

SECRETARY'S MESSAGE



Since my confirmation as Secretary just over three months ago, I've learned many things about our department based on my travel to VA facilities, talks with thousands of Veterans and VA employees, hearings, meetings, and phone calls with over 120 Members of Congress, and numerous

conversations with Veterans Service Organizations and other Veterans' stakeholders.

First, fixing access to VA care is critically important. We have a plan to do that, and we are dedicated to implementing it. That process will take time, but we will succeed by working together to provide Veterans the care they have earned.

Secondly, I have learned about the exceptional, wide spectrum of care and benefits that you, VA employees, provide to millions of Veterans, their families, and their survivors.

As an example, no one honors Veterans as does our National Cemetery Administration. NCA maintains approximately 3.4 million gravesites. Last year, alone, NCA conducted over 125,000 interments. For the past decade, the American Customer Satisfaction Index has ranked NCA the top public or private customerservice organization in the Nation—better than every customer-oriented corporation, industry, manufacturer, or organization.

That's the sort of excellence we want to achieve VA-wide.

That's the kind of excellence we began moving toward on our "Road to Veterans Day," an initiative that begins with our mission and our immediate objective:

To better serve and care for those who have borne the battle and for their families and survivors by achieving three goals:

- · Rebuilding trust with Veterans and stakeholders;
- Improving service delivery, focusing on Veteran outcomes;
- And setting a course for long-term excellence and reform.

But many parts of our "Road to Veterans Day" will not end on November 11. VHA's "Blueprint for Excellence" is a template to re-establish VA's preeminence and leadership in health care. Developed with the leadership and insights of former Under Secretary for Health Dr. Jonathan Perlin and Interim Under Secretary Dr. Carolyn Clancy, this is one example of our continued quest for excellence.

The Blueprint lays out four broad themes and supporting strategies for transformation to improve the performance of VA health care now—making it not only more Veteran-centric, but also Veteran-driven by putting our customers in control of their VA experience.

And, to better meet the expectations of our customers, we are going to reorganize for success—perhaps the largest restructuring in the history of the department. We call that reorganization and our customer



experience solution MyVA—also part of our overarching Road to Veterans Day strategy. It's called MyVA because that's how Veterans should view us—as an organization that belongs to them and provides quality care in the ways they need and want to be served. Veterans' and employees' ideas and initiatives will drive reorganization under MyVA. They will tell us what must change to better serve our customers.

MyVA will continue for the foreseeable future as we find ways to restructure, to combine functions, to simplify operations, make process improvements, leverage technology, enhance efficiency, increase productivity, and effectively implement the Veterans Access, Choice, and Accountability Act. MyVA is a 360-degree effort to provide Veterans with a seamless, integrated, and responsive VA—whether they come to us digitally, by phone, or in person.

It's imperative that we all regain and retain a laser focus on our customer base — everyone from the 90-year-old Veteran of Omaha Beach to the 19-year-old who fought in Afghanistan's Korengal "Valley of Death."

Our goal is simple: Provide quality, timely care and benefits with proactive, real-time, courteous, coordinated service.

Continued on page 11 ▶

VANGUARD

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Robert Turtil

Photographer/VACO

I covered the dedication of the American Veterans Disabled For Life Memorial in Washington, D.C., Oct. 5. There I met Joseph Bacani (right), whose likeness graces one of the walls at the memorial. Joseph was a combat wounded OIF Veteran and had come to see President Obama dedicate the memorial, with friends from the University of South Carolina, where he's studying psychology, under the GI Bill.



Staff Photographer/Richmond VAMC

Marine Corps Veteran John Peck answers questions from Hunter Holmes McGuire VA Medical Center's prosthetics chief, John Fox (foreground) Sept. 25. It's a team effort during the fitting of a new prosthetic leg. From left, William(Bill) Lovegreen, Jessica Smith-Armstrong and Konrad Walz make adjustments based on the Veteran's feedback. Peck has been at the prosthetics service many times, because fittings require precise measurements to ensure patient comfort and safety. Walz has a personal stake in his work. "My father was a combat Vet, and my twin brother is still in the Navy after 20 years; and fortunately they have all their limbs," said Walz. "I cannot think of a patient population more deserving of the best possible care available, as well as our thanks. It is very rewarding."

Do you have a great photo that should be featured in My VA? Submit it (at least 2 MB) with a short description to newmedia@va.gov.



Friendship. It matters.

Ask the question. It matters.

Family.

Compassion. It matters.

Support. It matters.

Listen. It matters.



It Matters.

© 10/13 VHA

Because you mean so much to them.

Confidential help for Veterans and their families



• • • Confidential chat at VeteransCrisisLine.net or text to 838255 • • •





TOP: Dr. Chan Park is the Director of Simulation Education at the Durham VAMC.

BOTTOM: Dr. Chan Park (right) was part of the Combat Logistics Battalion 5, Shock Trauma Platoon in Ramadi, Iraq. Dr. Chan Park served in the U.S. Navy from 1999-2009. Dr. Park entered service through the Navy Health Professions Scholarship Program and went on to complete his residency training in emergency medicine at Naval Medical Center San Diego. As a medical officer, he was assigned to the USS Dubuque (LPD8) out of Naval Hospital Guam, Combat Logistics Battalion 5, Shock Trauma Platoon in Ramadi, Iraq, and at Naval Medical Center Portsmouth, Virginia, where he served as an academic faculty member.

In 2011, Dr. Park joined the Hunter Holmes McGuire (Richmond, Va.) Veterans Affairs Medical Center staff and served as the site director for the Combined Emergency Medicine and Internal Medicine Residency Program, as well as the Director for Medical Simulations.

Currently, Dr. Park serves as the Director of Simulation Education at the Durham (N.C.) Veterans Affairs Medical Center, where he and his colleagues are actively engaged in examining best practices, procedural competency, team dynamics, and leadership training in cardiac and respiratory arrest, as well as reinforcing the principles of patient-centered care to provide the best care for our Nation's Veterans.

Do you know a VA employee who should be recognized in CONTINUED SERVICE? Submit two photos and a short bio to newmedia@va.gov.

November is National Smoking Cessation Month, and while most people are well aware of the detrimental general health effects of tobacco use, fewer are aware of the problems that tobacco can cause in the mouth. For example, you probably know that tobacco use is related to an increased risk of oral cancer, but did you also know that it is tied to gum disease, cavities (dental caries), failure of dental implants, and even birth defects such as cleft lip and/or palate?



