



U.S. DEPARTMENT OF VETERANS AFFAIRS

# Vanguard

SEPTEMBER/OCTOBER 1998



## **NCS 25th Anniversary**

**Proud Past, Challenging Future**  
— page 10-11

## CONTENTS

- ❑ Beulah Cope Dies 4  
*Served Spanish American War vets*
- ❑ Rolling out Enrollment 5  
*Communications plan launched*
- ❑ VA Guides DC Exercise 6  
*Disaster response expects rock n' roll*
- ❑ Blind Sculptor at VACO 7  
*VA celebrates blind rehab program*
- ❑ Red Tape Cutters 8-9  
*Employees earn VA Scissors Awards*
- ❑ NCS 25th Anniversary 10  
*A proud past and a challenging future*
- ❑ Y2K Medical Warning 12  
*Dr. Kizer calls for industry cooperation*
- ❑ PER Honors VA Effort 12  
*Award to NY/NJ Homeless Program*
- ❑ Nurses Share Values 20  
*Process brings nurses together*

## COLUMNS 13-19

### On The Cover:

The dawn of a new day at Camp Nelson, Ky., National Cemetery and dawn of a new millennium for VA National Cemetery System. NCS celebrates its 25th year as part of VA — 1973 - 1998.

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# INTRODUCING

## NCS Silver Anniversary Employees

September 1998 marks the 25th anniversary of the establishment of the National Cemetery System (NCS) with the transfer of 82 national cemeteries from the Department of the Army to the Veterans Administration on September 1, 1973. The anniversary's theme, "Pride in Our Past, Focusing on the Future," reflects the ongoing commitment of NCS and its employees.

NCS employees are a dedicated team. Given the sensitivity of their mission, they have an especially difficult responsibility. The grief over the loss of a member of one's family is often devastating. Of all the benefits a veteran might receive from VA, the one the family is likely to recall most vividly is the last one — the final laying to rest of their loved one in a VA national cemetery.

Twenty-six current employees have served in NCS since its establishment in 1973. The anniversary reflections by two 25-year NCS employees marks the NCS spirit:

"NCS employees take great pride in going the extra mile to help veterans and their families during their time of need. We have tremendous respect for our mission, which has remained essentially the same since 1973. Over the years, I have been able to travel around the country and watch the cemeteries grow. My memories are of the faces of children and widows, family and friends, who come together to share a moment of sadness and great pride. I am truly honored to be a small part of these beautiful National Shrines!" **Paul Graham**, foreman, Quantico National Cemetery

"I consider myself blessed to have worked with some great colleagues over the past 25 years. I am very fortunate in that respect. Occasionally, I run across the same people who have been with VA for a long

time and they ask, 'How do you work for the same department for 25 years? How do you stay there that long?' It is because I love what we do. We have a direct impact on veterans and their families, regardless of whether I work at headquarters or at one of our cemeteries. Throughout my years, I have seen a lot of people leave here...after they're gone, they realize what they are missing and fight to get back where they belong!" **Gladys Partee**, program specialist, Budget and Planning Service, Washington D.C.

The following are NCS employees who have served this Nation with pride, dignity and compassion for over a quarter century. We thank them for their unwavering commitment and dedication to veterans and their families throughout the years.

Headquarters: **Elizabeth Combs**, **Gladys Partee**.

Northeastern Area National Cemeteries: **Donald L. Monroe, Jr.**, **John H. Law, Jr.** (Baltimore), **Michael G. Gavin** (Camp Butler), **Eugene Lawrence**, **Arthur E. Primm**, **Robert G. Harwood**, **Paul C. Steiner** (Long Island), **William H. Jeffers** (Rock Island), **Paul H. Graham** (Quantico).

Southeastern Area National Cemeteries: **James H. Bennett** (Barrancas), **Wayne K. Graham** (Florence), **John P. Malak** (Little Rock).

Western Area National Cemeteries: **Patrick G. Barnhart** (Fort Logan), **Donald Emond** (Fort Snelling), **Freddie A. Edwards** (Golden Gate), **William J. Inojos** (Leavenworth), **John E. Lockhart** (Los Angeles), **Alfred J. Jeremiah**, **Lawrence M. Kiyabu** (National Memorial Cemetery of the Pacific), **Susano R. Leyba** (Santa Fe), **James R. Trimbo**, **Floyd A. May**, **Gary J. Guthrie** and **Lawrence H. Kase** (Willamette). ❑

Roger Rapp,  
Director, Field Operations  
National Cemetery System



For over two centuries, the history of this Nation has been first that of a new republic, struggling to establish its place in the world community, and then a nation upholding

its role as a world power and bastion of democracy. The devotion and courage of those who wore the uniforms of the United States, and now lay buried in our national cemeteries, greatly contributed to that history, ensuring the continued existence of a nation governed by its people.

The current national cemetery system certainly was not pre-planned. It was born of necessity and grew by expediency. It would take a Civil War, in which 600,000 American servicemen lost their lives, to bring about the national cemetery system. For over 100 years the Department of the Army administered these and other established cemeteries; until 1973, when 82 of the then 84 cemeteries were transferred to the Veterans Administration.

Combined with the 21 VA veterans cemeteries located at hospitals and nursing homes, the original VA National Cemetery System comprised 103 cemeteries. Today, the National Cemetery System (NCS) offers perpetual testimony of the concern of a grateful Nation that the lives and services of members of the armed forces will be appropriately recognized and commemorated.

It is the purpose of NCS's 25th anniversary to remember and honor all those who have served, both in war and at home, in the military and in civilian life. To that end, I'd like to offer my own testimony and personal observations.

My Dad is a World War II Battle of the Bulge veteran. I remember in

## This Hallowed Ground

the mid-1950s asking him the usual questions kids ask about the war: Were you scared? Did you kill anyone? I got the answers "Yes" and "I don't know." My Dad didn't talk much. As an eight-year-old, I didn't understand my Dad's nightmares. Even then, World War II seemed long ago. Today many veterans still don't talk about those war time experiences.

Recently a PBS special on World War II described how in 1940-41 Churchill and Roosevelt's leadership alliance essentially saved the free world at its darkest hour. No longer young, I remember thinking that World War II was not really that long ago.

I believe as we get older, we appreciate the value of life even more and appreciate the sacrifices of America's soldiers even more. As we get older, history and events seem closer in time, have more meaning, have more impact as we understand what it takes to maintain our freedom and our lives.

On V.E. Day 1995, I invited my parents to attend the ceremony at Fort Myer in our Nation's Capital. It meant a lot to my father, a simple man, a child of the depression, a high school dropout, a retired factory worker. My father sat with me in a section of mostly government executives and high-ranking military officers.

When the time came for World War II vets to stand and be recognized, my father was the only citizen-soldier to stand in our section. During that long pause, generals and admirals turned and pointed to my dad and applauded. My father cried and an officer put her arm around him and patted him on the back.

My dad now feels comfortable to talk about the war because of that 1995 experience. So why am I telling you all this? It's because we need anniversaries like the NCS 25<sup>th</sup> that help us to remember, to value, to appreciate, to thank, to love and, for some of us, to talk about those experiences.

I have been with the National Cemetery System 16 of my 26 years of service with VA. In that time I have seen many changes and have truly come to appreciate the sacrifices our Nation's veterans and their families have made in defense of our country. I have seen many faces come and go within VA, veterans and non-veterans, whose hard work and dedication represent the best of what government and caring is all about.

We have always been blessed with countrymen willing to put their personal concerns aside and give their all for America. We are blessed to have people like my dad, who from the beginning of this Nation to present time have answered the call to arms — a call that has often led to loneliness, danger, injury and, for some, death.

On NCS's 25th anniversary, I invite each of you to visit a national cemetery and linger there on the hallowed ground of a national shrine; to visit the grave of a loved one or friend. I urge you to read the marker inscriptions of those you do not know, of some young American whose life was cut short by war. Imagine what they may have been like, the families and friends left behind and the stories left untold. Never forget what they did to defend us and keep our Nation free.

As we move into the next millennium — the National Cemetery System's next 25 years — let us always remember our mission and the good men and women who served so this country might live! □

***... to care for him who shall have borne the battle, and for his widow, and his orphan...***

President Abraham Lincoln  
Second Inaugural Address

# Tireless Beulah Cope Dies at 97

**B**eulah Cope, 97, died in the 100-year anniversary of the war she had become identified with. She was buried July 15 in Arlington National Cemetery.

Adjutant General of the United Spanish War Veterans for the last 27 years, Mrs. Cope died in her home July 3 in Takoma Park, Md. The Spanish American War ended Aug. 12, 1898.

It was after she retired from a career in the U.S. State Department in 1971 that she found a second career assisting Spanish American War veterans. In recent years she would leave her house, where she lived alone, drive her car to the subway, and ride it to her small office at Central Office. Her health declined this year after she broke her hip in March.

As sole staff member of the United Spanish War Veterans and Affiliated Organizations, Mrs. Cope spent the last years of her life helping Spanish American War veterans and their families with pension and other benefit problems. Her uncle had been a veteran of the war, but her dedication to veterans was based on

a deep commitment that went far beyond family.

Born in Freeport, Ill., she lived her entire adult life in the Washington, D.C., area. Her husband died in 1938, and she never remarried.

Mrs. Cope actively participated in many organizations honoring veterans of the Spanish American War. She served as president of the



Cope

District of Columbia of the National Auxiliary United Spanish War Veterans from 1946-47 and National Fort Captain of the Daughters of '98 from 1963-64.

Almost to the last day, Mrs. Cope was involved in organization work

and responding to queries about the Spanish American War and its veterans. She was considered a prime source of information on Spanish American War veterans by the news media.

Some 392,000 Americans served during in the Spanish American War. Begun Feb. 15, 1898, after the sinking of the battleship Maine in Havana harbor, the war ended six months later with Spain relinquishing Cuba, Puerto Rico, the Philippines and Guam.

VA designates the Spanish-American War era as running through July 4, 1902, encompassing not only the Cuban and Puerto Rico campaigns but also the Philippine Insurrection and the Boxer Rebellion expedition into China.

