

U.S. Department of Veterans Affairs

VANguard

March/April 2007



- Please Read:**
1. Put your initials on the bottom of your project
 2. Write down the paint colors/numbers
 3. Do not mix paints
 4. Return paints to shelf
 5. Clean your brushes before & after use.
 6. Ask VOLUNTEERS for help.
 7. Clean up after yourself!

Volunteers to Employees

Bataan Survivor's Memoir

Parrot Sanctuary at West L.A.

Searching for Veteran Ancestors



Vanguard

VA's Employee Magazine
 March/April 2007
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On the cover

Maria Fasano, a vocational rehabilitation specialist with the VA Pittsburgh Healthcare System, is one of many employees who started out as volunteers. She was encouraged to volunteer by her uncle, Sil Fasano, a Navy submarine veteran of World War II and VA volunteer himself. *photo by Warren Park*

Search for the Last Doughboys

Few remain. Their time is running out and so is the time we have to recognize and honor our last veterans of World War I.

That's why I am asking fellow VA employees and all *Vanguard* readers to help the department find and identify these veterans. The list of 20 living World War I veterans

we had compiled a year ago is now down to three, yet there may be veterans among us who served on active duty between April 6, 1917, and Nov. 11, 1918, that we simply don't know about.

We've searched VA and other federal files but official records don't reveal those veterans whose military records were lost or destroyed or who mustered out and never again

dealt with a government agency, leaving no paper trail.

That's why we are asking you to send any leads you may have on living World War I U.S. veterans (with military service beginning before Nov. 11, 1918) by e-mail to ww1@va.gov, by fax to (202) 273-6702, or by mail to Office of Public Affairs, Department of Veterans Affairs (80), 810 Vermont Ave., N.W., Washington, D.C., 20420.

*Shannon Graves
Special Assistant
Office of the Secretary of
Veterans Affairs*

Wear Your Medals on Memorial Day

A few weeks before Veterans Day 2006, Charles Wallace, EEO program manager with the Clement J. Zablocki VA Medical Center in Milwaukee, saw a message from Secretary Jim Nicholson announcing the Veterans Pride initiative. It read, in part: "... That is why I am calling on America's veterans to wear their military medals this Veterans Day. Wearing their medals will demonstrate the deep pride our veterans have in their military service and bring Veterans Day home to all American citizens. Veterans, wear your pride on your left side this Veterans Day. Let America know who you are and what you did for freedom."

Though proud of his service in Vietnam, Wallace had never worn his medals and wasn't sure he wanted to. He shared the Secretary's idea with his wife Joy and son Christian, who encouraged him to wear the medals.

On Veterans Day morning, Wallace meticulously placed the medals on his suit. A photo of the beaming Army veteran wearing his medals ran in the November/December 2006 issue of *Vanguard*.

Thoughts of a buddy from Vietnam ultimately led to his decision to wear them. "He was a real cowboy from Wyoming," Wallace said of his friend. "He rode Brahman bulls and he would tell us these stories when we were out in the boonies. He was a wild guy."

Wallace's buddy was severely wounded in combat, and Wallace and others had to help get him up a hill where he could be airlifted out. "He never made it back," said Wallace.

He said he wore his medals for his buddy "and all those ... guys that I know are not going to be able to wear them."

Wallace now says that wearing the medals turned out to be the right decision for him. It brought some closure and honored the memory of his friends. "It was the first time ever that I really had good feelings about that. All [those] other guys [were] here with me. Thank you, Mr. Nicholson."

Veterans are again being encouraged to wear their medals this Memorial Day. Information about the Veterans Pride initiative is available on the VA Web site at www.va.gov/opal/veteranspride, where veterans also can obtain information about how to replace mislaid medals and learn how to confirm the decorations to which they are entitled. **VA**

Remember Their Sacrifices

The National Moment of Remembrance, established by Congress, asks Americans wherever they are at 3 p.m., local time, on Memorial Day to pause in an act of national unity for a moment—a minute—of silence in remembrance of our veterans and their sacrifices. The Moment does not replace traditional Memorial Day events; rather, it is an act of national unity in which all Americans, alone or with family and friends, honor those who died for our freedom. It will help to reclaim Memorial Day as the sacred and noble holiday it was meant to be. In this shared remembrance, we connect as Americans.

Wherever you are, ob-

serve the Moment at 3 p.m., local time, on Memorial Day. Ask others to join—relatives, friends, church members, neighbors or co-workers—to observe the Moment at places such as your neighborhood, local pool, picnic grounds, etc., for one minute of remembrance. Participation can be as informal as ringing a bell three times to signify the Moment. It can be a brief, but meaningful, pause that will:

■ Provide a time of remembrance for America's fallen and to make a commitment to give something back to our country in their memory.

■ Have Americans participate in an act of national unity and demonstrate gratitude and respect for those who died for freedom since the founding of our nation.

■ Provide a sense of history to our citizens and ensure that younger generations understand the sacrifices made to preserve our liberties.

For additional information, please visit the National Moment of Remembrance Web site at www.remember.gov and click on "Downloads." We appreciate your cooperation in our mission of remembrance. For all the fallen, let us make this nation one.

*Carmella LaSpada
Executive Director
White House Commission on
the National Moment of
Remembrance*

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.



Removing the Barriers to a Seamless Transition

Jim Nicholson
Secretary of Veterans Affairs

Unacceptable and heartbreaking!

Those were my thoughts reading and hearing recent media reports that showed some men and women injured while serving our nation were not receiving the care and support they earned and deserve, and I know those thoughts were shared by all VA employees—and all Americans.

How could any of us dedicated to the care of our nation's military veterans and their families not be deeply concerned and not look immediately inward at the quality and level of VA care for military servicemen and women returning from duty in Iraq and Afghanistan?

And that's exactly what we are doing. We are responding to the public's legitimate concerns by inviting Congress, the media and others to visit our facilities and see for themselves what the experts and the national news media have been saying: "When it comes to quality health care, nobody does it better than VA."

As chairman of the President's newly created Task Force on Returning Global War on Terror Heroes, I am working closely with all the federal agencies that work with Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF) veterans to address their concerns and identify and overcome roadblocks to their seamless and smooth transition from military to civilian life. We must overcome the barriers that both complex processes and disconnected bureaucracies

can inadvertently throw in the paths of injured veterans leaving military service.

While we provide top-quality care for veterans in our charge, red tape must not bind us as we work to care for these young men and women or any of the veterans we serve.

To that end, changes are already underway to make the system work better. We are focusing more resources and attention on the personal assistance we offer veterans and their families, something we started last year by hiring 100 new Global War on Terrorism

counselors for vet centers. Now, we are hiring 100 new patient advocates, most of whom will be OIF/OEF combat veterans, to serve fellow veterans by ensuring their smooth transition to VA health care and benefits.

We are also adding 17 additional polytrauma network sites to our four polytrauma centers to continue to provide world-class specialty care for the severely injured closer to their homes.

We are working more closely than ever with the Department of Defense by placing our own social workers, benefits counselors and outreach coordinators in military treatment centers and personnel processing centers for those returning from overseas.

VA is the nation's largest provider of mental health services and we are increasing access to those services for our newest combat veterans. A major initiative is underway to integrate our mental health services with primary care to ensure all veterans have access to that care as quickly and conveniently as possible. Every VA medical center now has specialty PTSD treatment capability, and our vet center system, which has served some 180,000 OIF/OEF veterans so far, will expand to 232 sites with planned openings of 15 new centers and eight new

and continuing through their release from the military and entry into the VA system. We are consolidating the processing of OIF/OEF claims at five sites that will support other VBA regional offices with the heaviest OIF/OEF workloads.

We are going to add an additional 400 employees to VBA by the end of June, to join more than 580 employees hired last year. The value of trained, motivated and dedicated employees can't be overstated. It is your experience, your knowledge, your ideas and your personal involvement that will maintain our

We clearly are not waiting for reports and recommendations to begin improving accessibility and timeliness of VA services for our OIF/OEF veterans.

outstations by the end of 2008.

One of the great challenges we face is the growing workload and complexity of service-connected compensation claims. That challenge translates into long waits, economic uncertainty and frustration for OIF/OEF veterans and their families—another access barrier that must be brought down, and work is underway to do just that.

Since the onset of combat operations in Iraq and Afghanistan, the Veterans Benefits Administration has expedited and case-managed claims for seriously injured OIF/OEF veterans with individualized service beginning at the military medical facilities where they are first treated

high level of service and improve the system we work in to better serve all veterans—our newest and our oldest.

We clearly are not waiting for reports and recommendations to begin improving accessibility and timeliness of VA services for our OIF/OEF veterans. I look forward to working with the President's Commission on Care for America's Returning Wounded Warriors, the federal Task Force, veterans service organizations and others to remove barriers to seamless and smooth transition as they are identified. I look forward to working with you—the dedicated employees who are our "front line" in providing care and serving our newest generation of heroes. **VA**



VA National Cemeteries: Honoring Veterans in Perpetuity

William F. Tuerk
Under Secretary for Memorial Affairs

The opening of VA's 125th national cemetery—South Florida VA National Cemetery, scheduled this spring in Palm Beach County—marks a significant milestone in the department's efforts to ensure that the burial needs of veterans and eligible family members are met. South Florida VA National Cemetery is the sixth new cemetery to open since 2001; its opening concludes the first of two phases in VA's major expansion of cemeteries across the United States.

The department now shifts to the second and equally ambitious phase of growth: the land acquisition, design and construction of six more national cemeteries.

We have announced site selections for cemeteries to be located in Bucks County, Pa., serving the greater Philadelphia area; in the areas of Sarasota and Jacksonville, Fla.; and at Fort Jackson in Columbia, S.C. Environmental assessments are complete for all of these locations, and also for other new national cemeteries that will serve veterans in Birmingham, Ala., and Bakersfield, Calif. The National Cemetery Administration's fiscal year 2007 budget includes \$12 million for master planning and preliminary design of these cemeteries. If we get funding, VA will begin construction in fiscal year 2008.

NCA plans to begin burial operations in "early turnover" areas at five of these six cemeteries by the end of 2008. At the sixth cemetery—

serving the Philadelphia area—NCA plans to conduct first interments in 2009. This extraordinary timetable can be achieved only through the meticulous planning and daily coordination that is occurring between NCA and the newly created VA Office of Construction and Facilities Management. VA intends to move quickly so that a convenient, close-to-home burial option can be provided to 88 percent of the nation's veterans in 2009.

The department will not achieve this performance measure acting alone. We will also rely on the crucial support and participation of state governments to establish, expand and improve state veterans cemeteries. Through the State Cemetery Grants Program, VA

Ultimately, VA's goal is to serve 90 percent of veterans with a burial option at a national cemetery or state veterans cemetery within 75 miles of their residence.

provides grants for 100 percent of development and construction costs. The states provide the land and then assume responsibility for operating and maintaining the cemeteries according to VA guidelines.

VA has provided grants to establish or improve 65 state cemeteries. Four more are now under construction in Shreveport, La., Anderson, S.C., Radcliff, Ky., and Glennville, Ga.

As VA serves growing numbers of veterans through new cemetery construction, we must also keep existing

cemeteries operating to ensure the availability of burial options at national and state veterans cemeteries in the future. Prescott National Cemetery in Arizona, for example, had been closed to first interments since 1974. This cemetery reopened in February to again provide a burial option with a new columbarium for cremated remains.

In fiscal year 2008, one of VA's largest cemetery expansion projects ever will be underway at Fort Sam Houston National Cemetery in San Antonio. There, NCA will invest \$29 million to develop additional full-casket gravesites, pre-placed crypts, columbaria niches, and supporting infrastructure such as roads and utilities. This project will support approximately 10 years of

2008—to assess potential courses of action into the future.


This program evaluation will not limit itself to burial space issues. It will review the full array of memorial programs and burial benefits available to veterans, including VA's provision of headstones and markers, Presidential Memorial Certificates, and burial and plot allowances. The study will include an assessment of VA's current 75-mile service area standard to consider issues such as the travel time required for a veteran or family member to reach a national cemetery.

