home to DoD’s primary burn center and will soon host a new DoD polytrauma facility.

Also, VA plans to build a fifth polytrauma regional center there. The agency currently has such centers in Tampa, Fla., Richmond, Va., Minneapolis and Palo Alto, Calif.

“We’ll be able to evaluate patients and their situations early on and then follow them as they transition to VA for longer-term care,” says Lawrence.

- VA *Research Currents*

New England Journal of Medicine Praises VA’s Electronic Health Record System

A recent study published in the *New England Journal of Medicine* singles out the Department of Veterans Affairs for its successful implementation of a comprehensive system of electronic health records.

The study’s authors, led by Dr. Ashish K. Jha of Harvard University, noted that VA’s use of electronic health records has significantly enhanced the quality of patient care. They also found that only 1.5 percent of U.S. hospitals have comprehensive electronic health records—adding VA hospitals to the analyses doubled that number.

“VA hospitals have used electronic health records for more than a decade with dramatic associated improvements in clinical quality,” the study’s

authors wrote.

VA clinicians began using computerized patient records in the mid-1990s for everything from recording examinations by doctors to displaying results of lab tests and X-rays. Patient records are available 100 percent of the time to VA health care workers, compared to 60 percent when VA relied on paper records.

Former VA Under Secretary for Health Dr. Michael J. Kussman said the department has “one of the most comprehensive and sophisticated electronic systems” for patient records in the nation.

“VA’s electronic health record system has largely eliminated errors stemming from lost or incomplete medical records, making us one of the safest systems in



With VA’s comprehensive system of electronic health records, patient records are available 100 percent of the time to VA health care workers like Dr. Divya Shroff, associate chief of staff, informatics, at the Washington, D.C., VA Medical Center.

the health care industry,” said Kussman.

The authors of the *New England Journal of Medicine* article are the latest to praise VA for its technology and commitment to patient safety. In 2006, VA received

the prestigious Innovations in American Government Award from Harvard’s Kennedy School of Government for its advanced electronic health records and performance measurement system. **VA**



President Obama, Secretary Shinseki and Assistant Secretary Duckworth cheer the riders as they start off from the White House grounds.

VA Officials Help President Kick Off Wounded Warrior Project's Annual Soldier Ride

VA Secretary Eric K. Shinseki and Assistant Secretary for Public and Intergovernmental Affairs L. Tammy Duckworth joined President Obama April 30 at the White House to start the third annual Wounded

Warrior Soldier Bike Ride from Washington to Annapolis, Md. The Wounded Warrior Project's Soldier Ride is a rehabilitative cycling program for wounded warriors as well as an advocacy program to

raise money and awareness for the returning wounded men and women from the wars in Iraq and Afghanistan.

For many of these combat-wounded veterans, the Soldier Ride provides a first and important step in their return to an active lifestyle.

The Veterans Benefits Administration is an official sponsor of the three-day race that started back in 2004 when Chris Carney, of Long Island, N.Y., completed a coast-to-coast bicycle ride in support of the Wounded Warrior Project. In 2007, the Soldier Ride switched to a regional ride format, with seven regional rides across the country.

The next ride was scheduled for May 23 in Denver. For more information, visit the Wounded Warrior Project's Web site at sr.woundedwarriorproject.org.

Longtime Volunteer Robley Rex Dies at 107

Just four days before what would have been his 108th birthday, longtime veterans advocate and VA volunteer Robley H. Rex died peacefully at the VA medical center in Louisville, Ky., on April 28.

Rex enlisted in the Army in 1919 and served for three years. After his military service, Rex dedicated himself to helping fellow veterans, both through his work with veterans service organizations and through his activities as a volunteer at the Louisville VA Medical Center.

"Mr. Rex's capacity for serving his fellow citizens was truly an inspiration to all who knew him," said Wayne Pfeffer, director of the Louisville VAMC. "He was a caring individual who consistently went out of his way to help others. His thoughtfulness, cheerfulness and sense of humor were treasures to those of us who had the privilege of knowing and working with him."

Rex was still volunteering three days a week at the medical center when he was 105. He was profiled in the September/October 2006 issue of *VAnguard*. Rex was interred at Zachary Taylor National Cemetery in Louisville.



