



U.S. DEPARTMENT OF VETERANS AFFAIRS
Vanguard

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An aerial photograph of the White House and surrounding area in Washington, D.C. The White House is visible in the lower-left foreground. The rest of the image is dominated by a thick, dark plume of smoke or steam rising from the background, partially obscuring the sky and other buildings in the distance.

**New 'Day of Infamy'
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On the cover:

The scene from the windows of VA Central Office after hijacked American Airlines flight 77, originally bound for Los Angeles from Dulles International Airport, crashed into the Pentagon shortly before 10:00 a.m. on Sept. 11. The jetliner was the third of four hijacked planes to crash that morning.

VA Central Office was ordered evacuated a short time later, sending headquarters workers into the streets, where they joined the mass exodus out of downtown D.C. on clogged roads and packed subway cars. The death toll from the crash stands at 189, including passengers, crew and Pentagon workers.

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INTRODUCING

Tim Trittschuh

The Michigan Department of Disabled American Veterans named Tim Trittschuh Outstanding Disabled Veteran of the Year for 2001, and for good reason. Aside from his contributions at the Fort Custer National Cemetery, the former 82nd Airborne Division paratrooper has spent more than a decade helping children overcome some of life's toughest obstacles.

An above-the-knee amputee, Trittschuh knows just how difficult it can be to overcome life's setbacks. His military career was cut short when doctors at Walter Reed Army Medical Center amputated his left leg. What began as a mysterious pain in his knee evolved into a debilitating condition that perplexed Army doctors. "They said they didn't know what was happening with my leg," he said, describing how doctors were unable to pinpoint the cause of his pain. He was eventually diagnosed with cancer and doctors amputated his leg to prevent the cancer from spreading.

In early 1990, Trittschuh began volunteering to help children at Camp Catch a Rainbow, a summer camp for kids with cancer sponsored by the American Cancer Society. One of his most memorable experiences occurred during a group meeting in which the kids had a chance to talk about their fears. "One kid had been diagnosed with non-Hodgkin's lymphoma and had lost all his hair through chemotherapy," he said. "He was so scared that all the other kids were going to make fun of him ... it just brought us all to tears."

After six years of volunteering at the summer camp, he decided to turn

his love for skiing into a volunteer opportunity with Community Integration Recreation, a non-profit group that teaches kids with disabilities, learning disorders or behavioral problems how to ski. "Many of the kids come from low-income families and otherwise would never get a chance to go skiing," Trittschuh said. "I try to be a role model for them and show them that if I can do it, then so can they." He's returned every year since 1995 to spend time with the kids and introduce them to the thrill of downhill skiing.



He was chosen to join the team at the Fort Custer National Cemetery in 1984, a few months before the cemetery's official dedication. Over the years, he's come up with a number of ideas to improve efficiency and

save money. "We used to pay to have our waste oil removed, but I thought, why not buy an oil-burning heater and use the oil to heat our shop in the winter?" Management agreed, and the oil-burning heater has saved the cemetery thousands of dollars. He also developed a timing system for the diesel block heaters that reduces electricity usage.

"Tim has had an influence on all aspects of our operation," noted Foreman Kenneth Haines, who has worked with Trittschuh for the past 14 years. "Everyone respects him for his innovative ideas." He explained that some of those ideas helped the cemetery earn an Achievement Award in the 2001 Carey Awards program. The 770-acre site is Michigan's only VA national cemetery. ❑

By Matt Bristol

Anthony J. Principi,
Secretary of
Veterans Affairs

Make This Veterans Day 'Veterans History Day'



Some call them "war stories," but to the Library of Congress the firsthand accounts of veterans who served during times of war are

the stuff of history. That is why I was pleased to accept the invitation of Librarian of Congress James H. Billington to serve on the Veterans History Project Five Star Council of Advisors.

The Veterans History Project, authorized by Congress last year, calls upon the Library of Congress American Folklife Center to develop a program to collect and preserve audio- and videotaped oral histories of America's war veterans.

The Library of Congress will publicly launch the project November 7, just before Veterans Day. VA is a natural partner for this project. Our ability to reach the nation's veterans is essential to its success.

Of our 25 million living veterans, nearly 19 million have served during times of war. There are 19 million stories to tell, 19 million histories to preserve. VA's national force of more than 90,000 volunteers will assist VA staff in veterans hospitals and benefits offices across the country in recording veterans' histories and bringing local groups and organizations into the project.

More information on the Veterans Oral History Project, including a "how to" guide to taping histories, is available on the Library of Congress Web site at www.loc.gov/folklife/vets.

Time is of the essence. There are only a few thousand World War I veterans left and they are all more than 100 years old. The average age of our World War II veterans is more than 77 and we are losing 1,500 of them a day. We have to reach them and preserve their great legacy right now, and this project is the way to do it.

The project encompasses veterans of World Wars I and II, and the Korean, Vietnam and Persian Gulf wars; men and women of all ranks in all branches of military service. The Veterans History Project offers "how to" guidelines for taping oral histories on its Web site at www.loc.gov/folklife/vets. Start-up information is also available by writing: Veterans History Project, American Folklife Center, Library of Congress, 101 Independence Ave., S.E., Washington, D.C. 20540-4615.

All recordings, personal histories and documents submitted to the Veterans History Project will be part of the Library of Congress/American Folklife Center National Veterans History Collection. They will be housed at the Library and partner institutions such as military museums, history centers or local libraries and archives. The Library of Congress will create a comprehensive, searchable catalog of all materials so that researchers and the public will have access to them.

There is a role for all of us to play. We can contact the veterans we serve to let them know about the project. We can encourage veterans organizations and other groups in our communities to join the project and collect veterans' histories. We can identify World War I veterans served by VA and assess their interest and ability to participate. We can encourage schools to interest students in the program and help them contact veterans.

I'm particularly interested in involving students and youth groups in this project. I can't think of a better

way for a school class to observe Veterans Day and to learn American history than by recording veterans' histories.

I encourage you to learn more about the Veterans Oral History Project by checking the Library of Congress Web site. Project pamphlets are being sent to all VA facilities and VA Voluntary Service is incorporating it into the volunteer program. For more information, check with your facility public affairs officer or voluntary service chief. □

Veterans Day 2001



This year's Veterans Day poster was designed by Andrew E. Scheller, Jr., visual information specialist at the Philadelphia VA Medical Center. As models, Scheller used employees of the medical center who are veterans of the services depicted. He traveled as far away as the U.S. Coast Guard station in Cape May, N.J., to obtain authentic active duty uniforms.

A limited number of posters are available on a first come, first serve basis from the Office of Public Affairs (80D). Posters may also be downloaded from VA's Veterans Day Web page, www.va.gov/pubaff/vetsday.

Terrorist Attacks on Ame



Plumes of thick, black smoke rise from the Pentagon after a hijacked airliner crashed into the building on the fateful morning of Sept. 11.