Among Mrs. Cope's last chores was preparing the annual convention of the veterans organization, held in Jacksonville Beach, Fla., September 18. Because the last of the Spanish American War veterans is deceased, the attendance consisted of children and other relatives of the original members. The official program was dedicated to the memory of Mrs. Cope. □

## VA Recruits Volunteers on the Web

**S**ince the VA Voluntary Service (VAVS) debuted its home page in July 1997, 92 individuals have volunteered by computer to give their time to serve veterans.

Nearly evenly split between men and women, this group is highly skilled and very enthusiastic. As expected, some have experience with computers, but the range of interests is quite broad. A number are trained medical professionals, psychologists, paralegals, engineers, and physical and vocational rehabilitation therapists. They are interested in caring for ill, homeless, and otherwise disadvantaged veterans in need of assistance.

Volunteers are not just a medical center phenomenon. A professional career counselor offered her services to help veterans get jobs. Familiar

with the difficulty of getting up-to-date information to veterans in foreign countries, one man in Mexico offered to help counsel veterans on their benefits. Another is interested in helping veterans start their own businesses. One manager contacted the web site looking for ways her company can help veterans.

The VA's Voluntary Service (VAVS) program places thousands of people who give their time in appreciation of veterans' service to our nation. VAVS volunteers have donated 475 million hours of service. In FY 1997, all VAVS volunteers contributed a total of 13,765,575 hours, of which 12,565,977 hours were from 109,716 regularly scheduled volunteers. The FY 1997 total VAVS volunteer hours equate to 6,618 full-time employee equivalent (FTEE) positions. The current

monetary worth of the 13,765,575 hours from all VAVS volunteers is over \$189 million (using a private sector valuation of a volunteer hour at \$13.73). VAVS volunteers and their organizations annually contribute an estimated \$40 million in gifts and donations.

VAVS collects contact information from volunteers over the Internet at the VAVS web site at <http://www.va.gov/volunteer/form.htm>. The Voluntary Service Office (10C2) and Information Management Service (045A4) developed the data entry form and implemented it with software supplied by Veterans Benefits Administration's Education Service and hardware and software provided by Veterans Health Administration's Washington Chief Information Officer's Field Office. □

# VHA 'Rolls Out' Health Care Enrollment

**C**ommunications and medicine joined forces this summer as the Veterans Health Administration (VHA) prepared for the national rollout of VA's new health-care enrollment program that begins October 1.

In addition to establishing the administrative and informational infrastructure to implement this radical change in eligibility determination, VHA faced the daunting task of informing millions of anxious veterans. In order to receive VA care, they must apply for enrollment in what amounts to a new VA health-care plan.

A communications and outreach plan, developed by the VHA Office of Communications with the support of private-sector consultants and the VA Office of Public Affairs, is going into effect in early October at VA health-care facilities across the country. Its objective is to inform and reassure veterans, clearly outline enrollment application procedures and spell out the comprehensive services enrolled veterans will receive from VA.

That plan stresses the "all health care is local" axiom by placing primary responsibility for informing veterans with VHA networks and, particularly, medical centers. Informational material — TV and radio tapes, news releases, consumer pamphlets — were created centrally with the help of contracted ad agencies and a variety of focus groups. They were tested during August in pilot rollouts in Spokane, Wash., and Lexington, Ky., where local VA medical centers orchestrated media blitzes introducing enrollment. National VA spokespersons also helped in those markets.

Front-line employees and VA spokespersons at both test-market facilities received training in responding to enrollment-related questions, including television training. VA officials briefed veterans organizations and congressional staffs, and held town hall meetings for veterans in Spokane and Lexington.

Among their selling points: VA's toll-free number for enrollment questions, (877)222-VETS; the easy

access afforded veterans once enrolled; and portability of health care, with the same health-care coverage provided at VA's 1,100 medical access points.

An Enrollment Project Team, with representatives from VHA's Chief Information Officer and Office of Policy and Planning, along with the Office of Public Affairs, has done much of the outreach work so far. Participating with the team was the Austin Automation Center, which mailed letters and a brochure to more than three million veterans, and followed with more than one million letters to veterans to confirm their enrollment.

VHA contracted for a telephone call service center on enrollment to handle veterans' questions. As of September 14, the center had received more than 76,000 calls.

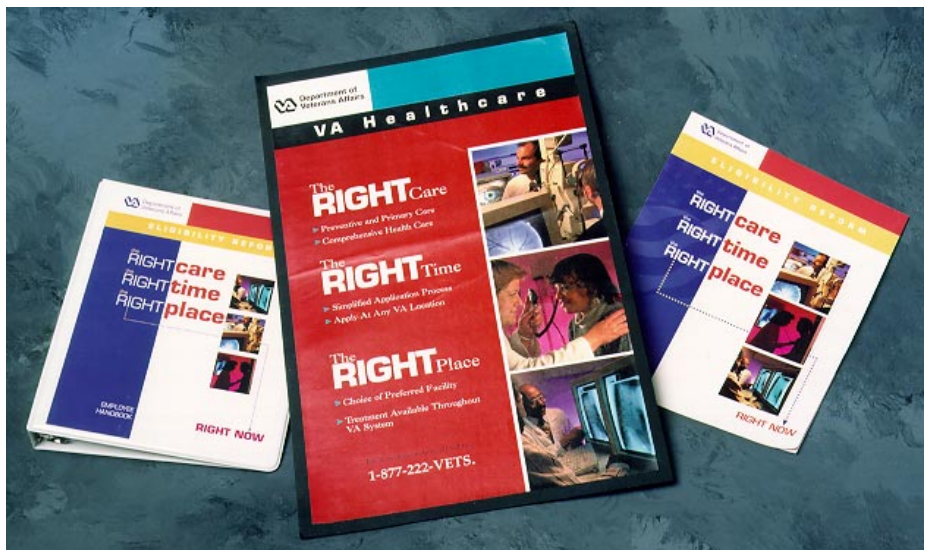
Test market communications succeeded, said VHA Health Administration Service Director Kent Simonis, measured by the fact that key messages were received accurately by veterans and produced a large volume of calls to the toll-free number. Twenty percent of calls to the call center from Spokane and Lexington were prompted by VA's print or broadcast announcements.

Now VA facilities — augmented by national VA spokespersons and communications support personnel — are continuing the marketing efforts nationwide. □

As Oct. 1 approaches, veterans will be wanting information. "They will likely ask, 'Am I eligible? What for and what will it cost?'," said VHA Director of Health Administration Service Kent Simonis. They will come to the nearest VA source to get answers. He said that VA medical center enrollment coordinators can provide detailed information that other VA staff may need.

There are consistent messages all VA spokespersons should convey, said Simonis:

- Most veterans must apply for enrollment; those with 50 percent or greater service-connected disability ratings are the exception.
- Once enrolled, veterans will find the Health Benefits Program offers easier access to care.
- For the first time, enrolled veterans will have access to the full range of services they need — including preventive care and outpatient services — not just those resulting from military service.
- The enrollment process is simple and streamlined. The old 11-page health-care application has been condensed to a single page available nationwide at any VA health-care location.
- VA has established a web site to provide veterans the most current information ([www.va.gov/health/elig](http://www.va.gov/health/elig)).
- Toll-free assistance: 877-222-VETS (877-222-8387). □



Handbooks and brochures for veterans and employees are part of the VA health-care enrollment communications campaign.

# VA Experts Guide DC Disaster Exercise

**A** large metro area stadium filled with 60,000 young fans attending a rock concert is the target of terrorists bent on disrupting the nation's capital. A toxic chemical is released in their midst. Chaos and pandemonium ensue.

The VA Medical Center in Washington, D.C., will join other District hospitals in receiving patients from such a simulated terrorist attack on September 22. The practice exercise, in which many employees from area emergency agencies will participate, simulates a chemical weapons attack at a rock concert at Washington's RFK Stadium.

Exercise participants, including VA employees from the Office of Emergency Medical Preparedness, will use the exercise to evaluate the community's emergency plans and resources. The exercise will focus on the coordination of local emergency employees providing security, decontamination, treatment and evacuation of victims to local hospitals.

In addition to being one of a dozen community hospitals accepting patients for treatment, the Washington VAMC, like other VA medical centers around the country, stores the antidotes needed to respond to a chemical attack. A key element in the exercise is getting truckloads of these simulated drugs

to other hospitals in time to be of use.

The "Rock'n Roll" exercise is organized by the District Office of Emergency Preparedness and involves employees of the District fire and police departments. A joint operations center, a joint information center and an emergency shelter will be located at the National Guard Armory. The joint operations center will involve a number of city elements, including the Health Department, Public Works, National Guard and the Office of the Mayor.

VA Deputy Director of Emergency Management Robert F. Elliott helped develop the exercise scenario. He and VA area emergency managers attached to his office will evaluate its success.

"Emergency planners and operators at city, county, state and federal levels must consider all available resources to mitigate the effects of chemical, biological or nuclear weapons," Elliott said.

He explained that local first responders bear the heaviest workload during the first hours following a terrorist incident. That is why it is important to forge partnerships among the first responders and their back-up departments and agencies in advance.

"Successful response depends on teamwork and a positive attitude on collective responsibility," Elliott noted. "Keys to overcoming short-

falls in resources are joint planning, joint training and joint exercising."

Every major metropolitan area in the United States is a potential target for terrorist weapons of mass destruction. In developing realistic scenarios, emergency planners and operators and first responders must deal with communications and transportation problems and potential gridlock.

Elliott admitted that there are no easy solutions in controlling masses of people under stress. Most individuals caught in the aftershock of a weapons of mass destruction incident will seek medical attention as soon as possible. Their survival paths will include all available exits from confined spaces via cars, buses or other transportation systems.

Individuals who are contaminated by hazardous chemicals will seek immediate relief through decontamination and appropriate medical care. These victims may also cause crush injuries and fatalities to other persons through mass stampedes.

Elliott stressed that because of the great risks associated with mass gatherings, it is crucial that emergency planners and operators construct scenarios which match local conditions and include facilities where the public normally congregates, like a crowded stadium. □

## Weekend Duty for 'Pvt. Ryan' Counselors

**A**dvance word on the movie "Saving Private Ryan" and its graphic portrayal of combat prompted extension of VA counseling services beyond normal business hours.