The evaluation will also assess the adequacy of the 170,000 veteran population threshold for establishing new national cemeteries. The re-

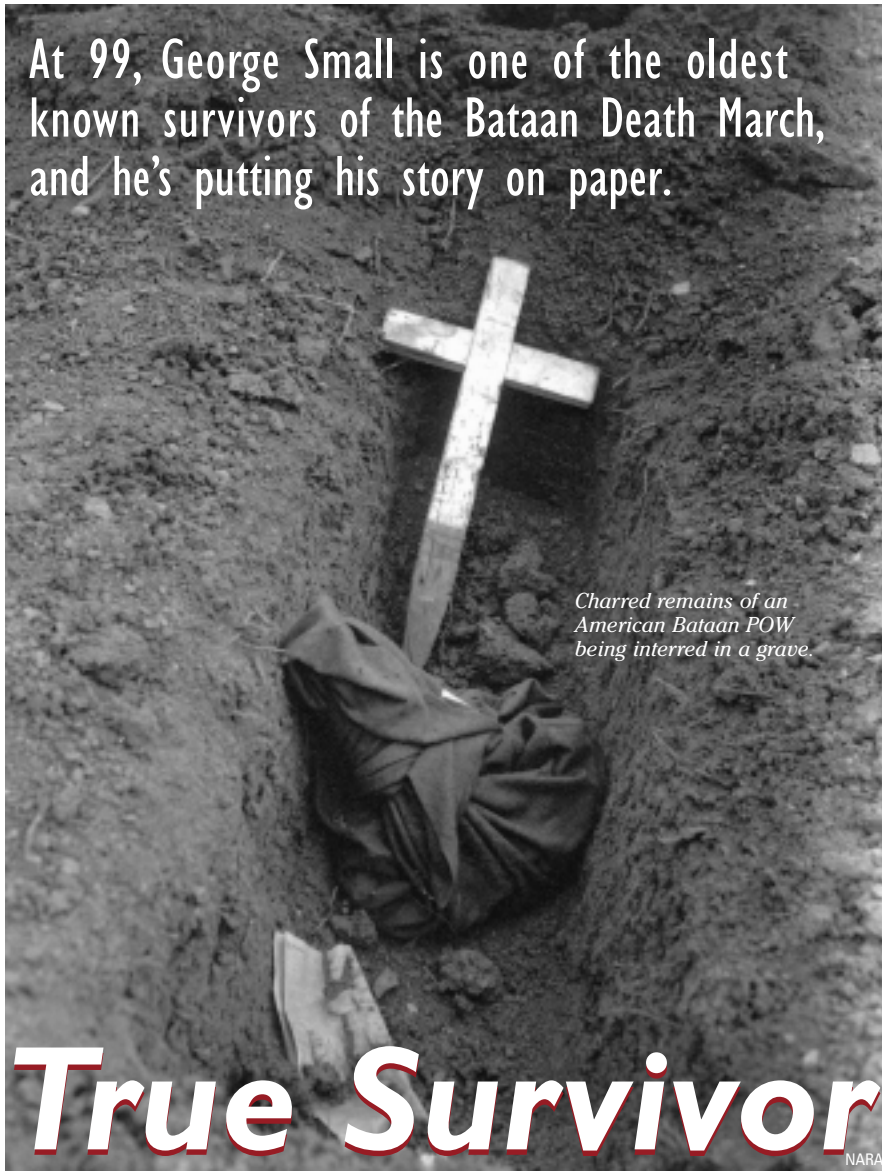
future burial needs in an area that has one of the largest populations of veterans in the nation.

Ultimately, VA's strategic goal is to serve 90 percent of veterans with a burial option at a national cemetery or state veterans cemetery within 75 miles of their residence. We have an ambitious but achievable plan to reach that objective and we have made excellent progress to date. Looking beyond 2010, I have commissioned an independent program evaluation—to be completed by the summer of

sults will be used to develop policy changes and any legislative proposals needed to define burial benefits that will serve veterans well into the future.

For nearly 150 years, national cemeteries have honored the citizen-soldiers of every generation who so willingly served in our nation's defense. At these national shrines, President Lincoln's promise of care is renewed and fulfilled each day. That is a promise that VA national cemeteries are prepared to fulfill in perpetuity. 

At 99, George Small is one of the oldest known survivors of the Bataan Death March, and he's putting his story on paper.



Charred remains of an American Bataan POW being interred in a grave.

True Survivor

George Small recently celebrated his 99th birthday, just two months prior to the 65th anniversary of an event during World War II that could very easily have ended his life.

Small is one of the oldest known survivors of the Bataan Death March and former POWs held captive by the Japanese in the Philippines and Japan during World War II, according to Paul Ropp, executive secretary of the American Defenders of Bataan and Corregidor. Small's birthday fell on Feb. 28; the anniversary date of the Bataan Death March is April 9.

Rita Andreola, POW coordinator at the Reno, Nev., VA Regional Office, met Small about six years ago while conducting outreach to POWs in the state. Making POWs aware of the benefits and services available to them through VA is one of the Veterans Benefits Administration's top priorities, she said.

Andreola attends the monthly POW meetings at the VA Sierra Nevada Health Care System in Reno, briefing the POWs on any changes in VA benefits and answering their questions. Small attends these meetings with his fellow World War II POWs,

along with POWs from the Korean War and the Vietnam War.

Last year the staff of the Reno VA Regional Office hosted a party for Small's 98th birthday at the Air National Guard Base in Reno that was attended by some 200 family members, friends, VA staff, local dignitaries and military servicemembers.

"He just really is an inspiration to us here," Andreola said.

Today Small is hard at work capturing the stories of his survival in a memoir. Not only did he manage to survive the Bataan Death March, he survived captivity under the brutal reign of the Japanese for a three-year, five-month period in five different POW camps in the Philippines and Japan.

The book project originated at the urging of Small's daughter, Gail Ferrell, a professor of mathematics at Truckee Meadows Community College in Reno.

"I wanted our family to know more about his experience and when I saw the class offered, I signed him up," Ferrell said.

The class was Life Stories, taught by writing instructor Carol Purroy. She said the objective of the class is to get students to put their stories down on paper so their families will have them. Purroy developed the class nearly 20 years ago out of a personal family experience—both of her parents died very young.

"They died before I learned their stories," Purroy said. "I don't know how my parents met. I don't know how they fell in love. I decided I didn't want that to happen to anyone else."

Small's story begins on April 25, 1941, the date he volunteered for active duty. He had applied for and received a commission as a 2nd lieutenant in the Army Reserve since he had earned a bachelor's degree in chemical engineering in 1935 from the Polytechnic Institute of Brooklyn, N.Y.

After a month's training at the

Army Chemical Warfare School, he was assigned to an airbase in Albuquerque, N.M., as the base chemical officer. Six weeks before World War II began, Small shipped out to Manila in the Philippines. He was ordered to Bataan on Dec. 24, 1941. Small served with the 31st Infantry Division as an infantry officer until the surrender of Bataan by Maj. Gen. Edward P. King, the commanding officer of the forces on Bataan, on April 9, 1942.

"The surrender of 76,000 men, including 12,000 Americans, was the greatest defeat in American military history. I don't know whether I should be proud of being part of that defeat."
— excerpt from Small's memoir

The March of Death

Small had been fighting the Japanese Army with his unit until about eight hours before the surrender. He had not had any water to drink or food to eat for two days before he started the March of Death on April 9. At the beginning of the march, Small failed to hear the command issued by Japanese soldiers to their Filipino and American prisoners to discard their weapons.

"A soldier pushed the point of his bayonet against my body, yelled something in Japanese and pointed to my pistol in the holster. I knew he wanted me to discard the pistol but I wanted the canteen which was also on the pistol belt. I reached behind me to unhook the canteen. I was having trouble in unhooking the canteen. The soldier got mad, yelled something louder in Japanese and pushed the bayonet further into my body. I felt a sharp pain so I removed the pistol belt and threw it on the ground. The soldier pulled the bayonet from my body and moved on."

— excerpt from Small's memoir

It took five days to reach the town of San Fernando, a distance of some 70 miles from the starting point of the march in the town of Mariveles, located at the southern tip of the Bataan peninsula. Many of Small's fellow soldiers did not survive the march because of their poor physical condition. Their rations had been cut in half for more than three months leading up to the march, and many suffered from tropical diseases such as malaria, for which there was no medicine available on Bataan. The Japanese guards had no tolerance

for stragglers.

"Some stragglers did not have the energy to move faster so they were beaten by the Japanese soldiers. If a straggler fell to the ground, unable to continue marching, he was executed."
— excerpt from Small's memoir

The prisoners received no food or water from their Japanese guards during the march, despite passing by artesian wells along the route.

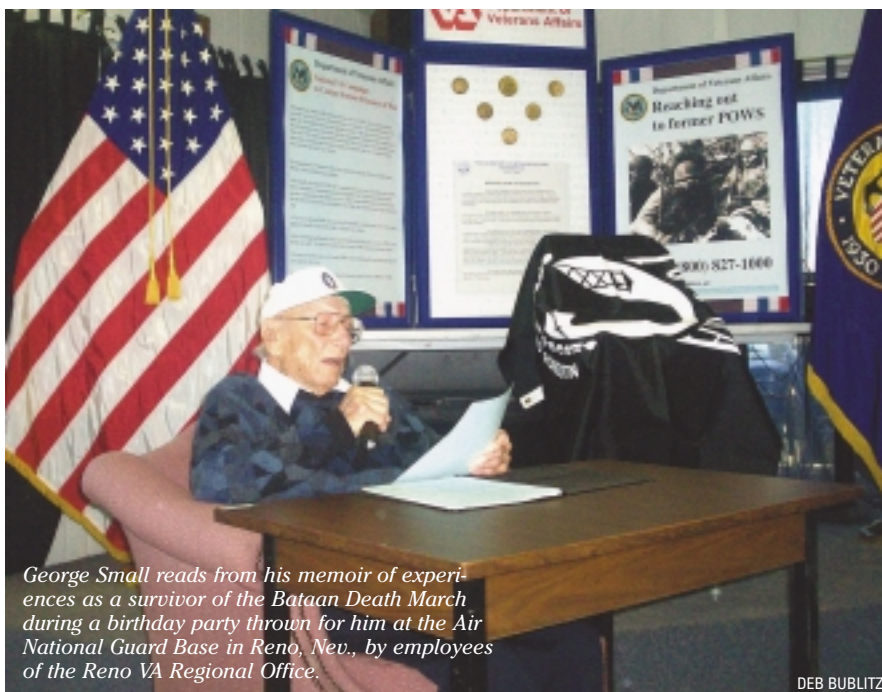
"The guards did not allow us to fall out of the group to drink the water, although they knew that we were thirsty. Some of the men, unable to resist the temptation to get a drink, ran to the well. The guard ran to the well, shouted something in Japanese then plunged the bayonet into one man's back. Then another young man was killed as well for trying to quench a thirst. This brutal and bestial act by the guard sickened me."
— excerpt from Small's memoir

Upon reaching San Fernando, the prisoners were herded into a warehouse and given some rice and water. The Japanese guards put padlocks on the warehouse doors, and locked them inside overnight. The next morning the prisoners were marched toward a railroad station, loaded into freight cars, and sent to the town of Capas. From Capas, the prisoners were unloaded from the freight cars and marched about eight miles to Camp O'Donnell. Before Small could be loaded onto the train, a truck drove by and some Japanese soldiers motioned for him and five other POWs to climb into the truck. They were driven to Camp O'Donnell.

Camp O'Donnell and Camp Cabanatuan, the Philippines

An estimated 9,300 Americans reached Camp O'Donnell after completing the March of Death. Along the way, about 600 to 650 Americans perished.

Small spent the next two months at Camp O'Donnell, where his fellow prisoners were dying at the rate of 30 or 40 a day because of overcrowded



George Small reads from his memoir of experiences as a survivor of the Bataan Death March during a birthday party thrown for him at the Air National Guard Base in Reno, Nev., by employees of the Reno VA Regional Office.

DEB BUBLITZ

and unsanitary conditions, disease and starvation. Small suffered from malnutrition, beriberi, scurvy, pellagra, malaria, dysentery, edema, intestinal parasites and jaundice. When he joined the Army, Small weighed 150 pounds; as a POW, his weight plummeted to 98 pounds.

Sadly, Small was considered one of the few “able-bodied men” available to work the burial detail. He was called upon to perform the disagreeable task of burying a fellow POW.

“Four of us lifted the litter that was supported by two bamboo poles. We carried the litter to the mass grave, lowered the bamboo poles and tilted the litter so that the body slid off. The body tumbled down the embankment until it rested at the bottom of the grave. About 40 other bodies were buried at the same time. We all started to walk away from the grave when one man, more sensitive than the rest of us, called out, ‘Let’s give them a salute.’ We all turned to the grave, came to attention and at the command, ‘Salute’ we all saluted our fallen comrades.” — excerpt from Small’s memoir

Small was transferred to Camp Cabanatuan on June 2, 1942. Twelve of his fellow POWs escaped from the camp, but were captured. The Japanese soldiers brought them back to Camp Cabanatuan and decapitated three of the men with their swords, then hung their heads in front of the camp. The remaining nine men were executed.

Small remained at Camp Cabanatuan until Nov. 7, 1942, when he was selected to perform slave labor for the Japanese war effort and sent to Japan on one of the infamous “Hell Ships.”

Voyage to Japan on the Hell Ship Nagata Maru

Prisoners selected to perform slave labor were driven in trucks from Camp Cabanatuan to the seaport in Manila. There the prisoners were loaded onto the unmarked cargo ship, the *Nagata Maru*. Although the Geneva Convention required that

ships transporting POWs be marked with a white cross, the Japanese failed to do this. Unmarked Japanese ships carrying American POWs were often torpedoed or bombed by the Allied Navy and Air Force, resulting in the deaths of thousands of American POWs.

The *Nagata Maru* left port on Nov. 7, 1942. Small estimates that approximately 500 prisoners were crammed into the ship’s hold. It was so crowded, they could not lie down without touching one another. Small picked up body lice during the 18-day crossing. He said the prisoners nicknamed the ship the “Maggot Maru” because of the filthy conditions.



MIKE REAGAN (WWW.NEW-WORK.COM)

“The latrine consisted of three wooden buckets. Men with dysentery did not always reach the bucket before defecating. Occasionally the feces fell on another man who was lying on the path to the latrine. Fights broke out frequently as we were all under tension and easily provoked. The latrine bucket was periodically hoisted to the top deck and emptied into the ocean. The bucket was then washed with seawater before our food—rice—was placed in the same bucket. We were hungry and not fastidious.” — excerpt from Small’s memoir

Although the ship did not come under submarine or aircraft attack,

Small said seven prisoners died during the voyage. The Japanese simply tossed their lifeless bodies overboard into the sea. For Small, the voyage to Moji, Japan, on the Hell Ship *Nagata Maru* was the worst part of his POW experience.