The Department of Veterans Affairs has many programs in place to help Veterans break their tobacco use habits. Here are a few:



SmokefreeVET is a free text messaging program to provide daily support, advice, and encouragement to you when you quit smoking.

You can sign up for the program in English by texting the word VET to 47848 from your mobile phone or by visiting smokefree.gov/VET.



The Stay Quit Coach App was designed to help Veterans with Post-Traumatic Stress Disorder (PTSD) quit smoking. The App guides users in creating a tailored plan that takes into account their personal reasons for quitting.



Tobacco quitlines can double your chance of quitting compared to getting no support at all. You are even more likely to be successful when you use a quitline and take smoking cessation medication.

Any Veteran receiving health care through VA is eligible to use the Quit VET quitline.

Call the quitline today 1-855-QUIT-VET

Quitting smoking is the single best thing you can do to improve your health. You have the power to quit smoking and to stay smoke free, and the VA has resources available to help.

THE ROAD TO **VETERANS DAY**

The Department of Veterans Affairs (VA) has an important mission: caring for Veterans and their families, and VA has strong institutional values mission-critical ideals that must influence day-to-day behavior and performance: Integrity, Commitment, Advocacy, Respect, and Excellence.

To better fulfill our mission and to improve our service to those who have "borne the battle," their families, and survivors, VA has developed The Road to Veterans Day 2014— a series of strategies and actions that will enable the Department to create a better VA for Veterans and employees.

To assure that these strategies are implemented, Secretary Bob McDonald has visited 22 cities and more than 35 VA facilities in the past 90 days.

ON THE ROAD

The number of VA facilities Sec. Bob McDonald has visited since August 2014

35,000

The approx. number of miles Sec. Bob McDonald has traveled since August 2014.

1. Phoenix 8/8/14 2. Las Vegas 8/9/14 3. Memphis 8/13/14 4. Reno 8/19/14 5. Palo Alto 8/20/14 6. Charlotte 8/26/14

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- 7. Durham 8/28/14 8. Philadelphia 9/5/14
- 9. San Diego 9/15/14 10. San Francisco 9/25/14
- 11. Cincinnati 9/27/14

- - 12. Sarasota 9/30/14
 - 13. Tampa 10/1/14
 - 14. St. Petersburg 10/1/14 15. Orlando 10/2/14
 - 16. Sacramento 10/11/14
 - 17. Burlington 10/13/14
 - 18. Baltimore 10/14/14
 - 19. Boston 10/17/14
 - 20. Kansas City 10/21/14
 - 21. Atlanta 10/28/14
 - 22. West Point 10/30/14

STRATEGIES MOVING FORWARD



Rebuild trust with Veterans and the American people



Improve service delivery



Set the course for long-term excellence and reform

THE RIGHT DIRECTION

200+

SECRETARY BOB MCDONALD

facilities for Veterans to express their concerns. All town halls were held before Oct. 1, 2014.

The number of VSO and stakeholder meetings Sec. Bob McDonald has held since being sworn in.

THE FIRST 90 DAYS

July 30



Speech to DAV:

Over these next several months, I am going to keep traveling, extensively, to hear directly from our employees, Veterans, and other stakeholders.



Bob McDonald sworn

in as Secretary.

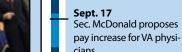
Speech to the

Like you, I don't want VA to be known for just "standard" care; I want it known as "THE Standard" in health care.



Road to Veterans Day:

We have reaffirmed our commitment to our mission and our "I-CARE" values — Integrity, Commitment, Advocacy, Respect, and Excellence — and are working to make reaffirmation an annual requirement.



Sept. 30

Sec. McDonald travels to Florida with Rep. Jeff Miller (HVAC).

Oct. 8 Sec. McDonald announces VA to continue town hall events nationwide.





Continued recruiting

I'm here for one thing and one thing only -- to get you to come work at VA.

ON THE LINE

VA's Social Media Roundup

VETERAN OF THE DAY: Every day we honor a Veteran through VA's official Facebook and Twitter accounts. On point is a Veteran of the Day submission from Facebook that had the most "social media reach" during the month of October with 1.6 million people reached.

NOAH GALLOWAY/ October 7, 2014



Noah joined the U.S. Army in October 2001. He was assigned to the 502nd Infantry of the 101st Airborne Division out of Fort Campbell, Kentucky.

On December 19, 2005, Noah lost his left arm above the elbow and left leg above the knee in an Improvised Explosive Device (IED) attack in Yusafiah, Iraq. After receiving medical treatment in Germany, he was then transferred to Walter Reed Army Medical Center in Washington, D.C.

Despite his injuries, Noah has participated in the 2012 Marine Corps Marathon and countless other extreme endurance races. Today, Men's Health Magazine announced that Noah will be featured on the cover of their November 2014 issue.

Congratulations Noah and thank you for your service!

Visit our Facebook page at www.facebook.com/VeteransAffairs and find out how you can submit a Veteran of the Day.

VA APP STORE: VA Mobile Health releases new Apps for Veterans regularly. Here are a few of the best rated ones in the VA App Store.



ACT Coach

This app helps you work with a mental health professional

during Acceptance and Commitment Therapy (ACT). ACT Coach is not a selfhelp tool and should only be used while in therapy with a provider.



Airborne Hazards and Open Burn Pit Registry

This app is an online database of health information provided by

OEF/OIF/OND or 1990-1991 Gulf War Veterans and Servicemembers and collected through a questionnaire about exposures to airborne hazards.

Visit mobilehealth.va.gov/appstore/all to see all the apps VA has to offer.

#VETQ: Here is one of the top questions answered using the #VetQ initiative. #VetQ is a collaboration of VA and Veteran Service Organizations to answer Veteran questions via social media like Twitter.





Not interested in using social media but want to stay up to date with all of the information VA posts? You can sign up for daily e-mail digests of VA social media posts at: www.blogs.va.gov/VAntage/subscribe/initiative.

Secretary's Message Continued

You see, there is no substitute for VA.

Veterans need their VA for the unique care and benefits you provide for them — services that produce tangible results for Veterans, their families, their survivors, and our Nation.

I need your help in making sure Veterans and the American public understand the full spectrum of care and benefits you provide, what you do, and how many things we do exceptionally well as a department. We must do a better job of conveying this in order to insert a degree of balance and truth to the previously one-sided conversation about VA care and services.