Secretary Shinseki met Robley Rex during a recent visit to the Louisville VAMC. With them are Director Wayne Pfeffer, center, and VA Mid South Healthcare Network Director John Dandridge Jr.

Omaha VA Medical Center First in VA to Offer MRI With 'Ambient Experience'

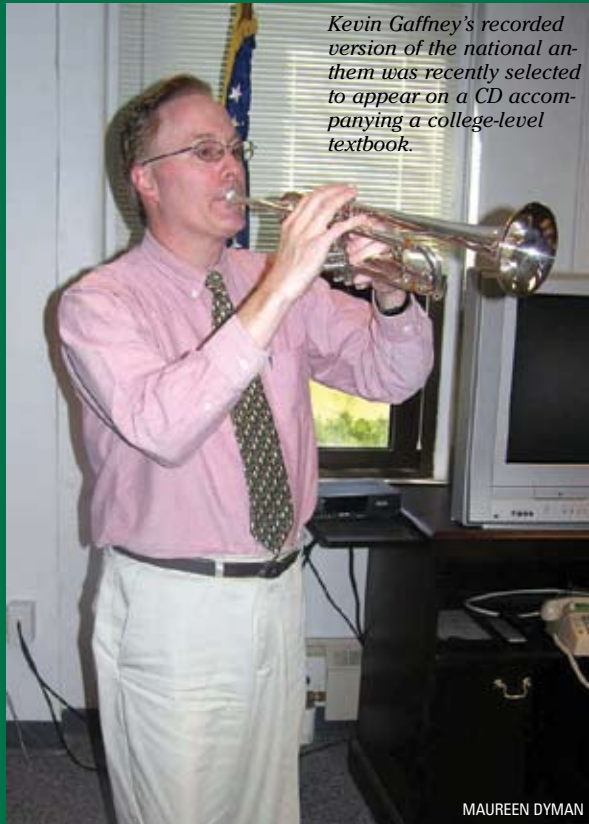
The VA medical center in Omaha, Neb., is the first VA facility, and one of the only health care facilities in the region, to offer the "Ambient Experience," an innovative, stress-relieving approach to diagnostic imaging.

The Experience relaxes patients undergoing a medical scan, like an MRI, by allowing them to choose soothing lighting, visuals and sounds while being imaged.

Patients are able to select from various landscapes, including mountains, beaches and deserts, which are then projected onto the room's walls and ceiling. Early evidence supports the system's calming claims—children require less sedation; adults find the distraction helps them worry less.

"The new Ambient Experience, combined with the medical center's own MRI suite, will provide our veterans a less stressful and convenient experience to meet their health care needs," said Al Washko, director of the VA Nebraska-Western Iowa Health Care System.

The Ambient Experience is part of the Omaha medical center's first-ever in-house MRI. Patient appointments began in February.



Kevin Gaffney's recorded version of the national anthem was recently selected to appear on a CD accompanying a college-level textbook.

MAUREEN DYMAN

For This Bugler, Community Service is a Way of Life

Kevin Gaffney played taps for the first time at his father's funeral in 1999. Today, Gaffney's talents as a bugler, father, teacher and writer serve his community of St. Charles, Ill., bringing past and present together to honor fallen heroes.

Gaffney bugles for Bugles Across America, playing patriotic tunes for veterans service organizations as well as taps whenever called upon. A representative paralegal specialist in the Office of Regional Counsel at the Edward Hines Jr. VA Hospital, he also teaches criminology at Judson University in Elgin, Ill.

At last year's Veterans Day celebrations, Kevin Gaffney's Family Brass Band, consisting of Gaffney, four of his children on a hodgepodge of brass instruments, and a fifth child as a vocalist, played patriotic tunes honoring those who have served.

Gaffney's recorded version of the national anthem was recently selected to appear on a CD accompanying the college-level textbook *Bonds: Listen to This*, published by Prentice Hall. Gaffney produced two CDs with a third planned. The first is a recording of Christian hymns and the second is patriotic tunes. A third will consist of film and Broadway tunes.

When Gaffney is not working or blowing the horn, he is writing a book entitled *While They Were Young: The Citizens and Soldiers of St. Charles from 1940-1945*. The book chronicles the town of St. Charles through letters, oral interviews and newspaper clippings of veterans and the contributions made by the community. To hear Gaffney's recordings, visit www.cdbaby.com/cd/kgaffney2.