Camp Tanagawa, Camp Zentsuji, and Camp Roku Roshi, Japan

Once the voyage ended on Nov. 25, 1942, the surviving prisoners were taken to Camp Tanagawa in Japan. Small spent about two months at Camp Tanagawa before being transferred to Camp Zentsuji on Jan. 16, 1943.

Small was put to work on a farm, growing crops for the Japanese. Japanese guards would escort the work detail to the farm each day, which was located about a mile from Camp Zentsuji. A Buddhist Temple was located near the farm on the route. Along the way, the Japanese guards would require the prisoners to bow down whenever they came to the shrine.

Despite working on a farm, the prisoners’ ration situation did not improve. Small said they subsisted on a little bit of rice—about the size of a tennis ball—tea, and occasionally some greens.

“Hunger was always on our minds,” he said. *“I had dropped down to 98 pounds. I was just a skeleton. I just thought about food and dreamed about food every night.”*

He was imprisoned at Camp Zentsuji for 18 months before being transferred to Camp Roku Roshi on June 23, 1945. Small would spend the remainder of his time as a POW at Camp Roku Roshi until his liberation on Sept. 10, 1945.

Small said that while he does not regret volunteering to serve on active duty with the Army, he does regret being captured. He said he would volunteer to serve again today if he felt it was for the good of the country. **VA**

By Renee McElween

Getting a Wing Up

Veterans aren't the only ones 'flocking' to the West Los Angeles VA Medical Center.

We've all heard it takes a village to raise a child. At the VA Greater Los Angeles Healthcare System's West Los Angeles VA Medical Center, it turns out that it takes a village to raise a bunch of wild parrots, too.

If you live in Southern California, you've no doubt heard the high-pitched screeches coming from what appears to be a moving green cloud in

the sky. This invasion of the ears and eyes is none other than flocks of wild parrots that have adopted this region as home, and by doing so, have changed the look of the local landscape—even that of the West L.A. VAMC campus.

The VA site is proving to be a hospitable place for some of these birds to live—especially for parrots that have been discarded by owners,

hurt in the wild, and otherwise rescued. For them, a sanctuary called Serenity Park is right on VA property.

Lorin Lindner, Ph.D., an eco-psychologist, saw an opportunity to help both veterans and parrots by creating what she describes as a “trans-species” recovery program—in essence, a program of mutual caring and dedication, allowing both veterans and the rescued parrots to heal by helping each other.

Although Lindner is not a VA employee, she is very familiar with VA and veterans. She worked with homeless veterans for years, eventually serving as clinical director of New Directions (a homeless veterans program that partners with West L.A. VAMC) for 10 years.

The VA facility provided an unused building to house the program. While working there, Lindner would sometimes take veterans to a parrot rescue sanctuary located two hours north of Los Angeles. It was meant as recreation but she noticed that something else was happening—she witnessed the therapeutic value that veterans were gaining from the experience with the birds.

Lindner started talking with various staff at West L.A. about creating a parrot sanctuary on campus. “We talked with key staff at the hospital, including the heads of nursing, mental health and the domiciliary,” Lindner explained. “I asked them if they felt a program like this would benefit patients. They agreed it would.”

Greater Los Angeles Healthcare System Director Chuck Dorman is no



PAULA BERGER

Magdalena, left, and Ruby are two of the residents of the parrot sanctuary at the West Los Angeles VA Medical Center. They are green-cheeked Amazon parrots.

stranger to creative approaches that help veterans. Besides a successful compensated work therapy farming program called Vets Garden, West L.A. has many other programs on-site that were developed “out-of-the-box.” A parrot sanctuary was just one more.

“If I know it’s a program that will help veterans with their recovery,” Dorman explained, “I’m all for it. If it’s a bit unconventional, we’ll just chalk it up to being trendsetters.”

The VA facility found an area on campus—what was once part of a dilapidated basketball court—for the parrot sanctuary space. Lindner hires veterans from the domiciliary, New Directions, Salvation Army programs on campus, and other veterans’ programs to work with the birds. Many of these veterans come from backgrounds of homelessness, substance abuse and mental health issues.

“Without this land ... and without the veterans here, I couldn’t be doing this,” said Lindner. “I’ve always been interested in working with veterans and ... as an eco-psychologist, I know that nature is healing. Here, they get job training while they get their recovery addressed.”

No VA money goes into the structure or upkeep of Serenity Park. Outside grants not only paid for the huge aviaries, they pay the veterans who are working there as part of their compensated work therapy.

“The birds really respond to these men and women ... it’s a relationship. For people who are dysfunctional, it can be hard to even care for a plant,” Lindner explained. “In taking care of an animal ... you’re responsible for its well-being and you can’t just do what you want. It’s a responsibility and an obligation.”

One of the first workers was a female Iraq war veteran who couldn’t even come out of her house, but once part of the program, she knew the birds had to be fed and that she was responsible for their livelihood. The birds got to know and trust her.

George, a Marine Corps Vietnam



Judy feeds Sherman, a blue and gold macaw. She worked with the birds while participating in the Salvation Army women’s program on the West L.A. VAMC campus and says they taught her “everything. They even taught me how to be a mom again.”

veteran, has only been in the program for two months. As a resident on the West L.A. VAMC grounds at the Salvation Army board and care program, he heard about the parrot sanctuary program through his case manager. He believes working at the bird sanctuary is helping him deal with his problems.

“It’s good therapy,” George said. “I don’t smoke when I’m here and I feel relaxed and peaceful. It helps give guys like me a chance to get involved.” Some of the birds are still getting used to him. “The big ones (macaws) don’t run away from me anymore when they see me. Now they squawk when they see me.”

Currently there are six veterans working in the parrot sanctuary pro-

gram at West L.A. One of them, Alton, a veteran who worked in the sanctuary for six months, recently left the program to go back to school and begin a whole new life. While training his replacement to take over his duties, which included feeding the birds and rewiring their perches, he said he would miss the birds, especially Joey, a double yellow-headed Amazon parrot.

“Joey’s a morning guy,” Alton said. “I would walk up to him and say ‘good morning, Joey,’ and he’d say ‘hello’ back to me. Once he gets started, he’s on!”

After becoming homeless, another of the veterans, Judy, ended up in the Salvation Army women’s program on the West L.A. VAMC cam-

pus. She's been working with the parrots for about four months and is almost ready to leave and graduate from her program.

The experience with the birds, she says, has brought her back to life. "They taught me everything," Judy said. "They even taught me how to be a mom again."

Working in Serenity Park was a natural spot for Judy. She's looking forward to being on her own again with a life that is sure to include animals.

As for how "it takes a village" applies to the parrot project, the medical center receives support from other partners in the community:

- Petco, the national pet store chain, supplies bird food once a month for the parrots.
- Albertsons, a major supermarket chain in the area, donates four boxes of fruit every week.
- A local farmers market that sells a variety of produce on the VA grounds every Thursday donates a lot of their

produce to the parrots and they often take the time to hand-feed them.

- Volunteers and staff at West L.A. have donated time and other services to help the sanctuary. One couple even bought foam for the bottom of the aviaries so that if the younger

"For people who are dysfunctional, it can be hard to even care for a plant. In taking care of an animal ... you're responsible for its well-being and you can't just do what you want."

birds fell, they wouldn't get hurt.

- Local handymen built little winter shelters inside the aviaries with heating lamps so the parrots could better tolerate the chilly winter weather.
- A local architect got the architecture department at American International University to create a community service class. Students came out and cleared the old asphalt by hand, built the small office/storage building, hand-built benches, etc., all pro bono.

■ Vets Garden provided flowers and plants to beautify the area and a local chapter of Eagle Scouts came out to plant them.

■ Los Angeles Zoo docents and local bird club members come by to help out where needed.

■ U.S. Fish and Wildlife Service gave the sanctuary 10 green and blue Indian ringneck parrots that were part of a larger group of birds they confiscated from illegal activity.

■ There are even shifts of volunteers who come on weekends to feed the birds, clean the aviaries, and do whatever needs to be done.

Besides Joey the "morning bird" and the 10 Indian ringneck parrots, residents at the sanctuary include Sherman, a bright blue and gold macaw, and Corky, a green military macaw, the largest birds in the group. Then there's Ruby and Magdalena—baby sisters that were kicked out of their nest in the wild—both green-cheeked Amazon parrots, and Tweety—a unique, all-yellow ringneck parrot.

It is estimated that more than 7,000 wild parrots from 10 different species live in California. How they got here is the stuff of urban legend, but often it's because pet owners didn't realize the commitment involved (parrots can live 30 to 80 years), and got tired of them.

No one at this VA site can help but notice these bright green flyers. You certainly can't miss hearing them. Even so, the parrots are special and staff and patients say they would miss them if they weren't around. Watch out, Discovery Channel—West L.A. VAMC has a wing up! **VA**



After showing VA Greater Los Angeles Healthcare System Director Chuck Dorman how to feed Joey, CWT veterans Judy and Bruce watch as he gives it a try. Dorman isn't averse to creative approaches to helping veterans in their recovery from homelessness, substance abuse and mental health issues.

PAULA BERGER

By Susan Fishbein

Two Allies, One Mission

Foreign visitor helps Korean veterans while learning how the U.S. cares for its veterans.

“I saw so many Agent Orange patients at the regional office,” said Seon-Mi Jang. “So many veterans are suffering from disease.”

Jang doesn't work at VA. She works at a regional office of the Korean Ministry of Patriots and Veterans Affairs in Seoul, South Korea.

With the exception of South Vietnam itself, no U.S. ally sent more troops into the jungles of Vietnam than South Korea. Korean troop strength averaged more than 40,000 soldiers, marines and support personnel each year from 1965 to 1972. They were a handpicked, all-volunteer force serving one-year tours. Shortly after returning home, many began experiencing the same illnesses as their U.S. counterparts.

VA's response to the needs of veterans exposed to the herbicide Agent Orange includes compensation, health care, outreach, education and scientific research.

South Korea has not yet mounted such a comprehensive program. It's one of many areas where Jang thought she might be able to improve her country's service to veterans by learning more about the U.S. Department of Veterans Affairs. So when the Korean government awarded Jang an overseas fellowship to work anywhere in the world for six months,



KEVIN CASEY

Intensive Care Unit Attending Physician Dr. Joon Kim provides a native-language tour to Korean guest Seon-Mi Jang at the James J. Peters VA Medical Center in Bronx, N.Y., in February. Jang is with the Ministry of Patriots and Veterans Affairs in Seoul, South Korea. She spent six months visiting U.S. VA facilities looking for ideas to improve her country's service to veterans. During her time in the U.S., she also met with Korean veterans and translated VA's benefits pamphlet into Korean.

she chose to come to the New York VA Regional Office.

New York VARO Director Patricia Amberg-Blyskal recalled that in the early 1990s, then-Director Joseph Thompson received a similar request to host a guest from South Korea. Years later, when Thompson was VA's Under Secretary for Benefits, he visited South Korea as the Veterans Benefits Administration was starting its Benefits Delivery at Discharge program, which helps separating servicemembers develop their VA disability compensation claims before they are discharged from the military.

“The connections between our countries and our service to veterans require us to assist when we can in helping and sharing our experiences.”

The information his Korean visitor had provided earlier helped VBA leadership understand the host country and its programs for veterans.

Knowing this history, Amberg-Blyskal immediately approved Jang's visit. “The connections between our countries and our service to veterans require us to assist when we can in helping and sharing our experiences,” she said.

Jang works in compensation in South Korea, so starting at the VARO was natural for her. She found our process more standardized than what she sees at home, but that also means it's more complicated.

Learning about Agent Orange programs was just the beginning. In her 12 years at the ministry in South

Korea, Jang has also handled enrollment, loan assistance, burial and health care. So while here, she ventured out from the VARO to visit VA medical centers, community-based outpatient clinics, vet centers and national cemeteries.

South Korea is the size of Utah and has a population of just under 49 million. As might be expected, many of Jang's impressions have to do with the scale of VA's services in the U.S. “There are so many health care facilities across the whole country that veterans have easy access to care,” she said.

Jang thinks sorting veterans seeking health care into eight priority groups is a good system, and she's impressed that veterans can enroll by visiting any VA medical center. In South Korea, veterans must apply at a regional office before they can seek treatment at a medical facility.

Jang was moved by her visits to Long Island National Cemetery and Calverton National Cemetery. “I was so impressed with the beautiful scenery, and they were kept well,” she said.

There was no question where she wanted to be on Veterans Day. Jang traveled to Arlington National Cemetery in Virginia. “There were so many citizens and veterans who were enthusiastic or solemn,” she said. “I

felt Americans love their country so much and are proud of their country.”

South Koreans are no different. The country's oldest veterans are patriots who resisted Japan's harsh colonial rule from 1910 to 1945. Others served during the Korean War and in the tense standoff with North Korea that continues to this day, 54 years later.

Jang got to meet many of her own constituents during an October visit to Korean Community Services in Flushing, Queens. With the help of two staffers from the New York VARO, she explained the veterans programs of both countries to a crowd of more than 50 Koreans and Korean-Americans.

The South Korean visitor also translated VA's benefits pamphlet into Korean while she was here. “I wish, even a little, it would help you,” she said, with characteristic modesty.

Jang returned home Feb. 26 buzzing with ideas from the cross-pollination between agencies, and she left behind peers in the U.S. who admire her intelligence and dedication.

Amberg-Blyskal was most impressed with Jang's desire to learn—and to venture forth. “She mastered the New York subways and the Long Island Railroad!” she said, adding, “I believe Seon-Mi's quiet, determined manner will help her as she applies the learning and shares her experiences with her colleagues at the Korean Ministry of Patriots and Veterans Affairs.” **VA**

By Kevin Casey

	Korean Ministry of Patriots and Veterans Affairs	U.S. Department of Veterans Affairs
Eligible Veterans and Families	1.59 million	63 million
Medical Centers	5	155
Regional Offices	24	57
National Cemeteries	6	125
Employees	12,000	235,974

Advancing a New Front

VA dietitians are helping veterans take control of their health.