I know NCA is not the exception — there is excellence in every administration of VA! Whether making unique contributions in medical research, education, and clinical care, PTSD and TBI treatment, spinal cord injuries and disorders, polytrauma care, disability and education benefits, home loans, homeless rescues, or final honors in our national cemeteries—there's no other

single institution like VA positioned to deliver a broad spectrum of Veteran-specific care and services to the one percent of our population who currently serve in uniform.

We know that VA makes unique contributions that help Veterans live better lives—and produce positive results for all Americans. We know that VA researchers have earned three Nobel Prizes in Medicine or Physiology, and seven prestigious Lasker Awards—recognizing people who make major contributions to medical science.

We know that an estimated 70 percent of all U.S. doctors receive training at VA. We know that the hardworking employees of VBA reduced the backlog of pending claims by 60 percent in the last 20 months, completed 1.32 million claims for Veterans in FY 2014 — 150,000 more than last year's record of 1.17 million—and have delivered over \$46 billion dollars in educational benefits under the Post-9/11 GI Bill to over 1.3 million Veterans and eligible family members. Help me spread the word of the good work you do and the accomplishments on behalf of Veterans you make possible.

We need every hand on deck as we move forward to improve our department. I seek and value your input. I appreciate and deeply respect every member of our team who works hard to produce results for those who have served our Nation.

We have the greatest opportunity for improvement in our history. We will succeed because of you, our dedicated workforce, through your commitment to our mission and to rebuilding trust, to reorganizing and reforming VA to best serve Veterans.

I recently had the opportunity to interview with 60 Minutes. I told them how your hard work is already making a difference—providing care to more Veterans and reducing wait times in recent months, among many other successes. While we have more work to do, I am confident we will be successful for one reason. You.

Thank you for what you do,

and God bless you all. Happy

d work you do and Veterans Day!

VANGUARD recently visited the Tampa VAMC to see what Veterans are saying about VA. Here's what some of them had to say.



David Freed, U.S. Army

I've never had a problem; they've always treated me good.

Podiatry treats me like a king; I suppose my least favorite thing is whenever I have to go to the emergency room. I've been using VA since 2005.



Susan Hoppy, U.S. Army

Do I think the VA is getting better? That is a really complicated question. I have been very lucky at the VA here in Tampa. I feel as though I've had wonderful doctors. On a scale from one to 10, I've had more 10s than I've had threes. I feel as though some of the doctors I have had have been put at a huge disadvantage.



Harry Gurr, U.S. Air Force

I've never had any problem here in the 30 years I've been coming. It's the best care you are going to get anywhere. The place is great. I'm just coming out of surgery right now; (they are) sending me home.



On the Recruiting Trail:

Hiring the Best and Brightest Improves Access for Veterans

By Reynaldo Leal





Secretary Bob McDonald answers a question from a Duke medical student during "Grand Rounds." It was the first of 20 recruiting trips he made during his first 90 days. (Photo by Reynaldo Leal)

Through its affiliation with more than 1,800 educational institutions, the Department of Veterans Affairs health care system prepares doctors and nurses for a career in medicine like no other with more than 70 percent of U.S. doctors receiving training by VA.

However, to keep up with current and future demands on the country's largest healthcare system, VA needs to not only keep its current doctors, but also recruit more of the medical pro to serve Veterans, their survivors and dependents. There is no higher calling."

He invited students to join the ranks of medical professionals who made notable contributions to medicine and research like the creation of the nicotine patch, implantable cardiac pacemaker, and revolutionized the modern electronic medical record, with the help of VA.

He also laid out the incentives he hopes will tip the scales in favor

"I am here for one reason – and one reason alone – I want you to come work at VA."

fessionals it trains across the country.

That's where Secretary Bob McDonald's new recruitment initiative comes in. He has visited more than 20 medical and nursing schools all over the country – from Duke to Morehouse – during his first 90 days, and is spreading the word about the higher calling of serving the more than 9 million Veterans enrolled in VA healthcare.

"I am here for one reason – and one reason alone – I want you to come work at VA," he recently told a group of medical students at the Morehouse School of Medicine. "At VA, we have a noble and inspiring mission of working at VA, such as repaying student loan debt and relocation incentives for doctors and nurses who want to work in rural areas. McDonald wants to make working for Veterans a no-brainer for recently graduated medical professionals and also pushed for an increase in pay for physicians to keep up with the private sector.

"We're taking the steps we need to take to get Veterans off of wait lists, into clinics and in the longer term, we're working to provide timely access to care," he said, "and we need to build our capability by having more medical providers."

Incentives:

Recruitment and retention incentives related to paying off student loan debt and enhancing the educational preparation of VA staff.

- Education Debt Reduction Program (EDRP): Loan reimbursements up to \$120,000 over five years.
- Student Loan Repayment Program (SLRP): Pays lending institution student loans of up to \$10,000 per year, with a lifetime cap of \$60,000.
- Employee Incentive Scholarship Program (EISP): Scholarship to employees for degree or training in select health care areas.
- Recruitment and relocation incentives to increase clinical providers for rural areas.

Competitive Pay:

Sec. Bob McDonald proposed salary rate adjustments commensurate with the private sector for physicians and dentists.

- TABLES 1 and 2: Maximum annual pay ranges increased by \$20,000
- TABLES 3 and 4: Maximum annual pay ranges increased by \$30,000 to \$35,000
- TABLE 5: Maximum annual pay ranges increased by \$25,000

Accomplishments:

Notable accomplishments contributed to medicine and research by VA employees.

- Developed the implantable cardiac pacemaker.
- Conducted the first successful liver transplant.
- Created the nicotine patch to help smokers quit.
- Crafted artificial limbs that move naturally when stimulated by electrical brain impulses.
- Received three Nobel Prizes in medicine / physiology and seven prestigious Lasker Awards.

