









VAnguard

VA's Employee Magazine May/June 2006 Vol. LII. No. 3

Printed on 50% recycled paper

Editor: Lisa Respess Photo Editor: Robert Turtil Published by the Office of Public Affairs (80D)

U.S. Department of Veterans Affairs 810 Vermont Ave., N.W. Washington, D.C. 20420 (202) 273-5746 E-mail: vanguard@va.gov www.l.va.gov/opa/feature/vanguard

Features

Serving in Harm's Way

6

Record numbers of female employees are deploying to Iraq, Afghanistan

Celebrating 75 Years of VA Nursing

Honoring the strength, commitment and compassion of the nurse corps

The Lifeblood of VA

12

The value of the department's volunteer corps cannot be overstated

National Cemetery Memorials Online

15

A searchable database of all NCA memorials will soon be on the Internet

Memorial Day 2006

16

The holiday in photos from across the nation

A Home of Their Own

18

Loan guaranty program has helped 18 million vets become homeowners

Opening Their Hearts

21

VHA employees are embracing the Affirming the Commitment initiative

"... Seven Marathons. Second pacemaker ..."

23

VA cardiac care enables veteran to achieve his dreams

Departments

- 3 Letters
- 4 From the Secretary
- 5 Outlook
- 24 Around Headquarters
- 28 Introducing
- 29 Medical Advances
- 30 Have You Heard
- 31 Honors and Awards
- 32 Heroes



On the cover

Members of the Nassau-Suffolk Horsemen's Association from Long Island, N.Y., march in the National Memorial Day Parade down Constitution Avenue in Washington, D.C. The parade was one of many events and observances held across the nation over the Memorial Day weekend. *photo by Robert Turtil*

Why We Volunteer

You see us every day throughout the hospital. There are more than 1,100 of us in all. We work at the information desk, we escort patients in wheelchairs to their appointments, we serve as counselors and ministers, we drive the DAV vans and the hospital shuttle bus.

We do so many other tasks that the hospital could not function effectively without us. Other than a daily lunch and an occasional cup of coffee, we do all this work for no pay.

Why do we do it? While I can't speak for everyone, I can tell you why I do it. I suspect that many of my fellow volunteers share my motives. It's really very simple—we do it because men and women who served our country need our help.

Most of the brave soldiers, sailors, airmen and Marines of WWII who preserved our very freedom in their youth are now aged and infirm. We see them coming in to the hospital every day with their walkers or in their wheelchairs. They are passing into history and too soon they will all be gone. We need to thank them and honor them for their service while we still can.

The often forgotten veterans of the Korean War (yes, it was a war) are also now getting on in years and many of them are in a diminished state as well. They did the same duty and took the same bullets that the WWII vets did but they were denied the same glory. We owe them special thanks.

A great number of my fellow Vietnam veterans suffer the lingering effects of Agent Orange along with the trauma of unresolved issues and broken bodies. Many of them are old before their time. When they find their way to this hospital I am glad to be here to welcome them home.

Now the Iraq war and the continuing war on terrorism ensure us that there will be a new generation of veterans who will be in need of our services for many years to come.

Throughout the decades, with or without the support of the public and the media, all of these coura-

geous veterans answered their country's call. Many served in combat while others were fortunate not to be drawn into battle. They all served honorably. They all stepped up. Now they need someone to step up for them.

We feel an obligation and a sense of duty to serve in this role. We do not consider this service to be a burden; rather, we are gratified by the sense of accomplishment that comes with it. We are proud and happy to do our part and that is why we show up for duty every day.

Joe Butera Volunteer Northport, N.Y., VAMC

Correction

On page 31 of the March/ April issue, we ran an item on Dr. David Casarett of the Philadelphia VA Medical Center receiving the William A. Nelson Award for Excellence in Health Care Ethics. The photo included with the item was of Dr. Chester B. Good of the VA Pittsburgh Healthcare System, who received the Mark Wolcott Award for Excellence in Clinical Care Leadership at the same ceremony in Washington, D.C. For more on Good's award, see page 31 of this issue.



Helping Veterans Get Fit for Life

VA Under Secretary for Health Jonathan Perlin, M.D., joined fitness expert Denise Austin at the HealthierUS Fitness Challenge, sponsored by the President's Council on Physical Fitness and Sports and the Fitness Challenge Foundation, at RFK Stadium in Washington, D.C., on May 6. They challenged veterans and their families to take part in the HealthierUS Veterans project launched recently by VA and the Department of Health and Human Services in an effort to reduce rates of diabetes and obesity in the veteran population. The event included fitness demonstrations and nutrition exhibits.

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, or fax your letter to (202) 273-6702. 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.



Information Security is the Job of Every Employee

Jim Nicholson Secretary of Veterans Affairs

The advance of technology over the past decade has accelerated at a pace unparalleled in human history. The digital age has made the personal computer a common appliance in American homes and offices, creating untold new opportunities for everyone from small children to senior citizens.

These changes have also brought about new and different risks and responsibilities. Whether it's safeguarding your credit card information while making an online purchase with your home computer or handling national security information, vigilance is paramount in this expanding digital universe.

Failures of vigilance can have far-reaching consequences, and this agency was the unfortunate witness to just this shortcoming when it was learned that a VA employee who had taken home sensitive veteran data without authorization was the victim of a household burglary, resulting in the loss of sensitive information on 26.5 million veterans, military personnel and some dependents.

This data theft was not the result of a malevolent hacker, the breach of a VA firewall or an unauthorized system intrusion. It was the result of a failure to observe longstanding policy on the handling of sensitive information and it is inexcusable.

VA takes great pains to ensure that those whose jobs involve access to or use of sensitive information are fully briefed on how to properly handle that information and the consequences of failing to do so. To that end, I've directed that all agency employees complete the VA Cyber Security Awareness Training Course and the General Employee Privacy Awareness Course in an expedited fashion.

Information security is the job of each and every VA employee, and most of our obligations for security can be met by exercising common sense.

Sensitive information

age and unauthorized access; computers and storage devices must be kept secure when not under the direct control of the employee. All of our rules and policies regarding encryption must also be flawlessly followed.

I know that VA is an agency of talented, hard-working people who are dedicated to serving the nation's veterans and it's a great source of pride to me personally. It's also a source of great comfort to the millions of veterans we serve and their families. These people

confidence to erode and we guard against that by careful stewardship of their personal information.

As technology continues to evolve, the challenges associated with protecting data must also change. I'm confident that VA can and will meet the challenges of this responsibility. Just as we have become a recognized leader in providing health care because of the quality of our people, I envision the day that VA will be similarly recognized for its data and information security. But it is

Just as we have become a recognized leader in health care, I envision the day that VA will be similarly recognized for data and information security.

and equipment should not be removed from any VA facility without authorization; equipment and data must be protected from physical damhave entrusted us with their faith and confidence, so it is incumbent on each of us to meet their expectations. We cannot allow that faith or

going to take the diligence and discipline of every one of us. We can do it and we must. The veterans we are here to serve deserve no less.

Protecting Veterans' Personal Information

VA sent letters to millions of veterans whose personal information was compromised by the theft in May of a laptop computer from a VA employee's home. The letter informs them of the data loss, offers guidance to monitor and protect personal finances, and lists sources of additional information on the Web and at a toll-free call center.

The Secretary issued an internal directive June 6 outlining and clarifying each employee's responsibilities and obligations regarding the protection of confidential and Privacy Act-covered information. The directive notes that: VA's commitment to the protection of personal data of all individuals covers all data formats and media, including electronic, paper, and oral information; employees authorized to remove protected data from the VA workplace are required to take all precautions to safeguard it until it is returned; and, they must consult with their supervisors and Information Security Officers (ISOs) to ensure the data is properly encrypted and password-protected. In the event a VA employee loses confidential or Privacy Act-protected data, they must report the loss immediately to their local ISO and privacy officer and immediate supervisor.

VAnguard outlook



The Future of VA Nursing: The Next 75 Years

Cathy Rick Chief Nursing Officer

My greatest privilege and responsibility as chief nursing officer is to advocate for our 61,000 VA nursing staff and provide resources to enhance all levels of professional practice, advance the application of evidence-based nursing care, 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, our nursing personnel face unique challenges and opportunities.

VA nursing is focused on developing creative solutions to enhance efforts for recruitment and retention—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 boomers enter their "golden years," and we will attend to the special needs of the younger generation of veterans as well.

In the coming years, we will test new models of nurs-

ing practice, expand interdisciplinary teamwork, enhance academic affiliations, and build systems that support data-driven decisions in all patient care areas. Current initiatives to support that vision for VA nursing are the Clinical Nurse Leader (CNL) pilot project, the pilot for Transforming Education Affiliations for Clinical Horizons (TEACH), and the VA Nursing Outcomes Database (VANOD).

The CNL project will enhance our evidence-based practice approach to patient-driven care through new clinical nursing roles. The TEACH pilot will expand our current approaches to academic preparation for nurses and other clinical health occupations. The

orities, clinical relevance and current evidence. Nurses, working as individuals and as members of interdisciplinary teams, are ensuring patient safety and quality care. VA nursing staff make significant contributions toward achieving desired outcomes (performance measures) by transforming the work environment through improved patient care delivery models and advanced nursing practice.

Over the past six years, VA Nursing Service has developed a National Nursing Strategic Plan with six overarching goals: Leadership Development; Technology and System Design; Care Coordination and Patient Self Management; Workforce Development; External Colfor our veterans.

In my experience, the spirit of VA nursing is best described by these 10 important two-letter words: "If it is to be, it is up to me." I'm reminded, though, that "Words to live by are just words unless we live by them." VA nursing staff do live by these words!

Finally, to our VA nurses, 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 curiosity is the "WHY" chromosome on which VA nursing staff build their practice.

Caring for men and women spanning multiple generations calls for new approaches and perhaps some revamping of our unique programs.

VANOD program is being implemented throughout the Veterans Health Administration to build a national database of clinically relevant, standardized, nursing-sensitive indicators that support strategic decision-making through internal and external benchmarking for all patient care areas.

VHA has long endorsed a measurement system that evaluates and summarizes organizational performance. The measures are selected based on organizational prilaboration; and Evidence-Based Practice. Developing strategic initiatives for each of these goals has been a priority.

Contributions from every level of the organization have made it possible to move VA to the forefront of the professional nursing community. These efforts have significantly contributed to higher staff and veteran satisfaction, lower than national average staff vacancy and turnover rates, and, most importantly, outstanding care

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 all of you "bright lights" in many corners across VA shine the way to move forward.

For more information on VA nursing, go to vaww1.va.gov/nursing

Serving In Harm's Way

Female VA employees have been deploying to Iraq and Afghanistan in record numbers. Here are some of their stories, in their own words.

omen are serving on the front lines in the war on terror in record numbers. Fifty-one women have been killed in Iraq and more than 370 wounded as of April 2006, according to the Department of Defense.