“A dietitian saved my life when I didn’t want to save it,” recalls Larry Peterson, a Vietnam veteran who says he owes his 300-pound weight loss to the compassion and expertise of VA dietitian Heidi Hoover.

Peterson, who weighed 603 pounds when he met Hoover at the Minneapolis VA Medical Center, is not alone. Regardless of the reason for their visit, nearly every veteran who enters one of the 155 VA medical centers across the country meets with a registered dietitian. And with dietitians supporting health care programs ranging from geriatrics to rehabilitation and post-traumatic stress disorder, they see a diverse group of patients.

In her job as a dietitian with the Southern Arizona Geriatric Extended Care Unit and Rehabilitation Center, Florinda Romero-Vagedes encounters a challenging range of issues, from cancer to renal failure to surgical foot ulcers. After completing a patient intake session, her work mostly involves goal-setting for patient rehabilitation: How did the patient come to be at the medical center? What activity level is the patient ultimately trying to reach?

Setting attainable goals is an important component of rehabilitation for veterans, explains Barbara Hartman, chief of Nutrition and Food Services at the Martinsburg, W.Va., VA Medical Center. “First we assess a patient’s physical capability, and then we factor in what he is ready to do on a psychological basis,” says Hartman.

For example, the Martinsburg

center supports veterans recovering from open or closed head injuries. In addition to providing nutrition assessments and educating patients on diet, the program also offers cooking classes in which head injury patients plan the menu, do the grocery-shopping, cook and clean up. But the class isn’t just about cooking; it fits into the bigger picture of how the patients handle budgeting, shopping or holding their hands steady to use a cutting board and a knife.

The center also offers a post-traumatic stress disorder program, which mostly sees Vietnam veterans. Though the nutrition services include general clinical dietetics, dietitians spend a significant amount of time gaining the trust of PTSD patients, whose conditions are rooted not only in experiences during the war, but after their return home as well.

In VA’s substance abuse disorder treatment programs, underweight and malnourished patients are common challenges for dietitians. And often the same faces in the substance abuse programs are seen in the homeless programs, where dietitians have a strong presence because of the unique set of nutrition problems that come with life on the streets.

But many veterans face more common health conditions, and like the rest of the country, obesity is one of them: VA serves more than 5 million veterans, of whom about 70 percent are overweight and approximately 30 percent are obese. VA responded with the multidisciplinary MOVE! Program.

“This is the largest and most comprehensive weight management and physical activity program associated with a medical care system in the United States, and our clinical dietitians play a key role,” says Ellen Bosley, national director of Nutrition and Food Services in VA Central Office. “The MOVE! Program is being offered at every VA medical center in the country.

“The good news is that weight loss has been shown to delay the onset of diabetes in a diverse American population of overweight people, lower heart disease risk and improve quality of life.”

Weight loss research shows that up to five years after dieting, dieters are able to keep off an average of 7 of the pounds they lost. Since most people gain 3 to 13 pounds over a five-year period, the dieter can be as much as 10 to 20 pounds lighter than the non-dieter.

Bosley offers a few examples of some successful nutrition and weight loss programs currently available to veterans in the VA health care system.

Dietitians at the **Oklahoma City VA Medical Center** promote positive eating habits by assisting veterans in controlling their cholesterol levels through a bi-weekly Lipid Clinic. Veterans participate in small group nutrition classes that provide a comfortable environment for them to ask questions and interact with the staff. Veterans are encouraged to bring family members who want to help the veteran make changes and may want

to change their own eating and lifestyle habits. For veterans with diabetes, dietitians team with nurses to offer classes on diabetic eating patterns and other diabetic care issues. Patient surveys have shown that one of the most important things patients gain from these classes is learning to pay attention to how many carbohydrates they take in each day and not just focusing on the sugar content of foods. They also learn about the effects of liquids (fruit juice, milk and Gatorade) on their blood sugar levels.

Louis Stokes Cleveland VA Medical Center dietitians offer several classes to promote healthier lifestyles. Each class starts with an emphasis on the importance of reducing risk of cardiovascular disease. The major focus of one class is carbohydrates and their impact on blood glucose control. Use of flashcards, menu examples and interactive group discussion make this difficult concept fun and easier to understand. Carbohydrate counting and food label reading classes are also offered for additional nutrition information. The diabetes program participants have suc-

cessfully lowered their blood sugar levels with the help of these classes.

At the **Canton, Ohio, Outpatient Clinic**, interested veterans join the MOVE! Program and participate in 12 weekly classes taught by a multidisciplinary group. The dietitian in this group helps the veterans learn to keep food records, add more activity to their daily lives, and make small changes in their food choices. While many veterans have lost 5 to 10 per-

“The good news is that weight loss has been shown to delay the onset of diabetes in a diverse American population of overweight people, lower heart disease risk and improve quality of life.”

cent of their starting weight, several have lost even more. Veteran Gary Archer, who completed the program in February, lost 12 percent of his starting weight. His diet still includes his favorite foods but he learned how to control the portions as well as add new foods that help him feel full. He increased his activity each week by setting goals and keeping records. He


plans to continue his weight loss efforts.

A fitness program called Walk, Lunch and Learn has been in place for two years at the **San Francisco VA Medical Center**. Nutrition and Food Services partnered with Voluntary Services to offer a wellness/health promotion program that would be fun and inspire fitness for a targeted (elevated weight/BMI) veteran population. The program involves a guided

walk with volunteers, veterans and clinical nutrition staff participating; a healthy lunch catered by Veterans Canteen Service and paid for by Voluntary Services; and an interactive, healthy eating class presented by a dietitian, focusing on healthy food choices and appropriate portions. Through the three-part program, the message of healthy eating is visible and powerful, and the opportunity to make meaningful social and professional connections, surrounding the concept of good food for good health, is appreciated by the veterans.

VA dietitians ask all department employees to support veterans in making healthy eating choices and incorporating physical activity into their daily routines by referring veterans to the appropriate nutrition and weight loss programs at VA facilities. Contact local Nutrition and Food Services staff for information on the programs available at your facility.

Bosley notes that VA is a leader in this area; most private insurance companies do not cover nutrition services for their clients, yet nutrition counseling is widely available at VA facilities.

For more information, visit the VA Nutrition and Food Services Web site at www.va.gov/nfs. 



A healthy lunch is one part of a fitness program offered at the San Francisco VA Medical Center called Walk, Lunch and Learn.



Jennifer Jennings, customer service representative at the Health Administration Center, "chats" online with a beneficiary.

JAY KAPPEL

Health Administration Center

Where Customer Service is Job One

Whether answering an inquiry about benefits sent by letter or engaging in an online chat, the emphasis is the same for VA Health Administration Center (HAC) employees—providing exceptional customer service.

Located in Denver, the HAC was established in 1987 to manage centralized eligibility determinations for the Civilian Health and Medical Program for the Department of Veterans Affairs (CHAMPVA). The center has grown from a fledgling eligibility cen-

ter with less than a dozen employees to the largest non-clinical organization within the VA health care system.

The HAC is responsible for managing four congressionally-mandated, major health plans for veterans and their family members as well as a host of other important financial functions related to the day-to-day operations of the VA health care system. The CHAMPVA program is the largest of the health care programs the center administers, followed by the Foreign

Medical Program, the Spina Bifida Health Care Program and the Children of Women Vietnam Veterans program. Together they represent more than 300,000 veterans and veterans' dependents worldwide that generate nearly 8 million health care claims, with a budgetary footprint of nearly \$800 million.

The center has established a network of customer-friendly services to allow beneficiaries, providers and other customers the maximum opportunity to communicate with the staff.

The most used of these services is the call center, which is staffed with 125 employees working from 8:05 a.m. to 7:30 p.m., Eastern Time. The call center receives around 1.7 million calls each year related to health care programs and in some cases overseas calls from Foreign Medical Program beneficiaries.

Another service offered by the center is an online "Live Chat" capability that allows beneficiaries to e-mail a customer service representative and have their questions answered in real time online.

"During the last six years we have had a period of unprecedented growth in all of our programs," said Ralph Charlip, director of the HAC. "We have gone from just over 100,000 eligible beneficiaries for all programs in fiscal year 2001 to over 300,000 this year."

Despite the rapid growth, the center has excelled at customer relations and service and was ranked in the top five of all government agencies by the American Customer Service Index. The HAC received a rating of 86 out of 100 possible points, which is 14 points higher than the federal government average of 72 and third highest overall for the entire government. The study compared the

center to other civilian health insurance industry leaders, and it scored 24 points higher than the nearest private sector organization.

"The HAC has established a high customer satisfaction rating in both internal and external satisfaction evaluations," said Ben Keller, chief of the Customer Service Center at the HAC. "Our staff has a deep commitment to serving our veterans and their families and is determined to provide exceptional support. Fiscal year to date, the Customer Service Center has received a 96.8 percent satisfaction rating from customers."

According to Charlip, a genuine sense of dedication to serving the customer has been ingrained into the work ethic of the entire HAC workforce, from the most senior leadership to the workers on the front line. "Just ask anyone at the HAC in any division, whether it is the call center or claims processing, and they all have a very good grasp of their mission and for whom their labors are directed," he said.

"The customer service representative is the face of our organization and for most customers, it's the only face," said Isabel Saunders, a Customer Service Center lead representative. "How you communicate with

people the first time is the key to good customer service. It's important to create a positive first impression. It takes many positives to undo a negative experience."


In 2003, the Fee Program Office was assigned to the HAC and became one of its major functions. Under the Fee Program, the medical centers and VISNs pay for non-VA care when certain conditions are met. In fiscal year 2006, VA authorized this care for more than 530,000 veterans and spent more than \$1 billion to ensure veterans had the care they needed.

"The National Fee Program Support Office's customer service philosophy and practice is to provide timely and accurate guidance that empowers the fee site to succeed in efficiently administering fee health care benefits for veterans," said Les Niemiec, National Fee Program manager.

The expertise and efficiency of the HAC is well documented in its long list of awards and professional accolades. Among others, the center is the 2005 recipient of the Colorado Performance Excellence's Timberline Award and the 2005 Mayor of Denver's Top Employer Partner Award.

"Our vision statement at the HAC says it all, I think: 'To promote the health and well-being of our veterans and their families,'" said Charlip. "It doesn't get any clearer than that, nor does it get any more poignant.

"We are here to serve the veterans of this nation and their dependents and the providers that take care of them to the very best of our ability, period. I am very confident in the knowledge that this is happening and that the HAC is a very big part of that, not only for the beneficiaries of the programs we manage but for veterans worldwide."

For more information about the HAC and its programs, visit their Web site at: www.va.gov/hac. 

By Glenn Johnson



JAY KAPPEL

The call center handles about 1.7 million calls each year.

Kim-Binh C. Kibler, right, with supervisor Sue Goss, was rescued by a U.S. Marine helicopter from the roof of the U.S. Embassy in Saigon hours before the city fell to the communists during the Vietnam War. She began volunteering with VA as a way of showing her appreciation to the United States and its veterans.



CHRIS PACHECO

From Volunteers to Employees

Some VA employees began their service to veterans as volunteers.

Maria K. Fasano's uncle, a Navy submarine veteran of World War II, encouraged her to volunteer. LaVonne Garrison didn't want to stay home babysitting her younger siblings all summer, but at age 15 was too young to get a paying job. Enoch Favours volunteered as part of his high school's Career Experience Program. Trudy Dugan wanted to be able to golf for free. Shelley Kay Long had been tagging along with her

father, a VA chaplain, to evening and weekend events for veterans for years and enjoyed the experience so much she signed up to be a volunteer as soon as she turned 14.

Although their motivations varied, the end result is the same. At least 79 VA employees are on the payroll today after spending time as unpaid volunteers helping America's veterans.

Kim-Binh C. Kibler started vol-

unteering at VA as a way of showing her appreciation to the United States and its veterans, especially those who served in the Vietnam War. Kibler narrowly escaped from Vietnam at the end of the war in April 1975 with her husband, Paul, and their 3-year-old son, Tri. Paul was a U.S. Embassy employee and she worked at the Defense Attache Office on Tan Son Nhat Air Base. Her family was rescued by a U.S. Marine helicopter that landed

on the roof of the U.S. Embassy in Saigon a few hours before the communists took over the city.

The Kiblers made their way to the United States, eventually settling in Washington state. She became a U.S. citizen in 1979.

Kibler was hired by VA in April 2003 as a program support clerk at the VA Puget Sound Health Care System in Tacoma. She continues to volunteer today. Kibler wakes up a couple of hours early every Friday morning and comes in before her shift begins on her paying job at VA to create business cards for the staff. She has processed more than 133,000 business cards performing her volunteer duties.

"I am thankful to be alive," Kibler said. "I am grateful to those who risked their lives to save me and other people on that last night at the embassy. It has been almost 32 years since I arrived here, but there isn't a day that goes by that I don't think of them. It is the reason that I continue

to volunteer long after I became an employee."

Elisha K. Rasor started volunteering at VA as a 16-year-old high school student as part of an occupational internship program. The program gives students from Eagle Point High School an opportunity to gain career experience by volunteering at VA's Southern Oregon Rehabilitation Center and Clinics (SORCC) in White City.