Visit http://www.vacareers.va.gov/for more information

LIFE IN THE FAST LANE

U.S. Army Veteran finds his calling in NASCAR

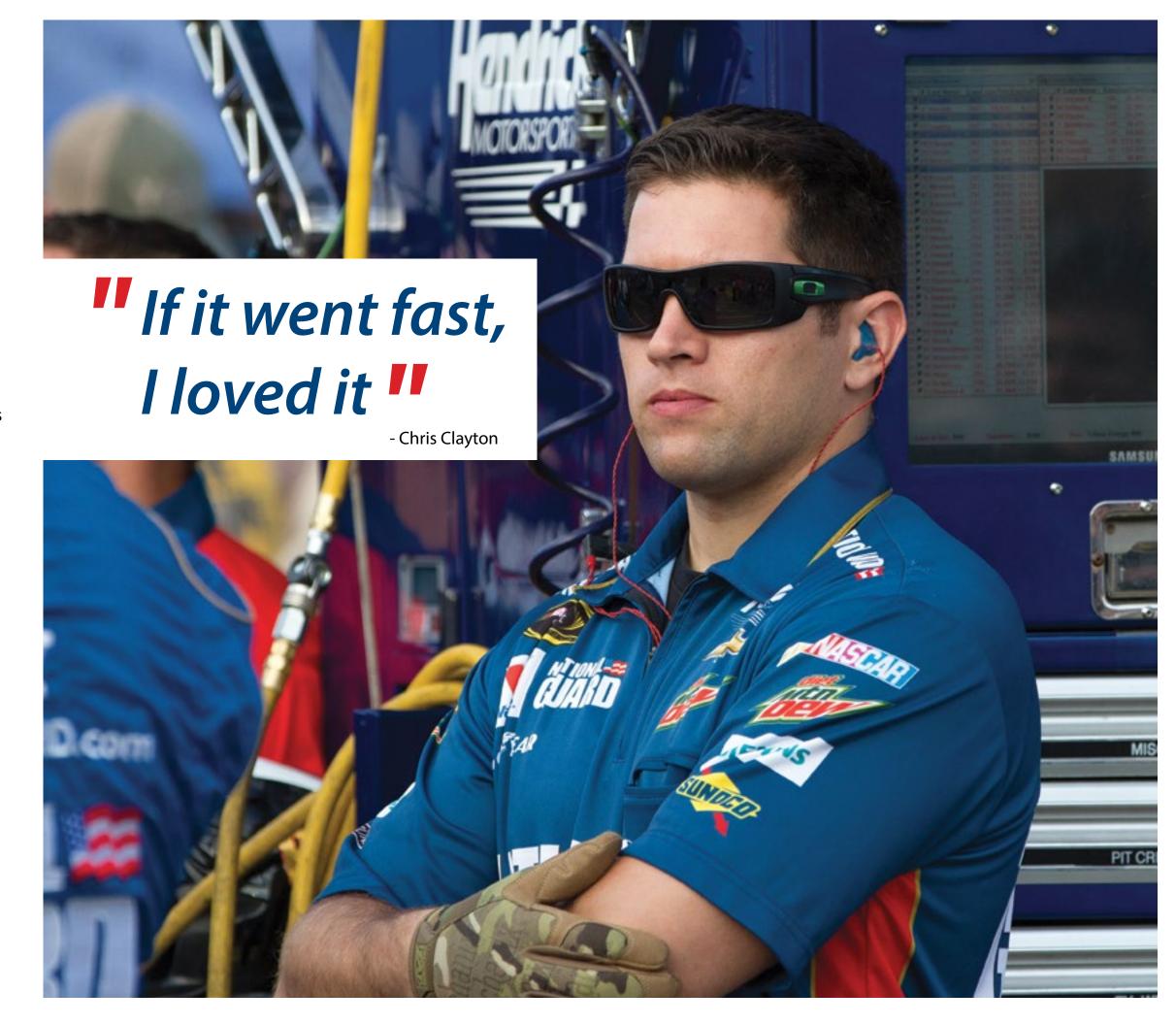
By Reynaldo Leal

Chris Clayton grew up with two passions in life: military aviation and racing. The first was from listening to his grandfather's stories of working on P-51 Mustangs during World War II, and the latter from spending countless summer nights at racetracks with his father.

He recalls his father giving him a choice between attending other sporting events or going to the local speedway. There was never a question in the young boy's mind — Chris always picked racing.

"If it went fast, I loved it," he said with a smile.

But the dream of somehow being involved in racing would have to take a temporary backseat to make room for another calling.





Chris Clayton sits down for an interview with VAnguard at the Hendrick Motorsports campus in Charlotte, North Carolina. Before chasing his NASCAR dreams as a pit crew member, Chris served as a CH-47 Chinook crew chief with the 160th Special Operations Aviation unit in Afghanistan.

His grandfather's stories, and the respect he had for the family patriarch's military service, inspired Chris to join the U.S. Army in 2007. He served as a CH-47 crew chief with the 160th Special Operations Aviation unit and deployed six times to Afghanistan during his six years of service.

Flying over Afghanistan in a Chinook helicopter, Chris was

Chasing the Dream

Chris was attending a marriage retreat in North Carolina with his wife before his last deployment when the couple decided to make a stop at the Hendrick Motorsports complex near Charlotte. While they were checking out the museum, trophy cases and engine shops, a chance encounter with

tially spurred on by his wife, but it got the attention of the coach.

"I'm sure I wasn't the first person to ask him what it took to be a part of the team," he said, "but I wanted to show him that I was serious."

Morin gave him his card, told him to stay fit and come back when he was out of the Army ... no promises, but that's all the

It was always in the back of my mind ... My love for racing never went away

as far away from an oval track as could be, but he never forgot about the father-son time spent in the grandstands. He believed someday he would make it into the racing world; he just wasn't sure when or how.

"It was always in the back of my mind," he said. "My love for racing never went away." Hendrick Motorsports' head pitcrew coach Greg Morin got him thinking again about his boyhood dream of being in racing.

Chris walked right up to Morin, who was in the middle of pit crew practice, introduced himself, and asked him what he needed to do to in order to pit for Hendrick Motorsports. It was a bold move, par-

sergeant needed to hear to keep the dream alive. From that point on, all his free time was dedicated to reaching his goal. Prior to leaving for his last deployment, he regularly showed up at the Hendrick practice facility to watch and take notes on everything the coaches said. He bought a lug-nut impact wrench to practice, and

he changed his workouts to focus on the movements needed as a tire changer. He watched as many Internet videos as he could find, always paying close attention to the "choreographed chaos" of pitting.

His peers in the Army didn't know what to think of Chris' new routine, but he kept working at it until, just months from getting out of the military, he got his chance to try out for Hendrick Motorsports. It was a big leap of faith to not reenlist and continue his military career, but all the hard work and dedication paid off when he made the team.

He walked over to his wife, who was watching the tryout from afar, and told her the good news. "We made it!" he told her.

"It was a big personal goal, and it was so competitive," he said. "Now that I'm here, we're just going to make the best of the opportunity."

Nothing is Impossible

The roar of the engines was deafening as Chris ran fuel and tires back-and-forth from the team hauler to pit row – vital tools for the 88 team during the NASCAR All-Star Race at Charlotte Motor Speedway in North Carolina on May 17, 2014. Chris was back in Charlotte, where this journey started, and living his dream as an integral part of Dale Earnhardt Jr.'s team on pit road that night.