They are our mothers, daughters, sisters and friends. And increasingly, they are our colleagues as well. More than 700 female VA employees have been called to active military service since 2001. Through an informal survey conducted via e-mail to VA nurses, social workers and women veteran health managers, VAnguard uncovered the stories of about 50 female employees who deployed to combat zones in Iraq and Afghanistan.

Their stories are raw and emotional. Many shared similar fears, such as anxiety over the constant threat of attack. Others struggled with the grim realities of treating combat casualties. All shared the hardships of separation from family and friends, and the lack of privacy or creature comforts. Here are a few of their stories, in their own words.

Rosanne DeFelippo Haynes, registered nurse, James A. Haley Veterans' Hospital, Tampa, Fla.

I was deployed as a registered nurse at the 332nd CASF (Contingency Air Staging Facility) in Balad, Iraq, from June to September 2004. Our mission was to take care of patients and prep them for aeromedical evacuation. All patients who were airlifted out of Iraq went through our facility.

We worked 10-16 hours a day, six to seven days a week. Most of my time was spent doing direct patient care and hands-on education with junior technicians and nurses. Injuries included psychiatric, orthopedic, head, abdominal, chest, burns, amputations and shrapnel wounds. In addition to patient care, I would sometimes be assigned as the shift leader and would be in

charge of the mission/flight out.

I also spent a lot of time seeking shelter due to mortar/rocket attacks. During my tour the base went into alarm red (attack imminent or in progress) 143 times



For Rosanne DeFelippo Haynes, serving in Iraq was an opportunity to fulfill a longtime ambition to follow in the footsteps of Florence Nightingale and other wartime nurses.

and each attack had between one and 25 mortars or rockets. You were constantly on your guard and scanning where you would take cover during the next attack.

I joined the Air Force Reserve in 1995 because I wanted to do wartime nursing. I joined knowing that one day I would take part in history and do combat nursing. I was always drawn to it and enthralled by the nurses who served before me in Vietnam, Korea, WWII, WWI, and all the way back to Florence Nightingale in the Crimean War. These women were pillars of strength to me and I wondered if I had what it took.

Prior to my deployment I was a trauma/surgical/burn ICU and ER nurse. I considered myself pretty seasoned and prepared for almost anything. Two days before I left we came under the worst attack of my tour and I was a first responder for a young man who suffered a triple amputation. A large rocket landed 1 foot behind him. The attack literally blew his legs off. There was blood, bone, tissue and shrapnel everywhere and he lay on the ground ashen and covered with sand, awake and watching our every move.

While I was in the ambulance transporting him to the surgical hospital, I was trying to keep him conscious and talking ... I started to run out of things to say (and I am quite a talker) so I told him, "You have the most beautiful eyes, but I guess all the girls tell you that." At that point he actually smiled and said, "No ma'am, they don't." He asked for pain medicine and I told him "soon," and then he went unconscious.

The trauma surgeon said his were the worst injuries he had seen in his whole 12-month tour. This young man survived, got married and the last I heard has amazing drive and determination and is adapting. Not a day goes by that I don't see this young man, and although it is a painful memory, I know I was part of a team that made a difference.

I value life and happiness differently now. I count my blessings daily. My deployment was by far the highlight of my military and nursing career. Nothing I did before and nothing I have done since compares. My experience is a piece of who I am, but it's just one piece; I am learning how to deal with that now.

Dawn R. Perry, program support assistant, Minneapolis VA Medical Center

I served eight months in Baghdad from February to mid-September 2004, and four months in Balad/Anaconda from mid-September 2004 to January 2005, with the 785th Medical Company (Combat Stress Control). Our mission in Iraq was to treat soldiers for combat stress in country. I performed a variety of tasks, including convoying for food, running clinic, client care and

security at all times.

I was surprised how open the Iraqi people were to the Americans and their eagerness to learn some Western ways. I had the opportunity to assist with a dental program at an elementary school in the Green Zone in Baghdad. The children were fascinated with us and I with them. Children are children no matter where they are in the world.

The mortar attacks will always be vivid in my mind. I truly feel blessed to have experienced war and come home alive.

I missed family, home and the freedom to move about without fear and speak your mind if you so desire. The simple things like running water, bathrooms, green grass and being able to drive whenever and wherever you want. It is the simple things in life that Americans have taken for granted.



Dawn Perry with a group of Iraqi schoolchildren.

After returning home and back to work at the VA, I found myself unable to handle clinic so I accepted a new position. My supervisors, Carole Hutchinson and Sheila Sheridan, have been wonderful at helping me orient back into civilian work life again. All of my coworkers in clinic and my current position have been so supportive. I do need to thank them all for their kindness, care and concern. Thank you, Minneapolis VA!

Alisha Juneau, social work intern, Tuscaloosa, Ala., VA Medical Center

I joined the service when I was 17 years old, as a senior in high school, because I thought it would be adventurous, and it was! I don't have family in the service, but I knew it was something I wanted to experience as an individual.

I served in the Army Reserve from September 1997 to September 2005 and deployed to Mosul, Iraq, from April 2003 to April 2004 as a fuel supply specialist with

the 851st Quartermaster. While in Iraq I spent most of my time on convoys transporting bulk fuel (5,000-gallon tankers) from Mosul to Telafar. My platoon also set up and ran the bulk fuel farms in these locations, as well as several retail fuel sites.



"Nothing I have ever done compares with my deployment experience," says Alisha Juneau.

My most memorable experience was crossing back into Kuwait after more than 11 months in Iraq. We were all so tired after being on the road for three days. When we went through the barricade we stopped and signed our unit name on the wall with spray paint, like all the units before us. It was a great feeling to be in a safe zone.

The thing I missed most about home was stability. Being deployed, we never knew where we were going and for how long we were going to be there. You just had to be flexible and adapt or you would lose your mind. Nothing I have ever done compares with my deployment experience. Never will! I will say that the convoy training I received while in the reserves was very realistic in comparison to the many convoys I went on in Iraq.

People are always shocked when they learn that I am an OIF veteran. My co-workers are very supportive and grateful for what my fellow soldiers and I have done. There is definitely a sense of pride that comes along with being a combat veteran.

Leanne Desiree Weldin, assistant Veterans Service Center manager, Seattle VA Regional Office

I served as a transportation officer with the 2220th Transportation Company, Arizona Army National Guard, and deployed to An-Nasiriyah, Iraq, from March 2003 to March 2004. My primary duty as convoy commander was running convoys of loaded trucks to various locations, mostly between Baghdad and Kuwait.

The biggest surprise was the primitive living conditions. There were no latrines, no tents, nothing available when we first arrived at the bombed-out Iraqi Air Base in southern Iraq. We slept on our trucks or in an open, metal-sided Iraqi warehouse for six weeks until we could set up our tents. It also took a month to get plywood to make burn latrines.

The worst part was living in noisy, dusty tents for 11 months. When the sandstorms hit, all gear and soldiers inside were covered in a thick layer of dirt and fine sand. I chased out snakes, camel spiders and mice with a boot or the butt of my rifle. There was little privacy or peace and quiet.

The most memorable part was interaction with the Iraqis. Sometimes we had humanitarian missions, and we worked with friendly, smiling Iraqis. Other times it was terrifying, as they had weapons or were staring at us in hostility. The kids were cute; they loved to smile and wave at us or touch us in amazement.



Leanne Weldin ran convoys of loaded trucks in Iraq.

I missed my husband and two kids the most. My kids had a hard time talking to me on the phone, and I could not tell them much of what I was doing. My husband was having difficulties in the single parent role, and there was nothing I could do to help him.

My deployment was the most challenging experience I have ever had, but I can now say it was one of the best times of my life. It was miserable and scary some days, yet God gave me peace and inner strength I never knew I had.

The camaraderie in our company was life-altering for me. Even though we sometimes got on each other's nerves while on post, we still pulled together off post when a truck broke down or when bullets were flying. I am grateful for having known the soldiers in my unit and would put my life in their hands again any day.

Editor's note: Watch for more of these stories in the next issue.

Strength, Commitment, Compassion

Celebrating 75 Years of VA Nursing

s the nation celebrated National Nurses Week May 6-12 under the banner "Nurses: Strength, Commitment, Compassion," the world's largest nursing service celebrated 75 years of strength, commitment and compassion in serving America's veterans. This year is VA nursing's 75th anniversary.

VA Nursing Service could easily add these key words to its celebration theme: "performance, teamwork, recruitment." Those words describe the challenges and initiatives that unify today's VA Nursing Ser-

vice and shape its future. They are clarified in an updated National Nursing Strategic Plan with six overarching goals: Leadership Development; Technology and System Design; Care Coordination and Patient Self-Management; Workforce Development; External Collaboration; and Evidence-Based Practice.

Under that plan, VA nurses are leading the way in their profession with initiatives that will change the way nurses interact with both clinical staff and patients, and measure nursing performance. In the process, their jobs will become both more

challenging and fulfilling and call for a higher degree of professional development and personal commitment than ever before. VA Chief Nursing Officer Cathy Rick says her nursing staff—all 61,000-plus of them—are more than up to it.

She points to the active involvement of nursing staff at all levels in developing strategic initiatives to achieve each of her strategic plan's goals. She cites the following examples:

The Clinical Nurse Leader pilot project to enhance evidence-based practice of patient-driven care;

The TEACH pilot (Transforming Education Affiliations for Clinical Horizons) to expand and explore new models of academic preparation for nurses; and

The VA Nursing Outcomes Database (VONAD) program being implemented throughout VA to build national databases of standardized indicators of quality and workload to support strategic decision-making and benchmarking.

Improving quality of care and process efficiency without interfering with compassionate care is on the minds of Cathy Rick and VA nurses. "Our clinical initiatives contribute to both staff and patient satisfaction," Rick said. "That helps with work force planning in a very tight recruiting market where we enjoy staff vacancy and turnover rates



This year's national nurse award winners (standing left to right) Lizabeth Weiss, Kathleen Ober, David Foley, Paul Loveric, Robert D. Smith and Joseph Williams Jr. with VA Deputy Secretary Gordon Mansfield. The awards were presented at a special VA Central Office ceremony in May.

well below hospital industry national averages."

Best of the Best

It's the biggest and arguably the best single group of nurses in the world. To be selected "Nurse of the Year" in any VA medical center is a high professional honor; to receive one of VA's four annual national Awards for Excellence in Nursing is recognition as the best of the best. Those awards were presented by Deputy Secretary Gordon Mansfield at a special VA Central Office ceremony in May; the winners are:

Nurse Practitioner - Kathleen Ober, R.N., Ph.D., San Diego VA Healthcare System

Kathleen Ober is a leader in managing population groups and integrated programs that cross services and disciplines. Her VA career has expanded from providing primary care, women's health care and homeless outreach to developing and coordinating two programs addressing special needs of veterans.

Registered Nurse - David Foley, R.N., Louis Stokes Cleveland VA Medical Center

David Foley is a staff nurse in long

term care and played an integral role in the development and implementation of the medical center's Restorative Care Program. He was responsible for implementing the Continuing Adult Restorative Exercise and Socialization Program in long term care.