As a volunteer, Rasor sterilized instruments, set them up for dental procedures, and shadowed the dental assistants. She also worked in the front office making appointment confirmation calls, answering the phone, and pulling patients' charts.

Rasor was hired by VA in June 2006 as a dental aide at the SORCC.

"I love doing things for the veterans, and I think that getting involved at the SORCC was the best thing that ever happened to me," she said.

Michael R. Winn started volunteering at VA as a teenager at the

suggestion of his father, a VA employee and veteran of the Korean War. Winn spent the summers of 1971 and 1972 volunteering in the pharmacy at the VA medical center in Memphis, Tenn. He filled solution and medical bottles using the bulk processing equipment, and performed miscellaneous tasks. Winn said the experience further acquainted him with VA's mission and he found it to be a comfortable place in which to work.

"It taught me a great deal about work ethic, responsibility and working with other people," he said.

Winn was hired by VA in February 1980 as a personnel management specialist trainee in Little Rock, Ark. Today, 26 years and eight VA facilities later, Winn has come full circle—he's now director of the Central Arkansas Veterans Healthcare System, which includes facilities in Little Rock and North Little Rock.

Not everyone started volunteering at VA when they were teenagers.

James A. Rankin Jr. started volunteering at the age of 51. The Air Force veteran was waiting to be seen for a medical appointment at the VA medical center in Boise, Idaho, when he saw a sign in the lobby advertising for volunteer drivers. Rankin said he needed something constructive to do on his days off, and since he hates yard work, he volunteered to drive veterans to their medical appointments as part of the Disabled American Veterans Volunteer Transportation Network.

"It was one of the most rewarding adventures in my life," Rankin said. "I am a history buff and I got a lot of insights into what some of our vets went through in their war experiences."

Besides the desire to avoid having to do yard work, Rankin said he volunteered because the transportation network was not around when his late father—James A. Rankin Sr.—could have used it. His father was a Navy veteran who served during World



Elisha Rasor was 16 when she began volunteering as part of a high school occupational internship program in Oregon. Today she's a dental aide in White City.

THOMAS P. MARSHALL

War II on the USS New Mexico. After suffering a series of strokes in the 1970s, Rankin Sr. relied on family and friends to get him to his medical appointments at the VA medical center in Sioux Falls, S.D., and had to cancel his appointments when no one was available to drive him.

"He got the most fantastic care," Rankin said. "My father was treated with deserved dignity and respect when he was in the VA system. I believe that this exemplary care is what made me decide to volunteer. Volunteering was a way of 'giving back' what the VA gave to my father."

Rankin was hired by VA in December 2003 as a program support clerk at the Boise VA Medical Center. He continues to volunteer today, driving veterans home from their medical appointments when he leaves work.

Several VA employees who started out as volunteers, were hired as VA employees, and then retired from VA are returning to their volunteer roots. For example, **Tommy**

Brown started volunteering at the Boise VA Medical Center as a driver and patient visitor. He was hired as a secretary in Nutrition and Food Services. Brown has since retired from VA but continues to volunteer as a patient visitor.

Laura Balun, director of VA's Voluntary Service Office, hopes to see this trend continue.

"VA has an exceptional volunteer force, and having former VA employees continue to volunteer after they retire allows us to retain valuable institutional knowledge," Balun said.

"Now it's easier than ever for VA employees to volunteer," Balun added, "perhaps as they prepare for retirement." She explained that since VA employees already have the necessary training in cyber security, infection control, safety, and privacy issues, they just have to complete a vol-



Michael Winn was a teenage volunteer; now he's director of the Central Arkansas Veterans Healthcare System.

unteer application and appropriate service-specific training for their volunteer assignment.

The Voluntary Service staff at the local facility will verify if they have the appropriate background check for their volunteer assignment. VA employees or retirees should simply contact their local VA Voluntary Service staff to sign up as a volunteer. **VA**

By Renee McElveen

Some other VA employees who started their careers as volunteers

Rick Ammerman, receptionist, VA medical center, Tuscaloosa, Ala.

Jessica Angove, clerk, VA medical center, Bedford, Mass.

Shan Arcobella, medical clerk, VA Sierra Nevada Health Care System, Reno

Rosalind "Rochelle" Atwood, recreation therapist, VA Gulf Coast Veterans Health Care System, Biloxi, Miss.

Floretta B. Barlow, dental assistant, VA medical center, Roseburg, Ore.

Randall Blodgett, Facilities Management Service chief, Central Texas Veterans Health Care System, Temple

Roberta Bugbee, accounting technician, VA medical center, White River Junction, Vt.

Billie Christmas, clerk, VA medical center, Waco, Texas

Melissa Clausen, telephone clerk, VA Montana Healthcare System, Fort Harrison

Kimberly Conway, program support assistant, VA medical center, Bedford, Mass.

Julie Cox, dental hygienist, VA medical center, Roseburg, Ore.

Bobby Creamer, laborer, VA medical center, Tuscaloosa, Ala.

Vanessa Davis, nursing assistant, VA medical center, Asheville, N.C.

Quin Denton, medical records coder, VA medical center, Tuscaloosa, Ala.

Lionel Duckworth, health technician, Jesse Brown VA Medical Center, Chicago

Trudy Dugan, outpatient coder, VA medical center, Roseburg, Ore.

María K. Fasano, vocational rehabilitation specialist, VA Pittsburgh Healthcare System

Enoch Favors, housekeeping aide, Miami VA Healthcare System

Marjorie Feeley, program support assistant, VA medical center, Tuscaloosa, Ala.

Charles W. Fosmire, human resources assistant, Stratton VA Medical Center, Albany, N.Y.

Tonya Gage, education specialist, Central Alabama Veterans Health Care System, Montgomery

L. Stephen Gaither, staff assistant/public affairs officer, Harry S. Truman Memorial Veterans' Hospital, Columbia, Mo.

LaVonne Garrison, voluntary service specialist, VA nursing home, Pueblo, Colo.
 Gerald Gentile, housekeeping aide, VA medical center, Boise, Idaho
 Laura Gruner, inpatient medical team coordinator, Michael E. DeBakey VA Medical Center, Houston
 David Grupy, program assistant, VA medical center, Durham, N.C.
 Andrew Hamilton, food service worker, VA medical center, Tuscaloosa, Ala.
 Terry Harding, transcription contracting officer's technical representative, VA medical center, Roseburg, Ore.
 Cory Hardy, nursing assistant, VA medical center, Tuscaloosa, Ala.
 Neicy Hardy, program support assistant, VA medical center, Tuscaloosa, Ala.
 Lee Harr, nursing assistant, James H. Quillen VA Medical Center, Mountain Home, Tenn.
 Aida Hawkins-Vindiola, human resources assistant, Southern Arizona VA Health Care System, Tucson
 Nicole "Nikki" Hilton, secretary, VA medical center, Coatesville, Pa.
 Tom Horan, medical clerk, VA Sierra Nevada Health Care System, Reno
 Duane Janke, administrative officer, VA medical center, Boise, Idaho
 Savithri Kamath, medical records supervisor, VA medical center, Martinsburg, W.Va.
 Ulani M. Levy, intern (Technical Career Field), VA medical center, Togus, Maine
 Shelley Kay Long, public affairs assistant, VA Pittsburgh Healthcare System
 Ellen Nicole Lopez, transfer coordinator, James H. Quillen VA Medical Center, Mountain Home, Tenn.
 Carole Lyle, registered nurse, James H. Quillen VA Medical Center, Mountain Home, Tenn.
 Brad Maasjo, IT specialist, VA medical center, Fargo, N.D.
 Colette Manning, registered nurse, VA medical center, Boise, Idaho
 Lupe Martin, nursing assistant, VA medical center, Roseburg, Ore.
 Johnna Matthews, social worker, VA medical center, Tuscaloosa, Ala.
 Charles McIntyre, medical instrument technician, Jesse Brown VA Medical Center, Chicago
 Yolanda Melendez, claims clerk, VA Sierra Nevada Health Care System, Reno
 Susan Miller, registered nurse, VA outpatient clinic, Pueblo, Colo.
 Gary Oilar, housekeeping aide, VA medical center, Roseburg, Ore.
 Katherine Paronto, research technician, VA medical center, White River Junction, Vt.
 Hiral Patel, inpatient pharmacy technician, VA medical center, Philadelphia
 Eccles Pridgen, supply technician, VA medical center, White River Junction, Vt.
 Steve Ransarran, housekeeping aide, Miami VA Healthcare System
 Kathy Roberts, clerk, VA outpatient clinic, Pueblo, Colo.
 Jose Santiago, food service worker, Miami VA Healthcare System
 Billie Scott, medical support assistant, Central Texas Veterans Health Care System, Temple
 Kathryn Seymour, registered nurse, VA medical center, Martinsburg, W.Va.
 Kelly Silvers, dental assistant, VA medical center, Asheville, N.C.
 Violet Ruthie Sims, recreation therapist, VA medical center, Waco, Texas
 Mike Sproule, human resources assistant, Stratton VA Medical Center, Albany, N.Y.
 Allen Stevens, systems administrator, VISN 20, Vancouver, Wash.
 Nathan Stevens, computer specialist, VA medical center, Portland, Ore.
 Paul St. Louis, housekeeping aide, Miami VA Healthcare System
 Gary Stock, program specialist, VA medical center, Tuscaloosa, Ala.
 Janet Summers, nursing assistant, VA medical center, Salisbury, N.C.
 Lyla Sward, recreation therapist, VA Gulf Coast Veterans Health Care System, Biloxi, Miss.
 Francis Taylor, food service worker, VA medical center, Tuscaloosa, Ala.
 Tara Taylor, retail associate, VA medical center, Tuscaloosa, Ala.
 Cheryl Thomas, medical support assistant, Central Alabama Veterans Health Care System, Montgomery
 Catherine Underhill, cook, VA medical center, White River Junction, Vt.
 Brad Wessman, medical support assistant, VA medical center, Fargo, N.D.
 Brenda Whattler, case manager, VA outpatient clinic, La Junta, Colo.
 Rowan Williams, housekeeping aide, Miami VA Healthcare System
 Jay J. Wood, nursing assistant, VA medical center, Boise, Idaho
 Ronald Wragg, pharmacy technician, VA medical center, Philadelphia



Shelley Kay Long was inspired to start volunteering at age 14 after tagging along with her chaplain father Lonnie to veterans' events.



In Search of Our Veteran Ancestors

Part I: Research Basics

Have you ever heard fascinating war stories from your grandfather and wanted to know more about him? A majority of Americans have at least one military veteran in their family lineage, but

few know how or where to begin to conduct research to find information on them. This is the first installment of a three-part series to help you research veterans in your family's past. The second installment will provide

tips for researching a Civil War veteran and the third will highlight sources.

What You Know

The first step in starting your re-

search is to write down *everything* that you already know about your veteran ancestor: full name, date and place of birth, date of death, burial location, parents' and siblings' names, wars they served in, branch of service, dates of service, rank, unit, jobs held, schools attended, etc. Even the most insignificant detail can often prove to be vital in the long run. Interview relatives to obtain as many details as you can. Create folders for each veteran that you plan to research; this will keep your research organized and make it easier to identify where information gaps exist.

Next, determine whether a genealogy has ever been published on your family—someone else may have already found some of the answers for you. Community histories may also provide good information or leads. Check your local library's catalog or their Special Collections section for these types of resources.

Time vs. Money

Do you have time to do the research yourself? Genealogy research is often like searching for a needle in a haystack and requires a substantial investment of time and energy. If you cannot travel to the necessary archival repositories to conduct the research yourself, consider hiring a professional researcher or genealogist to do the work for you. Many archives have a list of approved and experienced researchers they can provide you. Most researchers will charge a fee or hourly rate, regardless of the research results.

Caveats

Despite our modern reliance on computers, you will *not* be able to conduct all of your research on the Internet. Although some online genealogy subscription services provide access to a number of historic records, all valuable records have not been scanned and are not available online. Most archival institutions provide only indexes or guides to their collec-

tions online. Be aware that you may have to physically visit an archive and spend considerable time pouring through pages and pages of records or microfilm the old-fashioned way.

Not all answers will be found. Despite the volumes of records preserved in America's archival institutions, some records were not saved or were destroyed by fire, acts of war or other hazards. For older records, information was often transcribed by hand numerous times over, so errors, misspellings and omissions may confound or complicate your search.

Document your sources. When you find information on your ancestor, write down where you found it with as much detail as possible. This is especially important if you ever need to re-trace your research steps. Include the name of the archives or library, the collection or record group name, page number or other detailed reference information. Example: National Archives, Washington, D.C., Record Group 92, Records of the Office of the Quartermaster General, Entry 546, Burial Records of Soldiers Who Served in Ohio Regiments, page 30, line 5.

Visiting the Archives

Archives are *not* libraries. Although libraries often house an archives section, their operations are very different. In an archive, you cannot wander through rows of books or records and pull resources yourself. You will need to register as a researcher at each archive visited and they will issue you a researcher's photo identification card. Your purse, briefcase, coats and other personal items will be locked up in a separate room. Due to the historic and often fragile nature of old records, there are strict procedures to follow to gain access to the records you need. You may be required to wear gloves to handle certain records.

Each archive is different, so it is best to read their policies and procedures online before making your visit.

Some archives charge a fee or require an appointment for access to their records. The majority of archives charge fees for photocopies, so take money with you. Your purse and briefcase will be inspected by security officers before you leave.

Primary Place for Conducting Your Search


The majority of military and veteran records can be found at the National Archives and Records Administration (NARA). As the official recordkeeper for the federal government, NARA's holdings include records of servicemembers for all American wars, as well as census, immigration and other important records. Records for Medal of Honor recipients before World War I are preserved in the Records of the Office of the Adjutant General; World War II and later recipients' records are stored at the National Personnel Records Center.