Weigh to Go: Winning the Battle of the Bulge

Six years ago, Stanley Miller weighed almost 300 pounds. "I was a mess," said the Navy veteran, who is 5 feet 4 inches tall. During his consult at the VA medical center in Tomah, Wis., clinical dietician Kelly Christen gave it to him straight—his health was in danger. He had high blood pressure, elevated blood cholesterol and was pre-diabetic. With a 50-inch waist and wearing a size 5X shirt, Miller was considered morbidly obese.

"That afternoon, I decided to wage my war on weight," he said. "I committed to eating better and exercising regularly." In the first year, Miller lost a whopping 126 pounds and has kept it off, using a picture of himself at his heaviest as inspiration. Miller, 64, was recently selected as honorary chair of the 2009 Champions' Challenge kick-off, a nationwide wellness initiative sponsored by the Veterans Canteen Service and the HealthierUS Veterans Committee.



Left to right: Marta Ziems, a licensed practical nurse, Stanley Miller, Kelly Christen, dietician, and Deb Thiel, dietician, pose with a pair of Miller's old work pants.

JIM THERES

Student Donates Handmade Bench

Shawn Sheppard, a senior at Clackamas High School in Oregon, wanted to find a way to honor his uncle's memory. Terry Baldrige was killed in Iraq back in 2003. As part of his senior year project, Sheppard built a wooden bench, and on March 20, he and his family were on hand to donate it to the Portland, Ore., VA Medical Center's garden.

On the back of the bench is a plaque that reads: "This bench represents the lost souls of soldiers that fought in Iraq and put their lives on the line for our freedom because 'freedom isn't free.'" In appreciation, Dr. James Tuschmidt, Portland VAMC director, presented Sheppard with a Welcome Home Program coin and certificate.

Virginia Credit Union Employees Support McGuire VA Medical Center Community Living Center Residents

A community outreach committee of employees from the Virginia Credit Union contributed funds, energy and time to help out the Community Living Center residents of the Hunter Holmes McGuire VA Medical Center in Richmond, Va. The credit union's employees visited residents, purchased holiday gifts, and contributed furniture to renovate two recreational rooms for residents of the hospital's Community Living Center.

The credit union arranged for a local artist, Alex Glanville, to paint floor-to-ceiling murals in the rooms that brought scenes of nature indoors. The rooms, referred to as "dens," also include visual elements that provide stimuli for veterans with dementia. The changes are all part of a VA geriatrics initiative to make community living centers more "home-like," and couldn't have been done without the generous contributions of the Virginia Credit Union and its staff. The rooms were officially dedicated with a reception for residents and staff on March 11.



Credit union employees Dee Ingram, far left, and Nancy Fannon, far right, celebrate the completion of the Community Living Center renovation project with VA nurse Violet Oliver and artist Alex Glanville.

Indiana Physician Cycles Across America to Raise Money for Veterans

Dr. Lois Buschbacher, a spinal cord injury specialist at the Richard L. Roudebush VA Medical Center in Indianapolis, temporarily set aside her stethoscope for a fundraising 13-leg bicycle ride from sea to shining sea. Starting out in San Diego on March 6 and ending in St. Augustine, Fla., on May 1, Buschbacher participated to raise money to send newly paralyzed veterans to the upcoming National Veterans Wheelchair Games, the world's largest annual wheelchair sporting event, in Spokane, Wash., in July.

"Veterans' medicine is very important to me," said Buschbacher. "These men and women have served me, my family and our country. This ride is a way I can give back to them."

A graduate of the University of Virginia Medical School, Buschbacher is board-certified in physical medicine and rehabilitation as well as spinal cord injury treatment.



Dr. Lois Buschbacher recently finished a bike ride to raise money to send newly injured veterans to the Wheelchair Games.

San Diego VA Regional Office Team Participates in Demobilization of Marines and Reservists

Twenty-six employees from the San Diego VA Regional Office participated in the demobilization of approximately 1,100 active-duty service members and reservists from Camp Pendleton April 4-8. The service members, returning from a theater of opera-

tions, were from five companies within the 1st Battalion 4th Marines.