As the whole world now knows, just before 9:00 a.m. on Sept. 11, terrorists hijacked four commercial airliners, crashing two into the twin towers of New York City's World Trade Center (WTC) and another into the Pentagon. The fourth crashed near Pittsburgh, missing its intended target thanks to an apparent heroic attempt by passengers to stop the hijackers from carrying out their deadly mission. It's been called another Pearl Harbor, but the casualties from this new "Day of Infamy" far exceed that sneak attack of 60 years ago.

With the nation reeling from the shock of the terrorist attacks, VA employees at medical centers, regional offices, national cemeteries and vet centers quickly mobilized to help victims, their families, and others affected by this national tragedy. Veterans Health Administration (VHA) facilities nearest the crash sites were the first to get involved, activating disaster plans and preparing to receive casualties.

The VA New York Harbor Healthcare System (HCS), with divisions in Manhattan, Brooklyn and the Bronx, immediately ordered extra supplies and placed all medical personnel on standby. Non-essential

surgery was postponed, and inpatient beds were freed up so maximum resources would be available at a moment's notice.

In the first few hours after the attacks, all available staff and VA police at the Manhattan campus, the closest to Ground Zero, stood outside the emergency room entrance to flag down approaching ambulances carrying the injured.

Staff also took to the streets outside the medical center looking for wounded among the crowds fleeing the cloud of dust and debris settling on lower Manhattan. Bridge and subway closings had left hundreds of thousands with few other options for getting out of the area than to flee on foot. Many of those heading toward Queens walked past the facility.

It wasn't hard to pick out victims who needed immediate care, according to VA staff who scanned the crowds. Covered in concrete dust and with pained expressions on their faces, they'd already walked nearly four miles from the World Trade Center area.

Medical staff at the Manhattan campus gathered the supplies they needed to stabilize incoming victims and set up a triage area outside the

emergency room. Mental health counselors stood by to tend the victims' emotional needs. Although most of the victims VA staff approached outside the facility said they were okay and wanted to keep going, several accepted their offers of

Leaning on Faith

Thousands of employees were affected by the tragic events of Sept. 11, but few to the extent of Abraham Scott, a budget analyst with the National Cemetery Administration (NCA) in VA Central Office. He got a phone call from his wife Janice that morning, just minutes after hijackers piloted a commercial airliner into the first of the World Trade Center's twin towers. They talked for several minutes and she told him about the attack. It was to be the last time he would hear her voice.

Janice worked at the Pentagon as a budget analyst for the Army and is among those listed by the Department of Defense as unaccounted for. As the nation's shock of the attacks gave way to grief and anger, Abe Scott is holding out hope that rescuers will find some clue as to his wife's fate. "It's devastating," he said. "I'm leaning on the Lord's shoulders to help me get through this."

His church held a prayer service the week after the attacks and several of his NCA colleagues attended. Gladys Patree, a program specialist who works with Scott, was one of those. "I can't explain the hurt I felt for him and his family," she said. "It was deep." She described Abe as a "family man" and said she felt helpless to ease his pain at the prayer service. "Hopefully our presence helped." Abe and Janice have two daughters, Crystal Marie and Angel Marie.

American Soil: VA Responds



Staff from the Washington, D.C., VA Medical Center's Emergency Operations Center, set up shortly after the Pentagon attack, meet at noon on Sept. 11.

help for everything from having their eyes washed out to getting treatment for chest pains.

More than 30 patients were seen in the first hours after the attack. By the end of the first week, a total of 55 civilians, firefighters and National Guardsmen had been cared for by VA's three New York City medical

3), headquartered in the Bronx. Communication links were immediately established with New York City's emergency management team. Information on donating blood and signing up volunteers was quickly shared with employees across the network.

Dozens of people stopped outside

centers. By Sept. 26, that total had risen to 98.

Hourly updates on manpower and supplies were maintained through continuous communication among New York Harbor's three main campuses, and among the other medical centers in the VA New York/New Jersey Veterans Healthcare Network (VISN

the Manhattan campus emergency room offering to donate blood. Others with medical training offered to help care for the injured. Sadly, many of the people who stopped were looking for missing loved ones. Soon families and friends of the missing began taping homemade posters with pictures of their loved ones and pleas for information on their whereabouts to a brick wall outside the medical center.

VA New York Harbor HCS Director John Donnellan met continuously with his senior staff to monitor their response to the crisis. "Once we treated the casualties, we had to quickly address the special needs of our regular patients," he said. "We had dialysis, radiation and chemotherapy patients who needed care. With most of the city's bridges and tunnels closed, it was a real challenge getting these patients to the medical center."

Since the police were restricting access to Manhattan to emergency vehicles only, "getting meals, laundry and other supplies distributed to all our campuses took extraordinary effort," he added.

'Proud Memorial' to a Fallen Son

Arlene Howard's selfless action moved a President and a nation. The Navy veteran of World War II and widow of a World War II veteran is a volunteer at the Northport, N.Y., VA Medical Center.

Her son, a Port Authority police officer, was off duty on the morning of Sept. 11 when terrorists piloted a hijacked airliner into the World Trade Center. Like many off-duty police officers and firefighters, he was called in after the attack. He rushed to the scene to assist his fellow officers and was later caught in the World Trade Center's collapse.

When President George W. Bush visited New York City following the attack, Arlene Howard gave him her son's police badge. The President spoke movingly of their encounter during his address to a joint session of Congress on Sept. 20.

Holding up the badge, he told the world it was "the police shield of a man named George Howard, who died at the World Trade Center trying to save others. It was given to me by his mom, Arlene, as a proud

memorial to her son. This is my reminder of lives that ended, and a task that does not end."

From her home on Long Island, Howard explained that she gave her son's police shield to the President to honor not only her son's memory, but all the police officers and firefighters who died in the attack. "He said he was honored to have it and that he would carry it with him at all times," she said.

Howard has been a volunteer in the Women's Wellness Program at the Northport VAMC since 1994. She's on the VA Voluntary Service Executive Committee, the Northport VAMC's External Board of Directors, and is the VA representative for the Honor Society of Women Legionnaires.

"Arlene is a survivor," said Mary O'Sullivan, chief of Voluntary Service at the Northport VAMC and a close friend of Howard. "When I lost my husband, she told me what to expect during the grieving process. That's just the kind of person she is, and we are honored to have her as part of our VA family."

Voices...

“Great harm has been done to us. We have suffered great loss. And in our grief and anger we have found our mission and our moment. Freedom and fear are at war. The advance of human freedom—the great achievement of our time, and the great hope of every time—now depends on us. Our nation—this generation—will lift a dark threat of violence from our people and our future. We will rally the world to this cause by our efforts, by our courage. We will not tire, we will not falter, and we will not fail.”

—**President George W. Bush**, in an address to a joint session of Congress and the American people on Sept. 20

“As I look out my office window this morning at the still-rising plume of smoke at the Pentagon, I’m reminded in the most jarring possible way just how precarious peace and security can be. I felt compelled to share with you the pride I have in our country, our values and the uniquely American mettle and resolve that will carry us through this tragedy. This resolve, and the character and moral fiber of our nation, are defined largely by our heritage, the American experience of the last two and a quarter centuries. And this experience was written in great part by the venerable constituency we have been given the privilege to serve.”