The path wasn't easy, but Chris is certain it was worth the sacrifice to fulfill his lifelong dream. He credits the Army and his training for much of his success – from the discipline to follow through with goals and his eagle eye for details developed through years of work-



Chris Clayton works on tires for Dale Earnhardt Jr.'s 88 car before the All-Star race in Charlotte, North Carolina.

ing on mission-essential aircraft, to the high value placed on teamwork. He's convinced he wouldn't be working for Hendrick Motorsports – one of the most successful teams in NASCAR – if it weren't for the skills he gained while in the military.

Understanding that the goals are different, "there are a lot of similarities between the military and a [racing team]," he said. "It's all about integrity in the little things. One loose lug nut can cost the entire team, just like one missing part on a helo can affect the

entire mission."

He cautions other Veterans who might think their dreams are too far-fetched to "never set limits" for themselves.

"When you get out [of the military] there is always a mental battle," he said. "You ask yourself, 'what if I don't make it' and 'what if I can't do it?"" But the message Chris wanted other Vets to remember is that, "... you are good enough." And he is proof that setting goals, believing in yourself and hard work can truly pay off.

HEALING THROUGH ART



By Jordan Schupbach

Each year, submissions come from all over the country: pictures, photographs, paintings, and sculptures. They are all unique and poignant; yet in even the most beautiful painting you will find a hint of a struggle. These are the artistic works of Veterans, and many represent the battle against PTSD. "Chasing the ghost," as one Veteran calls it ...

But they also represent healing. "It is not just that art allows a Veteran to express the tragedies [of warl, it is the belief that someone will see or hear it and relate to it," said Army Veteran and Creative Arts Festival participant Jason Moon. "This validates it and lets me know I am not alone."

VA's National Veterans Creative Arts Festival has been encouraging healing through art for more than 30 years. The festival is the culmination of months of competition at local VA facilities around the country. This year, 3,208 Veterans from 129 VA medical facilities submitted entries to the competition. The gold medalwinning artwork entries from 53 categories were showcased in Milwaukee, Wisconsin, Oct. 29-Nov. 2.

The festival is open to Veterans who are enrolled at a VA Medical Center or Outpatient Clinic before entering the local competition. An eligible Veteran can enter local competition at only one VA facility per year in the divisions of art, creative writing, dance, drama and music.



Title: The Wall Category: Acrylic Paintng Artist Name: Albert Repple, U.S. Air Force Veteran VA Facility: VA St. Louis Health Care

Description: I took a photo of the people at the traveling Wall, then painted in the names and added the apparitions of the soldiers. I added an acrylic gloss varnish to make the "Wall" appear reflective.

Title: Airborne Lieutenant, Vietnam **Category:** Figurine Painting Kit Artist Name: Richard Benavides, U.S. Air Force Veteran VA Facility: VA North Texas Health Care System, Dallas

Description: Wire was bent to make grenade pin rings and loops for chinstraps. Aluminum foil was used for chinstraps, and plastic card for the buckles on the ends of the straps. Pressed foil with fine mesh screen to add texture. Used Photoshop and printer paper for handmade paper decals on the cigarette pack and shoulder patch. Spare decals of aircraft stenciling was used for bug repellant bottle instructions.



Title: Vietnam Elegy Category: Military Combat Experience Artist Name: Denham Clements, U.S. Marine

VA Facility: New Mexico VA Care System, Albuquerque

Corps Veteran

Description: As I got on with my postwar life and stumbled into an art career, thoughts of my 13 months as a Marine in South Vietnam were really never far away, and I was eventually inspired to weave this narrative on canvas. The hand-painted renderings of artifacts and relics and the collaged mementos provide a general sense of the mood and the realities of the Vietnam War era, and examine the attitude and events that typified the happenings back in "the world." The tearing apart of the canvas symbolizes a polarized American in the '60s. Each of the hand-painted elements and paper-collaged items provides its own historical precedent to our time in the war zone and has an individual story to tell.





Title: Mariner's Compass Category: Fabric Art Kit Artist Name: Nancy DuPree, Commissioned Corps of the U.S. Public Health Service VA Facility: Northern Arizona VA Health Care System, Prescott

Ouote from the Veteran: Participating in the creative arts is relaxing. It's a terrific way to express yourself and let feelings out!



Title: PRRC/VIP Veterans in Progress Logo Category: Group Art VA Facility: Greater Los Angeles Health Care

System - Psychosocial Rehabilitation and Recovery Center (PRRC)

Description: Approximately eight Veterans volunteered for this project, which went through several stages of designing, Representing the American flag and its colors with the Veterans in Progress logo best illustrated artistically who they are, as VIP members. Members and staff collaborated in purchasing art supplies, and coordinated time to complete the project. Hours were spent sorting, selecting and gluing the right mosaic tiles, beads and rope onto a flat wood surface.

This was truly a group effort and representative of the heart and spirit of the "Veterans in Progress" program. Their logo will be housed forever in the PRRC.



Title: WWFF Category: Monochromatic Drawing **Artist Name:** Mark Westberg VA Facility: Minneapolis VA Health Care

Description: Black and white charcoal pencils, black carbon pencils, black and white wax pencils on 20-lb. white paper.

Learn more about how VA uses the healing power of art in its holistic approach to health care at www.creativeartsfestival.va.gov.

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The History of

VETERANS DAY

From VA.gov

World War I – known at the time as "The Great War" – officially ended when the Treaty of Versailles was signed June 28, 1919, in the Palace of Versailles outside the town of Versailles, France. However, fighting ceased seven months earlier when an armistice, a temporary cessation of hostilities, between the Allied nations and Germany, went into effect on the 11th hour of the 11th day of the 11th month. For that reason, Nov. 11, 1918, is generally regarded as the end of "the war to end all wars."

In November 1919, President Wilson proclaimed November 11 as the first commemoration of Armistice Day, with the following words: "To us in America, the reflections of Armistice Day will be filled with solemn pride in the heroism of those who died in the country's service and with gratitude for the victory, both because of the thing from which it has freed us and because of the opportunity it has given America to show her sympathy with peace and justice in the councils of the nations..."

The original concept for the celebration was for a day observed with parades and public meetings, and a brief suspension of business beginning at 11 a.m.