Because previous realistic war movies had triggered emotional responses among veterans, VA decided to take special precautions when the movie opened nationally July 10.

Some 125 employees volunteered to work VBA

phone units over the weekend to cover extended hours. The phone service was also continued the following weekend.

"We had more volunteers than we needed to cover the phones," said Jimmy Wardle, the Veterans Benefits Administration coordinator for the project.

Volunteers included about 100 VBA employees, 15 Vet Center counselors and 10 other VHA employees.

Counselors were

prepared to help veterans and family members cope with emotions brought on by the movie.

With the VA toll-free assistance number open after normal business hours, calls were routed to counselors standing by at seven regional offices through midnight Sunday.

The number of calls generated by the movie caused the special phone link to be extended another day, through midnight Monday, Pacific Time.

The seven regional

offices handling calls over the weekend were Oakland, St. Petersburg, St. Paul, San Diego, Philadelphia, Chicago and Portland, Ore. For Monday night, calls were routed to the Oakland regional office.

As a result of an alert to news media and local veterans service organizations, VA's expanded service was reported by news agencies, television networks, and national and international newspapers and magazines. □

# Sculptor Lives VA Blind Rehabilitation Story

**M**ichael Naranjo forms clay heads with kids and veterans, and while the artwork is taking shape under his direction, it's easy to forget that the instructor doesn't see anything taking shape around him. A Native American Vietnam veteran blinded in combat in 1968, Naranjo helps sighted people develop creativity that bridges emotional and developmental gaps and heals body and soul.

Healing and developing were themes of the July observance of the 50th anniversary of the Blind Rehabilitation Service in VA Central Office. Naranjo was a featured guest speaker along with Tipper Gore, who presented a congratulatory letter from the President to Secretary Togo D. West, Jr.

Executive Director of the Blinded Veterans Association Tom Miller, another graduate of a VA blind rehabilitation center, was master of ceremonies for the program. Blinded veterans from the national capital area and invited VA, Congressional

and blind rehabilitation officials attended.

Naranjo — who completed the VA Western Blind Rehabilitation Center training program in Palo Alto, Calif. — held art workshops for veterans at the Washington, D.C., VA Medical Center and for veterans and students from a Very Special Arts program in Baltimore. At VA Central Office, he conducted another workshop for young people and talked to employees. Thirteen of his bronze sculptures were displayed in the lobby.

Naranjo describes his artwork as "touchable" and invited employees to feel his sculptures. Childhood moments of seeing particular animals while hunting and fishing near his New Mexico pueblo and native American festival dances are the memories he draws on to create many of his works in stone and wax.

"I always wanted to be a sculptor; I had to get there the hard way," he said in his gallery talk to employees. He credited VA blind rehabilitation center staff for getting him a block of

wood, a mallet and chisel when he wanted to sculpt in the center's woodworking shop during his training.

VA blind rehabilitation program anniversary observances continued in Chicago, where the artwork of 16 graduates of the blind rehabilitation program were displayed at the convention of the Blinded Veterans Association. That exhibit included the sculpture of an elephant, inspired by an Indian tale that relates the different impressions formed by six blind men who touch the elephant's legs, trunk, ear, tusk, tail and side. The elephant sculpture will be featured as the display travels to several VA medical center blind rehabilitation programs later this year.

The Washington programs and transportation of the elephant are supported by: Pfizer, Inc.; the Blinded American Veterans Foundation; Help Hospitalized Veterans; Disabled War Veterans; and sustaining members of the Association of Military Surgeons of the U.S. □



*Tipper Gore, (left), wife of the Vice President, discusses art and rehabilitation with blind sculptor Michael Naranjo at VA Central Office ceremonies marking the 50th anniversary of the VA Blind Rehabilitation program. With them (from left): Gail Berry West, wife of Secretary of Veterans Affairs Togo D. West, Jr., Deputy Secretary of Veterans Affairs Hershel W. Gober and Secretary West.*

# VA Scissors Awards To Red Tape Snippers

**T**he VA Scissors award, introduced by Deputy Secretary of Veterans Affairs Hershel Gober, complements the National Partnership in Reinventing Government's Hammer award by recognizing the outstanding accomplishments of VA employee teams in cutting red tape by finding better, less costly and more efficient ways of serving veterans. Here are recent winners of the VA Scissors award.

The **Portland, Ore., VA Medical Center Home Infusion Program Team** helped the center become the first in VA to provide home infusion services under contract. This reinvention process resulted in decreased lengths of stay, increased patient satisfaction, and an almost \$1 million savings in bed days of care. Previously, the program required the community health coordinator to get three bids for the proposed therapy each time a patient required treatment. A cost estimate was made and sent to the chief of staff for authorization. Now, by contracting with a JCAHO-accredited national infusion company, the therapy coordinator can arrange home therapy with a simple telephone call.

The **Battle Creek, Mich., VA Medical Center Destinators Team** redesigned transport of veterans between the Battle Creek and Ann Arbor VA Medical Centers resulting in a 1997 cost savings of \$202,299. In prior years, although a contract was negotiated, private transport services ran an average of \$56,630 per month, and veterans endured long waiting times. Today, veterans ride in specially equipped vans at times convenient to them. Outpatients are now able to keep their appointments because veterans are not required to spend the entire day waiting for return transportation.

Based on employee feedback, the **Albany, N.Y., VA Medical Center Employee Training Team** eliminated traditional classroom lecture training in favor of training fairs, saving \$108,000 annually, increasing morale, and decreasing staff time

away from work. The training fair educates employees on mandatory topics including fire, chemical, radiation and electrical safety, utilities failure, infection control, workplace violence, patient rights and safety, administration of blood components, emergency procedures and ergonomics. It was so popular that it will be expanded to include such topics as age-related competencies, latex sensitivities, information management and security.

The **Mountain Home, Tenn., VA Medical Center Extended Care Performance Improvement Team** developed integrated, interdisciplinary assessment in extended care. Patients are now assisted by a team of representatives from nursing, nutrition, social work, pharmacy, recreation, geriatric medicine, physical medicine, psychology, dental, and other specialties, including chaplain service. The change reduced the number of assessment forms from 15 to two, and completely eliminated 161 repeat questions. Although costs were reduced, the enhanced customer service is the most valued aspect of this reengineering effort.

The **Poplar Bluff, Mo., VA Medical Center Pharmacy Team** greatly improved customer service by including a pharmacist as part of the outpatient clinic primary care team. The staff addition means patients have direct contact with a pharmacist and medications are monitored to prevent duplication of prescriptions. The results show prescription waiting time at Poplar Bluff is less than half the national average, and costs have decreased from an average of \$15 per prescription to \$13, saving \$166,000 annually.

The **Mountain Home, Tenn., VA Medical Center Home Oxygen Team** reinvented home oxygen services to improve patient care and decrease costs. A team representing pulmonary medicine, prosthetics, respiratory therapy, nursing, pharmacy, and quality improvement studied all aspects of home oxygen services provided to patients. Their recom-

mendations changed purchasing, specified responsibilities, and added a tracking system and yearly evaluation process. As a result, the Home Care Program scored 100, with no recommendations, in a Joint Commission on Accreditation of Hospitals survey. In addition, per patient costs have decreased from \$4,000 per month, and satisfaction surveys indicate a 100 percent patient approval rating.

The **Des Moines VA Regional Office Iowa Communications Network** used fiber optics technology to provide video conferencing services that have reduced customer waiting times, speeded benefits processing and saved money. The VARO now routinely uses video conferencing for hearings for veterans with the Board of Veterans' Appeals (BVA), personal interviews for veterans seeking vocational rehabilitation and counseling, personal interviews for veterans requesting special adaptive housing grants, statewide program training for contractors and lenders, and staff meetings with outbased employees. Video conferencing at the VARO has improved service quality and timeliness and reduced a backlog of BVA hearings. Also, money spent on travel, per diem and salaries has been reduced.

**John Dietrich** of the **Roanoke, Va., VA Regional Office**, while with the **Baltimore VA Regional Office Loan Guaranty Division**, changed the way home sales listings reach customers by developing "fax on demand." Previously, monthly listings were collected and then mailed out, often reaching customers too late. In addition, printing costs reached \$12,000 a year and were increasing. Using equipment purchased in 1995 for other purposes, Dietrich began offering sales listings via fax in 1996. Today, 3,000-plus customers receive timely information via "fax on demand" at no cost to the regional office. Customers call from a fax machine, paying for the call and printing themselves. The service is available 24 hours a day, and enables thousands of customers to obtain



information in a timely, efficient and cost-effective way.

The **Boston VA Medical Center** and **VA Regional Office** formed a joint **Continuous Quality Improvement Team** that employed quality improvement methodology to streamline compensation and pension exams. Techniques included brainstorming, process mapping, cause/effect diagramming and flow-charting. Files are no longer lost due to system errors in transferring files between the regional office and the outpatient clinic. Processing time for cases 180 days or older has been reduced 55 percent, and the number of insufficient exams dropped from 30 to zero last year.

The **VA Records Management Center** formed a partnership team with the **St. Louis VA Regional Office**, **VBA Southern Area Office**, and the **National Personnel Records Center** to reduce the veterans record retrieval backlog at the national center, which had reached 35,000 by 1996. The team redesigned the records retrieval process by instituting a historical data file to identify duplicate requests, which amounted to 22 percent of daily requests. The Records Management Center and the National Personnel Records Center now work together to respond to requests within 24 hours of receipt, resulting in better service to VA and veterans.

The **VA Office of Intergovernmental Affairs (IGA)** and **State Rural Development Councils (SRDC)** partnered to connect local economic development programs with corresponding federal and state programs to ensure the needs of rural veterans were not being overlooked. VA, a charter member of SRDC, contributed leadership, technical expertise and financial support. Partnerships include tele-medicine in Alaska and Maryland; tele-technology in Colorado, Montana and Texas; housing in Kansas, Missouri and South Dakota; geographic information-sharing in Nebraska and Oregon; and health-care delivery in Kansas, Utah, West Virginia and Wisconsin. IGA promotes these partnership activities and hosts Truman Scholar Fellows

who act as advocates for rural veterans within VA.