Licensed Practical Nurse - Paul Loveric, L.P.N., VA Western New York Healthcare System, Buffalo Campus

Paul Loveric works on a 25-bed acute medical unit at the Buffalo VA Medical Center, where he has made significant contributions to the care and management of patients. He carries out the most complex practical nursing care assignments and frequently volunteers for additional tasks.

Nursing Assistant/Health Technician - Robert D. Smith, Alaska VA Healthcare System

Robert Smith is a health technician at the Alaska VA Outpatient Surgical Clinic. He is always looking for opportunities to streamline processes to improve quality and access to care.

Mansfield also presented two Advancement of Nursing Programs awards at the ceremony. The winners of those awards are:

Joseph Williams Jr., R.N., director, Hampton, Va., VA Medical Center Joseph Williams Jr. both facilitates and actively participates in the incorporation of contemporary nursing practice throughout the Hampton VA Medical Center and VHA. He consistently provides vital input on critical issues impacting nursing care delivery, and promotes a strong nurse recruitment and retention effort at the medical center.

Lizabeth M. Weiss, R.N., associate director for patient/nursing services, VA Western New York Healthcare System

Lizabeth Weiss was actively involved in the development of a nurse manager core curriculum that was recognized by the New York State Organization of Nurse Executives as a "best practice." It has been accepted and used throughout VA to orient and educate new nurse managers and as a reference for aspiring nurse leaders. Weiss is an active mentor to interns and new nurse managers.

By Chris Scheer

Reflections on VA Nursing

As part of the Office of Nursing Services' celebration of its 75th anniversary, VA Chief Nursing Officer Cathy Rick asked VA nursing staff to write responses to "Why are you a VA nurse?" or "Your special moment as a VA nurse?" She received more than 150 thoughtful responses, each as unique as the individual who wrote it but sharing a common theme of respect and honor for veterans.

Here are a few answers to Rick's question. The rest, along with the Office of Nursing Services 2006 Annual Report, "Journey of Excellence: Celebrating 75 Years of VA

Nursing," which outlines the historical achievements of the nation's largest organization of nurses and focuses on initiatives underway to meet today's and tomorrow's challenges, are available on the Office of Nursing Services' Intranet site at vaww1.va.gov/nursing. Just click on "The Heart of a VA Nurse."

'I couldn't sleep because of the noysiz'

It's 1982 and I am a fairly new nurse. I transferred to the Brooklyn VA from the VA in Boston, Jamaica Plain Campus, and I am new to New York. My background up until then was in psychiatric nursing and I have just started to work in the medical intensive care unit. One morning as I was making rounds on my patients, I greeted one veteran who was somewhat grumpy.

"I couldn't sleep at all last night because of the noysiz," he told me in his Brooklyn accent.

"The noises? What kind of noises?" I asked. Ha! I'm back on my turf—ICU psychosis? Sundowning? Sleep deprivation?

"You know, the noysiz," he repeated.



Miriam Cohen

I'm getting more comfortable. I start asking about hallucinations and I explain that being in the ICU is stressful and that sometimes patients will hear things that are not actually there. I try to make him feel more comfortable with this, but he gets grumpier.

"It's the noysiz that kept me up all night. You know, youse guys, the *noysiz*," he emphasizes.

I take a better assessment. He is not confused or disorga-

nized. Something does not make sense. "The 'noysiz?'" I think to myself. And then I get it.

"Oh," I said. "The nurses. The nurses kept you up all night." And I was right. The nurses were too noisy and they kept him from sleeping. I had to get used to the Brooklyn accent much more quickly. - Miriam Cohen, R.N., nurse practitioner, New York Harbor Healthcare System, Brooklyn Campus

Was this Fate?

Hungry and cold sat the brown-eyed Korean American girl and mother in the one-room house in Pusan, Korea, listening for the airplane

overhead to drop the bomb.

Time passed and the girl was in an orphanage in Seoul, waiting for Christmas and the snow. Seeing Santa Claus for the first time gave her pause, but she knew he was an American soldier, after all. The train with soldiers passed nearby and the people scrambled on the hillside as the soldiers threw them coal, more valued than gold.



Sandra Leatherwood

The girl was adopted at age 5 by an American family and grew up in Bonham, Texas. She chose a career in

nursing without much thought and left home for the second time.

Returning as a young woman and nurse to Bonham, home of Sam Rayburn, the late House Speaker, she took a job with the VA and planned to stay two years. Two years turned into 23; was this fate or divine intervention?

- Sandra Leatherwood (Kim Jung Ai), R.N., performance improvement nurse consultant, VA North Texas Health Care System, Bonham Campus

(Dedicated to my father and Korean War veterans)

A Traveler's Tale

I came to Florida in 2000 from the Greater Philadelphia area as a travel nurse in critical care, with my entire family of six in tow. I wanted to explore opportunities in area hospitals, escape the bitter cold winters, and be able to go to the beach whenever I wanted.

I enjoyed traveling nursing for several years, taking three-month assignments and at times even extending



J. Mia Arocho with her daughter Amanda, a Navy corpsman.

them. I spent over a year at one facility as a traveler but I often found that the institutional focus on the business aspect of the health care industry ran contrary to my fiercely embedded notion of nursing as ho-

listic as it relates to the individual, and nursing practice as collaborative as it relates to the art of healing.

If someone were to ask me why I'm a VA nurse, considering all the choices I had as a traveler, I would have to say, "Because the VA is the best place to practice genuine nursing." I have never worked anywhere else where the mission statement of the organization, "Honor America's veterans by providing exceptional health care that improves their health and well-being," so honestly reflects the heart of the staff, and is walked out day to day by everyone throughout the ranks.

My many quiet, special and memorable moments as a VA nurse are beyond compare and too numerous to mention. When I reflect on the sacrifice our veterans have made and that active duty military members continue to make to protect the freedoms we enjoy in this country, it gives me an enormous sense of pride in being able to serve them. - J. Mia Arocho, R.N., staff nurse, New Port Richey VA Outpatient Clinic, Pasco County, Fla.

Last year, some
94,000 volunteers
donated 13 million
hours of their time at
VA facilities. As VA
Voluntary Service marks
its 60th anniversary,
the value of the
department's volunteers
cannot be overstated.



DIANE FREEMAN

The Lifeblood of VA

ith loving hands and a keen eye for detail, Lottie Whitmore sews a button on a wrinkled and well-worn shirt, restoring it to usefulness and bringing a bit of joy to a Tennessee veteran. That task completed, she picks up a pair of knitting needles. They flick back and forth as she puts the finishing touches on a new stocking cap. By the time autumn's chill arrives, Whitmore will have knitted a hundred or more, and an equal number of veterans will be a little warmer.

Whitmore's simple acts of kindness are repeated a thousand times

over—they are everyday occurrences at VA medical facilities throughout the country—thanks to the dedicated corps of volunteers serving alongside VA staff.

Volunteers are "visible proof, especially to our combat-wounded, that the nation deeply appreciates the many sacrifices of our veterans," VA Secretary Jim Nicholson said in May as VA marked the 60th anniversary of VA Voluntary Service (VAVS).

For the past 30 years, Whitmore, 80, has volunteered at the Alvin C. York Campus of the VA Tennessee Valley Healthcare System in Murfreesboro. Her husband, Lee, who retired from the Air Force following a 23-year career, has been a York volunteer since 1989.

In March, the two were involved in an automobile accident that has left her temporarily homebound with a broken back. No worries, though. It just gives her more time to sew.

"I wish I had counted all the buttons I've sewn and all the zippers I've replaced," Whitmore said. "Probably more than a thousand! I've balanced checkbooks and written letters for patients and knitted more stocking caps than I can think

feature **VA**nguard

of," she said. "I'm not comfortable sitting around," she added, which makes her anticipated six-month recuperation period all the more challenging.

"Our volunteers take your breath away with their spirit, selflessness and dedication," Dr. Jonathan B. Perlin, VA's under secretary for health, said at the VAVS conference in May.

It was during that conference that Perlin awarded Harriett L. Howard the Female Volunteer of the Year award (see sidebar for a complete list of award winners). Howard, a retired member of the

The History of VA's **Corps of Volunteers**

For as long as the United States has had veterans, the nation has also had men and women who volunteered to help in the care of the wounded, the sick and the injured.

But 60 years ago, a partnership was formalized when the Veterans Administration created an office to oversee the volunteers assisting at the agency's facilities. In April 1946, former General of the Army Omar Bradley, then head of the VA, convened a meeting of veterans groups and welfare organizations to establish a national plan for volunteer assistance at VA facilities. From that meeting grew the Voluntary Service Office that now works with more than 60 national groups to provide volunteers for the Department of Veterans Affairs.

Volunteers assist hospital staff. They work in nursing homes, hospital wards, clinics, recreational activities, end-of-life care and many other programs. They also work in national cemeteries and benefits offices.

Navy WAVES (Women Accepted for Volunteer Emergency Service), has volunteered at the Murfreesboro facility since February 1988, donating more than 7,400 hours of service.

"As long as there's a breath in

spirit of volunteerism was cultivated by society. That spirit waned in the aftermath of Vietnam, when American culture became markedly more materialistic, even hedonistic by comparison.

But that trend is changing

"I do my best when I'm helping someone else. If we all did that, just think what a world we'd live in."

me, I'll serve my fellow veterans who risked it all for the freedoms we enjoy today in America," Howard, 82, told the Murfreesboro Daily News Journal. "And with the new wave of Iraq war veterans coming on line, this is no time to cut back on health care for our brave soldiers."

The Whitmores and Howard are typical of today's VA volunteer: middle-aged or elderly, most in their 50s, 60s or 70s, reared in the days following World War II when a

somewhat, at least as evidenced by rates of volunteerism today, according to Laura Balun, VA's director of voluntary services.

"More and more, baby boomers are looking for ways to 'give back' to their communities," Balun said. "They're seeing their children, or friends of their children, going overseas to fight, and they want to find ways to ensure they're taken care of when they return.

"I think more families are par-

Male Volunteer of the Year

George Risdale, American Red Cross

Stratton VA Medical Center, Albany, N.Y.

Female Volunteer of the Year

Harriett L. Howard, WAVES National

VA Tennessee Valley Healthcare System, Murfreesboro

Award for Excellence

Joseph "Joe" Dooley

Edith Nourse Rogers Memorial Veterans Hospital, Bedford, Mass.