—**Dr. Thomas L. Garthwaite**, VA Under Secretary for Health, in an e-mail message to VHA employees on Sept. 12

“I am so proud of the thousands of VA employees here in Washington, in New York, and everywhere they are needed in this time of crisis. You always rise to the challenge, and you always emerge victorious. You represent the very spirit of patriotic duty. I am reminded that one of the reasons the eagle was chosen to be our national symbol is that it is the only bird that will fly through a

When the New York National Guard activated 4,500 troops to help with the recovery and clean-up effort, Guard commanders asked VA to serve as the primary source of medical care for sick or injured members. “The risk of injury [to Guardsmen] was significant,” Donnellan said, “not to mention the threat of respiratory problems from the concrete dust, and smoke from fires that were still burning more than a week later.”

Extra counseling teams were standing by to help the Guardsmen deal with the emotional impact of uncovering victims’ remains. The Bronx VAMC also furnished gloves, masks, bandages and assorted supplies to National Guard units heading south to the disaster scene.

Just when things seemed to be settling down at the Manhattan campus, air quality became a problem when shifting winds began carrying smoke north from the fires downtown, drawing it into the facility’s ventilation system. Engineering staff had to use the air conditioning system judiciously, keeping the building as cool as possible while trying to minimize smoke intake.

VISN 3 Director James J. Farsetta said he continues to be inspired by the many ways in which network

employees have overcome obstacles and rallied to continue normal operations and support the needs of the community. “They have faced, and continue to face, the fear for their own personal safety and battled unimaginable inconveniences—all the while ensuring that the care of their patients remains the number one priority,” he said.

“Their reaction to the attack and the aftermath is a testament to the dedication of all our staff and the spirit of public service that they embody. All of our medical centers are helping one another, as they always do. It is very rewarding to watch them in action.”

VA medical centers near the other two crash sites were also prepared to accept casualties. Though two private hospitals near the Pentagon took in most of the injured from that attack, the Washington and Baltimore VA medical centers stood ready to help. So did the Altoona, Pa., VA Medical Center, located 70 miles from the Pennsylvania crash site. Tragically, the lack of survivors made extra medical support unnecessary. A Pentagon worker suffering from stress was treated at the Washington, D.C., VAMC later in the week.

As the initial shock of the incident gave way to grief, VA mental health



Secretary Principi looks at the “wall of the missing” outside the VA Medical Center in Manhattan during his Oct. 1 visit to New York City. Behind him is VISN 3 Director James J. Farsetta.



Sue Malley (center) from VBA's Compensation and Pension Service, and Lamont Saxon (right) from the Washington, D.C., VA Regional Office, help a Navy casualty affairs officer file a claim on behalf of a survivor at the Joint Services Survivors Assistance Center.

counselors skilled in treating post-traumatic stress disorder (PTSD), many of them from vet centers, responded to requests to help those affected by the disaster. The VA New Jersey Health Care System, for instance, sent grief counseling teams to Newark Airport and the Meadowlands Sports Complex, where families of the plane crash victims gathered to get information about their loved ones.

Horrific images of the second jetliner slicing through the World Trade Center, combined with the comparisons to the Japanese attack on Pearl Harbor, rekindled difficult memories for many World War II veterans who sought counseling at VA medical centers nationwide. The day after the attacks, Glenn Smith, a psychologist at the James A. Haley Veterans Hospital in Tampa, Fla., said there were "a lot of vets coming in, a lot calling."

The Veterans Benefits Administration (VBA)'s response to the terrorist attacks has focused primarily on the variety of benefit programs available to survivors of military personnel who were killed. VBA staff immediately began working to identify survivors who might be eligible for benefits including Servicemembers' Group Life Insurance (SGLI), dependency and indemnity compensation (DIC), dependents' educational assistance, home loan guarantees or a burial

allowance.

Shortly after the attacks, the Philadelphia VA Regional Office & Insurance Center took action to speed SGLI payments to victims' survivors. The Insurance Center contacted military casualty affairs officers to encourage swift submission of casualty claims forms, and then pledged to process insurance payments for the beneficiaries of those killed in the terrorist attacks within 48 hours of receiving the casualty report from the Defense Department and the claim from the beneficiary.

In the days following the terrorist attacks, Department of Defense officials established a Joint Services Survivors Assistance Center at a hotel just blocks from the Pentagon in Arlington, Va. It is a place where families of those missing or killed in the attacks seek solace and comfort while gathering for twice-daily updates on the recovery operation.

The center houses representatives from a variety of emergency relief agencies, including a team of specialists from VBA headquarters and the Washington, D.C., VA Regional Office. They came prepared to award on-site decisions for VA claims filed by survivors of active duty military personnel killed in the attack. The team will aid survivors and their loved ones seven days a week, 10 hours a day, "until we're no longer needed," according to Diane Fuller,

storm. On the wings of the eagle, America will fly through this storm."

— **Anthony J. Principi**, Secretary of Veterans Affairs, in a video broadcast to all VA employees on Sept. 13

"As the men and women who have fought America's wars, you—more than all others—understand what the September 11th attack on freedom and democracy means for the days ahead. More than simple acts of terrorism by radical or unbalanced individuals, this was an attack on our way of life, our country, our home. And so, as we ask God's tender mercies on all those who have fallen, we ask also for His guidance and protection for all of us who remain to finish the task now before us. I thank the same God for America's veterans—those of you who made us free and kept us free. I thank God for all you have done, and for all I know you will do again, to support peace and final victory."

— **Donald H. Rumsfeld**, Secretary of Defense, in a message to veterans on Sept. 16

"I have been incredibly proud of the way each of you has drawn together in this time of great sorrow and anger. Years ago, when I came face-to-face with terrorism, I felt very alone. Unfortunately, that black tapestry has now spread farther and has touched each of us and all Americans in a very real way. While I pray that our country's leaders will have the strength to do what needs to be done, I am comforted knowing that our family—the National Cemetery Administration—will surely do what we need to do. In the next few weeks, we will be called upon to bury many veterans and their family members whose time was not supposed to have come so soon. We will do it with grace, honor, and dignity."

— **Robin L. Higgins**, Under Secretary for Memorial Affairs, in a message to NCA employees on Sept. 14



Flowers, photos and other items left as memorials to those killed or missing in the Pentagon attack decorate a long table at the Joint Services Survivors Assistance Center in Arlington, Va.



Families of the Pentagon attack victims gather twice each day at the family assistance center to get updates on the recovery operation.

assistant director of VBA's Demand Management section.

Outreach specialist Ron Weaver helped set up the station and assisted several families during his first week there. In one case, a woman veteran whose husband was listed as missing told him she was planning to move to Arizona to be closer to her family. Weaver told her about the VA loan guaranty benefit and issued a Loan Guaranty Certificate of Eligibility on the spot.

In addition to working with victims' families and friends, the

team is also helping military casualty assistance officers file claims on behalf of survivors of active duty military killed in the attack. Sue Malley, a former claims examiner from the Winston-Salem, N.C., VA Regional Office who now works in VBA's Compensation and Pension (C&P) Service, volunteered to

staff the VA booth. As she finished processing her second DIC claim the week after the attacks, she said she was glad to be there. "To be able to come here and process benefits for these families in their time of need ... anything I can do to help."