Comprised of military outreach specialists, veterans service representatives and vocational rehabilitation counselors, the VA team provided benefit briefings, answered

questions, and assisted service members and reservists with filing claims for compensation benefits. Given only a week's notice of the troops' pending arrival, the team stationed tables outside the facility in a dirt parking lot.

Despite the wind and

Cleveland VA Regional Office Helps 'Can' Hunger

How creative "can" you get? That was the question asked of Cleveland VA Regional Office employees during a local Harvest for Hunger food drive. Teams comprised of regional office employees were challenged to create sculptures made of donated canned goods and compete against each other in a "can-struction" building event.

"We tried to increase donations through some non-traditional methods," said Monica Greiner, assistant loan guaranty officer with the Cleveland Regional Loan Center and Harvest for Hunger committee member.

The regional office also hosted a chili cook-off, with donated chili judged by supervisors and fellow employees. To increase donations, employees were then able to taste the winning chili dishes by purchasing samples with canned goods in lieu of cash.

Thanks to their efforts, more than 2,400 non-perishable food items were collected during the campaign. In addition, the office raised more than \$200 through the local Harvest for Hunger Web site.

Puget Sound CFO Selected Veterans Health Administration Financial Employee of the Year

Ken Hudson, VA Puget Sound Health Care System chief financial officer, has been selected as the VHA Financial Employee of the Year. The award recognizes the outstanding career of an employee in the Veterans Health Administration financial arena whose innovation, leadership and personal commitment to VHA's mission had a national impact on financial operations.



Hudson

Hudson's innovations have been in the area of software development—saving thousands of hours of staff work each year. He has also developed several databases used by accounting and budget staff throughout VHA. The implementation of these processes has reduced the number of staff hours for certain

tasks from thousands of hours to scores of hours. Moreover, these processes have established standards of practice across the country that significantly improve VHA's financial performance. Financial staff have been able to devote more time to improving other financial processes, accomplishing more work and meeting the increasing financial demands with the same or lower staffing levels.

VA Physical Therapist Earns National Recognition for Public Service

Randi Woodrow, chief of physical therapy at the VA Greater Los Angeles Healthcare System, is the 2008 recipient of the GEICO Public Service Award for her work in the field of physical rehabilitation. The award honors her physical therapy work as well as the many hours she devotes to educating the public about physical therapy.



Woodrow

Woodrow has worked throughout her career to promote the benefits of adaptive sports, serving as a national official for the National Veterans Golden Age Games from 2002-2007, and founding the VA Greater Los Angeles Annual Adaptive Surf Camp for Disabled Veterans. She also spearheaded the first VA-sponsored Summer Sports Clinic. The GEICO Public Service Awards honor five career federal employees and retirees for their outstanding achievements in the fields of substance abuse prevention, fire prevention and safety, physical rehabilitation and traffic safety/accident prevention. Woodrow will receive a \$2,500 cash award, a commemorative plaque, and an all-expense paid trip to Washington, D.C., for the ceremony.

Two VA Employees Selected as Finalists for Service to America Medals

Two VA employees are among 30 finalists selected for this year's Service to America Medals (Sammies). Dr. Janet Kemp, national director of the VA Suicide Prevention Program at Canandaigua, N.Y., is a finalist for the Citizen Services Medal, and Dr. Audrey Nelson, director of the VA Patient Safety Center in Tampa, Fla., is a finalist for the Career Achievement Medal.



Kemp



Nelson

Kemp earned a Ph.D. while working as a nurse and became an expert on suicide prevention. She was recruited by VA to establish a national veterans' suicide prevention hotline and moved from her Denver home to Canandaigua to develop a program that has rescued more than 3,000 veterans. Nurse scientist Nelson is cited for "relentless pursuit of a solution to the high rate of nursing injuries that led to a \$200 million nationwide three-year program funded by the Department of Veterans Affairs that is designed to radically change the way nurses handle patients."

The Service to America Medals are presented annually by the nonprofit, nonpartisan Partnership for Public Service to celebrate excellence in our federal civil service.

Honorees are chosen based on their commitment and innovation, as well as the impact of their work on addressing the needs of the nation. For more about VA's Sammie finalists, go to servicetoamericamedals.org/SAMI/finalists09.