James H. Parke Memorial Scholarship

Andrew Layton

Battle Creek, Mich., VA Medical Center

American Spirit Award (Student Recruitment)

Margaret Trunick, VAVS Program Manager

Battle Creek, Mich., VA Medical Center

American Spirit Award (Corporate Recruitment)

Ralph Marche, VAVS Program Manager

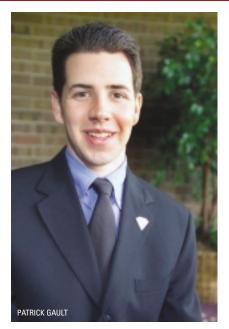
Boston VA Healthcare System, Brockton

American Spirit Award (Senior Recruitment)

Frank Cimorelli, VAVS Program Manager

Northern Arizona VA Healthcare System, Prescott

feature VAnguard



Battle Creek, Mich., VA Medical Center volunteer Andy Layton, 17, was awarded the James H. Parke Memorial Scholarship, which comes with a \$15,000 grant, for his work at the facility. He is writing his second book, about two Battle Creek former POWs. His first was published when he was 16 years old. Layton has volunteered more than 400 hours.

ticipating in the rehabilitation of their loved ones, particularly at our polytrauma centers, and now they're seeing how they can help other veterans. The more they see, the more they want to serve as volunteers," Balun said. "And, I think many 'boomers' just didn't have time before—we were out pursuing careers and raising families."

One of Balun's goals at VAVS is to increase by 5 percent the number of baby boomer volunteers—those in their 40s, 50s and 60s.

Leading the charge of younger volunteers is Andy Layton, who has donated more than 400 hours of his time at the Battle Creek, Mich., VA Medical Center. Since 2003, he's worked on the Veterans History and Stories of Service Projects, audio-and videotaped recollections of veterans. He also has completed work on a documentary video about VA volunteers. Last year, his book about Michigan's fighter aces, Wolverines in

the Sky, was published. In May, he was named winner of the James H. Parke Memorial Scholarship, and received a \$15,000 educational grant.

Layton is 17 years old.

"We all need to encourage more young people like Andy to serve those who have served," Balun said.

"Some veterans—and active duty folks—use volunteer work as a way of transitioning back into civilian life, and as a means of developing marketable skills," she added. "If our facilities can identify jobs that our young people want to do, we can make their volunteer experiences more meaningful and more relevant."

In the process, she hopes that facilities across the country can cultivate a cadre of young volunteers to augment the older volunteers.

At the VA medical center in Beckley, W.Va., voluntary service officer Cheryl Yost told the local newspaper that volunteers often benefit as much as those they serve.

Volunteering, she said, "helps

them forget about their own problems, and it gives them purpose in their lives. Many of the volunteers have told me the patients are therapy for them."

She also told the *Beckley Register-Herald* that volunteering is an act of patriotism.

"How many other places do you get to care for American heroes every day? Our volunteers love what they do. You can't put a price tag on what they do. To them, taking care of our veterans is a way to show honor for our military and for our country."

Volunteers also get a truer sense of self-worth when they are serving others, Yost said.

Murfreesboro's Lottie Whitmore, who has donated "around 17,000 hours," underscored that philosophy. "I do my best when I'm helping someone else," she said. "If we all did that, just think what a world we'd live in."

By Tom Thomas

What's 13 Million Hours?

In 2005, some 94,000 volunteers donated their time at VA facilities. The department would have needed 6,200 employees to replace the time donated by the volunteers, at a cost of nearly \$228 million. The total number of hours donated? Thirteen million. You can get a lot done in that amount of time. Consider:

- If you worked full-time, 40 hours each week for 50 weeks each year, you'd only need 6,500 *years* to reach 13 million hours.
- 13 million hours ago, in the mid-6th century, Buddhism was being introduced to Japan, and the numerals we use today—Arabic numerals were being developed.
- Driving at 55 mph, you could drive 715,000,000 miles—or make the

round trip from New York to Los Angeles 119,167 times.

■ If you had to pay for 13 million hours worth of labor at the national minimum wage of \$5.15 per hour, it would cost \$66,950,000—about three-fourths of the money won by golfer Tiger Woods. *Last year*.



VAnguard feature

National Cemetery Memorials Online

A searchable database of all memorials on National Cemetery Administration property will soon be accessible to the public online.



On Feb. 18, the fourth monument to the U.S. Colored Troops in the national cemetery system was dedicated at Nashville National Cemetery, adding a new structure to commemorate America's Civil War. Civil War commemoration is the third highest ranked category of monuments in the national cemeteries.

he first-ever comprehensive survey of monuments and memorials under National Cemetery Administration jurisdiction is now complete, and a searchable, online database of the memorials is in development. The database will be updated with information on new memorials as they are added to national cemeteries.

Through a partnership between NCA and Save Outdoor Sculpture,

nearly 3,000 individuals from around the world contacted the administration about participating in the three-year Memorials Inventory Project. In all, 372 volunteers were assigned to document monuments and memorials in 95 national cemeteries, soldiers' lots and monument sites under NCA's jurisdiction. Twenty-five NCA properties were found to contain no memorials.

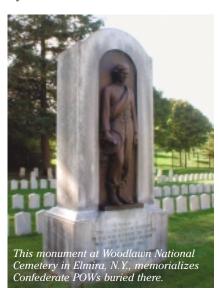
As the project got underway, the initial estimate of 300 memorials on NCA property was quickly eclipsed. Volunteers documented more than 1,000 memorial objects, including carillons, historic "gun monuments," plaques, headstones, and other objects. Because VA defines a monument or memorial as a commemorative object erected at a site that is not a grave, many inventoried objects had to be reclassified. After the reclassification of non-memorial objects, the number of true memorials stood at 834—nearly triple the original estimate.

The survey revealed a marked rise in the number of memorials erected in national cemeteries beginning in the 1980s. One explanation for the profound increase in

memorials over the past 25 years is the introduction of memorial walkways in the new national cemeteries. Simply put, the walkways offer places to put memorials; in the past, precious burial space was sacrificed to provide for memorial placement.

The final report on the project, along with listings about the memorials found on NCA properties, is available at www.cem.va.gov/histhome.htm.

By Darlene Richardson



Artistic memorials on Smithsonian database

In January, as part of the Memorials Inventory Project, the NCA History Program transmitted survey data and photographs on 80 of its most artistic and sculptural monuments to the Smithsonian Institution's American Art Museum for entry into its SIRIS database. These memorials are accessible to the public through their Web site at www.siris.si.edu. Click on "Art Inventories," listed under the "Smithsonian American Art Museum Research Databases" section.

An easy way to go directly to all 80 NCA memorials is to select "Keyword" search from the green bar at the top of the first search screen. Then type "Memorials Inventory Project" in the General Keyword box and "National Cemetery" in the Owner Keyword box.

Memorial L

In the field

Above: Cemetery caretakers at the National Memorial Cemetery of the Pacific in Hawaii prepare to raise the 20-by-38 garrison flag that flew from the cemetery's main flagpole during Memorial Day weekend ceremonies.

Below: At Fort McPherson National Cemetery in Maxwell, Neb., red carnations are arranged on the grave of a B-24 crew shot down during World War II. The original interment took place in 1949, but additional remains were later located and a second full military funeral was held last June. SAN DIEGO UNION-TRIBUNE PHOTO BY NADIA BOROWSKI SCOTT

Top: Some 1,800 Boy and Girl Scouts volunteered to place flags on all 42,000 graves at Tennessee's Memphis National Cemetery. Scouts have been placing the flags for Memorial Day there for the past 22 years. It takes them less than two hours. About 200 people attended the Memorial Day ceremony at the cemetery.

Above: Genevieve King and her children, Stephen and Monique, visited the grave of King's son, Marine Lance Cpl. Marcus Cherry, at Fort Rosecrans National Cemetery in San Diego. Cherry was killed in Iraq while serving with the 1st Marine Division. King and her children were among the estimated 2,000 people who attended the Memorial Day ceremony at the cemetery.

GENE LINXWILER

Day 2006

Top left: Attendees at the Women In Military Service Memorial's annual Memorial Day program pay tribute to fallen comrades by tossing rose petals in the memorial's reflecting pool.

Bottom left: President Bush laid the traditional wreath at the Tomb of the Unknowns at Arlington National Cemetery.

Above: Children who have lost parents in Afghanistan and Iraq were honored at the Time of Remembrance ceremony May 21 on the National Mall. During the event, which was sponsored by the White House Commission on Remembrance, Marine Gen. Peter Pace, chairman of the Joint Chiefs of Staff, and VA Secretary Jim Nicholson presented a specially designed medal to David Smith, 12. Smith's father, Army Sgt. 1st Class Paul Smith, was killed in Iraq and received the Medal of Honor posthumously. Smith represented all of the children of fallen service-

Below: Tens of thousands of motorcycles roared through the nation's capital on May 28 as part of Rolling Thunder, an annual Memorial Day weekend event held to honor veterans, prisoners of war and those missing in action. The ride circles through downtown Washington, ending at the Vietnam Veterans Memorial.

PRISCILLA KATES

and in the nation's capital

PRISCILLA KATES



of Their Own

hrough more than 60 years of change, the VA home loan guaranty program has stayed true to its mission: helping veterans become homeowners, and helping them stay in their homes.

The loan guaranty program was first created for veterans of World War II at a time when loans for homes were officially encouraged to help avert a post-war economic recession. Sixty-two years later, the program has expanded to include veterans of all succeeding wars, peacetime veterans, men and women on active duty, surviving spouses and reservists. Central to the program is the goal of helping those who served the nation in uniform, and their families, achieve the American dream of homeownership.

The loan guaranty program was originally part of a national effort to move from a war economy to a peacetime economy and to avoid the economic recession historically associated with postwar periods. The program was one of the innovations advanced by the Servicemen's Readjustment Act of 1944 (PL 78-346), known as the GI Bill of Rights. By offering loan guaranties, the government could provide the housing benefit to the veteran at little cost.

Loan guaranty program legislation regarding eligibility, financial coverage and types of loans has changed over the years with a changing economy and military force.

When the loan guaranty program began in 1944, the maximum

amount of guaranty was limited to 50 percent of the loan for a maximum of \$2,000. Loans were limited to a maximum of 20 years and a maximum interest rate of 4 percent. The law specified that the purchase price, including the value of the land, could not exceed its "reasonable normal value." Loans could be used for the purchase, construction, improvement or repair of residential property that veterans intended to occupy as their homes.

Veterans were required to have served in the active U.S. military forces for a period of 90 days or more anytime on or after Sept. 16, 1940, and before official termination of World War II. A veteran had to apply for this benefit within two years after separation from the ser-

vice or two years after the official end of the war. No applications would be received five years after the end of the war.

Change began almost immediately. In 1945, the delimiting period was increased to 10 years, the maximum guaranty doubled to \$4,000 and the home loan limit was extended to 25 years. Today's home loan guaranty program covers servicemembers on active duty or in the military reserves; can accommodate standard 30-year mortgage loans or graduated payment loans; has no entitlement delimiting date; charges a funding fee; can be used to purchase manufactured housing; allows restoration of initial eligibility; and provides direct loans for Native American veterans building on Trust lands.

"The core benefit of the program offered to veterans under the GI Bill of 1944 was the opportunity to buy a home without making a downpayment," said Keith Pedigo, director of Loan Guaranty Service in the Veterans Benefits Administration, "and that feature remains the program's centerpiece today." Ninety-one percent of the 1.6 million loans worth \$202 billion guaranteed by VA in fiscal years 2001 through 2005 were made without a downpayment.