OPPOSITE: President Woodrow Wilson first proclaimed November 11 as the day to commemorate Armistice Day. BELOW: World War I Veterans return home to Massachusetts in 1919.

The United States Congress officially recognized the end of World War I when it passed a concurrent resolution June 4, 1926, with these words:

Whereas the 11th of November 1918, marked the cessation of the most destructive, sanguinary, and far reaching war in human annals and the resumption by the people of the United States of peaceful relations with other nations, which we hope may never again be severed, and

Whereas it is fitting that the recurring anniversary of this date should be commemorated with thanksgiving and prayer and exercises designed to perpetuate peace through good will and mutual understanding between nations: and

Whereas the legislatures of twenty-seven of our States have already declared November 11 to be a legal holiday: Therefore be it Resolved by the Senate (the House of Representatives concurring), that the President of the United States is requested to issue a proclamation calling upon the officials to display the flag of the United States on all Government buildings on November 11 and inviting the people of the United States to observe the day in schools and churches, or other suitable places, with appropriate ceremonies of friendly relations with all other peoples.



An Act (52 Stat. 351; 5 U. S. Code, Sec. 87a) approved May 13, 1938, made the 11th of November in each year a legal holiday—a day to be dedicated to the cause of world peace and to be thereafter celebrated and known as "Armistice Day." Armistice Day was primarily a day set aside to honor Veterans of World War I, but in 1954, after World War II had required the greatest mobilization of soldiers, sailors, Marines and airmen in the Nation's history; after American forces had fought aggression in Korea, the 83rd Congress, at the urging of the veterans service organizations, amended the Act of 1938 by striking out the word "Armistice" and inserting in its place the word "Veterans." With the approval of this legislation (Public Law 380) on June 1, 1954, November 11 became a day to honor American Veterans of all wars.

Later that same year, on October 8, President Dwight D. Eisenhower issued the first "Veterans Day Proclamation," which stated: "In order to insure proper and widespread observance of this anniversary, all veterans, all Veterans' organizations, and the entire citizenry will wish to join hands in the common purpose. Toward this end, I am designating the Administrator of Veterans' Affairs as Chairman of a Veterans Day National Committee, which shall include such other persons as the Chairman may select, and which will coordinate at the national level necessary planning for the observance. I am also requesting the heads of all departments and agencies of the Executive branch of the Government to assist the National Committee in every way possible."

On that same day, President Eisenhower sent a letter to the



President Eisenhower signs the first Veterans Day Proclamation in 1954

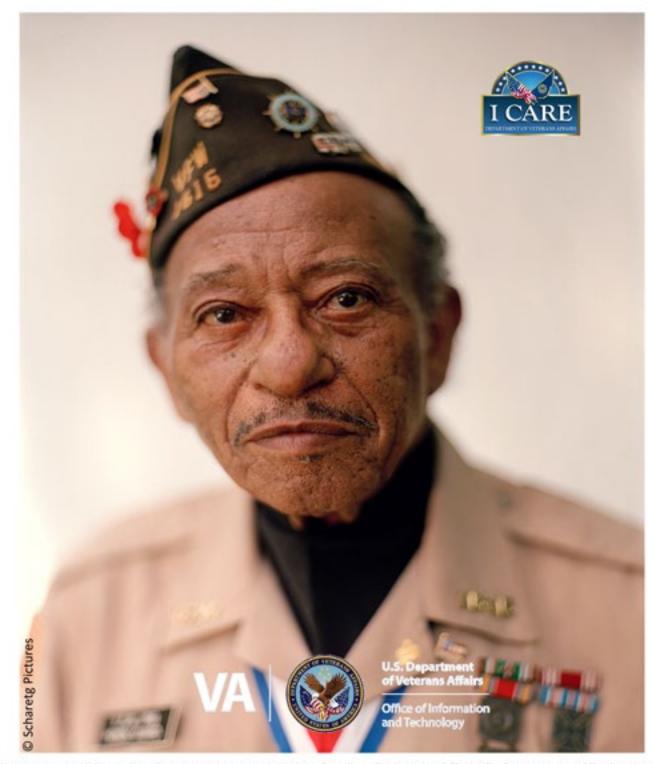
Honorable Harvey V. Higley, Administrator of Veterans' Affairs (VA), designating him as Chairman of the Veterans Day National Committee.

In 1958, the White House advised VA's General Counsel that the 1954 designation of the VA Administrator as Chairman of the Veterans Day National Committee applied to all subsequent VA Administrators. Since March 1989, when VA was elevated to a cabinet -evel department, the Secretary of Veterans Affairs has served as the committee's chairman.

The Uniform Holiday Bill (Public Law 90-363 (82 Stat. 250)) was signed June 28, 1968, and was intended to ensure three-day weekends for Federal employees by celebrating four national holidays on Mondays: Washington's Birthday, Memorial Day, Veterans Day, and Columbus Day. It was thought that these extended weekends would encourage travel, recreational and cultural activities and stimulate greater industrial and commercial production. Many states did not agree with this decision and continued to celebrate the holidays on their original dates.

The first Veterans Day under the new law was observed with much confusion Oct. 25, 1971. It was quite apparent that the commemoration of this day was a matter of historic and patriotic significance to a great number of our citizens, and so Sept. 20, 1975, President Gerald R. Ford signed Public Law 94-97 (89 Stat. 479), which returned the annual observance of Veterans Day to its original date of Nov. 11, beginning in 1978. This action supported the desires of the overwhelming majority of state legislatures, all major veterans service organizations and the American people.

Veterans Day continues to be observed on Nov. 11, regardless of which day of the week it falls upon. The restoration of the observance of Veterans Day to November 11 not only preserves the historical significance of the date, but helps focus attention on the important purpose of Veterans Day: A celebration to honor America's veterans for their patriotism, love of country, and willingness to serve and sacrifice for the common good.