The **Leavenworth, Kan., VA Medical Center Surgical Ambulatory Care Clinic Team** reorganized the center's entire surgical ambulatory care process, from scheduling to follow-up exams. Their changes reduced overbookings from 23 in 1994 to 5 in 1996. Also, patient waiting time decreased from 41 minutes to 13, and the percent of veterans reporting quality of care as very good to excellent increased from 60 percent in 1995 to 76 percent in 1996.

The **Leavenworth, Kan., VA Medical Center Domiciliary After-care Program** works to help homeless veterans make successful transitions from hospital wards to independent living. The aftercare program began in 1994 with 12 patients and has now served nearly 200. Community reintegration assistance and classes prepare veterans for the day-to-day activities of living outside the hospital. Patients receive instruction in budgeting, paying rent, cooking and following preventive medicine guidelines. The center provides transitional housing as well as primary care, and staff make home visits to the veterans, who also meet quarterly with members of their treatment team. The medical center also employs community resources to provide low-income housing for veterans returning to the community. Based on 28 patients in a two-year period, savings on domiciliary care compared to the aftercare program totaled \$814,875. Plans are underway to open a second transitional house.

**Mountain Home, Tenn., VA Medical Center Elective Surgery Team** members recognized patients were routed through an inefficient elective surgery process which caused delays and cancellations. Many patients were rushed through surgery, or were sent along with unfinished procedures. Under changes instituted by the team, delays have decreased and patients report to and depart from a single service area with their medications and instructions in hand. These improvements also have minimized

cancellations and kept costs down, and patients have consistently expressed satisfaction with the new system.

The **HR LINK\$ Team** in VA Central Office, the Austin, Texas, Automation Center and the Topeka, Kan., Shared Service Center automated VA's personnel and payroll functions, enabling employees to electronically access and change their personal records on line. Cutting out the "middle man" in these transactions reduces paper, redundancy, misplaced documents and errors.

The **Fee-Basis Program Team** in VHA, the Office of Acquisition & Material Management, the Office of Small & Disadvantaged Business Utilization and the Austin, Texas, Automation Center automated the collection of socioeconomic procurement data for VA's fee-basis program.

The **Electronic Certification Automated Processing Team** at the Buffalo, N.Y., Muskogee, Okla., Atlanta and St. Louis VBA regional processing offices developed and implemented an automated application for processing Chapter 30 education re-enrollments, which improved service to veterans through more timely and accurate processing. □



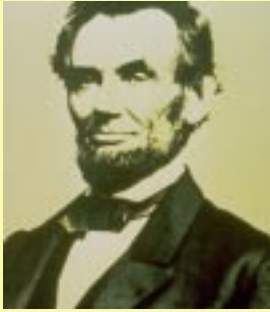
**Since the award  
began in 1995,  
200 Scissors  
Awards have been  
earned by  
innovative  
VA employees**

# National Cemetery System

## *Pride in Our Past*

The national cemeteries of America serve as constant reminders that freedom isn't free. It was paid for with the blood of our sons and daughters from Revolutionary War times to present day.

Our national cemeteries came about during the American Civil War, when President Lincoln



signed into law an Omnibus Act on July 17, 1862. This act led to the establishment of the first 14

national cemeteries in 1862. Hundreds of thousands of brave soldiers who died to preserve the Union now rest with special commemoration of their service on the field of battle.

**Frontier:** Following the war, America moved west to the Pacific Ocean. Soldiers in scattered lonely outposts provided protection and security for the mass movement westward. Their service made possible the coming of the railroad and the telegraph. The number of national cemeteries increased during this period marked by special efforts to develop and beautify the hallowed grounds. Simple, dignified, uniform headstones adopted in 1873 now marked all new graves.

**War with Spain:** America came on the world scene when the Rough Riders charged up San Juan Hill. Military commitments in areas beyond our shores brought new and increased interment challenges to national cemeteries as veterans of the War with Spain were given burial rights.

**World War I:** The "War to end all Wars" further expanded the system as all soldiers, sailors or marines who died in service or died after earning an honorable discharge were offered burial in any national cemetery.

**World War II:** The greatest war in the history of the world brought the American people together as never before. The total resources of the nation were

Americans have been gathering on hallowed ground since the founding of this country — from the Old Hill Burying Ground in Massachusetts, the burial site of early Colonial families and Revolutionary War Soldiers, to Tahoma National Cemetery in Washington State, VA's newest national cemetery opened in 1997. The National Cemetery System (NCS) is an integral part of this tradition to honor the memory of those who have served this Nation in time of need. This is NCS's mission and has remained the same since its establishment. Employees of NCS work amid reminders of our Nation's past each and everyday. All they have to do is look out over the landscape any day of the week, rain or shine, to see a constant reminder of what sacrifice, honor and duty is all about. In a way, they are the keepers of our national memory, the link between the past and the future.

**NCS ESTABLISHED BY LAW** The National Cemetery System (NCS) came into existence on September 1, 1973, as established by Public Law 93-43. Congress made this change to ensure that the honor of burial in a national cemetery would continue to be a benefit available to eligible veterans and their families. The law recognized that burial in a national cemetery is a permanent expression of the American people's desire to recognize and pay respect to those who have honorably served in the United States Armed Forces. It declared that "all national and other veterans' cemeteries in the (system) ... shall be considered national shrines as a tribute to our gallant dead."

**SINCE 1973** NCS has increased the number of national cemeteries from 103 to 115. Most of the original 103 were developed in response to the Civil War. The number of gravesites maintained has risen from 1.2 million to more than 2.2 million and annual interments have doubled from 36,422 to 73,000. More than 6.3 million headstones and markers have been provided since 1973. Initiated in 1962 by President Kennedy, NCS's Presidential Memorial Certificate (PMC) program honoring veteran's service has delivered more than 2.3 million PMCs to veterans' next of kin.

**NCS HAS BEEN RECOGNIZED** throughout its 25 year history for its innovation and quality customer service. Recently, NCS received two of the *Vice President's Hammer Awards* which are presented to teams of Federal employees who have made significant contributions in support of reinventing government processes. In 1998, NCS received a Hammer Award for its Second Inscription Program that has saved the Federal Government and taxpayers over a million dollars. In 1995, NCS accepted a Hammer Award for its development of the Burial Operations Support System (BOSS) that automated the way NCS gathers, records and disseminates information about burials, grave locations, headstone and marker applications and various reports.

*The Robert W. Carey Quality Award* recognizes organizations within VA that have demonstrated a commitment to the principles of quality management resulting in organizational effectiveness, service delivery and customer satisfaction. In 1996, Calverton National Cemetery was the overall trophy winner. Other NCS Carey Award winners include: 1998 *National Cemeteries Category - Florida National Cemetery*; 1998 *Achievement Award - Jefferson Barracks National Cemetery*; 1997 *National Cemeteries Category - Ft. Logan National Cemetery*; 1997 *Achievement Award - National Memorial Cemetery of the Pacific*; and, 1996 *National Cemeteries Category - Riverside National Cemetery*. These awards, combined with numerous *VA Scissors Awards*, represent NCS's commitment to promote and recognize initiatives within VA that cut through red tape, streamline operations and improve customer service.

# 25th Anniversary Salute

## *Focusing on the Future*

NCS estimates that the annual number of veterans' deaths will peak in the year 2008 at 620,000, before gradually decreasing. In that same year, annual interments will increase to 104,900, compared to 11,752 in 1973. The total number of graves maintained is projected to increase to 3.1 million. How will NCS prepare for this?

**FOUR NEW NATIONAL CEMETERIES** By the year 1999, NCS plans to open four new national cemeteries in Texas, New York, Illinois and Ohio. With a total of 119 national cemeteries, the system's total acreage will increase to over 13,200, tripling the original total of 4,260 in 1973.

**EXTEND THE SERVICE LIFE OF EXISTING CEMETERIES** Approximately, fifty percent of NCS land is undeveloped, providing the potential for more than 1.6 million additional gravesites. Thirty-nine projects have been identified for construction within the next five years to develop this acreage, including major construction projects at national cemeteries in Texas, Florida and Arizona. Additional land acquisitions adjacent to existing national cemeteries are also under review.

**COLUMBARIA AND IN-GROUND CREMATION SITES** Approximately one-third of the interments at national cemeteries involve cremated remains. Recognizing the increased acceptance of cremation and that some cemetery land is not suitable for casketed burials, NCS has significantly expanded both in-ground and columbaria features. Ten national cemeteries presently have columbaria and NCS is evaluating other possible locations for the future. All new cemetery construction, and the majority of our gravesite development projects, now include columbaria. In addition to columbaria, NCS designers have expanded the use of pre-placed, in-ground burial crypts that almost double the number of casketed burials per-acre of land.

**ENCOURAGE STATES TO BUILD VETERANS CEMETERIES** The State Cemetery Grants Program (SCGP), a 50-50 federal/state matching grant program established in 1978 to complement NCS, assists states in establishing, expanding, or improving state veterans' cemeteries in areas not served by a national cemetery. Since the first grant was awarded in 1980, VA has provided over 128 grants totaling more than \$58 million to assist over 40 veterans' cemeteries in 23 states and Guam. In FY 1997, approximately 12,000 veterans and eligible family members were buried in SCGP-supported veterans cemeteries. To enhance the federal/state partnership, NCS has proposed legislation to increase the ratio from 50 to 100 percent for the cost of construction and to fund initial equipment costs.

**THE GOVERNMENT HEADSTONE AND MARKER PROGRAM** Memorial Programs Service (MPS) is a National Performance Review reinvention site. To increase efficiency and reduce costs, MPS was decentralized and re-engineered. Some functions moved from VACO to NCS-owned sites in Nashville, Tenn., Fort Leavenworth, Kan., and, Indiantown Gap, Pa. Since the Automated Marker Application System (AMAS) redesign in December 1996, processing of headstone and markers has improved, while the development of the Burial Operations Support System (BOSS) has fully automated the administration of burial operations and reporting. All national cemeteries and several state veterans cemeteries now have a direct link to AMAS/BOSS.