VA's loan guaranty program not only makes it easy for veterans to buy a home, it helps them keep it. The program provides comprehensive service to assist veterans who become seriously delinquent on making mortgage payments. Analysts and counselors at nine VA regional loan centers work closely with veterans and lenders to find ways to avoid foreclosure.

The mortgage holder first notifies the defaulting borrower to determine the reason for default and

Opposite: Iraq war veteran Rob Laurent holds son Cameron, and wife Briley holds son Robert Casey outside their new home. make arrangements to make up the missing payments, but after three missed payments, the default must be reported to VA (VA encourages veterans to call before that). The regional loan centers then go to work to protect the interests of the veteran-borrower and the government by personally contacting the borrower to offer financial advice and, perhaps, intercede with the lender to obtain forbearance or arrange a reasonable repayment schedule.

In fiscal year 2005, VA contacted more than 300,000 veterans and offered assistance. VA staff set up repayment plans with lenders for nearly 9,000 veterans that enabled them to catch up on mortgage payments and avoid foreclosure. "Not only did we help these veterans save their homes," Pedigo explained, "VA avoided approximately \$187 million in foreclosure costs under the guaranty."

Between 1996 and 2002, VBA consolidated its loan guaranty operations from 46 regional offices to the nine regional loan centers (with a small office in Honolulu). Technological innovation made this possible and also made the process of obtaining a VA loan much quicker for the veteran.

Lenders can now order appraisals required by the home loan program online and appraisals can be sent electronically to lenders and VA. Many veterans can obtain their VA certificate of eligibility online, and lenders can submit loan information needed by VA and receive the loan guaranty electronically within 24 hours. To speed the loan approval process even more, VA has delegated to lenders the authority to review and determine the appraised value of the property as well as process and approve the veteran's loan application.

Latest changes to the program have added flexibility to match the dynamic nature of the housing market and new financing instruments. The Veterans Benefit Act of 2004 changed the maximum guaranty amount for certain loans in excess of \$144,000 to an amount equal to 25 percent of the Freddie Mac conforming loan limit for a single family residence. In practical terms this means that the maximum no downpayment loan that a veteran can obtain will always be the same as the conventional conforming limit. Presently that amount is \$417,000. Each January the limit is adjusted based on the average cost of housing in the United States for the previous year. The VA guaranty is adjusted commensurately.

The new law also extended authority to make traditional and hybrid adjustable rate mortgages to Sept. 30, 2008, and extended loans under the Native American Veteran Direct Loan Program to Dec. 31, 2008. In addition, the 2004 law expanded the definition of disabled veterans to include veterans who are rated eligible as a result of a pre-discharge disability examination, thereby increasing the number of veterans not required to pay the funding fee.

The loan guaranty program also administers the specially adapted housing program, which provides grants to veterans who have certain service-connected disabilities. There are two types of grants: 1) the specially adapted housing grant is generally used to create accessible homes for veterans who have lost or lost the use of both upper or lower extremities. It is currently limited to \$50,000. The special housing adaptation grant is generally used to assist veterans who are blind in both eyes or have lost or lost the use of both hands. It provides the type of adaptations that would give these veterans greater mobility in their homes.

Loan guaranty staff at the nine regional loan centers and Honolulu

provide close personalized service to veterans who go through the grant process to ensure that the adaptations are properly completed.

Since the inception of this program in 1948, VA has made more than 32,400 grants totaling approximately \$581 million. In 2005, 556 grants totaling \$27.5 million were made.

In May 2006, VA Secretary Jim Nicholson marked the award of the

18 millionth VA home loan guaranty with the presentation of a special plaque to Operation Iraqi Freedom veteran Robert A. Laurent at the National Association of Home Builders Annual Spring Conference in Washington, D.C. "The VA home loan program reflects our nation's appreciation of the brave men and women who put on our country's uniforms in defense of freedom and our way of life," he said. "It

also highlights VA's contribution to the achievement of the American Dream, making us a nation of homeowners."

Within a few miles of that presentation stands a brick row house—the very first house purchased with a GI Bill home loan guaranty in 1944 with a 20-year, \$7,500 loan with a 4 percent interest rate.

By Chris Scheer

18 Millionth Home Loan Guaranty Recipient: At Home in Texas

Iraq war veteran Rob Laurent is back in Kyle, Texas, starting a new life in a new home.

The 25-year-old Texan left the Army with a Purple Heart for wounds suffered in Iraq. He says he'd go back in a heartbeat, but now his heart is with his wife Briley and two young children in their new four-bedroom home in Kyle, just outside Austin, purchased with a VA-guaranteed mortgage loan.

"We wouldn't have been able to afford it without the nodownpayment loan," Laurent said.

He and his family also wouldn't have traveled to Washington, D.C., in May if he hadn't used his VA home loan guaranty. He was honored there by VA and the Home Builders Association as the recipient of the 18 millionth home loan guaranty, the latest landmark for a program begun 62 years ago as part of the original GI Bill and credited by historians with transforming America from a nation of renters to one of homeowners.

Laurent is quick to point out that the benefits of homeownership outweigh the challenges. "So far, the only challenge has been to remember not to park in front of the mailbox during the day," said a smiling Laurent, who served four years in the Army before being discharged as a result of combat injuries sustained in Iraq.

"I am very grateful to the VA for not only allowing my family to purchase a new home, but also for the benefits of VA's vocational rehabilitation program," said Laurent. He noted that the program allows him to attend classes at Austin Community College as part of his quest to finish a four-year degree.

The new homeowners say they have enjoyed picking out the paint and flooring while decorating their home, which sits in a new, well-manicured development.

In his study, which occupies the fourth bedroom, Laurent proudly displays a wall full of medals and Army mementos, including his Purple Heart. "One day I will tell my sons about my experiences, but for now they are just too young to understand," he said.

His study houses a professional workstation. "Even the computer, which I use to conduct all my schoolwork, was purchased by the VA," said a grateful Laurent.

In commemorating VA's 18 millionth home loan guaranty, VA Secretary Jim Nicholson presented Laurent, his mortgage banker and his home builder commemorative plaques at the National Association of Home Builders Annual Spring Conference in Washington.

While in Washington for the conference, Laurent and his wife visited wounded soldiers at Walter Reed Army Medical Center, where Laurent had recuperated. "When I was there recuperating I remember numerous visitors who took time out of their day to say 'thank you,' which of course made me feel honored. I wanted to repay that feeling to other wounded soldiers" said Laurent

Laurent's trip to the nation's capital also took him to the city where the first house purchased with a VA-guaranteed home loan by World War I and II veteran Miles Myers still stands—a two-story brick row house in the District purchased new in 1944 with a 20-year, \$7,500, 4 percent loan.

Even though he grew up in Louisiana, Laurent is now a proud Texan who displays his Texas pride in a rather creative and unusual way. Due to his injuries, he wears a glass eye. "When they asked me what kind of eye I wanted, I thought, 'Well, why not give me a Texas eye." And that is what they did. Occasionally, he will switch his authentic-looking glass eye with one that resembles the Texas state flag.

"I have to be sure not to wear the Texas eye when I visit my Louisiana friends and family," he laughed.

By Jessica Jacobsen

Opening Their Hearts

One year after the Veterans Health Administration launched Affirming the Commitment, employees nationwide are embracing the initiative.

ith help from employees at a VA medical center, a homeless veteran moves from a cardboard box to a brick home. A returning Iraqi Freedom veteran—fresh from battle—finds VA employees who listen and help him put his life back together. A World War II veteran recovering from open-heart surgery gets a hand saluting the colors during a television broadcast of the National World War II Memorial dedication

ceremony.

These are just a few of the anecdotes highlighted as part of Affirming the Commitment (ATC), a year-old VHA initiative created to "affirm" employees' commitment to veterans. They are representative of the compassion and commitment displayed every day in VA facilities across the nation.

The ATC initiative kicked off on May 6, 2005, with the distribution of brochures, a poster, a book and an award-winning video. In addition, VA launched a dedicated Intranet site (*vaww.va.gov/atc*) to promote the initiative and serve as a resource clearinghouse.

VA medical facilities across the country have embraced ATC and created unique programs showing their commitment to veterans and honoring their sacrifice to the country. The first anniversary of the program seems an appropriate time to reflect on the successes of the past year.

The Cincinnati VA Medical Center kicked off ATC with an educational module using information from the ATC book and organized an ATC Fair. They also adopted "Affirming the Commitment" as their 2006 customer service slogan.

"As a part of our integrated approach, we provided on-the-spot opportunities for co-workers to recognize one another as well as opportunities for patients to recognize staff," said Joyce Seltzer, educational specialist at the Cincinnati VAMC.

"When we listen to veterans' stories, we are caregivers," said Glen Busby, chaplain at the North Florida/South Georgia Veterans Healthcare System. "When we listen for veterans' stories, we are lifesavers. When we hear the struggles and pain hidden in hard-to-tell stories, we truly begin 'Affirming the Commitment."

Employees there are supporting the care of former POWs through a "Living Documents" project. "The



During the National Salute to Hospitalized Veterans the week of Valentine's Day, the Durham, N.C., VA Medical Center held a Veterans Decoration Day to honor patients in the Extended Care and Rehabilitation Center. Here, patient O'Neil Richardson gets "decorated" with a pin by North Carolina Army National Guard Maj. Jerry Corbett, patient representative at the Durham VAMC. At right is Wilma King, captain in the Army Reserve and physical therapist at the Durham VAMC.



"Documentation of veterans' POW experiences in a public forum validates their sacrifice," says Glen Busby, chaplain at the North Florida/South Georgia Veterans Healthcare System.

project communicates individual POWs' stories as 'Living Documents' through posters and educational pamphlets that remind us of the importance of the memories veterans share," said Busby. "Documentation of veterans' POW experiences in a public forum validates their sacrifice."

Lil Foster, a registered nurse with the Extended Care and Rehabilitation Center at the Durham, N.C., VA Medical Center, proposed recognizing the unique life contributions of each veteran residing in the center in a special way. "I wanted to hear the stories of the veterans we serve, and I believed that sharing their stories would educate and engage VA staff and fellow veterans," said Foster. "The result was Veterans Decoration Day on Feb. 17."

In traditional military style, each veteran was "decorated" with a pin in honor of their service to the country. "The Veterans Decoration Day ceremony was intended not only to honor veterans' accomplishments, but also to affirm the staff's commitment to serving these men and women," said Foster.

The Central Arkansas Veterans Healthcare System kicked off their ATC initiative last November with "A Month of Thanksgiving." The words "A Month of Thanksgiving" and "We're Thankful for Our Veterans" were highlighted on various calendars and posters throughout the facility.

"By making the initiative a monthlong celebration, two-thirds of all employees completed Affirming the Commitment training in November," said Dr. William White, associate chief of staff for education at Central Arkansas. White said similar activities took place during this year's National Salute to Hospitalized Veterans.