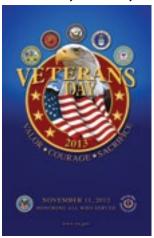


For nearly 150 years, VA has existed to serve Veterans and their families. Today, the Office of Information and Technology plays a key role in supporting over 350,000 employees and associates who serve more than 10 million Veterans and their families a year. Information Security and protecting the privacy and integrity of employee, patient, and beneficiary data remains one of Ol&T's highest priorities as we support all stages of Veteran care. Supporting You, our customer, is our goal while Serving Veterans is our mission. Tell us how we are doing by taking the IT Customer Satisfaction Survey at vaww.itsatisfaction.oit.va.gov

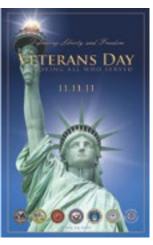


VA's Veterans Day Poster throughout the years

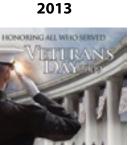
The Department of Veterans Affairs' mission to fulfill its promise to Veterans exists because of the service and sacrifice of our Nation's heroes. Each year — often through a national Veterans Day poster contest — VA's National Veterans Outreach publishes a commemorative Veterans Day poster, soliciting and selecting from the numerous creative contributions of U.S. citizens nationwide. Through the years, these posters have illustrated the rich history of our country's protectors, and continue to remind all who see them of the accomplishments and struggles faced by our Veterans, past and present. From Revolutionary War battles, to an Old Guard soldier rendering a salute in a solemn ceremony, vivid images and artwork call on us to pause and reflect in homage to those who paved the way for our freedom. The poster is distributed to VA facilities and military installations around the world, and graces the cover of the official program for the Veterans Day ceremony at Arlington National Cemetery.

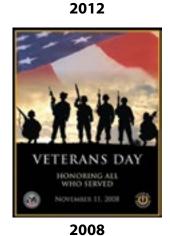


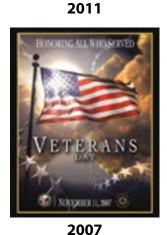


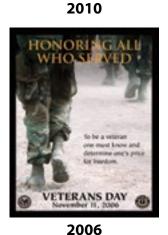


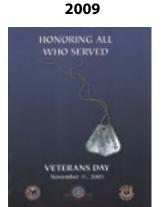








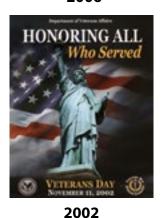


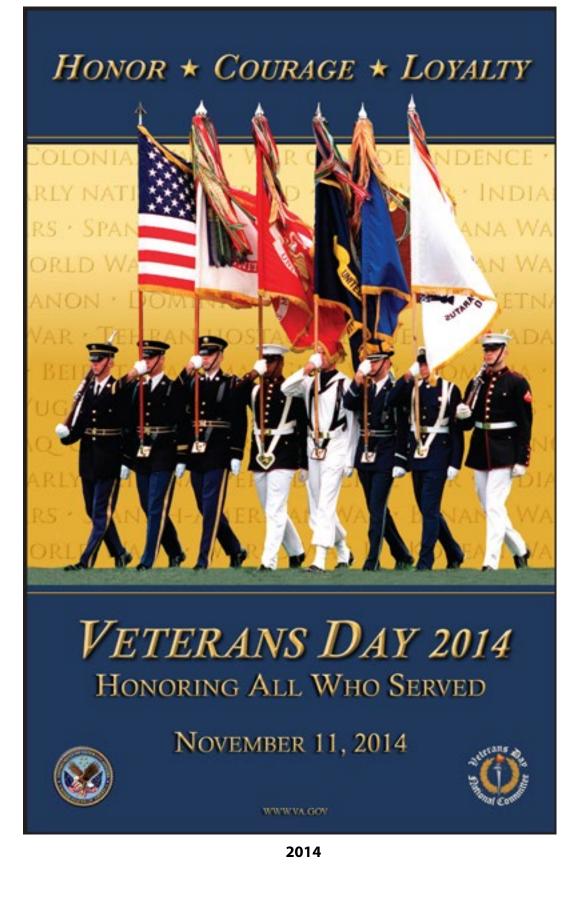


2005









To see past posters from 1978 to the present, visit http://www1.va.gov/opa/vetsday/gallery.asp

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Honor Flight Network gives Army Air Corps nurse a chance to pay tribute

By Megan Moloney

The bus carrying Veterans of past conflicts pulled up alongside the American Veterans Disabled for Life Memorial on Sunday afternoon. It was the first time a group from the Honor Flight Network had visited the memorial, which had been officially dedicated just a week before.

The group from Austin, Texas, included 20 Veterans of World War II, Korea and Vietnam. Among them was former Army Air Corps nurse Lois Crook. Now 92 years old, Lois was excited to see the new memorial, and have her picture taken in front of a quote from Dwight Eisenhower.

"I took care of them, that's why I want to see this," Lois told me, not only during the war, but after, as a nurse at her local VA.

But Lois' story of service is also one of sacrifice. While serving in the Army Air Corps, Lois met and later married Clyde Jones, a pilot. A first lieutenant at the time, Clyde was killed when his F-84E Thunderjet collided with another plane during a training flight in 1953.

Leslie Jones, Clyde and Lois' daughter, was four when her father died: "He was only 29 years old when he flew that day, February 6, 1953. We were living





ABOVE: Lois Crook visits her husband, Clyde Ray Jones Jr., at Arlington National Cemetery BOTTOM LEFT: Clyde Jones in his F-84E Thunderjet.

in England and he was stationed at Manston AFB. He had orders for Korea in three days. I have a letter he mailed that day to his family in which he said, 'I don't mind going; it's just that I hate to leave Lois and Leslie for so long."

So on Sunday, the Honor Flight moved on from the new memorial to make another stop: Arlington National Cemetery. The group witnessed the changing of the guard at the Tomb of the Unknown Soldier.

But it was another stop that had special meaning to the lone female Veteran on this flight. Lois and her fellow Veterans paid their respects graveside to Clyde Ray Jones Jr., an experience the Honor Flight staff described as "humbling."

Lois Crook is a charter member of the Women in Military Service for America Memorial, located at Arlington National Cemetery. We honor her service and sacrifice.



For more information on Honor Flights Network and their schedule, please visit www.honorflight.org/



she wore these.

It's **our job** to give **her** the best care anywhere.



Escorted With Honor — A fallen Veteran at the Sierra Nevada VA is given a final escort, accompanied by family members, patients, and VA staff. From left to right are Vietnam Vet Scott Bowman (in wheelchair), VA Staffer Ron Cook (walking behind wheelchair), VA Staffer Marc Launtz (center) and Nurse Rachael Hambleton. (Photo by Darin Farr)

Veterans Receive a Final Walk with Dignity

By Darin Farr

Though VA's top priority is to provide world class care and service to America's Veterans, eventually there comes a time when our heroes pass on.

Determined to give the Veteran and his or her family a meaningful and unique way to pay tribute in a manner reflecting the nobility of the Veteran's service, VA Sierra Nevada Health Care System staff provide an Honors Escort.