NARA Web sites of interest

- National Personnel Records Center www.archives.gov/st-louis/military-personnel
- Genealogy resources www.archives.gov/genealogy
- African American resources www.archives.gov/genealogy/heritage/african-american
- Native American resources www.archives.gov/genealogy/heritage/native-american

Selected Sources for Veteran Information

- Library of Congress, Veterans History Project www.loc.gov/vets
- Daughters of the American Revolution (DAR) www.dar.org/library/default.cfm

For specific research questions, contact Darlene Richardson, VHA historian, at (202) 273-8923 or by e-mail at Darlene.Richardson@va.gov. 

By Darlene Richardson

National Salute to Hosp



ROBIN CRONSHAW

Above: McArthur Dixon, a patient at the William Jennings Bryan Dorn VA Medical Center in Columbia, S.C., displays a handmade valentine he received during a visit from Miss Teen South Carolina on Feb. 13.



PAULA BERGER



TIM TERAN



MARIBETH BROWN



MICHAEL E. DUKES

Top: "Cupid" paid a visit to the VA Greater Los Angeles Healthcare System's Los Angeles Ambulatory Care Center on Feb. 15, brightening the day of patients including Alberto Atividad; center: Debbie Sartino, a volunteer clown at the Birmingham, Ala., VA Medical Center, and Stephanie Call, Voluntary Service assistant, visited and made balloon figures for patients; bottom: Members of the U.S. Air Force Strings filled the halls of the Baltimore VA Medical Center with soothing music while members of the Bolling Air Force Base's Ceremonial Guard visited patients on Feb. 13. The Strings ensemble is part of the U.S. Air Force Band.

Left: These schoolchildren from Manhattan, Kan., traveled an hour for their field trip to the VA Eastern Kansas Health Care System's Topeka campus to distribute their handmade valentines to veterans and decorate the facility's corridors with their creations.

hospitalized Veterans 2007



DEBORAH MEYER



SCOTT KRUEGER

Top: Bruce Gordon, director of the Central Texas Veterans Health Care System, greets first-graders from a local elementary school. Children from the school performed a cadence for patients and visitors: "I don't know but I've been told, veterans are made of gold ..."; center: University of Wisconsin cheerleaders visited patients at the William S. Middleton Memorial Veterans Hospital in Madison on Feb. 11, including Jerry Poarch. With him and the cheerleaders are his wife, registered nurse Jenea Cade and the cheerleaders' U.S. Marine Corps escort; bottom: Miss California Jacquelynne Fontaine visits nursing home care unit patient Winfield Neff at the VA Palo Alto Health Care System's Livermore Division.



LAURA E. THEIS



MISS CALIFORNIA ORGANIZATION



ANNA DIEHL

Top: Virginia Love, a volunteer with the National Society of the Colonial Dames of the XVII Century, reads a valentine to Tarver Snedecor, a patient at the Southern Arizona VA Health Care System's Southwestern Blind Rehabilitation Center in Tucson; bottom: The VA Southern Oregon Rehabilitation Center and Clinics kicked off National Salute week with a visit by Bryce Fisher (#94), defensive end for the Seattle Seahawks, on Feb. 12. An Air Force Academy graduate, Fisher spent two years on active duty with the Air Force and is currently on active duty with the Washington Air National Guard. He paid his own airfare for the visit with patients and staff.

High School Students Get an Inside Look at Federal IT Careers



High school students Bradley Hart and Kaelyn Mulvey recently spent a day with VACO IT professionals including (left to right) Michael Boyce, Kim Pugh (seated), Eleanor Sullivan-Friday and Owen Dolan.

Eight high school seniors from Marshall Academy in Falls Church, Va., got a close-up look at the real world of Information Technology management watching government IT professionals do their jobs during IT Job Shadow Day Feb. 1 at VA Central Office in Washington, D.C.

IT Workforce Planner Paanee Grupe and IT Specialist Anne Ogu worked closely with Marshall Academy career advisor Stephanie Thompson to bring the students, all of whom are considering careers in IT, to headquarters to see what it's like to work for VA.

"This program can help the students achieve a well-rounded education," said Thompson. "We can teach them all of the different aspects of information and technology, but they need to learn more than that by interacting with the real business world."

Ogu said the event was

designed with that in mind and "gives students the unique opportunity to observe the real-life world of federal IT professionals." She and Grupe hope to make IT Job Shadow Day an annual event.

Kaelyn Mulvey and Bradley Hart, both 18, were two of the students who visited VA headquarters to learn how they could apply their interest in computers to a career in the federal government. Hart, who wants to be an IT security consultant, hopes to intern at VA this summer. Mulvey will attend George Mason University in Fairfax, Va., in the fall, and although she is unsure of her future career path, she was eager to see the inner workings of VA's IT management. "This has been a great educational opportunity to really see and get hands-on experience in what my future career could possibly be," Mulvey said at the

end of the day's activities.

A panel of previous IT interns who are now VA employees spoke candidly about their experiences interning and working for the federal government. One panel member was Kim Pugh, an IT specialist at VACO. She interned

with VA after graduating from George Mason University. "You need an agency that can take care of you. The VA can do that for you and will give you all the training you will need to be successful in your future careers," said Pugh.

To give the students a true feel for VA, each of them was paired with an IT expert and given the chance to participate in that person's daily office functions. For almost two hours, the students received one-on-one attention and mentoring from the top IT managers. In addition to the job shadowing opportunity, the students also toured VA headquarters, including Secretary Jim Nicholson's office and the Section 508 compliance lab, where they saw technology in action.

VA Assistant Secretary for Information and Technology Bob Howard spoke to the students about VA's mission of serving veterans and how his office supports that mission. "Job Shadow Day gives them the opportunity to see what it really takes to be a VA employee," he said. **VA**

'Echo Taps Worldwide' Planned for Armed Forces Day in May

Hundreds of volunteer brass players are needed to perform the 24 notes of taps on May 19, Armed Forces Day, at 11 a.m. local time, at national and state veterans cemeteries and American Battle Monuments Commission cemeteries overseas.

"EchoTaps Worldwide," organized by VA's National Cemetery Administration and Bugles Across America, will honor American veterans with a worldwide performance of taps. Organizers hope the event will interest brass players in volunteering to perform taps at military funerals of veterans year-round.

Players will form a line through each cemetery and perform a cascading version of taps. Brass players of all ages may perform at a cemetery of their choice. Schools and other organizations are also invited to participate as performers or supporting volunteers. Information and a sign-up sheet are available at www.echotaps.org and www.va.gov/volunteer/spotlight.cfm. **VA**

New \$50 Million Rehabilitation Center Opens in San Antonio



Left to right: Arnold Fisher, chairman, Intrepid Museum Foundation; Gen. Peter Pace, chairman, Joint Chiefs of Staff; Secretary Nicholson; Richard Santulli, president, Fallen Heroes Fund; Kenneth Fisher, chairman, Fisher Houses; and Gordon England, deputy secretary, Defense Department, at the ceremony.

VA Secretary Jim Nicholson was in San Antonio on Jan. 29 to dedicate a high-tech rehabilitation center and two Fisher Houses at Brooke Army Medical Center. VA and the Department of Defense are teaming up to staff the Center for the Intrepid, a world-class

rehabilitation facility for severely wounded soldiers.

The opening of the \$50 million, 60,000-square-foot center allowed the Army to move its rehabilitation program out of Brooke Army Medical Center and into the much larger and more techno-

logically advanced new facility, which features an indoor running track, a two-story climbing wall, gait lab, prosthetic center and virtual reality dome, where veterans can work on improving their balance. Seven Veterans Health Administration employees and

two Veterans Benefits Administration employees are stationed at the Center for the Intrepid.

The center was funded entirely by private donations to the Intrepid Fallen Heroes Fund, chaired by New York philanthropist Arnold Fisher, whose family also makes Fisher Houses possible. Fisher said 600,000 Americans contributed funds for the project, in amounts ranging from \$1 to \$1 million.

Dozens of wounded warriors were among the 3,000 guests at the dedication, along with dignitaries and celebrities including Sens. Hillary Clinton (D-N.Y.) and John McCain (R-Ariz.), Chairman of the Joint Chiefs of Staff Gen. Peter Pace, actress Michelle Pfeiffer and singer John Mellencamp.

The center will initially cater to amputees and burn patients injured in Iraq and Afghanistan, but future plans call for it to expand to include other veterans, military retirees and family members. **VA**

Vet Centers Coming to 23 More Communities Across the Nation

VA's vet center program, which provides readjustment counseling and outreach services to combat veterans, is expanding into 23 new communities across the nation over the next two years. These facilities have become an important resource for veterans returning from the wars in Afghanistan and Iraq and their families.

New vet centers will be located in Montgomery, Ala.; Fayetteville, Ark.; Modesto, Calif.; Grand Junction, Colo.; Orlando, Fort Myers and Gainesville, Fla.; Macon, Ga.; Manhattan, Kan.; Baton Rouge, La.; Cape Cod, Mass.; Saginaw and Iron Mountain, Mich.; Berlin, N.H.; Las Cruces, N.M.; Binghamton, Middletown, Nassau County and Watertown, N.Y.; Toledo, Ohio; Du Bois, Pa.; Killeen, Texas; and Everett, Wash.

VA plans to open the new facilities in Grand Junction, Orlando, Cape Cod, Iron Mountain, Berlin and Watertown this year. The other new vet centers are scheduled to open in 2008.

All vet centers are community-based. They provide counseling on mental health and employment—plus services related to family issues, education, bereavement and outreach—to combat veterans and their families. They are staffed by small teams of counselors, outreach specialists and other specialists, many of whom are combat veterans themselves.

The vet center program was established by Congress in 1979 in recognition that a significant number of Vietnam veterans were still experiencing readjustment problems. Today, all veterans who served in combat are eligible for care at a VA vet center at no cost, as are their families for military-related issues. Also eligible are veterans who were sexually assaulted or harassed while on active duty and the families of servicemembers who die on active duty.

Currently, VA maintains 207 vet centers in all 50 states, the District of Columbia, Guam, Puerto Rico and the U.S. Virgin Islands. **VA**

Little Caesars Offers Franchise Opportunities to Disabled Vets

An Operation Iraqi Freedom veteran who returned from combat a double amputee became the owner/operator of a Little Caesars Pizza franchise in January in Paducah, Ky.

For Paducah native Robbie Doughty, joining the Army was a boyhood dream that became “a calling.” He served as a career soldier and pushed to get assigned to Iraq after 9-11; two months after arriving in the combat zone he returned home wounded. He never lost his gung-ho spirit and completed rehabilitation in record time. He went home to Kentucky on artificial legs after only five months of training on his new prosthetics.

Last year, he received a call from Little Caesars Pizza founder Mike Ilitch. The Marine Corps veteran had read about Doughty’s injury and remarkable comeback spirit and “wanted to do something” for him. That “something” was to give Doughty a Little Caesars Pizza franchise in his hometown free and clear—building, equipment, even a special chair for Doughty behind the counter.

Ilitch, family members and community leaders gathered at a formal presentation ceremony in January. One more person was on hand—Doughty’s Army Special Forces boss, Lloyd Allard, the man he trusted his life to in Iraq and who now joins him as business partner in the new franchise.

Ilitch hasn’t stopped helping disabled vets. He created the Little Caesars Veterans Program, which provides franchise business opportunities to qualified, honorably discharged veterans transitioning to civilian life or seeking a career change. The program, coordinated with the VA Veterans Enterprise Center, offers disabled veterans who qualify deep discounts on Little Caesars franchise costs and free start-up support including favorable financing, opening support and reduced fees—a package worth up to \$68,000.



Disabled Iraq war veteran Robbie Doughty, left, is the new owner of a Little Caesars Pizza franchise in Paducah, Ky. Lloyd Allard, right, who served with Doughty in Iraq, joined him as a business partner.

LITTLE CAESARS

VA Marks 20th Anniversary of Stand Downs for Homeless Veterans

On the eve of the 20th anniversary of its first program targeted specifically at the needs and problems of homeless veterans, VA announced a \$24 million spending package—the largest one-time designation in its history—for programs benefiting homeless veterans.

In events Feb. 22 at Veterans Village in San Diego marking VA’s first homeless program, Secretary Jim Nicholson announced the department was committing \$10 million to support about 1,000 new transitional housing beds nationwide, \$12 million for seriously mentally ill veterans, terminally ill veterans and similarly vulnerable groups, and \$2 million for other programs.