In New York, the VA Hudson Valley Healthcare System introduced employees to the ATC initiative by training approximately 80 percent of them with a one-hour class that included showing the ATC video and asking each participant to share a "moment that took your breath away."

Staff members at Hudson Valley also developed a sign at the front gate welcoming all veterans to their facility. Printed on the banner's reverse side are the words "How have you affirmed your commitment to-day?" to encourage employees to reflect on the importance of their service.

"Employees are particularly engaged in the ATC initiative at Hudson Valley and often volunteer to share their own story with us," said Nancy Winter, public affairs officer there.

Across the country in California, the entire Long Beach VA Healthcare System has embraced the ATC campaign, from leadership through the front-line employees, according to Dr. Susan Angell, associate director for clinical support services. "One of our favorite initiatives was combining efforts with the American Cancer Society during their March Daffodil Days campaign," she said. "VA staff bought bouquets of bright yellow daffodils, which are a symbol of hope, and

personally delivered the bouquets to our patients on the wards."

Of particular note, the leadership team delivered a bouquet to a recently returned Operation Iraqi/ Enduring Freedom soldier in the Spinal Cord Injury Unit. A bouquet was also given to his young mother, who was attending to her son's needs. "The leadership team expressed great thanks and appreciation to this soldier and his mom for their enormous sacrifices and offered continued support for their journey ahead," said Angell.

The South Texas Veterans
Health Care System kicked off a
monthlong customer service campaign this past April with ATC as
the central theme. During the observance, a series of educational events,
guest speakers, contests, fun events
and training were available to help
employees better understand and appreciate veterans and their military
service.

As the second year of the initiative gets underway, VHA will soon introduce new ATC promotional products and share best practices from other facilities. To measure employees' commitment to VA and its mission, two questions were incorporated into the all-employee survey that took place this spring. Data from the survey will help assess how well ATC is reaching its target audience.

The ATC video has received numerous accolades, including an Award of Excellence in the Communicator Awards Video Competition, a Videographer Award of Excellence, an Aegis Award, an Omni Intermedia Bronze Award, and the National Association of Government Communicators Gold Screen Award. To date, more than 25,000 employees have visited the ATC homepage, an Intranet site that has received more than 220,000 hits.

By Jessica Jacobsen

VAnguard feature

'Five years. Seven marathons. Second pacemaker. Priceless.' VA cardiac care enables veteran Bob Melcher to achieve his dreams.

amburtus "Bob" Melcher has come a long way to write this slogan for himself since he was pronounced dead on a summer day nearly 30 years ago: "Five years. Seven marathons. Second pacemaker. Priceless."

On Aug. 1, 1977, after waking up to find burn marks on his chest, he was told that while running formations during basic training in the Marine Corps, he suddenly fell to the ground. His heart stopped beating for 7 to 8 minutes and he had to be shocked and resuscitated. After learning that he had an irregular heartbeat, he was put on medications to stabilize it and eventually received a medical discharge from the Marines.

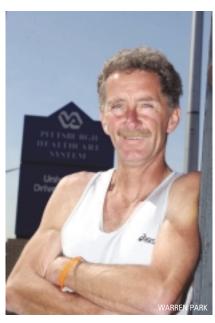
For many years, the medications were enough for Melcher. He received his care and medications from the Lebanon, Pa., VA Medical Center. But eventually his body adjusted to them and he needed a new kind of treatment. He needed a pacemaker. So he was sent to the VA Pittsburgh Healthcare System to enter a new phase of cardiac care.

After he received the first pacemaker and got back in shape, he decided that since he would only live once, he should reach for his dreams and strive to achieve his goals. He had been running all of his life, competing in smaller races and halfmarathons. But his dream was to complete a full marathon.

In July 2001, Melcher completed his first marathon during the Grandfather Mountain Highland Games in North Carolina. This marathon has earned a reputation as "America's Toughest." The race is 26.2 miles long and features a net elevation gain of 1,000 feet. However, runners who successfully complete

the race end up climbing well over 3,000 feet due to the rolling terrain of the course. To make it even more difficult, the last portion of the race—a distance of 13 miles—is virtually all uphill. Bob Melcher has completed this marathon five times.

After six years, Melcher's pacemaker was exhausted. So he received a new one, at VA Pittsburgh.



Melcher: marathoner with a pacemaker.

In November 2005, Melcher ran a marathon in Richmond, Va. When he arrived for the race, he discovered that the terrain was mostly flat, which would make this marathon relatively easy for him. Indeed, he not only achieved a time that was a personal best, he qualified for the Boston Marathon. It was not the first time he qualified, but it was the first time that he decided to save the money, train, and finish this world-renowned marathon on April 17, 2006.

"Someone told me that 1 percent of the population will complete

a marathon," said Melcher. "Only 5 percent of that 1 percent will do the Boston Marathon. I wonder what percentage of them have a pacemaker in their chest?"

Melcher completed the marathon in 3 hours and 9 minutes, 4 minutes faster than his personal best. He finished in the top 10 percent: 2,085 out of 22,000 runners.

"I try hard. I do my best. It's not always about winning, it's about doing your best," said Melcher. He explained that when he runs a marathon, he has two goals. His number one goal is just to finish. But if he is nearing the finish line and sees that he can reach a personal best, or place first, second or third in his age division, then that becomes his second goal.

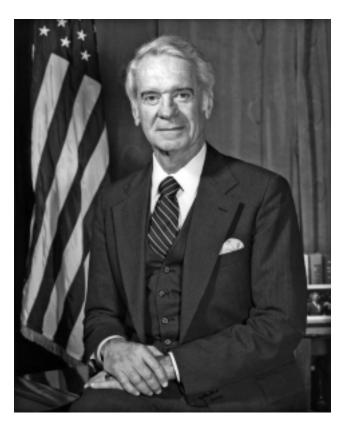
Once a year Melcher makes the four-and-a-half-hour trip to VA Pittsburgh from his home in York, Pa., for a checkup. As it gets closer to the time when he will need a new pacemaker, he'll start to visit twice a year. The VA Surveillance Center calls him every month to check on him and monitor his pacemaker.

Melcher believes that once you achieve one goal, you have to get motivated again and reach higher, towards the next step or goal. The Boston Marathon was one of his goals. Future goals include a 100-mile race, an "Iron Man"-type competition, and the Marine Corps Marathon.

But Melcher credits VA and the care he received from the staff for allowing him to set and reach his goals. "Without the VA, I wouldn't be able to do all of this," he said. "I really want to thank the VA for all they have done for me."

By Shelley Kay Long

Veterans Community Mourns the Loss of a Tireless Advocate



Former Mississippi Rep. G.V. "Sonny" Montgomery, known as "Mr. Veteran" because of his decades of tireless advocacy for the men and women who served in uniform, died in his home state on May 12 at age 85.

A decorated Army veteran of World War II, Montgomery also served in the Korean War while activated as a member of the Mississippi National Guard, ultimately retiring with 35 years of military service and the rank of major general.

He served as a Democrat in the House of Representatives for 30 years, and was chairman of the Committee on Veterans' Affairs for 13 years. Montgomery was the prime force behind an effort to modernize the GI Bill for a peacetime, vol-

unteer force after the Vietnam War. Through his leadership and persistence, the Montgomery GI Bill was enacted in 1984, offering education benefits to National Guard and Reserve personnel for the first time.

Nearly a decade after it was passed, Montgomery said in a speech that the bill offered "a tremendous incentive for bright young men and women to join our armed forces. Smart, motivated young men and women just weren't going into the military."

As chairman of the House Veterans' Affairs Committee, he was also credited, along with then minority leader Gerald Solomon of New York, with the successful elevation of the Veterans Administration to a Cabinet



ROBERT TURTIL



MICHAEL L. MOORE

department. President Reagan signed the legislation giving veterans a seat at the President's table into law on Oct. 25, 1988; it became effective March 15, 1989.

"Sonny left an indelible mark on the history of veterans and military service in America," said VA Secretary Jim Nicholson. "He will be greatly missed."

Born in Meridian, Miss., in 1920, Montgomery joined the Army immediately after graduating from Mississippi State College (now University) in 1943. He received a Bronze Star serving in the European Theater during World War II.

He ran a successful insurance business in Meridian before being elected to the Mississippi State Senate in 1956. He was elected to Congress in 1966 and easily won 14 more terms.

After leaving Congress in 1997, he operated a lobbying firm in Washington, D.C., before retiring and returning to Meridian in 2004. In 2005, he was awarded the Presidential Medal of Freedom, the nation's highest civilian honor, by President Bush. The VA hospital in Jackson, Miss., bears Montgomery's name, as does a conference room in VA Central Office.

Online Weight Management Tool Launched at Golden Age Games



Robert Hugee, an Army veteran from Falling Waters, W.Va., was one of nearly 600 veterans competing in this year's Golden Age Games.

Setting his sights on the twin maladies of obesity and diabetes, VA Secretary Jim Nicholson announced on May 12 the launch of a national registration campaign that allows veterans and their families to move toward a healthier lifestyle by modifying their diet and exercise programs.

'Good nutrition and physical activity can help millions of Americans preserve the independence that would be threatened by diabetes and being overweight," said Nicholson. "We want everyone to know that they can act now, before it is too late, and VA has the tools to help."

The new health care assessment is part of the MOVE (Managing Obesity for Veterans Everywhere) campaign, which is part of the HealthierUS Veterans program sponsored by VA

and the Department of Health and Human Services to reduce rates of obesity and diabetes, a disease often associated with being overweight.

Patients enrolled in VA's health care system can complete an interactive online questionnaire about their health status, nutrition and exercise and receive a customized report with health information and instructions for follow-up with the staff of a VA medical center.

People who aren't enrolled in VA's health care system can log on to www. move.va.gov/move23 and answer 23 questions. They will receive an individualized report giving them suggestions for making changes in their eating habits and physical activity and referring them to helpful materials on the Web site.

Nicholson said VA medical centers nationwide

are starting an aggressive ef-

fort to counsel and follow up

with patients who express interest in managing their weight.

He spoke at the 20th National Veterans Golden Age Games in Hampton, Va., where nearly 600 veterans aged 55 and older tested their mettle in competition at the nation's largest sporting event for older veterans. The Games are co-sponsored by VA and the Veterans of Foreign Wars.

Launching the program at the Golden Age Games allowed participants to register for MOVE on computers set up for them in Hampton.

VA estimates that 70 percent of its patients are overweight, compared to 64 percent of the U.S. population. Diabetes also affects a greater percentage of veterans in VA's care than in the general U.S. population. M



Supporting the Guard and Reserve

With the stroke of his pen, VA Secretary Jim Nicholson became the last of the 15 Cabinet secretaries to sign a joint statement in support of the Defense Department's Employer Support of the Guard and Reserve organization. Looking on at the April 14 ceremony in VA headquarters are Thomas F. Hall, left, assistant secretary of defense for reserve affairs, and Craig W. Duehring, principal deputy assistant secretary of defense for reserve affairs. VA was the last signer of the document by design; DoD was the first.