**INFORMATION RESOURCE MANAGEMENT** NCS is certified fully Year 2000 compliant. The IRM staff has provided full Internet/Intranet accessibility to its national cemeteries and has developed its own NCS Home Page. A new touch screen information center (Kiosk) system has been designed to

*Continued on page 20*

brought to bear in the cause of freedom. Gold stars appeared in windows around the land, signifying the ultimate sacrifice. Eligibility for burial in a national cemetery was officially extended to spouses and dependent children of an eligible veteran.

**Korea:** The next 45 years of the American story saw this nation in a polarized world. This "Cold War" had its flash points and Americans answered those calls. In 1950, the flash point was Korea where the United States led a United Nations force in defense of South Korea and its people.

**Vietnam:** In the 1960s, American forces were committed to one of the longest and most complex conflicts in our history, as America sought to contain communist aggression in South-east Asia. In 1973, the National Cemetery Act was signed into law, establishing the National Cemetery System as part of VA.

**Panama/Grenada:** During the 1980's American forces responded in freedom's name in Grenada and Panama. As the cold war ended and the winds of freedom swept across a troubled world, new threats to the world community of nations arose in the Middle East. In 100 hours the thunder and lightning of Desert Storm liberated Kuwait from its Iraqi occupation.

**Today:** Our armed forces still stand as a visible symbol of freedom around the world. They have answered every call to arms in the name of liberty for more than two hundred years and will continue to do so. The final resting place for our fallen heroes will continue to remind us of the tremendous cost paid for the life, liberty and the pursuit of happiness we all enjoy. □



# Dr. Kizer Warns of Y2K Instrument Glitches

**D**r. Kenneth Kizer, VA Under Secretary for Health, has called for medical device manufacturers to step up disclosures about their products and the millennium bug threatening computers.

At a Washington news conference, Dr. Kizer showed off a variety of devices, including heart monitors and blood pumps, that won't recognize the new century and, as a result, may not function properly starting Jan. 1, 2000.

Leading a coalition of provider groups, Dr. Kizer warned that with 18 months left and tens of thousands of medical devices in use, the sheer number of manufacturers and products "makes it impossible for any entity to do the testing." According to Dr. Kizer, "We must rely on the manufacturer."

Dr. Kizer was speaking for a coalition of health-care providers, including VA, the American Medical Association, the American Hospital



*Dr. Kizer at Year 2000 news conference*

said Dr. Kizer. "It's going to take time to address some of these problems. This isn't information that can be made available on Dec. 31, 1999."

Dr. Kizer said VA has not yet received year 2000 compliance information from 30 percent of the 1,600 manufacturers it has purchased equipment from, even though it has sent them four letters.

Association and the American Nurses Association.

The device makers "need to take immediate action,"

Among the products Dr. Kizer singled out was a CT scanner. "Despite multiple inquiries, we don't know if these are going to be compliant or not," Dr. Kizer said, pointing to a photo of one of the \$1.3 million units.

The coalition wants device manufacturers to make information about their products available to customers and the public no later than Jan. 31, 1999. The coalition also called for the establishment of a national clearinghouse for information on problems with medical devices used in hospitals and homes.

The health-care industry depends on electronic medical devices controlled by microprocessors with embedded programs governing dates and times.

But because references to years are often kept as the last two digits of a date in the 1900s, medical devices could stop calculating new dates, and compute them instead as "1900". □

# National Honor for NY/NJ Homeless Program

**T**he VA New York/New Jersey Veterans Integrated Service Network Consortium on Homeless Veterans has received the Public Employees Roundtable (PER) 1998 Public Service Excellence Award in the federal category.

The Consortium for Homeless Veterans was recognized for excellence in providing a seamless continuum of care for homeless veterans through innovative, cost-effective service partnerships between VA and the New York metropolitan area community. It has become a national model for the planning, coordination and integration of such programs.

"VA has made a commitment to excellence in every aspect of health care. Helping homeless veterans is one of our highest priorities. We're proud of the consortium and the recognition it has received," said Kenneth W. Kizer, M.D., VA Under Secretary for Health.

The award pays tribute to the highest standards of excellence and innovation in federal, state and local

government. By recognizing groups rather than individuals, the award demonstrates the importance of teamwork in public service.

VA estimates there may be as many as 12,000 homeless veterans in New York City, about one-third of the total number of homeless adults. During fiscal year 1997, outreach efforts by the consortium reached 3,194 veterans who might not otherwise have sought treatment at VA.

Nearly 1,000 veterans were placed in either permanent or VA-supported housing, and 512 veterans were housed in VA domiciliaries. Of the domiciliary residents, 62 percent were housed when discharged from the program and 64 percent were employed when discharged.

Nationwide, VA estimates that some 250,000 homeless persons, or about one-third of the adult homeless population living on the streets or in shelters on any given night, have served their country in the armed services. VA's major homeless programs constitute the largest

integrated network of homeless assistance programs in the country, offering a wide array of services to help veterans recover from homelessness and live self-sufficiently and independently.

VA directed more than \$92 million to specialized homeless assistance programs in fiscal year 1997, including grants and per diem payments to 23 public and non-profit groups to assist homeless veterans in 15 states and the District of Columbia. VA plans to spend more than \$96 million on its specialized homeless assistance programs in fiscal year 1998.

PER is a non-profit, non-partisan coalition of 38 management and professional associations representing more than one million public employees and retirees. Its mission is to educate the public about ways public employees contribute to the quality of life in America, to enhance excellence and esprit de corps in the public sector, and to encourage interest in public careers. □



## **Dementia Gene Found in Human Chromosome**

Researchers at the VA Health Care System at Puget Sound have identified a gene that causes a form of dementia. Researchers found that nerve cell death was caused by mutation of a gene called Tau. Research showed that the mutated Tau produced tangles of long string-like filaments identical to those found in the brains of Alzheimer's patients.

Over the past 15 years, the research team has studied a family whose members frequently develop what appears to be Alzheimer's disease. The team later identified a second family affected by the same disorder and found the same Tau mutation.

Dr. Thomas D. Bird, a team member, said: "Our finding may help us learn more about a variety of brain disorders." The new information also points to Tau as a potential target for new treatment of Alzheimer's.

## **Heart Patients Receive Unneeded Procedures**

More than a quarter of the Americans who have heart attacks each year receive unnecessary procedures to reopen their clogged arteries. A team of researchers at the Syracuse, NY, VA Medical Center says studies show between 400,000 and 600,000 patients each year could avoid coronary angiography, the high-tech procedure in which a tube is threaded through an artery into the heart.

Dr. William Boden, chief of medicine at the VA facility, said many patients could also avoid angioplasty, in which the clogged arteries are stretched open with a balloon device inserted in the arteries. The VA research found that 462 volunteers who had their heart arteries reopened with the balloon technique, or who had bypass surgery, were two-and-a-half times more likely to die within a month after their initial heart attack compared to the 458 patients whose doctors used less invasive techniques. These techniques include giving clot-dissolving drugs and using exercise stress tests.

The study looked at patients with a type of heart attack known as non-Q-wave myocardial infarction, which represents at least 55 percent of all heart attacks. Dr. Boden estimated that half of that 55 percent should not need aggressive treatment. Some patients, however, benefit from the more invasive techniques, including angiography, angioplasty and bypass surgery. Patients who need invasive treatment may develop chest pain even after being put on drug therapy.

## **Sleep Disorders Cited as Villain in Study of Stroke Causes**

Scientists are learning more about the harmful effects of sleep disorders because of research at the Sepulveda,

Calif., VA Medical Center. The studies show a chain reaction that can cause stroke. When persons suffering from sleep apnea fall asleep, their tongue falls back into their throat, blocking their airway. As they struggle for breath, their blood pressure rises. The rise in blood pressure damages the inner walls of the carotid arteries lining the sides of the neck. Then, cholesterol and calcium stick to the injury sites and form calcified plaques and block blood flow to the brain. The VA study used dental X-rays of 47 male veterans who suffered from obstructive sleep apnea. The X-rays show a detailed view of the neck, enabling scientists to detect whether calcified plaques had formed in the carotid arteries. Those X-rays were compared to those of a healthy, age-matched control group of 891 men. Twenty-one percent of the men in the study group showed calcified plaques blocking their carotid arteries. But only 2.5 percent of the control group had similar blockages. "Our results told us that the increased stroke risk was coming from the neck, not another part of the body," says Dr. Arthur Friedlander, who chairs the department of dentistry at the medical center. "The calcium deposits are just the tip of the iceberg. The X-ray can't show the true size of the plaque, which is also made up of fat, platelets and other soft tissue."

## **New Treatment May Relieve Patients with Back Pain**

Thousands of veterans suffering from lower back pain may be able to avoid surgery, thanks to a new outpatient medical procedure being performed at the Columbia, S.C., VA Medical Center.

The new procedure, epiduroscopy, allows doctors to use a probe to explore soft tissues in the lower back that do not show up on X-ray, CT or MRI scans. By providing a live, color image of the area, it makes possible an accurate diagnosis of the low-back soft tissue.

A small incision is made to accommodate a miniature fiberoptic. The probe then explores the epidural space, the area surrounding the spinal cord. The patient is conscious and assists by directing the doctor to the areas of pain.

## **Lowering Blood Pressure Helps Cut Heart Disease**

A new study shows lowering diastolic blood pressure beyond the currently recommended levels can help reduce heart attacks. In the VA Hypertension Optimal Treatment (HOT) study, the number of cardiovascular disease deaths was higher in patients targeted to 90 on blood pressure gauges than 80 (90 mmHg versus 80 mmHg).

Dr. Fred A. Fass, with the Central Arkansas VA Healthcare System, participated as a researcher in the HOT study, which followed 18,790 patients in 26 countries over a five-year period. More than double the patients in the study sustained a major cardiovascular event with a diastolic blood pressure of 90 as opposed to those targeted to 80. The study also confirmed that the addition of aspirin is beneficial in reducing death and illness in patients with well controlled hypertension. □

# HONORS



and awards

Three Fargo, N.D., VA Medical Center physicians received awards from the University of North Dakota School of Medicine and Health Sciences: **Dr. Mark Ingebretson** received the 1998 Dean's Special Recognition Award for Outstanding Volunteer Faculty; **Dr. Kushal Handa**, chief cardiologist, received the 1998 Outstanding Campus Preceptor Award; and **Dr. William Newman**, chief endocrinologist, received the 1998 Reverend Elmer and Min West Memorial Facility Award.