VA Central California Healthcare System Named a 'Best Company to Work for'

The VA Central California Healthcare System was recognized as one of Central California's best companies to work for during a ceremony held in downtown Fresno late last year. VA Central California received the award in the Large-Sized Company category and was named one of the top five finalists in the competition, sponsored by the *Fresno Business Journal*.

The selection process for large and small companies was done in two phases involving both employer and employee surveys. The final 15 best companies were evaluated for effective communication, recognition of employees, community involvement, effective teamwork and strong core values. The award was presented by *Journal* owner/publisher Gordon Webster Jr.

VA Research Pioneers Receive Prestigious Awards

Two of VA's most outstanding research pioneers, Thomas Starzl, M.D., Ph.D., of Pittsburgh, and Stephen G. Waxman, M.D., Ph.D., of the VA medical center in West Haven, Conn., were presented the prestigious Secretary's Diamond Award and William S. Middleton Award on April 30 by VA Secretary Eric K. Shinseki.

The 2008 Diamond Award was presented to Starzl for his remarkable accomplishments in the field of organ transplantation. The 2008 Middleton Award was presented

to Waxman in recognition of his extraordinary contributions to the understanding of the causes and treatment of spinal cord injury, multiple sclerosis, and chronic neuropathic pain.

Starzl has devoted nearly 50 years of his career to VA and is often called the "Father of Transplantation" for revolutionizing the field of organ transplantation by discovering methods to prevent rejection of transplanted organs. Waxman has worked as a VA clinician-scientist for more than 30 years, bridging science and medicine to develop new strategies for restoring function after spinal cord, nerve and brain injury.



Dr. Thomas Starzl, left, with former transplant patient Bob Phillips.

PRISCILLA KATES



Waxman

BILL FITZPATRICK

Houston VA Doctors Recognized for Excellence in Education

In April, Baylor College of Medicine selected its outstanding educators for 2008. These faculty members included five physicians from the Michael E. DeBakey VA Medical Center in Houston.

Neena Abraham, M.D., Research Care Line gastroenterologist staff physician, Kimberly Arlinghaus, M.D., Mental Health deputy executive, Joseph Huh, M.D., Cardiothoracic Surgery chief, and Barbara Trautner, M.D., Medical Care Line staff physician, were honored with the Fulbright & Jaworski LLP Faculty Excellence Award for outstanding work in teaching and evaluation. Prasad Atluri, M.D., staff anesthesiologist, received the Fulbright & Jaworski LLP Faculty Excellence Award in the educational leadership category.

For more than 50 years, the DeBakey medical center has provided clinical training for health care professionals through its major affiliate, Baylor College of Medicine. Each academic year, more than 1,972 students are trained through 144 affiliation agreements with institutions of higher learning in 19 states.



Karin McGraw, director of the Beckley VA Medical Center, receives a plaque from Bob Lutjen, marketing and communications manager for the Red Cross, commemorating the 3,500th pint of blood donated.

RICK BARBERO/THE REGISTER-HERALD

Beckley VA Medical Center Earns Awards for Blood Collections

On April 21, the Appalachian Blood Services Region for the American Red Cross presented two awards, Hometown Hero and Partners for Life, to the VA medical center in Beckley, W.Va., for its outstanding contributions to the community and ongoing coordination of blood drives held throughout the year at the facility.

The medical center has collected blood donations of 3,500 pints for the last 15 years. Additionally, the Beckley VAMC set a record in April for the largest single blood drive within the 11 West Virginia counties covered by the Appalachian Blood Services Region, with donations of 138 pints. The Beckley VAMC has sponsored blood drives since the 1980s and began sponsoring blood drives every four months in 1994. On average, 90 to 120 employees donate blood during each drive, which is also open to veterans, volunteers, and family members of employees.

Bronx VA Medical Center Employees Sweep New York Federal Executive Board Awards

The New York Federal Executive Board announced its annual Employee of the Year Award winners, with the Bronx VA Medical Center sweeping every category in which it fielded nominees. Dr. John Eng won Distinguished Scientist of the Year for discovering the revolutionary diabetes drug Byetta; Dr. Dan E. MacDonald for Distinguished Government Service, establishing unique spinal cord injury dental clinical services; and Dr. Marianne Goodman for Special Individual Achievement in the development of a dialectical behavior therapy program for individuals with more chronic presentations of suicide.