Fifteen VA Executives Receive Presidential Rank Awards

Fifteen VA executives are among the recipients of the 2005 Presidential Rank Awards. The awards are given to Senior Executive Service (SES) members for "exceptional long-term accomplishments" and are divided into

two categories: Distinguished Executives and Meritorious Executives.

Winners are chosen through a rigorous selection process. They are nominated by their agency heads,

evaluated by boards of private citizens and approved by the President.

Feelev

William F. Feeley, former Veterans Health Administration network director in Albany, N.Y., and now deputy under secretary for health for operations and management, and Michael Walcoff, associate deputy under secretary for field operations in the Veterans Benefits Administration, are among

55 members of the SES who received the Distinguished Executive Award. Another 13 VA executives were among the 187 SES members who received the Meritorious Executive Award.

They are: Joseph J. Adair, director of the Jackson, Miss., VA Regional Office; Jeffrey M. Alger, director of the Denver VA Regional Office; Linda W. Belton, VHA net-

work director in Ann Arbor, Mich.;

Vincent Crawford, retired director of the St. Paul,

Minn., VA Regional Office; Elizabeth J.
Freeman, director of the VA
Palo Alto, Calif.,
Health Care System; William
Paul Kearns III,
deputy chief financial officer in
VA Central Of-

VA Central Of- Walcoff fice; Patricia A. McKlem, VHA network director in Phoenix, Ariz.; Edward Joseph Murray, deputy assistant secretary for finance in VA Central Office; Ronald B. Norby, director of the VA Long Beach, Calif., Health Care System; Charles E. Roberson, associate deputy assistant secretary for program management and operations in VA Central Office; Ralph E. Shalda, deputy

director and chief operating officer of the Veterans Canteen Service in VA Central Office; Michael K. Wheeler, director of the Detroit VA Medical Center; and Michael R.

Winn, director of the Fayetteville, Ark., VA Medical Center.

Distinguished rank winners receive a lump-sum payment of 35 percent of their base pay; Meritorious rank winners receive 20 percent of their base pay. Each recipient receives a framed certificate signed by the President.



Public Service Recognition Week on the Mall

During Public Service Recognition Week May 1-7, VA headquarters employees joined hundreds of civilian and military agencies for a massive display of public service on the National Mall in Washington, D.C. Here, VA employee and Iraq war veteran Michael Meinen (in white shirt) describes prosthetic devices to (from left) Larry Sommers, of Alaska, and eighth-graders Trevor Wages and Matt Walker, of Indiana, who were visiting the nation's capital on a school trip. Meinen, who lost a leg in Iraq, is a computer specialist in VA Central Office.

VA Marks Reissuing of Purple Heart Postage Stamp at Ceremony



VA Secretary Jim Nicholson, third from right, joined Postal Service and Military Order of the Purple Heart officials for the unveiling of the new Purple Heart stamp during a ceremony at Arlington National Cemetery May 26.

In a pre-Memorial Day ceremony, VA Secretary Jim Nicholson joined top officials from the U.S. Postal Service May 26 to unveil a new Purple Heart stamp.

Nicholson also presented the Purple Heart

medal to two soldiers being treated at Walter Reed Army Medical Center in Washington, D.C., for combat wounds: Army Spc. Michael Hilliard and Army Spc. Ian Wagner. Both were injured in Iraq, Hilliard while serving with the 101st Airborne Division and Wagner with the 10th Mountain Division.

"This stamp will be a daily reminder of the extraordinary valor of our service members," said Nicholson during remarks at the first day of issue ceremony for the stamp held at Arlington National Cemetery.

"It is fitting that we have everyday testimonials to the wounds of war that, for some veterans, have occurred through their brave and selfless service to our grateful nation," he added.

The new 39-cent postage stamp has the image of the military's Purple Heart medal. Created by George Washington in 1782 for soldiers in the Continental Army, the Purple Heart now goes to military men and women wounded in combat. Next of kin of veterans who die in combat also receive the medal.

In 2003, the U.S. Postal Service first issued a 37-cent stamp with the medal's distinctive image—a profile of George Washington on a purple background within a heart-shaped medallion. The new stamp has the same image, although it comes in the new 39-cent value set for first-class postage. It is now available for purchase.

More New Features Now Available to Veterans on My HealtheVet

Ever wish there was a single place on the Web where veterans could find trusted health information and help taking control of their own health? Beginning on Memorial Day, veterans and their families can continue their journey to optimal health with the launch of a new look and feel for the My Health Vet eHealth portal.

The new look and feel is the result of yearlong intensive usability studies with veterans and active duty personnel. Based on their feedback, the portal has a new task orientation that lends itself well to the growing functionality of the personal health record.

Also on Memorial Day, the portal released health histories (family and personal) and graphing features. The family health history offers a veteran's health care provider an opportunity to help the veteran understand specific risk factors so that appropriate action can be taken to decrease health risks.

My HealtheVet users may also select self-entered items to combine with personal identification and contact information to create a printable "Doctor's Sheet." Taking a printout of their summary health information to an appointment provides a basis for the veteran and health care provider to discuss issues and develop an action plan.

My HealtheVet is aimed at helping VA improve the

quality and humanity of health care by putting the patient at the center. Using the new health portal helps veterans better understand and manage their health, and it's as easy as viewing any other Web site.

With the features now available on My HealtheVet, veterans can access objective and clinically relevant health information; view health information developed specifically for veterans; refill pre-

continued on page 28

Michelle McKenzie

A new book, *Mad Seasons: A History of the First Women's Professional Basketball League*, by Karra Porter, is about the Women's Basketball League (WBL), which was active from 1978 to 1981. The book includes several references to a 6-foot forward for the Dayton Rockettes named Michelle McKenzie, who played in the league's first season.

Today, McKenzie helps veterans as a recreation therapist at the New Mexico VA Health Care System in Albuquerque. But in 1976, the "teacher-in-training" was accepted as an alternate on the U.S. Olympic women's basketball team.

She left Federal City
College (now known as the
University of the District of
Columbia) for one semester
to train with the Amateur
Athletic Union team in Milwaukee. The Washington,
D.C., native never got to
play in an Olympic game in
Montreal. Instead, she returned to college to complete
a bachelor's degree that
would allow her to teach
physical education.

The trip to Milwaukee wasn't a total waste of time. A talent scout had gotten a glimpse of McKenzie's amazing ball-handling ability. It wasn't long before she got a

phone call asking her to put her teaching career on hold and play basketball in the new WBL. McKenzie accepted the offer.

Her new job was in Ohio with the Dayton Rockettes. McKenzie played well in her first pro season, averaging nearly 10 points and 6.7 rebounds per game. Playing professional basketball was thrilling, but the WBL did not have the financial stability and success of today's WNBA. Players often dealt with the uncertainty of payday.

"We never knew if we were going to get paid," said McKenzie. "Sometimes the owners would just pay the coach and we had to wait for our money."

Some of the pay problems stemmed from low game attendance. After all of the progressive gains the social movement of the 1970s brought, it seemed that America just wasn't ready to support the female league.

By the time the WBL folded in 1981, McKenzie was playing for an Albuquerque-based team with a rival short-lived league. When it too folded, she decided to stay in Albuquerque. Over the next four years, she worked in recreation with the YMCA and YWCA. In



McKenzie with the book on women's basketball that mentions her.

1985, she left Albuquerque to start a new career with the federal government at White Sands Missile Range.

The desolation of working in the world's largest gypsum dune field made McKenzie long for greener pastures. She was ready to leave White Sands after six months, and in a stroke of luck, a friend told her about a job opening at the VA hospital in Albuquerque. The decision was a "no-brainer" for McKenzie.

The move back to the "Duke City" also gave McKenzie an opportunity to go back to school while working full time. In 1996, she was awarded a master's degree in therapeutic recreation from the University of New Mexico.

Walking down the VA hospital hallway to Ward 4D

on the fourth floor of Building 41, you might see McKenzie meeting with one of her many patients. It's a completely different line of work compared to her pro basketball days.

"I truly love working with veterans on a regular basis," she said. "For people to know who I was back when I played basketball is appreciated, but for them to learn who I am now because of them is of the highest of my values."

Though she is not playing on a team these days, McKenzie still manages to keep her hands in the game. She coaches a team in the city's Women's Senior Basketball Program. The league's name, A League of Their Own, is coincidentally reflective of her own glory days. W By Bill Armstrong

My HealtheVet continued from page 27

scriptions online; link easily to benefits and resources available from VA and other federal sources; add information about their prescription and over-the-counter medications, allergies, tests, medical history, and visits with non-VA doctors to a personal section they control; and track health readings such as blood pressure and blood sugar levels. As new features are added incrementally over the next year, veterans will be able to read copies of key parts of their VA medical record; view their next ap-

pointment date and time; view their co-payment balance; and grant access to all or part of their health information to others, including VA or non-VA doctors, family members and veteran advocates.

Veterans can log on

from any computer with Internet access at www. myhealth.va.gov. Try out the demo: username is mhvuser; password is mhvdemo#1. And be sure to tell a veteran about the new My HealtheVet, now designed by veterans for veterans.

Study Shows Seniors Benefit From Exercise

Four years ago, Sally Pritchard was healthy enough. She took no medications, could swim slowly and had no aches or pains. Still, the newly retired teacher wanted to be more athletic. So when she saw an ad seeking research subjects for a physically demanding training program at the VA medical center and University of Washington Medical Center in Seattle, it seemed like just the ticket; it changed her life.

Shortly after her participation in the seven-month program's study regimen—90 minutes of stretching and exercise on a treadmill and sta-



tionary bicycle three times a week—the 69-year-old was fit enough to bicycle through Holland.

Pritchard was among 34 seniors in the recent Seattle study, which found that older people leave twenty-somethings in the dust when it comes to improving their "exercise efficiency," a mea-

sure of how well the body uses oxygen, which directly affects stamina.

Previous research had suggested that much improvement wasn't possible for older people. Yet the Seattle participants improved an average of 30 percent in how their bodies responded to exercise, compared with a 2 percent improvement for the younger group.

"What was new and unexpected in our study was the disproportionately greater response to training in the elderly subjects," the VA and University of Washington researchers reported in the Journal of the American College of Cardiology.

Before the training program, for example, an older subject used as much oxygen to walk three miles per hour as a younger subject used to walk three-and-a half. But after the conditioning, that disparity disappeared, the scientists reported.

That doesn't mean seniors need to exercise as hard as the ones in the study did. But it indicates that they can benefit greatly from exercise, even low levels of it.

"The take-home message is to get out and walk," said Dr. Wayne Levy, a University of Washington associate professor of cardiology who co-authored the study with Dr. John Stratton of VA and Dr. Susie Woo of the University of Washington.

The study was funded by the National Institutes of Health. Researchers compared the results of training between the 34 older participants (ages 65 to late 70s), and 27 younger participants in their 20s to early 30s. None of them exercised much before volunteering for the study.

What Are Your Chances of Dying Within Four Years?