The North Chicago Medical Center's **Intensive Psychiatric Community Care Team** and **Police and Security Team** were designated finalists in the Chicago Federal Executive Board's 1998 Federal Employee Awards Program for their innovative service to veterans and to the community.

The Memphis Area Federal Executive Association honored these Memphis, Tenn., VA Medical Center employees for their public service contributions and professional excellence: **Marlin D. Angell**, medical administration officer, received the Outstanding Managerial/Executive Award; **Almeda J. Williams**, supervisory dietitian, received the Outstanding Supervisor Award; **N. Timothy Smith**, computer specialist, received the Outstanding Specialist Award; **Karen B. Whittington**, biological sciences laboratory technician, received the Outstand-

ing Technical/Assistant Award; **Mary A. Sumler**, secretary, won the Outstanding Secretary Award; **Mary A. Sorensen**, program support clerk, received the Outstanding Clerical Award; **Mary Ann Giampapam**, **Constance K. Haan**, **John Riddle**, and **Daryl Weiman** won the Group/Team Award for Total Quality Improvement; **Nancy Appling**, **Constance Haan**, and **E. Van Thompson** won the Group Award for Outstanding Public Service; and **Herbert Alexander** and **Estell Leverston** received the Heroism/Valor Award.

**Gary J. Krump**, assistant secretary for Acquisition and Material Management, was elected as a fellow in the National Contract Management Association for his contributions in the field of federal acquisitions and contract management.

Two Little Rock VA Medical Center physicians were selected as officers in the Southwestern Surgical Congress. **Nicholas P. Lang, M.D.**, chief of surgical service,



Lang

is a State Councillor for the Congress.

**Ivelysse Swan**, staff assistant/associate director, New York VA Medical Center, was advanced to diplomat

status in the American College of Healthcare Executives for her commitment to continuing education, professional experience and participation in voluntary health-care and community affairs.

**Linda A. McVey**, health systems specialist and consultant for the Northampton, Mass., Medical Center, was advanced to diplomat status in the American College of Healthcare Executives for her commitment to continuing education, professional experience and participation in voluntary health-care and community affairs.

**Robert E. Coy**, recently retired VA general counsel/deputy general counsel, was presented the Exceptional Service Award for his 40 years of government service, 38 of them with VA. This is the Department's highest honor.

Washington Governor Gary Locke presented the Governor's Award for Service and Quality Improvement to the **VA Fort Lewis Team**, comprised of employees from the Seattle VA Regional Office, the VA Puget Sound Health Care System, the Washington Department of Veterans Affairs, the American Legion and the Army. The award noted that participants had "joined together in a collaborative effort to improve the process of providing benefit information and responses" for separating military personnel at Ft. Lewis and McChord AFB. Formerly, individuals leaving the Army or Air Force at these facilities had to wait up to eight months for a VA claim decision. The team established processes to develop and adjudicate the claim while the service person

is still on active duty, with a final VA decision issued 30 days or less after actual separation.

The **Carl T. Hayden VA Medical Center**, Phoenix, Ariz., is one of four winners of the John N. Sturdivant National Partnership Award. This is the first VA facility to be so honored as an outstanding example of how labor-management partnerships are meeting the National Partnership for Reinventing Government's (NPR) goal of a government that "works better and costs less."

The **Friends of Fisher House Foundation**, Inc., has been recognized as a Point of Light by the Points of Light Foundation for voluntary service to the community. The Foundation builds and maintains "comfort homes" at VA and military medical centers that offer temporary lodging to patients and their families. Hundreds of VA volunteers are part of the nearly 3,000 volunteers that raise funds, equip and operate 26 "Fisher Houses."

**Karla Overland-Janssen** of the Hot Springs, S.D., VA Medical Center, received the South Dakota Pharmacists Association Young Pharmacist Award. She manages the outpatient anti-coagulation clinic and is active in patient education.

Fort Meade, S.D., VA Medical Center's **Steve Williams** assumed the presidency of the South Dakota Academy of Physicians Assistants. A member of the academy since 1981, he works in the center's nursing home care unit.

**Robert W. McCarley, M.D.**, deputy chief of staff for mental health at the Brockton/

West Roxbury, Mass., VA Medical Center, received the 1998 American Psychiatric Association Award for Research at the group's annual meeting in Toronto. Dr. McCarley's research interests include the basic neurophysiology and neuropharmacology of sleep and wakefulness.

**Meacham-Muhammed**, an infant teacher at the Tuscaloosa, Ala., VA Medical Center Child Educare Center, received Childcare Online's first Caregiver of the Month Award. She was nominated by the parent of a 13-month-old child who began receiving care at the center when he was eight weeks old. The seven-year-old child care center was five years in planning and has space for 44 infants and toddlers, from six weeks to kindergarten.

**Lloyd E. Rader, Jr., M.D.**, chief of the outpatient psychiatry residency training unit at the Little Rock, Ark., VA Medical Center, was named National Teacher of the Year for 1998 by the Association for Academic Psychiatry. Rader also is an associate professor at the University of Arkansas Medical School and received the school's Red Sash Award this year in recognition of his teaching.

**Melodee Mercer**, head of the Philadelphia VARO&IC Reader Focused Writing (RFW) program, received special thanks from the National Partnership for Reinventing Government for her rewriting "in plain language" of the new "Medicare and You" booklet. The Health Care Finance Administration will release to booklet later this year to 33.5 million Medicare beneficiaries. It will be one of the first major publications issued after the

October 1 start of the President's initiative directing that all new government documents be written in plain language.

**Linda B. Haas, Ph.C., R.N.**, endocrinology clinical nurse at the Seattle VA Medical Center, was elected President for Health Care and Education of the American Diabetes Association. She has been an active Diabetes Association volunteer for many years and has served the association at state and national levels. She is also a clinical assistant professor at the University of Washington School of Nursing.

The Jacksonville, Fla., Vet Center honored Disabled American Veterans (DAV) service officer **Bob Padgett** for 16 years of volunteer service to northeast Florida veterans. Padgett began working at the Vet Center in 1982 and has logged more than 5,000 volunteer hours. He often works with troubled and destitute veterans after hours. He is a past national commander of the Military Order of the Purple Heart.

**Charles J. Jones**, St. Paul, Minn., VA Regional Office vocational rehabilitation specialist, was named National Veterans Business Advocate of the Year by the U.S. Small Business Administration (SBA). More than 675 veterans receive vocational rehabilitation under Jones's supervision and he has successfully assisted another 177 into jobs or self-employment. He has worked with state small business development centers to help disabled veterans start a number of successful enterprises such as a gunsmith service, trucking, farming, a restaurant and free-lance art business.

**Anthony Winckowski**,

**DSW**, director of Social Work Graduate and In-Service Education at the West Los Angeles VA Medical Center, received the Heart of Social Work Award at the annual conference of the Council on Social Work Education. The award recognizes excellence in partnerships between social work schools and field instructors of exceptional skill and expertise. This is the first time that the award recipient was nominated jointly by three major social work schools.

VA Deputy Assistant Secretary for Equal Opportunity **Gerald K. Hinch**, received the Distinguished Service Award from the Federal Asian Pacific American Council



Hinch

He was recognized for his many contributions, including career advancement workshops conducted for FAPAC.

The **VA Center for Excellence in Functional Electrical Stimulation (FES)** in Cleveland was honored by business, government and rehabilitation scientists this year for development of a hand-grasp neuroprosthesis known as the Freehand System. The Rehabilitation Engineering Society of North America presented its Leadership Award to FES for contributions to the advancement of assistive technology for persons with disabilities. FES Director P. Hulnter Peckham, Ph.D., received a special citation from the Commissioner of the Food and Drug Administration for a "dedicated career to restoring movement and independence to those who are paralyzed."

And FES received recognition from Cleveland's Enterprise Development, Inc., for developing an idea resulting in measurable benefits to business and society. FES is part of the Cleveland Functional Electrical Stimulation Consortium that includes the VA Medical Center, Case Western Reserve University and the MetroHealth Medical Center.

**Gary J. Young, Ph.D.**, of the VA Health Services Research Management Decision and Research Center at Boston VA Medical Center, was awarded the 1998 Thompson Prize for Young Investigators by the Association of University Programs in Health Administration. A frequent contributor to leading health care research and management journals, Young won the 1997 Best Paper Award from the Health Care Administration Division of the Academy of Management.

Florida Congressman Mark Foley presented VA youth volunteer **Freddie Evans** the Bronze Medal Congressional Award at West Palm Beach, Fla., VA Medical Center. The award recognizes achievement of rigorous developmental standards in



Evans

four areas: voluntary service, personal development, physical fitness and expedition leadership. When notified of the award, Freddie wrote to Congressman Foley and asked him to "come to the hospital and see what I do." The Congressman took him up on the invitation. Freddie took him on a tour of the center's extended care facility where he volunteers. □

# HAVE you heard



Fort Meade, S.D., VA Medical Center staff take a buckboard wagon tour of historic Fort Meade and help celebrate the fort's 120th birthday as a military post. The ride took them to a Cavalry Days military ball. Fort Meade is the first military post where the U.S. national anthem was played, and was home to the 4th and 7th Cavalry Divisions. It has been home to the VA hospital since 1946.

The Veterans Benefits Administration (VBA) has installed a toll-free telephone number to enable veterans in Oklahoma, New Mexico and Washington to call education counselors at the **Muskogee, Okla., regional processing office (RPO)**. Soon, callers to 888-GI BILL 1 will have access — through an automated response system — to information specific to their education benefits status.

The Downtown Division of the **Augusta, Ga., VAMC** recently opened an outpatient "mall," which completes the first phase of an ambulatory care renovation and addition. The completed project will provide 14,000 sq. ft. of new space and renovate 15,000 sq. ft. of existing space for five primary care team clinics. The space also will house sched-

uled admissions, compensation and pension examinations and the office of special programs such as Persian Gulf treatment.