The New York FEB recognizes outstanding federal government employees each year in May and bestows its prestigious Employee of the Year trophies during Public Service Recognition Week. The annual FEB Awards Program is the only regional all federal agency (150 federal agencies) competitive employee recognition awards program. This is the fifth time in the last six years the Bronx VA Medical Center has garnered the Distinguished Government Service Award, its second consecutive Distinguished Scientist Award, and the second consecutive Special Individual Achievement Award.

VA Capitol Health Care Network Wins Gold for Quality

The VA Capitol Health Care Network has been awarded the prestigious Maryland Quality Gold Award for 2008 as part of the Maryland Performance Excellence Awards Program. Since 1983, Maryland's U.S. senators and the University of Maryland have joined together to honor organizations that successfully implement performance improvement strategies and achieve excellent results. Award recipients are evaluated rigorously by an independent board of examiners using the Baldrige Criteria for performance excellence, which measures an organization in seven areas: leadership; strategic planning; customer and market focus; measurement, analysis and knowledge management; workforce focus; process management; and results.

"This award reflects the superb performance and contributions of the more than 7,000 employees throughout the VA Capitol Health Care Network," said Network Director Sanford M. Garfunkel. The VA Capitol Health Care Network serves more than 200,000 veterans in Maryland, the District of Columbia, and portions of Virginia, West Virginia and Pennsylvania.



Shown during the presentation of the Maryland Quality Gold Award for 2008 are (left to right): Dr. Herbert Rabin, director, Maryland Technology Enterprise Institute, University of Maryland; Dr. Archana Sharma, chief medical officer, VA Capitol Health Care Network; Dennis Smith, director, VA Maryland Health Care System; Dr. Allen Berkowitz, strategic planning officer, VA Capitol Health Care Network; and Nellie Freeman, staff member, Sen. Benjamin Cardin (D-Md.).

Garfunkel Elected to ACHE Board of Governors

VA Capitol Health Care Network Director Sanford M. Garfunkel has been elected to serve on the Board of Governors of the American College of Healthcare Executives, an international professional society of more than 30,000 health care executives. Garfunkel, a longtime ACHE fellow, assumed the office during the organization's 52nd Congress on Healthcare Leadership in Chicago.

He will serve a three-year term representing ACHE affiliates on its Board of Governors, the authority that oversees operations and member services. Garfunkel was appointed to the Board of Governors as an interim governor in 2008. Before being elected an ACHE governor, Garfunkel was the VA liaison to the organization from 1993 to 2003.

VA Psychiatrist Receives NAMI Award

VISN 1 (Boston) Mental Health Care Line Manager Dr. Ethan "Sam" Rofman recently won the 2009 National Alliance on Mental Illness Exemplary Psychiatrist Award. The awards are presented to psychiatrists who are noteworthy for going the extra mile and who have made substantial contributions to local or state NAMI activities.

Rofman, a former Air Force officer, was nominated by the NAMI Veterans Council. Rofman is a fellow of the American Psychiatric As-

sociation and is board-certified in general and geriatric psychiatry. He has written about separation reactions in Air Force personnel, psychiatric emergencies, the prediction of dangerousness, and programs for the chronic patient.

Most recently, he was an author with others of the Massachusetts Guidelines for the Treatment of Schizophrenia. In 1989, Rofman received the Pride in Medicine Award, sponsored jointly by the Massachu-



Rofman

setts Medical Society, the Massachusetts Hospital Association and the Massachusetts Organization of Nurse Executives.

Jackson VA Staffer Promoted to Brigadier General

Catherine Lutz, Ph.D., program analyst in the office of the director at the G.V. (Sonny) Montgomery VA Medical Center in Jackson, Miss., was recently promoted to the rank of brigadier general in the Mississippi Air National Guard.