Dr. Sei Lee, a geriatrics researcher at the San Francisco VA Medical Center, has helped developed a quiz based on 12 risk factors to try to answer that question for people over 50.

He says the widely reported quiz is designed "to try to help doctors and families get a firmer sense for what the future may hold.

"We know that patients and families want more prognostic information from doctors. It's a very natural human question of, 'What's going to happen to me?' We also know that doctors are very cautious about giving prognostic information because they don't want to be wrong."

Lee and colleagues report that the test is roughly 81 percent accurate and can give older people a reasonable idea of their survival chances. Other experts note, however, that it ignores family history and is much less meaningful for the younger population.

Test co-author and VA researcher Dr. Kenneth Covinsky warns that the test taker's results should be discussed with a doctor to put things into perspective. "There could always be other mitigating factors," he said.

The test study was reported in the *Journal of the American Medical Association* and is based on data involving 11,701 Americans over 50 who took part in a national health survey in 1998. The research team analyzed participants' outcomes during a four-year follow-up and based their death-risk survey on health characteristics that seemed to predict death

within four years.

Like golf, this is one test you want a low score on.

Home Is Where the Hospital Is

"When you're in your own bed, you mend better."
That's the conclusion of Portland, Ore., VA Medical Center patient Paul Willer, and it's backed up by a study of several hundred patients at that facility and two other non-VA hospitals cared for at home.

Willer received life-saving care at home after agreeing to participate in Portland's innovative "home hospital" program. Unlike other home-based programs that tend to serve early-discharge patients who can be easily monitored at home, the Portland program is designed specifically as a substitute for hospital treatment. It offers sophisticated medical oversight, including nurse and doctor visits, X-rays and other tests, to patients in their own beds.

A study of the home hospital programs of three providers—the VA medical center, a managed care plan and a single site managed care provider—showed that patients hospitalized in their homes cost less to care for, had shorter "stays," fewer procedures, less delirium and reported greater overall satisfaction. Portland VA administrators value the program for its other benefits: freeing up scarce beds in a hospital operating at near capacity for more urgent patients—a lot cheaper than adding a new

Willer, who was treated for congestive heart failure, liked being "discharged" from the hospital without leaving his house.

Now open for service: VA's Fisher House in Palo Alto

Nearly 800 people—veterans, staff, active duty military, veterans service organizations and community members—were on hand April 19 to officially dedicate the new 21-suite Fisher House at the VA Palo Alto, Calif., Health Care System. The home, the first VA Fisher House on the West Coast, will provide temporary lodging for family members of veterans and returning servicemembers injured in Iraq and Afghanistan. Many of these families travel long distances to be with their loved ones during lengthy and arduous rehabilitation at Palo Alto's polytrauma center.

A number of the health care system's other programs will also benefit from the new Fisher House. These programs, including hospice and palliative care, spinal cord injury, organ transplant, post-traumatic stress disorder, blind rehabilitation and traumatic brain injury, are highly specialized and family members play an important role in the recovery of their loved ones.

This Fisher House is the 34th built by the Fisher House Foundation. There is at least one Fisher House at every major military medical center, and Palo Alto is the eighth VA Fisher House. The Tampa, Fla., VA Medical



VA Deputy Secretary Gordon Mansfield, far right, talks with Marine Master Sgt. Kenneth Sargent, his wife Tonia and daughter Tasha at the new Fisher House. Tonia, whose husband suffered a severe brain injury in Iraq, was instrumental in bringing a Fisher House to Palo Alto, and the Sargents were the first family to move in.

Center (one of VA's four polytrauma centers, along with Palo Alto, Richmond, Va., and Minneapolis) will be the next VA facility to dedicate a Fisher House.

New amputee rehabilitation center at Miami VAMC



Army Sgt. 1st Class Mike McNaughton in the Miami VA's new amputee center. McNaughton lost his leg in a land mine explosion in Afghanistan.

A new million-dollar amputee rehabilitation center at the Miami VA Medical Center aims to bring to older vet-

erans the aggressive, high-tech rehab given to many of the troops coming back from the Middle East. The center, which opened March 31, has physical therapy beds alongside treadmills and weight machines. In a nearby room, computerized machines test patients' ability to stand, balance and walk

Physical therapist Bob Gailey helped design the center to meet the needs of all veteran amputees, young and old. According to Gailey, in the past five years, more than 400 U.S. troops have returned as amputees from Iraq and Afghanistan. During that time, he said, more than 40,000 veterans have lost feet or limbs because of diabetes, other vascular diseases and injuries. "Everybody wants to take care of amputees who are coming back from Afghanistan and Iraq," Gailey said, "but there's also this large population of veteran amputees who want the same level of care."

Gailey has worked with athletes training for the Paralympics and other events for disabled athletes. In recent years he spent time at Walter Reed Army Medical Center in Washington, D.C., helping to create training regimens for amputees returning from the Middle East.

Honoring an emissary of hope



Army Spc. Brian Anderson delivers the milkshake he promised Jim Mayer while hospitalized at Walter Reed. Anderson lost both legs and an arm in an IED explosion in Iraq. At right is Army Maj. David Rozelle, who lost a foot in a land mine explosion and later became the first Iraq war amputee to return to combat.

Veterans honored the real-life volunteer introduced to 75 million Doonesbury readers as "Jim the Milkshake Man" for his bedside visits to wounded vets at Walter Reed Army Medical Center in Washington, D.C. Jim Mayer was recognized in an April 13 ceremony at the hospital for his 500th peer visit.

It's called a peer visit because Mayer, like many of the war-wounded veterans in hospital beds, lost his legs in a land mine explosion during the Vietnam War. Besides the occasional milkshake, Mayer brings to their bedside a message of hope based on lessons learned since his own traumatic injuries 37 years ago. At the ceremony, VA Secretary Jim Nicholson applauded Mayer for making an "inspiring impact on the lives of all the young heroes you've cared for, cajoled, kidded, consoled and loved."

A native of St. Louis who joined VA in 1974, Mayer currently is an outreach official in the Seamless Transition Office in VA Central Office. But it is Mayer's volunteer work with wounded servicemembers that earned him special recognition. He is one of a group of Vietnam veteran volunteers who work together to help today's severely wounded veterans before and after their discharge by providing support and friendship.

Raymond Schinazi, Ph.D., one of the Atlanta VA Medical Center's prestigious Senior Career Research Scientists, received the Distinguished Scientist Award from the Hepatitis B Foundation during a March 25 ceremony in New Hope, Pa.

Schinazi was honored with the foundation's highest scientific award in recognition of his extraordinary contributions to the science and

discovery of new drugs for the treatment of chronic hepatitis B, and for his strong commitment to finding a cure for this chronic liver disease. "It is estimated that as many as 70 percent of all people treated for HIV and HBV have been treated by a drug discovered all or in part by Dr. Schinazi, a record not equaled by any other university scientist," said Timothy M. Block, Ph.D., president of the Hepatitis B Foundation.

Jenice Guzman, a nurse practitioner with the VA Greater Los Angeles Healthcare System, received the 2005 Mark Wolcott Award for Excellence in Clinical Care Delivery for her dedication to improving care for older patients. The annual award recognizes a

health care practitioner who has demonstrated excellence in direct patient care. Dr. Chester B. Good, a physician with the VA Pittsburgh Healthcare System, received the 2005 Mark Wolcott Award for Excellence in Clinical Care Leadership. He is nationally recognized for his drug safety expertise, is a champion for evidence-based prescribing, and has been a leader in developing VA's drug formulary management process. The award he received is given annually to a health care practitioner in a leadership or management position who has demonstrated excellence through exceptional support for direct patient care providers, including support of innovations enhancing the quality of direct patient care. VA

Hurricane response honors

The National Hurricane Conference 2006 Outstanding Achievement Award for Emergency Re-

sponse was presented to Robert Lynch, M.D., director of the South Central VA Health Care Network (VISN 16), on April 13 at the 28th National Hurricane Conference in Orlando, Fla. The award is given to an individual or group for a specific outstanding and innovative achievement in a hurricane-related activity that may serve as a model to others. In the immediate aftermath of Hurricane Katrina, Lynch directed the rescue of hundreds of patients and staff from the flooded VA hospital in New Orleans while continuing



Lynch

care to veterans in Louisiana as well as those on the Mississippi Gulf Coast, where the Gulfport VA hospital was destroyed. This continuation of care included quickly setting up a system of mobile clinics throughout the hurricane-ravaged areas to provide medical care to veterans as well as non-veterans.

Rescuing a child in trouble



Lydia Lopez, above, audiology health technician at the Central Texas Veterans Health Care System's Austin Outpatient Clinic, was grocery shopping when she heard a woman's screams. She ran to the commotion and found a 3-year-old girl choking on a piece of candy. Others were trying to revive the child using CPR, but she wasn't breathing and her lips were blue.

Lopez offered assistance and as the others watched, she performing the Heimlich maneuver, successfully dislodging the obstruction. Soon, the frightened child was crying for her relieved mother.

Lopez has been a VA employee for six years, preceded by seven years as an Army medic. "I just did what needed to be done," said Lopez. "I would encourage everyone to take CPR [training], because you never know when you can save a life."

Answering a call for help

Brad Bishop, R.N., was arriving at work at the Mountain Home, Tenn., VA Medical Center when he heard a cry for help from the employee parking lot. He ran to the area and found a fellow employee on the ground beside his car. Realizing the man was having a heart attack, Bishop began CPR.

Nursing assistant **Cultrina Ryans** saw what was happening and rushed to help Bishop. The employee was transported to the main hospital and admitted to the ICU.

'Willie, he's choking'

Willie Kelley, a housekeeper in the nursing home care unit at the Wilmington, Del., VA Medical Center, was removing trays in the dining room when he heard a resi-

dent calling to him, "Willie, he's choking." Kelley turned to see another resident, who was unable to breath.

"I didn't even think," Kelley said, "I just went around behind him and did the Heimlich maneuver. A large piece of meat came right out." While the resident was thanking Kelley for saving his life, the entire room erupted in applause.

Restaurant tragedy averted

While eating at a restaurant in Tracy, Calif., Sallie Lafleur, a licensed vocational nurse from the VA Palo Alto Health Care System's San Jose Outpatient Clinic, saved the life of a man who happened to be a 100 percent service-connected veteran.

Lafleur noticed the man, seated at a nearby table, begin gasping for air. People tried to help but Lafleur saw that the victim was going limp and his lips were turning blue. "Let me have him," she shouted to the men trying to help. She performed the Heimlich maneuver and a piece of meat came flying out.

The victim began breathing again and was finally able to speak. His first words were, "I don't know who you are but you have just saved my life, thank you."

Teaming up to aid and assist



Beverly Doughty, left, chief of food production, and Judy Lord, right, chief of supply, processing and distribution at the Miami VA Healthcare System, were walking into the medical center's main entrance when they saw a young man fall to the ground, suffering an apparent seizure. Lord ran to the victim and administered first aid while Doughty contacted the code team. Both were commended for their caring and professionalism.