Rounding out the team are David Leonard and Jacqueline Bobo, from C&P Service, along with Linda Pyne and Lamont Saxon, from the Washington, D.C., VA Regional Office.

Benefits counselors from the New York VA Regional Office, which was evacuated shortly after the terrorist attacks and didn't reopen for business until the following Monday, Sept. 17, also are staffing a VA booth at the Pier 94 Family Assistance Center in Manhattan. They are verifying the veteran status of victims of the WTC attack, and providing information to their families about survivor and burial benefits.

Rotating crews of VARO employees are working in teams of three to staff the booth seven days a week. Hours vary according to need, but the booth is usually staffed about 10 to 12 hours a day.

They're joined there by rotating teams from New York VA medical centers. The VHA teams include medical benefits/eligibility specialists, and mental health counselors from both VAMCs and vet centers. "We are seeing veterans who have lost family members and friends, as well as family and friends of veterans who are dead or missing," said Henrietta Fishman, VISN 3's coordinator for WTC veteran and family outreach. She said many of the dead

or missing veterans had been members of the New York City police and fire departments.

Recruiting volunteers to work at Pier 94 hasn't been difficult, according to Fishman. In fact, she said, employees who volunteered found the experience so meaningful that they all asked to return.

VA is one of many city, state and federal agencies with a presence in the bustling family assistance center on the Hudson River, set up by the office of New York City Mayor Rudy Giuliani in the days after the WTC attack. VA employees also are working at two other assistance centers in the area—one coordinated by the Federal Emergency Management Agency in Manhattan, and the other in New Jersey.

Also on the VBA front, VA has asked holders of home mortgages that it guarantees not to start foreclosures on loans affected by the attacks for 90 days from Sept. 11, and loan servicers have been encouraged to extend the dates for imposing late charges on mortgage payments. Lenders have been informed that National Guard and Reserve members who may be called to active duty could be entitled to loan repayment relief under the Soldiers' and Sailors' Civil Relief Act of 1940.

In the wake of the terrorist attacks, VA national cemeteries closest to the disaster sites, including Calverton, N.Y., and Quantico, Va., began planning for burial requests for veterans and active duty military. Less than a week after the attacks, the first victim to be buried in a VA national cemetery was laid to rest in Calverton National Cemetery.

VA Under Secretary for Memorial Affairs Robin Higgins drove to Long Island to attend the Sept. 17 funeral of New York City firefighter and Navy veteran Glenn E. Wilkinson. "I was proud to see our employees at the national cemetery at Calverton doing what they do best—providing dignified burial services to veterans," Higgins said. "Naturally, this particular one was especially poignant. They wanted to do it right, and they did."

That same week, the National Cemetery Administration (NCA) received its first request for a marker to memorialize a veteran's wife whose body has not been recovered. Rhonda Sue Rasmussen, wife of



In a scene repeated at public and private buildings throughout Washington, D.C., a giant American flag hangs outside VA headquarters.

Army Capt. Floyd A. Rasmussen, was a civilian employee of the Army at the Pentagon. Capt. Rasmussen requested the bronze marker to be placed at the Riverside, Calif., National Cemetery so his family will have a special place to come in remembrance of his wife. NCA mailed the first group of nine Presidential Memorial Certificates on Sept. 19 to next of kin of victims who were veterans or active duty military.

By the end of September, 12 victims of the terror attacks had been scheduled for burial in VA national cemeteries, with more expected, and Presidential Memorial Certificates had been requested for 40 veterans who died in either the WTC or Pentagon attacks. So far, about half of the deceased slated for burial were active duty military, and the other half veterans. One was the son of a veteran, another the spouse of a veteran.

VA Secretary Anthony Principi got a firsthand look at the WTC destruction on Oct. 1 during a visit to New York City that included a stop at Ground Zero. "Television and newspaper pictures cannot fully capture the devastation and horror of the terrorist acts," he said after returning to Washington. "Standing

on the rubble of the World Trade Center brought home to me the magnitude of this barbaric act and the importance of extinguishing terrorism from our world."

Accompanied by Rep. Chris Smith (R-N.J.), chairman of the House Veterans' Affairs Committee, Principi began the day at Pier 94 visiting VA employees working at the family assistance center. He and Smith also visited the New York VA Regional Office and the VA Medical Center in Manhattan, where they presented awards to employees who coordinated and participated in the response efforts.

"My grief for the families of the victims was softened by the outpouring of caring by the thousands of relief workers, police, firefighters, military personnel and volunteers who are helping the families cope with this tragedy," Principi said. "I am very proud of the VA employees who are on the front lines of this war caring for the injured and assisting the families of the victims, from benefits counseling to PTSD." □

Editor's Note: Look for more coverage of VA's response to the terrorist attacks in the next issue of VAnguard.

A Memorial is Born

Fort Albany's battery of 12 heavy guns once guarded the approach to Washington, D.C. Though the Civil War structure is long gone, hundreds trekked up the ridge to the site where it once stood in the days after the Sept. 11 terrorist attack on the Pentagon.

They made the journey to glimpse the charred crater in the Pentagon and pay their respects to the men and women who died there.

Some lit candles and spent quiet moments in reflection. Others waved U.S. flags and sang patriotic songs. Many carried flowers and letters addressed to the victims and their families. They draped flags over the fence and wrapped red, white and blue streamers around streetlights to mark the site. They gathered there at 7:00 p.m., on Sept. 14, a day President Bush called a national day of remembrance.

As they left, they propped small flags against the base of a knotty pine tree at the center of the ridge—its long branches reaching toward the sky. Some laid flowers to commemorate the site. Others tacked photos, letters and other memorabilia to the tree's trunk.

Within a week, the collection of items left at the tree had transformed the once lonely hilltop into a makeshift memorial honoring not only those who lost their lives at the Pentagon, but all affected by this national tragedy.



The makeshift memorial on the ridge overlooking the damaged side of the Pentagon.

Workplace Violence Task Force Addresses Environmental Security, Incident Reporting



Audrey Johnson, a clerk in Nursing Service at the Washington, D.C., VA Medical Center, walks to her vehicle in a well-lit parking lot.

Attacks like those in Buffalo and Salisbury draw national attention to workplace violence in its extreme. Yet, some 2,000 assaults are reported to VA police each year. And experts believe many more go unreported.

According to the Occupational Safety & Health Administration, approximately 1.5 million Americans are assaulted in the workplace each year. By the nature of their professions, taxi drivers, police officers, and health care and social workers are among those at an increased risk for workplace violence.

In response, last year Dr. Frances M. Murphy, VA Deputy Under Secretary for Health, appointed a task force composed of occupational health specialists, psychiatrists, nurses, police officers and other experts to review current VHA workplace violence policies. In the May 2001 VHANOW newsletter, Murphy noted that “nurses are twice as likely

and mental health professionals are five times as likely to be assaulted [in the workplace] as are average citizens.” Among the areas the task force is reviewing are environmental security, employee training and violent incident reporting.