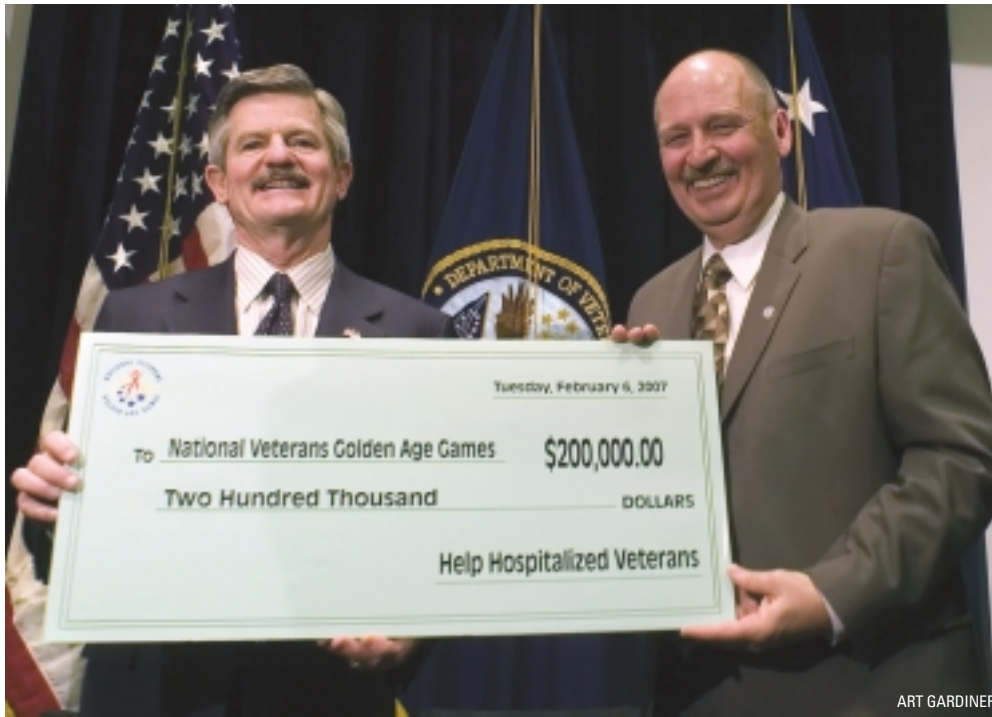
Twenty years ago, VA began its national effort to eradicate chronic homelessness by providing \$5 million for a pilot program to support contract residential care and to

create domiciliary care for homeless veterans.

Today, VA supports more than 15,000 beds in transitional housing facilities or in VA residential treatment programs. The department has become the largest federal provider of direct assistance to the homeless, including outreach and case management, treatment, rehabilitation, transitional residential care, therapeutic work and assistance with permanent housing. VA supports special programs for the treatment and rehabilitation of those suffering from mental illness and addictive disorders.

Since 1988, VA has supported more than 1,500 stand downs across the nation. Stand downs give homeless veterans a temporary refuge where they can obtain food, shelter, clothing and a range of community and VA assistance. **VA**

Help Hospitalized Veterans is New Golden Age Games Co-Sponsor



Mike Lynch, right, executive director of Help Hospitalized Veterans, presents a check to VA Secretary Jim Nicholson to become a co-sponsor of the National Veterans Golden Age Games. This year's event will be held in Houston Aug. 27-31, hosted by the Michael E. DeBakey VA Medical Center. HHV has also been a longtime sponsor of the National Veterans Creative Arts Festival.

In a Feb. 6 ceremony at VA headquarters, Help Hospitalized Veterans (HHV) presented VA Secretary Jim Nicholson a check for \$200,000 to become the newest co-sponsor of the National Veterans Golden Age Games.

"VA is proud to welcome HHV to help bring this important event to our nation's veterans," said Nicholson. "These national games highlight VA's world-class health

care system and encourage veterans to pursue physical fitness and a healthy lifestyle."

A health and welfare organization, HHV joins VA as a co-sponsor for one of the top adaptive rehabilitative senior sports programs in the world. As an event sponsor, HHV shares the responsibility to provide a quality program for America's aging veteran population. HHV has also been a co-sponsor of VA's Na-

tional Veterans Creative Arts Festival for the past 17 years.

"The National Veterans Golden Age Games provide another innovative and marvelous program that gives America's veterans the opportunity to participate in challenging events that not only test their abilities but enhance their spirit," said Mike Lynch, executive director of HHV. "We look forward to our sponsorship to help bring this

wonderful program to the veteran community for years to come."

The Michael E. DeBakey VA Medical Center in Houston is hosting this year's event Aug. 27-31.

The Games are the only national multi-event sports and recreational seniors' competition program designed to improve the quality of life for older veterans, including those with a wide range of disabilities. Activities include swimming, bicycling, golf, shot put, discus, 10-meter air rifle, table tennis, dominoes, shuffleboard, horseshoes, nine-ball, bowling, checkers and croquet. Each event has seven age categories for participation. Veterans with visual impairments and those who use wheelchairs may also compete in the visually impaired or wheelchair divisions at the annual event.

Since 2004, the National Veterans Golden Age Games have served as a qualifier for the National Senior Olympics in a number of competitive events. The National Senior Olympics is a community-based member of the United States Olympic Committee.

Registration for the National Veterans Golden Age Games is now open online at www.veteransgoldenagegames.org. The final day to register is June 1. [VA](#)

VA Partnering With States to Help Severely Injured Veterans

VA has expanded a pilot program to help severely injured servicemembers receive benefits from their states when they move from military hospitals to VA medical facilities in their communities. Secretary Jim Nicholson made the

announcement while addressing a conference of the National Association of State Directors of Veterans Affairs (NASDVA) in Alexandria, Va., on Feb. 12.

"This initiative is a promising extension of VA's own

transition assistance for those leaving military service," said Nicholson. "It is also an opportunity to partner with the states to make long-term support possible for our most deserving veterans throughout the country."

Called the State Benefits Seamless Transition Program, the initiative involves VA staff located at 10 Department of Defense medical facilities. They will identify injured military members who will be

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Greta Crawley

They may not be as well known as Manolo Blahniks or Jimmy Choos, but the customized shoes Greta Crawley makes are just as coveted.

Known as the “Shoe Lady,” 71-year-old Crawley is a prosthetic/orthotic assistant in the Physical Medicine and Rehabilitation Service at the William S. Middleton Memorial Veterans Hospital in Madison, Wis.

She is a master at making and modifying shoes and inserts that help patients struggling with serious foot problems caused by everything from arthritis to diabetes.

Crawley works out of a tiny shop in the hospital basement and has been helping hospitalized veterans with foot ailments for more than 30 years. She began working as a volunteer at the hospital when her children were in school and “officially” began working there in 1974.

She started out making prosthetic legs and feet for amputees. About 20 years ago, she began taking classes on how to heal and prevent foot ulcers in diabetic patients to reduce the need for amputations. She’s been doing shoe and insert work ever since, all with the goal of saving limbs.

Her caring and dedica-

tion have made her a favorite with patients and colleagues. “Greta has developed a reputation across the medical center as someone who can get the job done, and does it with compassion, enthusiasm and creativity,” said Jean Farrell-Holtan, her supervisor in the Physical Medicine and Rehabilitation Service.

If a patient needs to be seen, said Farrell-Holtan, Crawley will fit the patient in, even if it means working through lunch or staying late. “It is not unusual for Greta to run up to one of the clinics to see a patient with a provider to collaborate on developing a plan that meets the patient’s needs,” she added.

Crawley sees five or six patients a day, many of them returning to have adjustments made to shoes or inserts.

Leaving many satisfied patients in her wake, Crawley is pleased that what she does makes such a difference. “I enjoy coming to work every day,” she said. “I really take pleasure in working with patients and seeing them get good results—getting their foot ulcers healed and getting them in regular diabetic shoes, avoiding amputations.”

Many veterans credit Crawley’s interventions with



SCOTT KRUEGER

Greta Crawley works on a patient in her shop. She’s known to patients and staff at the William S. Middleton Memorial Veterans Hospital in Madison, Wis., as the “Shoe Lady.”

saving not only their feet and legs, but also their lives.

“Greta has been the one getting me through to where I can get around like a human being,” John Garrett, 84, of Delavan, Wis., told the *Madison Capital Times* at a recent ceremony honoring Crawley at the medical center. He’d been in pain and was having trouble walking due to arthritis and other problems.

About 100 co-workers and patients attended the ceremony honoring Crawley as recipient of the national Hands and Heart Award, along with a letter from VA Secretary Jim Nicholson praising her efforts. The award rec-

ognizes an employee “who consistently does the most to exercise professional expertise and provide emotional support, help and guidance to veterans through direct patient care above and beyond the call of duty.” Her colleagues nominated her for the honor.

Crawley has no plans to put down her tools and head into retirement anytime soon. “I greatly enjoy having past patients stop back to let me know how they are doing, and I always encourage them to call immediately if they encounter any problems,” she said. “And I especially enjoy the staff I work with—they are wonderful.” VA

State Partnership continued from page 29

transferred to VA facilities. VA staff will contact state veterans’ affairs offices on behalf of the veterans. The state offices will in turn contact the veterans to inform them about state benefits available to them and dependent family members. Most states and territories offer a range of benefits to veterans.

“Connecting veterans

with state benefits immediately upon their separation from military service is a challenge, and more so for those who have suffered serious injury,” said John M. Garcia, president of NASDVA.

“The State Benefits Seamless Transition Program opens a good line of communication and coordination between the Department of De-

fense, the U.S. Department of Veterans Affairs and the state departments of veterans’ affairs.”

NASDVA members are top veterans’ affairs officials in each state and territory. The association is a nexus for the exchange of information among the states, Congress, the U.S. Department of Veterans Affairs and veterans service

organizations.

Nicholson said this state-federal initiative will maintain an injured veteran’s privacy and provide early access to additional benefits. The new national partnership between VA and the states grew out of a pilot program with the Florida State Department of Veterans’ Affairs, which began in September 2006. VA

Psychological Treatments Can Reduce Back Pain

A new study has found that biofeedback or cognitive-behavioral therapy can reduce lower back pain by about 30 percent and may even be more effective than drugs or surgery.

“When I started researching these therapies 26 years ago, we all thought they might help people manage their pain, perhaps help them to go about their lives,” said Robert Kerns, a psychologist with the VA Connecticut Healthcare System and a professor at Yale University. “Now it’s clear they affect the intensity of the



pain itself. There’s a real and important reduction in pain and suffering.”

Pain intensity was one of the key measures Kerns and his colleagues examined in the study, which appeared in the January issue of *Health Psychology*. They reviewed 22 previous studies of patients suffering from chronic lower back pain. Some patients were receiving psychological treatments, while others were receiving more conventional treatment, such as analgesics or surgery. This allowed the researchers to compare the effects of the treatments. Pain intensity was determined by patients’ self-reports.

The effect of cognitive-behavioral therapy appeared stronger than anything else,

Kerns reports. That approach teaches patients to divert their attention from pain and to think about it in a less alarming manner. Biofeedback also had a big pain reduction effect. Feedback makes patients aware of bodily reactions that otherwise occur subconsciously. Sensors can detect muscle tension and signal it as a rising musical tone, for example, so patients can learn to avoid that tone and thus learn to relax their muscles. Kerns said the results of cognitive-behavioral or biofeedback therapy can be life-changing for some patients seeking relief from chronic back pain.

— *U.S. News & World Report*

Controlling Iron Levels Early in Life May Cut Future Heart Risk

A six-year study by VA researchers suggests that reducing the body’s excess iron stores—in this case, by drawing blood—may improve clinical outcomes for people with symptomatic but stable peripheral arterial disease (PAD), but only if iron reduction begins at a relatively young age. The findings appear in the Feb. 14 issue of the *Journal of the American Medical Association*.

“While our study did not show that reducing iron led to across-the-board decreases in overall mortality, or combined death plus non-fatal myocardial infarction and stroke, it did support the theory that vascular health might be preserved into later life by maintaining low levels of iron over time,” said lead author Leo R. Zacharski, M.D., a physician-researcher at the White River Junction, Vt., VA Medical Center and Dartmouth Medical School.

Excess iron in the blood is thought to promote free-radical damage to arteries, par-

ticularly in the early stages of atherosclerosis, a major risk factor for heart attack and stroke. The VA clinical trial involved 1,277 men and postmenopausal women with PAD, ages 43 to 87, studied between May 1999 and April 2005 at 24 VA medical centers.

Patients were randomly assigned to either a control group (no iron reduction) or a group undergoing iron reduction by phlebotomy, with removal of defined volumes of blood at six-month intervals. By the end of the study follow-up period in 2005, there had been 273 deaths from all causes, occurring roughly equally between the iron-reduced (125) and control (148) groups.

When researchers analyzed the results for younger patients in the study—those ages 43 to 61—they found 54 percent fewer deaths from all causes in the iron-reduction group, and 57 percent fewer deaths plus nonfatal heart attacks and strokes. Iron reduction also appeared to somewhat improve the outcomes for smokers and those without diabetes.

The study was funded by VA’s Cooperative Studies Program. Study co-authors included researchers at VA sites in Palo Alto, Calif., and Gainesville, Fla., and at Dartmouth Medical School, Stanford University Medical School and the University of Florida College of Medicine.

Umbilical Cord Stem Cells Show Promise as Heart Attack Treatment


A research team from the James A. Haley Veterans’ Hospital and the University of South Florida has discovered that stem cells obtained from human umbilical cord blood could significantly reduce the

effects of heart attacks in rats, even when administered up to 24 hours after the onset of the attacks. Moreover, no immune-suppressive therapy was needed to keep the rat hearts from rejecting the human cells. The scientists reported their findings in the journal *Cell Transplantation*.

“These observations suggest that human umbilical cord stem cells can be administered relatively late—that is, at 24 hours—after the onset of an acute heart attack and still produce very beneficial results,” said lead investigator Robert J. Henning, M.D., a physician at the Tampa VA.

If the treatment eventually proves safe and effective for humans, it could “reduce the morbidity associated with heart damage,” said Timothy O’Leary, M.D., Ph.D., VA’s director of Biomedical Laboratory Research and Development.

The research team induced heart attacks in anesthetized rats by tying off a major blood vessel to the heart. They took tissue samples from the damaged hearts at nine different intervals post-heart attack, ranging from 1 to 96 hours. Then they exposed each tissue sample to a solution containing 100,000 stem cells and measured how many of the cells successfully migrated to the different damaged tissues. They found that the samples obtained at 2 and 24 hours after an attack attracted the greatest number of stem cells. The stem cells used in Henning’s lab were donated by cord banks that freeze and store umbilical cords—with consent from the mother prior to delivery—after the cord is separated from the mother and newborn.