The "Digi Drive" high-tech car driving system at the **Richmond, Va., VAMC** — a new concept that eliminates the steering wheel — is training severely disabled veterans who were only able to dream about driving. The system uses a single joystick for steering, braking and accelerating. Other equipment uses digital touch pads and switches. Trainees' response has been overwhelmingly positive in spite of the required 40 hours of instruction.

**Private pilots** will fly veteran patients to VA medical centers under an agreement signed between

VA, the Disabled American Veterans (DAV) and the National 210 Owners Association (a pilots group). The Association's American Veterans' Medical Airlift Service division will recruit qualified pilots and DAV will provide ground transportation from patients' homes to airports and back. Arrangements for the service are made through VA chiefs of staff at treatment sites.

**James Mayer**, formerly in VA Central Office Voluntary Service, has been appointed executive director of Leadership VA, succeeding long-time director **Dana Moore**, who is now director of operations, Office of the Inspector General. **Robert L. Jones**, former special assistant to the Assistant Secretary for Public and Intergovernmental Affairs, is now deputy assistant secretary of defense for POW/Missing Personnel Affairs in DoD.

VA has awarded a \$11 million contract to build the first phase of a **Cleveland-area national cemetery**. The 60-acre initial phase will include nearly 16,000 full-casket gravesites and 3,000 sites for cremated remains. The 274-acre site is 45 miles south of Cleveland, near Rittman, Ohio. Burials will begin in late 1999.

There is no bigger day for veterans and VA than Veterans Day. Those planning Veterans Day observances should check out web site <http://www.va.gov/pubaff/vetday98/vetsday.htm>. The site was added to VA's intra- and internet home pages to assist VA employees, veterans service organizations, schools and others interested in planning Veterans Day programs for November 11. The site contains information

about the history of Veterans Day and Veterans Day activities planned in Washington, D.C., and around the country. You will find information about the Veterans Day National Committee, Veterans Day Regional Sites and the Veterans Day school information packet that can be download as a PDF file. There are links to other Veterans Day information pages, the Veterans Day Poster, Veterans Day Presidential Proclamation, State Directors of Veterans Affairs and related sites. The Veterans Day web site also allows sharing of comments, questions or program materials with others.

The first medical supply technician certificate issued to a VA patient went to **Ralph Nicander** at the White City, Ore., Domiciliary. He completed six months of on-job supply processing and distribution (SPD) training, with academic work, to prepare him for employment. The SPD program developed when VA's Acquisition and Materiel Management Service identified a need for better VA service and high employment demand in both government and private-sector health care in the region. Community hospitals and a community college facilitate the training. SPD assures aseptic conditions and consistent distribution of medical/surgical supplies and equipment. Last year, White City's employment program served 365 patients.

The **Pittsburgh VA Regional Office and the VA Healthcare System** held a veterans forum earlier this year to commemorate Armed Forces Day and to reach underemployed younger minority veterans. VA minority veteran coordinators chose Saturday for the event



and held it in a predominantly African-American community. The forum included not only health screening for conditions prevalent among black veterans but also a job fair with employers and personnel counselors.

The **FY 1997 Annual Report** of the Secretary of Veterans Affairs is available on the intranet at [vaww.va.gov/corpinfo](http://vaww.va.gov/corpinfo). A single copy is also available at VA medical center libraries. Unlike past reports, it follows a format similar to VA's Strategic Plan for 1998 through 2003, reporting the relationship between resources and achievements.

A new **"One-VA Employee One-Stop" web site** offers employees information aimed at developing job skills, teamwork, a family-friendly workplace, mentoring, networking and diversity. The intranet address is <http://vaww.va.gov/1vaemployee>. (On the Internet, change vaww to www.) Site creator Michael A. Moore, of VA's Office of Policy and Planning, says employees can make suggestions for site improvement by contacting any of the many "One-VA Champions" listed under "collaborative effort." A few of the champions include the VA Asian Pacific American Heritage Council, VA Blacks in Government, the VA Hispanic Association, and VA representatives to the President's Interagency Council on Women. Moore called the collaborative web site a step toward fulfilling needs identified in the One-VA Employee Survey. He chairs the VA Minority Forum, another "champion" group. The Forum aims to draw together leaders and employee volunteer groups for women, minorities and people with disabilities to further the

goal of making VA an employer of choice.

The **Iowa City VAMC** held a slogan contest for third, fourth and fifth grade students at Hamilton Elementary School in Hamilton, Ill., to help name a memorial wall erected at the hospital to honor deceased veterans. The winning slogan, "The Unforgettable Heroes" from Mikayla O'Brien, has been inscribed on the wall. A teacher at the school and her grandmother had the idea for the wall in memory of the elder woman's husband, a World War II veteran. Recognition and saving bonds went to the winner and two runners-up at a school assembly. The program also featured discussions about who veterans are. Hamilton Elementary School plans an annual essay contest to thank veterans each Veterans Day.

More than 1,000 veterans and family members have stayed at the **Albany, N.Y., VAMC Fisher House** since it opened in 1994, but never has the comfort house hosted a more distinguished group than when six Medal of Honor recipients toured the facility. Held in conjunction with the Congressional Medal of Honor Society's convention nearby, the tour introduced

the recipients to the Fisher House network of guest houses that accommodate people visiting loved ones in VA hospitals.

Minneapolis VA Medical Center researchers **Herbert Nagasawa, Ph.D.**, and **Don Shoeman, Ph.D.**, entered a contest sponsored by a company searching for the longest running Eppendorf Micro Centrifuge. They were pleasantly surprised when their research lab turned out to have it. Theirs was a 1968 model, one-third the size of the new \$3,000 model which the hospital received as a prize. The centrifuge separates blood components by spinning solutions at very high speeds.

The deadline for changing from the Civil Service Retirement System (CSRS) to the **Federal Employees Retirement System (FERS)** is December 31. The SF 3109 Election Form must be filled out and given to human resources offices by that date to make the change to FERS. Employees in organizations participating as prototype sites in HRLink\$ will not receive a paper copy of the form, since they make changes through the interactive phone system, a kiosk or by calling a service represen-

tative at 800-414-5272.

VA has received authority to grant **voluntary early retirement** until Sept. 30, 1999 (an extension of a year). Management may choose to use the new authority in locations where it wants to facilitate reorganization and downsizing and to ease the effect of reductions in force.

A CD-ROM for Alzheimer's caregivers is the result of collaboration between the **Minneapolis Geriatric Research Education Clinical Center (GRECC)** and the Veterans Health Administration Employee Education System. The interactive multimedia application provides tailored, individualized instruction for those who live with and care for Alzheimer's patients. It includes a caregiver-based assessment that allows the user to select information and strategies most relevant to their particular needs. Based on the extensive clinical and caregiver education of its authors, the program is principally aimed at developing and strengthening the skills of family members in providing daily care for a person with dementia. The underlying principles have been used in numerous GRECC programs that have decreased patients' behavioral problems and helped relieve the stress for caregivers. For more information, call the Minneapolis GRECC at (612) 725-2051, or FTS (700) 780-2051, or e-mail [adelsonric@lm.va.gov](mailto:adelsonric@lm.va.gov) or [maddox.melitta@minneapolis.va.gov](mailto:maddox.melitta@minneapolis.va.gov).

Planning a Veterans Day observance? Check the Veterans Day website on the VA home page at <http://www.va.gov/pubaff/vetday98/vetsday.htm>. □



*Medal of Honor recipients visit the Albany VAMC Fisher House during their convention.*

# HEROES



Birmingham VA Medical Center optometrist **Patti Fuhr, OD, PhD**, coordinated a humanitarian eye-care mission to Brazil under auspices of the Volunteer Optometric Service to Humanity. During the mission, Dr. Fuhr and five other volunteers visited a remote state with a population of 250,000 served by only four eye-care providers. Sixty percent of the population is under 20 and the mean age of death is 56, mainly due to parasitic infections. The volunteer team provided services to as many people as possible. Outlying tribes of Indians from the Amazon rain forest trekked in for eye care despite the threat of bandits. The volunteers treated more than 1,200 people, providing examinations, medications and recycled eyeglasses during the one-week stay. Medications primarily were for eye infections and glaucoma. Lines were long and some had to be turned away.



Huntington, W. Va., VA Medical Center pharmacy technician **Margaret Hodge** received a call from a distraught veteran who said he had run out of his medication and was going to kill himself. Hodge kept the veteran occupied on the phone while getting the attention of pharmacist Mike Perdue who contacted Mental Health services for assistance. She assured the veteran that VA would get his medicine to him. The patient was taking Dilantin for Grand

Mal seizures and didn't want to go through another seizure. Hodge gained the veteran's confidence and said she would personally deliver his Dilantin. After a 30-minute conversation, Hodge and mental health workers were confident that the veteran was calm or no longer suicidal. Hodge and her husband later drove to the veteran's home, an hour from the medical center, and delivered his prescription.



Two VA Western New York Healthcare System police officers, **Michael Melerski** and **Timothy Wagner**, responded to a car fire on the main thoroughfare in front of the VA medical center. They found the driver in the vehicle and used fire extinguishers to put out the fire while she was removed from the car. The two secured the scene until emergency response teams arrived.



While driving home from work, VA Hudson Valley, N.Y., Health Care System medical administrative specialist **Sue Antonio** was first on the scene of a head-on car crash. She called 911 with her cell phone and reported that the driver of one car was unconscious, but alive. She kept the other driver, pinned in his car, calm and called his family at his request. Antonio stayed on-scene until emergency response teams arrived.

Iowa City VA Medical Center renal and infectious disease case manager **Sharon Gefaller, R.N.**, arrived at the scene of a serious van accident and immediately began helping paramedics. The van, carrying nine people had overturned into a ditch. Working in knee-deep water, Gefaller found several seriously injured people still in the van and helped stabilize them until they could be transported to area hospitals.