Marilyn Lewis Lanza, Ph.D., R.N., associate chief of Nursing Research at the Edith Nourse Rogers Memorial Veterans Hospital in Bedford, Mass., estimates as many as 80 percent of violent incidents are never reported. She is on the VHA task force and has researched workplace violence since the late 1970s.

She credits a background in nursing with providing insight into the difficulties nurses face in handling disruptive or violent patients, as well as their reluctance to report patient assaults. “Many accept this as being part of the workplace—they feel nothing can be done,” she said. “Others are afraid of being blamed ... and then there’s the paperwork.” She hopes to develop a reporting system modeled after the one being implemented by Dr. James Bagian, director of the National Center for Patient Safety, in which the emphasis is on fact-finding and prevention instead of the blame game.

Violence erupted at the Buffalo, N.Y., VA Medical Center in August when a 39-year-old psychiatric outpatient pulled into the parking lot armed with a .22-caliber rifle, a bag of bullets and a knife, and went on a rampage that left three people wounded. The incident was the first of its kind in the medical center’s 51-year history, and came a year after an emergency room physician was shot by an 83-year-old patient in the Salisbury, N.C., VA Medical Center.

VA Deputy Secretary Leo S. Mackay Jr., Ph.D., flew to Buffalo following the attack to lend support to the victims and their families, and to reassure employees and patients. “We will move quickly to make improvements where warranted to ensure the safety of all who work and heal here,” he told reporters at a news conference the day after the shooting.

Prevention Tips

Workplace violence includes incidents of homicide, assault, intimidation, verbal abuse, extortion and other forms of harmful behavior. To reduce your likelihood of becoming a victim, follow these tips from Richard Reed, program manager for the Prevention and Management of Disruptive Behavior at the Employee Education Resource Center in Birmingham, Ala.

■ **Conduct assessments of self, potential perpetrator and environment.** Ask yourself, “Am I contributing to the escalating tension? Does this patient have a history of violence, or appear anxious, angry or stressed? Are there any potential weapons in my work area?”

■ **Know the signs of escalation and avoid power struggles.** Be wary of loud, boisterous behavior, pacing, cursing, intrusive gestures, or threats of bodily injury. If you suspect the situation is getting out of control, respect personal space, convey willingness to help, demonstrate supportive body language, and call VA police.

■ **Seek workplace violence training.** Each VA medical center should have a designated workplace violence officer and an active training program. Ask your facility’s workplace violence officer how you should respond if you feel threatened or suspect violent potential.



Sgt. James Matthews, a police officer at the Washington, D.C., VAMC since 1993, monitors security cameras in the control room.

As program manager for the Prevention and Management of Disruptive Behavior at the Employee Education Resource Center in Birmingham, Ala., and a member of the VHA task force, Richard Reed has trained thousands of VA and Department of Defense employees in violence prevention techniques. This month, he's conducting training workshops at a number of VA sites, including the White River Junction, Vt., VA Medical and Regional Office Center, and the Detroit, West Haven, Conn., Indianapolis, and Tuscaloosa, Ala., VA Medical Centers.

Reed said workplace violence stems from a dynamic relationship between organizational, environmental and individual factors, and all three must be addressed in order to resolve the issue. "These factors all impact one another, and we are looking at this in a comprehensive manner." He said the best predictor of whether a patient has the potential to become violent is whether they've done it in the past. "Pay attention to patient behaviors," he said. "Those with a history of violence, who have unrealistic demands, are actively intoxicated or not following medication protocols, all have the potential for violent incidents."

Environmental security is another aspect of workplace violence. This includes environmental elements that reduce the risk of violence, such as adequate lighting in parking lots and strategically placed cameras, and

those that increase the risk, such as waiting room chairs not securely bolted to the floor that could be thrown by an angry patient. "We are constantly learning about environmental hazards," said Frank Denny, an occupational health specialist in

VA Central Office and task force member. "Experts like Dr. Paul Kim [area emergency manager, Emergency Management Strategic Healthcare Group at the Stratton VA Medical Center, Albany, N.Y.], and Dr. Lanza travel to various facilities to conduct environmental assessments and identify potential hazards."

For the third year in a row, a report by the Pinkerton security firm titled "Top Security Threats," lists workplace violence as the leading concern among security managers at some of America's largest corporations. Experts in VA are working to reduce the risk for such incidents. "Our patients, employees and visitors deserve to know that we are doing everything we can to make certain that our facilities are safe," reported Murphy. For more information, visit the workplace violence Web site on the VA Intranet at vaww.va.gov/vasafety, or contact Richard Reed via Outlook e-mail or call (205) 731-1812 ext. 302. □

By Matt Bristol

Violence in Buffalo

All three victims of the violence at the Buffalo VA Medical Center are recovering well from the gunshot and stab wounds they suffered when they encountered the armed assailant at the busy Ambulatory Care entrance on Aug. 17.

Gary Muck, a parking lot attendant, was shot in the neck when he approached the suspect's vehicle in a driving lane in front of the outpatient clinic area. **Mann Pollock Jr.**, a county van driver, spotted the assailant as he headed toward the entrance. When Pollock tried to wrestle the gun away from him, the suspect shot him in the hand and stabbed him in the buttocks.

John Skyler, a medical records file clerk, was the most seriously wounded. The assailant stabbed him in the chest inside the outpatient clinic. The wound nicked his liver and intestine, and his gallbladder had to be removed. After he was stabbed, Skyler managed to grab the suspect's rifle as it went flying down a corridor.

Though they were not wounded in the attack, nurse practitioners **Karen Dudenhoefer** and **Kathleen Burns** played key roles in the incident. The two, who both work in the cardiology unit, happened to be walking out of the building when the violence began. They heard the shot that hit Muck, and saw him fall to the ground.

Dudenhoefer ran to help Muck, applying pressure to his neck wound while Burns ran in another door to warn those inside about the approaching assailant. When Dudenhoefer and Muck saw the suspect returning to his car after the attack, Muck urged her to write down his license plate number. She wrote it on the sleeve of her lab coat. Their quick thinking helped police track down and arrest the suspect a short time later at his apartment.

VA Police Step Up Security in Wake of Attacks



VA police officer Denise Gentry guards the emergency room entrance at the Washington, D.C., VA Medical Center.

"All medical facilities are open. All VA employees are safe," VA Secretary Anthony Principi announced on Sept. 11, hours after terrorists attacked New York City's twin towers and the Pentagon. Keeping VA facilities safe and secure is a responsibility shouldered by the VA police, a force composed of about 2,200 officers stationed across the country.

As America struggled with the horror of black Tuesday's attacks, VA police officers at medical facilities and outpatient clinics stepped up security as part of the Department's emergency

response plan. "I was standing in the Deputy Secretary's office when we saw this plume of smoke coming from the Pentagon ... I knew we were in trouble," said John H. Baffa, a former Secret Service agent and current Deputy Assistant Secretary for Security and Law Enforcement. "We immediately sent an e-mail to all police chiefs telling them to elevate their security until further notice."