Henning’s research was funded by VA and the American Heart Association. 



Cooking contest winner Michelle McBride Adams, right, with restaurateur and contest judge B. Smith.

Cooking up a palate-pleasing win

Michelle McBride Adams, a claims examiner with the St. Louis VA Regional Office, won first place in the national *Serving Up Soul* contest sponsored by General Mills. Adams was one of three finalists who traveled to New York City in late January to compete in the quest to crown a new entertaining diva. The finalists were given less than 24 hours to plan and shop for ingredients and other items for their final culinary creations. Contestants were presented with the theme of an elegant birthday brunch for six people, around which they had to plan, prepare and present a memorable dining experience. Judges included B. Smith, restaurateur and lifestyle expert; Jonell Nash, *Essence* magazine food editor; and Shirley Dolland, manager of the Betty Crocker Kitchens. Each selection was judged on creativity, presentation and taste.

Adams, who created a meal around a field greens salad with raspberry vinaigrette, caramelized walnuts and edible flowers; chicken breast stuffed with spinach, feta cheese and garlic; shrimp scampi over pasta parmesan; and brioche rolls, won an all-expense paid trip for two to Las Vegas. "This was such an amazing experience," Adams said. "I had the opportunity to do something I love, use all of the talents that I've acquired over the years and win! It doesn't get much better than this!"

An icy test for the emergency preparedness plan

A devastating ice storm in January tested the effectiveness of the emergency preparedness plan of the Jack C. Montgomery VA Medical Center in Muskogee, Okla. When the National Weather Service issued the severe warning for all of Oklahoma, medical center workers quickly activated the Incident Command and Emergency Operations Center. Staff immediately prepared staffing plans for wards and snow crews and ran checklists for supplies.

The storm, which hit the afternoon of Jan. 13, created heavy ice build-up on trees, walkways and roads, leaving many employees unable to get home. An inpatient rehabilitation unit that had not opened yet was used to house employees and their immediate families. Nutrition and Food Services provided meals to employees over the weekend, and Canteen Service extended operating hours throughout the week.

When the City of Muskogee needed a shelter, the medical center director authorized the use of the auditorium for veterans and their immediate families without electricity and for non-veterans with special medical needs. Medical center employees voluntarily worked around the clock in shifts during the entire time the shelter was open. The facility, which was never without either generator or commercial power, had sufficient nursing

Doing a 'snow dance' in N.H.



Instructor Hank Small works with participant Ellen Kaatz at the New England Winter Sports Clinic for Disabled Veterans.

The snow may have been manmade—thanks to the warmest January on record—but that didn't stop the 10th annual New England Winter Sports Clinic for Disabled Veterans from going on as planned Jan. 8-12 in Mount Sunapee, N.H. Forty-six veterans and 101 volunteers participated in this year's clinic, which promotes rehabilitation by introducing physically challenged veterans to adaptive skiing and other winter sports. Volunteers work with the veterans to teach them techniques and get them out on the slopes.

"The lessons [this year] were as good as I have seen, from beginner snowboard and ski lessons to the higher levels and reaching independence on the slopes," said Ralph Marche, chief of Voluntary Service at the VA Boston Healthcare System and co-founder of the clinic with Anthony Santilli, a VA Boston volunteer and disabled Marine Corps veteran. The two were honored for their efforts with the clinic as last year's recipients of the Olin E. Teague Award—the highest VA honor recognizing employees whose achievements have been extraordinarily beneficial to the rehabilitation of combat-injured veterans.

Women vets showing their pride



ANTHONY SANTOYA

Members of the VA Women Veterans Color Guard participate in an Avenue of Flags dedication ceremony at the VA Central California Health Care System in Fresno last November.

The VA Women Veterans Color Guard first presented colors six years ago during Diversity Week at the VA Central California Health Care System in Fresno. Back then, team members wore jeans, white VA polo shirts and tennis shoes and carried borrowed flags. Today, the all-volunteer group performs throughout the year with their own flags, banner and harnesses while sporting full camouflage uniforms and boots. The nine team members and four alternates represent all five branches of the military and three wars: Vietnam, Desert Storm and the Gulf War.

The only requirements to be part of the team are employment at VA Central California, honorable discharge from the military and a desire to volunteer. Each year they participate in the Veterans Day Parade in downtown Fresno, competing in the color guard category while proudly representing women veterans and VA. "It's a chance to show our pride for VA and the vets," says Daphne Cuyler, 38, an Army veteran and original color guard member.

staff for the 55 to 65 inpatients each day, and both the medical center and its Tulsa Outpatient Clinic saw about 350 patients each day. By Jan. 17, with electricity restored to the majority of the area, most workers were able to return to work and a few days later, the last veteran left the shelter.

Helping a veteran get a long-overdue medal

Mike Ogle, Global War on Terrorism outreach officer for the Spokane, Wash., Vet Center, helped an Operation Iraqi Freedom veteran obtain a long-overdue medal. Ogle was working an outreach event at the Moses Lake Armory when he met an infantry soldier who had been wounded during OIF and had not received the Purple Heart medal. The paperwork on the Army National Guard soldier assigned to an active duty unit bounced from one command to another, but was never completed. Spc.

Alexis Love was injured Jan. 4, 2005, when a car bomb exploded outside his barracks, showering him with glass. Ogle took the incident reports and statements and submitted them through the system. He also received assistance from the office of Rep. Cathy McMorris Rodgers (R-Wash.) in expediting the paperwork. The paperwork was approved, and a medal ceremony was conducted on Dec. 14, 2006, at the Spokane Veterans' Outreach Center. Attending the ceremony were some of Love's buddies from the Washington Army National Guard, other Purple Heart recipients, Love's 3-month-old son Xavier, VA staff members, and members of the media. McMorris Rodgers pinned the medal on Love, praising him and all military personnel deployed overseas as "patriots that are helping shape our history." VA



BARBARA SELLON

Tim Graesser, a housekeeping aide and Navy veteran, is featured on one of the posters.

'Veterans Serving Veterans' in N.Y.

What began in November 2006 as a Veterans Day breakfast thanking veterans employed by the VA Western New York Healthcare System in Buffalo and Batavia has become a year-long campaign recognizing veterans at the medical centers who work to take care of fellow veterans. The *Veterans Serving Veterans* campaign displays photos of employees who served in the military on large posters featuring their military branches and years of service and their personal testimonials expressing what it means to them to serve veterans. Public Affairs Officer Evangeline Conley came up with the campaign after seeing a local grocery store's employee recognition project. She said the response from employees and patients has been overwhelming. The posters are displayed throughout both medical centers.

Honoring research excellence

Douglas Owens, M.D., staff physician with the Ambulatory Care Department of the Palo Alto, Calif., VA Medical Center, received the 2007 Under Secretary's



ROBERT TURTEL

Owens

Award for Outstanding Achievement in Health Services Research on Feb. 22 in Arlington, Va. The award recognizes a VA researcher whose work has led to major improvements in the quality of veterans' health care, made key contributions to the future of health services research through excellence in training and mentorship, and enhanced the visibility and reputation of VA research through national leadership. Much of Owens' research has focused on HIV and sudden cardiac death. His research helped determine that routine HIV screening in health care settings is cost-effective, even in relatively low-prevalence populations. His research on strategies to prevent sudden cardiac death determined that the use of an implantable cardioverter defibrillator was a cost-effective treatment for some patients and also identified those patients most likely to benefit from the use of this device.

Lucille B. Beck, director of Audiology and Speech Pathology and chief consultant for Rehabilitation Services in VA Central Office, recently received the top honor from the American Speech-Language-Hearing Association. She received the Honors of the Association award during the group's national convention in Miami. The award recognizes distinguished contributions to the field of speech, language and hearing. "VA is extremely pleased that this important association has selected Dr. Beck to receive this prestigious award," said Dr. Michael D. Kussman, VA's

acting Under Secretary for Health. "She is one of our top leaders and an internationally respected administrator, policymaker, researcher, clinician and educator." A VA employee for nearly 30 years, Beck has initiated groundbreaking collaborations between VA and the Department of Defense to develop the first distance-learning doctoral program in audiology. Her recent efforts have resulted in increasing the understanding of polytrauma and blast complications for speech, language and hearing.

Robert J. Roundtree, of Vocational Rehabilitation and

Employment (VR&E) Service in VA Central Office, recently received the 2006 Distinguished Service Award from the University of Wisconsin-Stout Vocational Rehabilitation Institute and the Department of Rehabilitation and Counseling. The award was presented during a university conference last fall. This award recognizes dedicated and insightful leadership during a distinguished professional life-

time of service and commitment to the advancement of rehabilitation and serving persons with disabilities. Roundtree is currently serving as the VR&E Service supervisor of Employment Services, where he has been the driving force behind the implementation of valuable career training, work experience and direct job offers to injured Iraq and Afghanistan servicemembers and veterans. **VA**

Linking home and work life

Sandy Leake, R.N., associate director for Nursing and Patient Care Services at the Atlanta VA Medical Center, was selected *ADVANCE for Nurses* Best Nurse Leader for 2006. The balance that Leake achieves between being a loving and active parent and a focused yet compassionate nurse leader are the qualities that led to her selection. Leake has three children: one in high school, one in fourth

grade, and one in kindergarten. "I utilize my expertise in health care by volunteering to conduct vision, hearing and scoliosis screenings for school-age children, and I give talks at schools about health-related careers and personal health issues," Leake said.



PETER GRATTAN

Leake

"By making deliberate choices regarding my volunteer activities, I find that it is possible to positively contribute to my community and still be involved with my children's schools." Leake is most proud of how nursing and the nursing leadership team at the Atlanta VAMC have evolved during her time of service. "Over the past year and a half, we implemented a successful shared governance model that has been very well received," she said. "This encourages involvement of staff at all levels to have a voice and participate in the issues pertaining to nursing practice. We are moving from the philosophy that participation is not just an invitation, it's an expectation."



SCOTT SNELL

MaryAnn Streiter, standing, with the colleague she saved, Lillie Hunter.

Quick thinking at the office

The quick actions of MaryAnn Streiter, secretary in the office of the director at the VA New Jersey Health Care System in Lyons, recently helped save her officemate and fellow secretary, Lillie Hunter, from choking. Streiter heard Hunter gasping for air, and she proceeded to perform the Heimlich maneuver, which dislodged a piece of orange from her throat.

Emergency on board: Helping a child in distress

Cynthia Gordon, nurse executive at the Iron Mountain, Mich., VA Medical Center, Janie McGrew, nurse manager with the Bay Pines VA Health Care System in Florida, and Patricia Lind, nurse executive from the Canandaigua, N.Y., VA Medical Center, were flying from Chicago to Salt Lake City when they learned that a child on board had developed severe breathing problems. Gordon and McGrew responded quickly, suctioning

a clear airway for the child. Lind assisted the father with the medical equipment that the family carried with them. The plane made an emergency landing in Nebraska and the family was transported to an area hospital.

Coming to the aid of a community in crisis

Last summer, states in the Midwest were in the grips of a severe heat wave and drought that had turned thousands of acres of wild lands to tinder. It was on such a night in July that the fire department of South Dakota's VA Black Hills Health Care System responded to an emergency call from state officials to help protect homes endangered by a 2,000-acre wildfire in the Black Hills.

Three off-duty VA firefighters responded and drove a VA reserve fire engine to the threatened area. Through the night they saved four homes from a firestorm by foaming the structures and starting a back burn to eliminate combustible material near the homes. The VA crew was relieved the next day, but worked on after a rest until the fire threat ended. The VA Black Hills Health Care System Fire Department was recently recognized by state and local officials for its professionalism and emergency assistance. **VA**

First on the scene of a tragedy



SHARON CARLSON

Jon Dick was the first to arrive at the scene of an accident in which the victims included two small children and their young mother.

Jon Dick, a patient transport vehicle driver at the VA Roseburg Healthcare System in Oregon, was headed home on a rain-slicked road recently when he came upon a devastating accident involving a pickup truck and a tractor-trailer. First on the scene, Dick rushed to the victims in the pickup and pulled two children, ages 1 and 3, from the wreckage. Dead at the scene was their 21-year old mother, whom Dick had tried to save. A witness to Dick's actions told the *Grants Pass Daily Courier*, "Jon was a real hero. He tried and tried to get [the mother] out of there. He felt bad he didn't have the equipment."



Fulfilling America's Pledge



We thank our employees and volunteers for delivering the best in health care to veterans.

Our mission gives us the great privilege of serving those who bravely serve our nation.



U.S. News and World Report

July 2005

"Today's VA Hospitals are models of Top-Notch Care."

Business Week

July 2006

"VA hospitals and clinics have been ranked best-in-class by a number of independent groups on a broad range of measures."

NBC Nightly News

March 2006

"The transformation of America's VA hospitals has been so dramatic that now the question is why can't all hospitals be this good."

TIME

September 2006

"Most private hospitals can only dream of the futuristic medicine Dr. Divya Shroff (of the Washington VA Medical Center) practices today."

Fortune

May 2006

"The seamless integration of science, information, and compassion is the dream of modern health care. Scenes like these are not fantasies, however, but daily realities at the Veterans Health Administration."

CBS Evening News

December 2006

"In studies, including one by Harvard, and in six straight years of patient satisfaction surveys, VA earned the highest health care quality rating in the country. It's also the least expensive.... Today's VA looks like the future."