When Miami VA Medical Center Registered Nurse **Bessie Garrett** received the United Way Green Family Foundation American Values Award and a \$5,000 check, she knew exactly what she wanted to do with the money. Last month, more than 50 homeless children and their moms left on an all-expense paid trip to Disney World thanks to Bessie and the Green Family Foundation. Bessie is a special immunology nurse at the VA medical center who works as a community volunteer to provide basic health care and assistance to the homeless. "These children have been hungry all of their life and are looking after their moms," she said. "It's my dream to give the kids their childhood before it is too late."

**Karen Hendry, R.N.**, of the Biloxi/Gulfport, Miss., VA Medical Center, came upon a car accident while driving to her weekend military reserve drill. She had to crawl through the broken rear window to reach an injured front-seat passenger. Persuading the driver not to move the passenger because of possible back and neck injuries, she stayed in the wrecked car with the victim until an ambulance arrived.

The "Jaws of Life" had to be used to remove the injured person.



A troubled World War II veteran wrote a letter to the President to have his suspended VA pension reinstated. The letter made its way to **Bert Compton**, customer service specialist in the Nashville VA Regional Office's Special Activity. She quickly took care of the veteran's immediate problem by obtaining some necessary technical information. But she didn't stop there. In reviewing the veteran's files, she noticed references to his war time experiences and how they affected him. Her supervisor encouraged her to develop the possibility of service connection for the veteran. After determining that the veteran's documented war experiences possibly could have contributed to or caused the PTSD-type symptoms he now displayed, Compton phoned the veteran and persuaded him to file for service-connected disability compensation. The veteran was very suspicious and reluctant. He missed examination appointments, but Compton persisted. She arranged transportation for the veteran with the Veterans of Foreign Wars and the veteran was finally awarded a 50 percent service-connected disability rating for PTSD.



Roseberg, Ore., VA Medical Center registered nurse **Marilyn Eifert** expected another routine call from a veteran, but as she listened to the troubled voice on her phone, she realized she was dealing with life and death. The veteran had a gun and threatened to kill himself. Eifert engaged the veteran for

half an hour, distracting him until police arrived at his home. Things got tense when the veteran refused to let the police in. Still talking to him on the phone, Eifert remained calm and supportive until the veteran finally relented.

☆☆☆☆

Providence, R.I., VA Medical Center librarian **Cheryl Banick** was taking her usual four-mile walk along the waterfront in Warwick, R.I., when a boy ran up begging her to help his five-year-old brother. She followed him to his brother who was bleeding profusely from the mouth, a pool of blood at his feet. Banick saw three people in the vicinity and called them to help. None knew what to do, so she told them how to stop the bleeding, keep the boy breathing, what to do in case of vomiting, and how to apply ice to the head. She then flagged down a motorist and instructed him to call 911 and report the boy's situation. An ambulance arrived a few minutes later and Banick directed traffic so the emergency response team could get to the child. While all this was occurring, the boy's mother, who had gone to get her children ice cream, arrived on the scene. As she ran to her son, she clutched her chest and fell to the ground. Banick directed rescue workers to help her, as well. The boy and mother were taken to a local hospital and subsequently recovered. One of the rescue workers said that the boy had suffered a very serious injury and that if Banick had not responded as she did, the patient could easily have died.

☆☆☆☆

Cleveland VA Medical Center (Brecksville Division) registered nurse **Barb Klatka**

was snorkeling in the Grand Cayman Islands during a March vacation when she heard yells for help out on the water. A fellow snorkeler from her boat had suffered a heart attack while swimming. He was brought aboard the boat and Barb began CPR breathing for the stricken man. Her emergency breathing kept the victim alive until the boat reached shore and an awaiting emergency rescue team, but he later died on his way to the hospital.

☆☆☆☆

Four Omaha VA Medical Center employees were part of a ten-person health-care team that visited a small village in central India earlier this year and spent several weeks providing care to the inhabitants. They were: **David. M. Chacko**, M.D., Ph.D., and eye specialist who led the team; husband-wife operating room technicians **Larry** and **Becky Rohe**; and operating room nurse **Denise Cuevas**. The team performed 215 eye procedures, 188 of which were cataract removals with lens implants. The trip was financed with donations from the Nebraska Lions Club, the Nebraska Health System, pharmaceutical firms, friends and family.

☆☆☆☆

While on vacation to Alaska, Boise, Idaho, VA Medical Center registered nurse **Mike Farruggia** came across an auto accident in northern British Columbia, near the Yukon border. A car had veered off the highway, rolling several times. The driver was trapped inside. Farruggia directed the removal of the driver from the car. He determined that the driver had a dislocated shoulder and a number of broken ribs and had him

moved to a hotel a few miles away and cared for him until a med-evac aircraft arrived. Ironically, the victim, a World War II veteran on his way to visit his son in Alaska, asked if there was a VA facility nearby. Farruggia informed him that there was no VA facility in Canada but that he was being cared for by a VA nurse.

☆☆☆☆

**Giovani Rivera**, a veteran working at the Ponce, P.R., VA Outpatient Clinic in the work-study program, was recognized by the clinic director and his veterans benefits counselor for turning in to authorities an envelope containing \$2,000 cash. VA officials said that Rivera turned in the envelope without hesitation and it was returned to its owner, a fellow veteran.

☆☆☆☆

When North Chicago VA Medical Center police officers **Bruce Culver** and **John Howard** responded to a fire alarm in a campus outbuilding, they noticed smoke coming out a second-floor window. Hearing a faint voice, they entered the building and rescued a patient. The patient and officers were treated for smoke inhalation and released in good condition.

☆☆☆☆

**John Syme** was on his way from his job at the Fayetteville, N.C., VA Medical Center to a doctor's appointment when he came across a wrecked sports utility vehicle. A crowd had already gathered; some were dousing the vehicle with fire extinguishers. As he walked to the wreck, Syme saw that the driver was still in the driver's seat, unconscious and badly hurt.

People were afraid to move her, fearing she had a broken neck. Grass around the wrecked vehicle was beginning to burn and a power pole the car was wedged against was starting to flame. The front doors were jammed and Syme opened the back door of the vehicle. He carefully began pulling the victim back over the fully reclined driver's seat and out of the wreck. Others assisted and after they removed the victim, her car began to burn furiously. The driver suffered numerous injuries, but is recovering. "The only reason she's around today," said her business associate, "is that someone was there for her."

☆☆☆☆

It was a sweltering Texas afternoon at the Waco VA Regional Office. Management analyst **Carolyn Webb** noticed that a veteran doing contract work in the director's office didn't look well. When she asked, he explained that he had no air conditioning in his apartment where the temperature had reached 116 degrees the previous evening. He said he was diabetic and his blood sugar had dropped to a dangerous level. Carolyn called a number of offices and agencies to assist the veteran but was unsuccessful. She then went to her assistant director **Larry Burks** who called the local United Way office which located a window air conditioner donated by a local businessman.

☆☆☆☆

While attending a pork exposition at the Iowa State Fair grounds in Des Moines, Knoxville VA Medical Center psychiatric nursing assistant **Kevin DeGoey** rescued a child who was choking on a large piece of pork with the Heimlich maneuver. □

# Biloxi VAMC Nurses Define Core Values

**A**fter Nursing Service at Biloxi, Miss., VAMC split into service lines, Nurse Executive Renita C. Johnson, R.N., M.S.N., sensed the need to bind more than 500 nurses together in a process to establish a unifying mission. Last fall she started consensus-building meetings — structured with a “script” of poetry, songs and drawings contributed by Biloxi nurses. The result last spring was a celebration of core professional values emblazoned on tee shirts during Nurse Appreciation Week.

Teams within service lines focused on objectives supporting patient-centered care. Team facilitators met with all nurses of the Biloxi and Gulfport Divisions of network 16 and its outpatient clinics in Mobile, Ala., and Pensacola, Fla., to identify their core values for nursing care. In focus and work groups, facilitators helped team members examine change in their work, find out what motivated them as caregivers and express their individual professional values.

Those values turned out to be similar to the ones announced later for all of the Veterans Health Administration by Under Secretary Dr. Kenneth Kizer — caring, trust, compassion, integrity, respect, credibility, communication and excellence.

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## From on page 11

provide visitors with NCS, cemetery and specific gravesite location information.

## COMPENSATED WORK

**THERAPY PROGRAM** In 1995, an NCS and VHA national agreement formalized a partnership between VA national cemeteries and VA Compensated Work Therapy/Veterans Industries (CWT) program. National cemeteries are provided a supplemental work force while disabled veterans receive pay, regain work habits and learn new skills. Since 1993, 22 partnerships have led to more than 100 participants working annually at national cemeteries. □

By Steven Westerfeld



Nurse Executive Renita C. Johnson discusses the core values expressed on posters with nursing students of Mississippi Gulf Coast Community College.

From these, the nurses derived a conceptual model for maintaining high standards of care. Johnson said it also allowed them to take control of the changes affecting their work. In early 1998 the teams published a mission and vision statement, and in

May they shared their values with all employees. Nurse Melanie Covacevich used the nursing staff's drawings and values to design a T-shirt displaying them. It's being worn throughout the Biloxi VA Healthcare System and community. □

## Letter to the Editor: No 'Robotic Pharmacists' in VA!

I was disconcerted by the page 5 article (May/June 1998 Vanguard), “Robotic Pharmacists Cut Waiting Time for Veterans' Prescriptions.” What is being implemented is an automated system for filling prescriptions, not a “robotic pharmacist.” I know that many pharmacists are harried by the title of the article. Its contents details the need to shorten waiting times for VA patients, and I fully support the concept and statement.

But pharmacists are no longer trained to count, label and pour prescriptions. Our education goes far beyond that. As a doctor of pharmacy, I came to VA due to the available opportunities — opportunities to educate, manage patient medication therapy, and provide medication-specific knowledge that only comes from a pharmacist.

Pharmacists are not in VA's system to be replaced by robots, but to take advantage of the many needed opportunities that exist. When a robotic system is developed to give patients their daily medication, will they be called “robotic nurses?” Were radiologists replaced by MRI scanners? The answer is no! Systems are added to adjunct the care that is provided, to improve outcomes and, yes, even to cut costs, but not to replace a viable, growing and valuable resource.

Marcus C. Raven, Pharm.D.  
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