At the Washington, D.C., VA Medical Center, one of four VA health care sites that braced for the possibility of receiving victims of the attacks, an officer stood guard in the driveway checking employee identification badges and driver's licenses of visitors and veterans entering the medical center grounds. Patrol Captain Phyllis Thomidis said officers were working 16-hour overlapping shifts to

"make patients and employees feel more secure" after the attacks.

In VA Central Office, located across from the White House, security officers were on high alert as employees reported to work in the

wake of the terrorist attacks. Lines formed outside the building as officers inspected briefcases, day planners, umbrellas and any other items carried into the building. They also took a closer look at the expiration dates on employee identification badges.

Title 38, the law creating and organizing VA, gives the Secretary of Veterans Affairs the responsibility for prescribing rules and regulations "for the maintenance of law and order and protection of persons and property on Department property" and designating Department police officers to enforce them. Within this system of law enforcement, VA's police remain dedicated to a philosophy that permeates VA training and policing: first, aim to prevent crime; second, work to defuse the threat; and finally, take physical action. For more information, check the Office of Security and Law Enforcement Web site at www.va.gov/osle. □

Child Care Tuition Assistance Program Extended One Year

VA employees who qualify will have another year to participate in the VA Child Care Tuition Assistance Program. Congress voted to extend the program, which is designed to help employees who meet the eligibility criteria reduce their child care costs, for another 12 months.

Since the program began last January, more than 980 VA employees (with nearly 1,280 children) have enrolled. Full- and part-time employees can apply for child care tuition assistance if they:

- have a total family income of less than \$52,000; and

- use a child care provider (center-based care, home care and/or before/after care) that is licensed and/or regulated by the state and/or local regulating authorities.

Questions about the VA Child Care Tuition Assistance Program should be directed to your Human Resource Office, or you can visit the Child Care Tuition Assistance Web site at vawww.va.gov/vachildcare. □



Lt. Raul DeVelasco, police officer at the D.C. VA Medical Center, stands guard outside the emergency entrance.



San Diego VAMC Researchers Develop Blood Test to Diagnose Heart Attack

Using a simple, inexpensive blood test, VA researchers have developed a faster method for diagnosing heart attacks in hospital emergency rooms. Each year, about 5 million Americans present symptoms of heart attacks at emergency rooms, although only 10 to 15 percent are actually suffering a cardiac episode. Ruling out a heart attack has usually taken 6 to 24 hours and can be quite expensive.

Without quick and accurate ways of ruling out a heart attack, emergency room patients often receive unnecessary testing and hospitalization, with nationwide costs reaching hundreds of millions of dollars each year. The Food and Drug Administration has approved the tests.

The new blood tests, which can reliably rule out an attack within 90 minutes, look for three cardiac enzymes, or markers, that are released by distressed heart tissue during a heart attack. The keys to the tests, known as the Triage Cardiac System, are the rapid determination of test results and repetition of the tests.

Over a period of nine months, Dr. Alan S. Maisel, director of the Coronary Care Unit, and his colleagues at the San Diego VA Medical Center tested 1,285 patients three or four times within 90 minutes of their arrival at the emergency room, in combination with an electrocardiogram and a patient history. The research team reports in the Sept. 15 American Journal of Cardiology that the new tests were 100 percent accurate in ruling out heart attacks. As a result of the tests, critical-care admissions dropped 40 percent and overall hospital admissions dropped 20 percent.

In related research, Maisel reported earlier this year on the effectiveness of a blood test that measures a cardiac marker to identify congestive heart failure. Congestive heart failure symptoms are very different from heart attack symptoms.

Collaborating on the study were Siu Ming Ng; Padma Krishnaswamy, M.D.; Robin Morrissey, R.N.; Paul Clopton; and Robert Fitzgerald, Ph.D., all with the San Diego VA Healthcare System.

VA Study Finds Shortcomings in Popular Colon Cancer Screening Procedures

Colonoscopy proved far superior to two other common tests for colon cancer in a VA study published in The New England Journal of Medicine and reported by The Associated Press and The New York Times. The two most widely used tests for colon cancer, sigmoidoscopy and the fecal blood test, together missed one-quarter of the tumors and precancerous growths detected by colonoscopy.

"Colonoscopy currently is the best available test that we have," reported Dr. David Lieberman, who led the

study as chief of gastroenterology at the Portland VA Medical Center. He said the study "makes a case for at least considering colonoscopy as a screening test beginning at age 60."

For average-risk people age 50 and older, the U.S. Preventive Services Task Force calls for a yearly fecal occult-blood test and sigmoidoscopy every five years for colon cancer screening.

"But what happens in real life is that patients often get only one test and no follow-up," noted Lieberman. "This study tells us physicians can't use that single negative test to reassure our patients and that people need to return for repeat testing in order for screening programs to be effective."

Lieberman and colleagues studied 3,121 apparently healthy volunteers aged 50-75 at 13 VA medical centers around the country. All study participants underwent colonoscopy to compare the procedure's effectiveness with the fecal occult-blood test and sigmoidoscopy. The study results show colonoscopy detected colon cancer in 24 patients and serious growths in 282 others. The blood test, on the other hand, detected only 24 percent of those, while sigmoidoscopy caught 70 percent.

Costing at least \$1,000, colonoscopy is considered about 95 percent accurate. It uses a flexible, lighted viewing tube that permits the physician to view the sedated patient's entire colon and immediately remove any growths. Sigmoidoscopy, which costs \$100 to \$200, uses a less-advanced viewing tube and cannot probe the colon's top two-thirds, where growths become more common, dangerous and hard to detect with age. The study findings could put pressure on more insurance companies that had previously been reluctant to cover the cost of colonoscopy examinations.

VA Surgeons Perform First Transplant To Repair Multiple Sclerosis Cells

The first central nervous system transplantation to repair the myelin-forming cells in a patient with multiple sclerosis (MS) was recently performed by a neurosurgery team from the VA Connecticut Health Care System (VACHCS) and the Yale School of Medicine.

The cell transplantation is part of a clinical trial that is testing whether cells found in peripheral nerves can be used to safely repair damaged cells in the brain and spinal cord that result in disorders such as MS. In MS, the immune system strips away myelin, the protective sheath around nerve fibers, making it difficult for the affected nerves to transmit messages.

The surgery team used a MRI machine to very accurately guide a needle through the frontal lobe and to inject peripheral nerve cells, which had previously been taken from the same patient, into a previously identified MS lesion. In six months, a small biopsy will determine whether the cells survived and whether they were able to make and wrap myelin around or restore the nerve fibers in the brain, restoring normal function.

The experiment holds promise for the estimated 1.4 million people worldwide with MS, as well as for a group of other demyelinating hereditary diseases that primarily attack the nervous systems of infants. Timothy Vollmer, M.D., of the VACHCS and associate professor of neurology at Yale, is the study's principal investigator. □

HONORS and awards



The **VA New Jersey Health Care System** took first place in the 2001 VHA Under Secretary's Diversity Awards for advancing diversity in the workplace. The health care system was cited for using mentoring programs—Expanding Horizons, which is open to employees GS-8 and above, and New Frontiers, open to all employees—to promote diversity and provide self-improvement opportunities for all employees. The **Atlanta VA Medical Center** received an honorable mention for developing and implementing a leadership program which embraces the principles of diversity. **VISN 8 (Bay Pines, Fla.)** and the **Chief Information Office** in VA Central Office received special recognition awards.