Lutz, the first female general in the Mississippi Air National Guard, serves as assistant to the chief nurse of the Air Force. Lutz is also dual-qualified as a senior flight nurse and senior Medical Service Corps officer. **VA**

Murfreesboro Employee Lands Himself in Tornado Recovery Efforts

While driving to work at the VA medical center in Murfreesboro, Tenn., on April 10, student clerk Paul A. Piro spotted a large funnel cloud. A tornado formed 150 yards in front of him, crossing the road from left to right. He followed at some distance as the tornado took him right to a house just as the twister devastated it. Piro watched helplessly as every structure around him was



Paul A. Piro in the devastated neighborhood in Murfreesboro, Tenn., where he witnessed the "Good Friday Tornado" and searched destroyed homes for survivors.

razed. He called the police, gave his location, and described the storm and devastation.

Avoiding live, downed power lines, Piro and another man scoured the neighborhood, searching destroyed houses for anyone they could help. After inspecting some structures with shocked, though unhurt, survivors, they approached what was left of a house and encountered a distraught man who said he could not find his brother's wife and infant daughter. The trio continued searching the house.

Fearing what he might find, Piro braced himself every time he turned over a large piece of rubble. Sadly, he found the missing woman lying beneath some rubble. The men yelled for the paramedics, who ultimately were unable to resuscitate the woman. Continuing the search, Piro's hopes were dashed when he found the woman's 9-week-old baby just feet away, still strapped in her car seat beneath a tree. The baby, too, was dead. These were the only deaths reported in this EF-4 tornado that ripped through parts of the state. Though his efforts proved fruitless, Piro's courage and desire to help were saluted.

Phoenix Employees Rescue a Baby in Distress

On Feb. 13, Terry Heater, peer support technician with the Substance Abuse Residential Rehabilitation Program at the Phoenix VA Health Care System, was alerted that a client's baby wasn't breathing. The baby was losing color and her eyes were rolled back.

With assistance from Penny Miller, a social worker, Heater removed the baby from the stroller, rolled her over into the palm of his hand and performed an infantile Heimlich maneuver. The two VA employees cleared material blocking the baby's airway and the child began to breathe on her own. VA medical personnel soon arrived to evaluate the situation, closely followed by paramedics and firefighters. The baby was later released to her mother's care.



Terry Heater and Penny Miller came to the aid of a baby who wasn't breathing.

From Financial Tech to Ambassador: Going the Extra Mile

Marsha BeDen, a financial account technician at the VA regional office in Togus, Maine, championed the rights of a local veteran, stopping the eviction process that would have left him homeless and hungry. BeDen averted the crisis after receiving a request for a check tracer from the National VBA Call Center. The tracer referenced VA payment to a disabled, formerly homeless veteran who had not received a VA check in two months and, as a result, would be evicted from his apartment due to the undelivered funds.

BeDen could have simply processed the tracers and gone on to the next finance case. Instead, she seized the opportunity to change this situation. She contacted the veteran personally and told him he did not have to wait until the situation was that dire to contact VBA. She then identified the need for a closer partnership between the veteran and his social worker. She contacted the social worker and offered to be the point of contact for such issues in the future. BeDen went on to convince the social worker to contact the veteran's landlord and request an extension on the eviction so the veteran would not return to the streets.

When she contacted the veteran with this news, he asked about an income letter that was needed to receive food stamps. BeDen coordinated with the VBA Public Contact team, and the income letter was immediately issued. **VA**



Demobilization Initiative



Facilitate VA Healthcare enrollment and educate combat veterans on new extended Health and Dental Benefits.

Post-Deployment Health Reassessment



Screening for PTSD, Women's Health, Readjustment, Traumatic Brain Injury, Alcohol, Military Sexual Trauma, Depression

Yellow Ribbon Reintegration/Welcome Home Events



30-60-90 day programs for returning National Guard/ Reserve members to learn about VA services/benefits

Military Liaisons at VA



Coordinate care for severely injured warriors at VA sites

Disability Evaluation System



Reaching out to provide a full range of VA services to medically separated veterans

Wounded Warrior Resource Center



Resource call center to resolve immediate need for VA services/benefits

Transition Assistance Advisors (VA/NG Partnership)



Coordinate access to care for returning National Guard/Reserve veterans

Warriors in Transition Collaboration



Linkages between military leadership in Warrior Transition Units and VA Health Care Leadership

Combat Veteran Call Center



Contacting all returning combat veterans to introduce them to or assist with VA Health Care and other services.

DEF/OIF Internet



A modern day information portal for our newest generation of veterans

Reaching Out to

COMBAT VETERANS