The Eastern Paralyzed Veterans Association presented its Zelma Marea Canning Annual Award in Spinal Cord Injury Nursing Practice to **John Yeomans**, a registered nurse with the **Castle Point** campus of the **VA Hudson Valley Health Care System**. Yeomans has 30 years of nursing experience and was selected for his exceptional clinical nursing skills, knowledge of spinal cord injury care, problem-solving abilities, teamwork and leadership skills. The award is named in honor of a World War II Navy nurse who served at the Bronx VA Medical Center until her retirement.

The Air Force Association selected **Jack Zimmerman**, team leader at the **Huntington, W.Va., Vet Center**, to

receive its VA Employee of the Year Award. Zimmerman was chosen for the personal interest he shows in serving a caseload of more than 400 veterans, and for the long hours he contributes to ensure the Huntington Vet Center remains a model for excellence in assisting veterans. The 150,000-member Air Force Association was formed following World War II.

VISN 3, headquartered in the Bronx, N.Y., has been named one of the nation's Most Wired Hospitals and Health Care Systems by Hospitals and Health Networks, a journal of the American Hospital Association. The award is based on a poll of the nation's health care systems about their use of Internet technologies to connect with patients, physicians and nurses, payers, health plans and employees.

For the second year in a row, the **VA National Center for Patient Safety** was selected as a finalist in the Innovations in American Government Awards program, one of the most prestigious awards dedicated to public service. Finalists receive a \$20,000 grant and are eligible for one of five \$100,000 awards. Created in 1998, the National Center for Patient Safety encourages health care professionals to report errors and close calls so that medical centers can examine the causes and subsequently learn from these mistakes. As a result, system-wide problems are now being ad-

ressed and health care workers are no longer afraid to report medical mistakes. The Innovations in American Government Awards program is administered by Harvard University's John F. Kennedy School of Government in partnership with the Council for Excellence in Government.

Joseph McQuaid, a volunteer at the **San Fran-**



McQuaid

cisco VA Medical Center, received a \$5,000 Disabled American Veterans National Commander's Youth Volunteer Scholarship Award. He is the son of **Kenneth McQuaid, M.D.**, chief of Gastroenterology at the medical center, and has volunteered for two years in the Neurology Research section, working on factors that control the re-growth of nerves in stroke victims. Aside from his hard-working efforts as a VA volunteer, Joseph is in the top three percent of his high school class and has maintained a 4.0 grade point average for four years. He is also a member of his school's varsity rowing and cross-country running teams.

Government Executive magazine selected **William Bardwell**, traffic manager in the **Office of Acquisition and Materiel Management** in **VA Central Office**, to receive its Travel Manager of the Year Award. He was selected for his work developing and implementing the VA Centralized Household Goods Program. "In the past, VA had no centralized household goods program," explained Bardwell, referring to a program to oversee authorized employee moving and relocation expenses. "This

program allows experts in travel policy and acquisitions to use their skills to help employees make efficient moves."

Two employees from the **Oklahoma City VA Medical Center** were honored recently. **Pam McKinney**, an equal employment opportunity specialist, was named the Statewide Federal Employee's Cultural Diversity Person of the Year, and **Michael Kuns**, who is past president of the Oklahoma Academy of Physician Assistants, received the Statewide Federal Employee's Outstanding Customer Service award.

Belen Austria, R.N., a clinical applications coordinator in the **VA Northern California Health Care System**, was honored by California NurseWeek Magazine during their 3rd Annual California Nursing Excellence Awards Ceremony in Los Angeles. She was selected as a finalist in the "Innovation" category for her role in implementing the Computerized Patient Record System throughout the VA Northern California Health Care System.

Four employees from the **Columbia, S.C., VA Medical Center** were honored during the facility's second annual Federal Man of the Year Program. **Mark Anderson**, director of Diagnostic and Ancillary Care Service Line; **Alberto Saenz, M.D.**, cardiologist; **Raymond Hodge**, electrician; and **Stephen Perlstein, D.D.S.**, a dentist, were recognized for contributions ranging from mentoring 6th grade students and coaching Little League ball clubs to chairing professional civic organizations and building homes for missionaries in the Philippines. □



William L. Livingston, director of the **Los Angeles National Cemetery**, landed a role in the DreamWorks motion picture "The Last Castle," starring Robert Redford, James Gandolfini and Robin Wright Penn. He plays a full-bird colonel attending a military funeral in a scene filmed at the cemetery. It's not the first time Hollywood producers have filmed scenes at the cemetery, but it is the first time the cemetery director has been asked to serve as a technical advisor and appear in the film. The cemetery received a generous donation for allowing the scene to be filmed. The movie opens this month.

Two surgeons from the **VA Chicago Health Care System's Lakeside Division** were profiled on national television as part of the Lifetime cable network's new documentary series "Women Docs." The program originally aired Sept. 22. To shoot the documentary, a Lifetime film crew followed surgeon **Katherine Yao, M.D.**, and surgery resident **Aleda Jacobs, M.D.**, for several weeks as they made their rounds in the operating room. The program provided a case study of the pre-operative, surgical and post-operative care given to several of Dr. Yao's and Dr. Jacobs' veteran patients. The documentary was initially going to be filmed at Lakeside's affiliate, Northwestern Memorial Hospital. However, the two surgeons told producers that the patients they treat at VA are "more interesting and

appreciative" and suggested that the filming take place at Lakeside. After viewing the footage, the producer described the lifesaving measures taken by the two surgeons as "heroic." The Lifetime channel has more viewers than any other cable network. This highly acclaimed new documentary series is being heavily promoted and provides yet another example of the high level of quality health care veterans receive in VA.

A West Haven, Conn., VA community center specializing in the treatment of veterans with chronic mental illnesses, substance abuse problems or homelessness, has been renamed in honor of **Dr. Paul Errera**, who recently retired as chief of Psychiatry from the **West Haven, Conn., VA Medical Center**. The Errera Community Care Center provides treatment, vocational training, housing assistance and other programs to help veterans get back on their feet and on the road to recovery. Errera retired after a distinguished 48-year VA career. He was appointed chief of Psychiatry at the West Haven VAMC in 1970. From 1985 to 1994, he directed the Mental Health and Behavioral Sciences Service in VA Central Office. While in Washington, D.C., he led VA efforts to bring mental health services out of the large, institutionalized hospital environment and into a smaller, more intimate community setting. The Community Care Center was built in 1995 and became a national model for the delivery

of mental health services. In 1998, the center was named a VA Center of Excellence for the Care of the Chronically Mentally Ill. Errera credits the center's success to the dedicated efforts of center director **Dr. Laurie Harkness**.

Members of the Federal Women's Program at the **San Francisco VA Medical Center** knew there were more than thirty children living at La Casa de las Madres, a shelter for women victims of domestic abuse. They also knew the shelter didn't have enough resources to buy school supplies for all the children. So they decided to do something about it by sponsoring a "Back-to-School" drive at the medical center. They displayed large colorful posters of a little red schoolhouse and encouraged staff to bring backpacks, paper, pens, and all sorts of school supplies for these needy children. "The response was overwhelming," said Andi Ibarra, treasurer for the Federal Women's Program. On Aug. 17, they delivered a vanload of school supplies to the shelter, including more than 30 new backpacks of all sizes and colors. "Nora Webb, the shelter director, said that she was impressed and very touched by the generosity," added Ibarra.

Military servicemembers get a great deal in the **life insurance program** offered by **VA**, a new study found. The study shows VA life insurance for military personnel is 58 percent less than the cost of comparable private-sector plans. In 1998, Congress directed VA to contract for a study to evaluate the adequacy of five programs: the Dependency and Indemnity Compensation program, Servicemembers' Group Life Insurance, Veterans' Group Life Insur-

ance, Service-Disabled Veterans Insurance, and Veterans Mortgage Life Insurance. The study's findings were compiled into a report which will be sent to veterans service organizations, members of Congress and VA's top officials. Download a copy of the report's executive summary at www.va.gov/vetdata/excreportmay2001.doc.

When the **Las Vegas VA Regional Office** moved to its new location, veterans had a hard time finding the new site. So Director **Eileen Straub** partnered with the City of Las Vegas Traffic Engineering Division to have street signs installed providing directions to the new location. As a result of her efforts, the city's traffic division manufactured and installed eight signs leading veterans to the new office, at no cost to VA.

Hundreds of veterans learned about VA benefits during the annual Erie County (N.Y.) Fair, one of the oldest county fairs in the nation, dating back to 1820. Employees from the **Buffalo VA Regional Office, Buffalo VA Medical Center**, New York State Department of Veterans Affairs, and representatives from veterans service organizations set up shop at the 12-day fair to answer questions from veterans and their families and help those eligible for benefits file the necessary paperwork. One highlight of the fair was a special day honoring veterans. On that day, all veterans were admitted to the fair free of charge. Although the day was dedicated to honoring Vietnam veterans, members of the regional office's Korean War Commemorative Committee attended to distribute buttons, pins and medal applications to veterans of the Korean War. □

HEROES



A veteran nearly drowned off the beaches of Hawaii when he was hit by a wave and knocked unconscious. The man was one of several veterans and employees from the **Honolulu VA Medical and Regional Office Center** camping at the beach as part of a program run by the Day Treatment Center. **Sara Ho**, a vocational rehabilitation specialist, saw the wave come crashing down and quickly pulled the man ashore. Reaching the shore, **Maka Rego**, a mental health associate, and **Roland Campos**, a social science program specialist, took the veteran's vital signs and positioned his body to allow the water he swallowed to run out of his mouth and nose. Other employees had already called 911 and an ambulance quickly arrived. The veteran was transported to a nearby hospital and has fully recovered from the incident.



While driving from Montgomery to Dothan, Ala., employees from the **Central Alabama Veterans Health Care System** came upon an accident in which a 17-year-old had been thrown from his truck and another vehicle had slid down a deep ravine. **Linda Watson**, health care system director, **Lea Swafford**, associate director for resources, **Leverta Peeples**, health administration manager, **Paul Johnson**, logistics manager, **Marquenta Boykin**, administrative assistant, and **Phyllis Alston**, voluntary service manager, immediately called 911 when

they saw the accident. They used a sheet to shade the injured young man from the hot sun, and let drivers of the other vehicle use their cell phones to call loved ones. The VA team assisted the accident victims until emergency personnel arrived.



Mary M. Stitak, a staff assistant in **Diagnostic Service** at **VA Central Office**, was driving home from a picnic with her husband, John, when she heard a loud explosion from a nearby building. "I looked over and saw flames coming from the air conditioning unit," she said. "Then I saw the sign out front and realized it was a nursing home." They immediately pulled to the side of the road and jumped out of their vehicle. "As I approached the building, nurses started wheeling out patients in wheelchairs," said Stitak. She ran to the front door to help evacuate patients, and along with staff and other volunteers, moved 60 patients from the building to a back parking lot. Her husband, meanwhile, helped police divert traffic so the fire department could access the site and extinguish the blaze. After the incident, the nursing home sent a thank-you letter to the couple.



Jeff Atkerson saved a three-year-old child from drowning in a hotel swimming pool over the Labor Day weekend. He was traveling with his wife **Mary**, both employees of the **New**

Mexico VA Health Care System, when the incident occurred. They saw a group of unattended toddlers push the boy into the deep end of the swimming pool. Jeff immediately dove into the pool to rescue the child, who appeared to be gasping for air and panic-stricken. His actions may have saved the child's life, as there was no lifeguard on duty at the time.



Sonya Ramsey, a registered nurse in the **VA Gulf Coast Veterans Health Care System**, was driving home with her husband when she saw a vehicle swerve out of control and run off the road. It rolled six times down a highway embankment, slamming to a stop against a tree. They immediately pulled over to see if they could help. Smoke was rising from the vehicle and it looked as if it might burst into flames, so the Ramseys pulled the victims—four children and two adults—from the wreckage. Sonya Ramsey crawled through broken glass and over seats to rescue the children, one of whom was an infant who had been thrown into the back seat. With the passengers evacuated from the vehicle, they called 911 for medical assistance. Paramedics soon arrived and the victims were taken to a local hospital.



When an older passenger on the express bus into downtown Phoenix appeared to be having a medical emergency, **Sharon Newman-Matt** sprang into action. The registered respiratory therapist from the **Carl T. Hayden VA Medical Center** lifted his head off his chest to open his airway while another passenger called 911. When a fire truck arrived, the

lone paramedic asked if she could assist in attempting to save the victim. She assisted with the intubation, or inserting a tube into the victim's airway, and performed chest compressions until additional rescuers arrived. They fought to save the man, but sadly, he passed away as the ambulance rushed him to the hospital.



Fred Thessing was driving home from the **North Little Rock** campus of the **Central Arkansas Veterans Healthcare System** one evening when he witnessed an accident. A staff nurse, Thessing immediately stopped to assist the victims. He noticed a young girl lying some distance away from the wrecked vehicle. She appeared unresponsive and in respiratory distress. By this time, other motorists had stopped as well, including a nursing instructor from a local university and a physician. Together, they performed CPR on the girl until paramedics and emergency crews arrived. Thessing also assisted paramedics as they cared for a young man hurt in the accident who was waiting to be airlifted to the hospital.



Valerie Lytton, R.N., clinical practice guidelines coordinator at the **Beckley, W.Va., VA Medical Center**, was enjoying a day at the swimming pool with her family when an emergency unfolded. An elderly woman started yelling for someone to help her husband, who appeared to be suffering from a stroke while in the swimming pool. Lytton checked his condition and helped him get out of the pool. She calmed the man's wife and attended to him until paramedics arrived. □