"The Honors Escort program is recognized as a Best Practice as it touches the hearts of family and staff because of military bearing and protocol," said Celia M. Ranson, creator and coordinator of the Honors Escort Program.

The coordinator recruits and trains staff to provide a dignified transfer of the recently deceased Veteran from their hospital room to the facility morgue. Upon receiving notice that death is imminent or has suddenly occurred, key members of staff, who serve as escorts are notified and preparations commence. A special gurney is prepared that has a frame designed to cover the body of the Veteran and support a draped American Flag.

After the procession, the family is given the opportunity to assist

with folding the Flag.

"One especially touching moment was when a Desert Storm Veteran assisted with folding the flag for his Vietnam Veteran father. He was so grateful that Honors were provided," Ranson said.

Allison Baca, like many other family members, said the procession was an experience she'll never forget. Her father, a WWII and Korean War Veteran, had been a longtime resident of the Sierra Nevada VA's Community Living Center. She was at her father's side when he passed recently.

"I was absolutely honored and touched by the respect and love shown to my father," Baca said. "To be included in the procession was something I will always cherish as a memory with my dad."

During a recent visit to the Sierra Nevada VA, Secretary McDonald was given a presentation on the Honors Escort program as an example of how the Reno VAMC "Honors Service and Empowers Health." Subsequently, training has been developed to instruct all VA medical centers on how they can form an Honors Escort Program at their own facility. A training course along with an instructional video is currently being developed and should be available by the end of the year.

VA Employees on the Frontlines of Information Protection

By Josh Laredo

With high-profile data breaches becoming regular occurrences in recent years, Americans are becoming increasingly concerned about how large organizations who hold personal information are protecting data. VA's Office of Information Security within the Office of Information and Technology (Ol&T), is responsible for establishing policy and monitoring systems to help protect Veteran information. However, the responsibility for protecting Veteran information belongs to each and every VA employee.

The agency's size alone – VA operates the largest hospital network in the U.S. and delivers benefits to millions of Veterans annually – makes it a target for cyber criminals seeking sensitive information. To protect Veterans and VA employees from ever-evolving cyber threats, OIS has developed a layered, defense-in-depth cybersecurity system that is constantly guarding VA's network perimeter and reinforcing the agency's networks and systems from within. In September 2014 alone, VA's network defenses detected and prevented more than 1.9 million spam emails and 2,400 viruses from entering VA's networks. In that same time span, OIS's cybersecurity measures also stopped more than 159 million malware attacks targeting VA information.



VA Chief Information Security Officer Stan Lowe knows that VA has to keep up with a constantly evolving cyber threat landscape, but that's not what keeps him up at night.

"For me," Lowe says, "it's all about people, paper, and process. Security begins and ends with employees." Lowe has numbers to back this up. While VA has no evidence that cybersecurity intrusions have led to extraction of Veteran data from VA systems, more than 90 percent of VA's information security and privacy incidents involve human error and mishandling of devices or paper. Preventing these kinds of mishandlings is the responsibility of VA employees in hospitals and benefits processing centers who are entrusted with handling Veteran information.

To educate more than 400,000 VA employees and contractors about protecting VA information, OIS provides resources for VA employees to better protect Veteran information, including an annual Information Security and Privacy Awareness Week, bi-annual **Information Security Speakers** Series events, regular brown bag information sessions, mandatory and optional security and privacy trainings, and monthly messages on security and privacy topics ranging from mobile device security to phishing awareness.

VA also has an internal site dedicated to providing tips on information security to employees, which can be found on the VA network at go.va.gov/infosecurity. The site offers tip sheets on a variety of security and privacy topics.

MEDICAL ADVANCES

Leading the way in medicine



Army Reserve Veteran Rebecca Peoples (right) talks with Amanda Vaughn, a Licensed Clinical Social Worker at Salisbury VAMC, North Carolina. (Photo by Reynaldo Leal)

STUDY: Social support is only part of PTSD treatment-seeking for Veterans

By John Crawford

When it comes to post-traumatic stress disorder, strong social support can often mean the difference between recovery and deterioration. Research has consistently shown that a person's social network—that is, the people he or she can rely on—can play a mitigating role in both PTSD development and severity.

It stands to reason, then, that patients with PTSD and strong social networks would be more likely to seek treatment and get help. But new research suggests that might not be the case.

A study published in Psychiatric Services on Oct. 1, 2014, suggests that, social support, on its own, has little impact on whether a patient chooses to seek treatment. More important are severity of PTSD; demographic factors like age or marital status; and whether the patient has any other illnesses.

Study based on 3,000 people with PTSD.

"This isn't about developing

PTSD," says Dr. Rebecca Sripada, a postdoctoral fellow with VA's Serious Mental Illness Treatment Resource and Evaluation Center and the University of Michigan. "We know that lack of social support is associated with an increased likelihood of developing PTSD and with greater severity of PTSD symptoms. What we weren't sure of was how that translated to care. Does having good social support lead individuals with PTSD to seek care?"

The answer, it would seem, is not really. While social support can play a role in whether or not people develop PTSD in the first place, and can play a role in easing symptoms, it may not influence them to seek treatment.

For the study, Sripada selected a sample of almost 3,000 people with PTSD from the National Epidemiologic Survey on Alcohol and Related Conditions. In the survey, participants rated their social support on a 12-point scale by indicating their agreement with statements such as, "If I were sick, I know I would find someone to

If you or a Veteran you know is in crisis, call the Veterans Crisis Line at 1-800-273-8255 and PRESS 1.

help me with my daily chores," or, "If I wanted to go on a trip for a day, I would have a hard time finding someone to go with me."

Sripada calculated the association between level of social support and the likelihood of receiving treatment for PTSD, and adjusted for sociodemographic information. Sripada says sociodemographic factors appeared to play a significant role.

Mobilizing family members and friends

"Traits like age, household income, marital status, geographic region, and race did play a part in whether or not a patient sought treatment for PTSD," she says. Traits linked to a greater likelihood of seeking treatment included having higher education or greater income; being divorced, separated, or widowed; and having greater PTSD severity.

Interestingly, because one of the symptoms of PTSD is withdrawal, symptom severity may adversely impact social support. So worsening PTSD symptoms may result in diminishing social support.

In any case, say the researchers, understanding the role of family, neighbors, and peers is integral to helping Veterans with PTSD manage their symptoms, and to improving treatment rates.

"PTSD is treatable," Sripada says, "and social support is such an important resource. The key is to mobilize them [family members or friends], to educate them, so that they encourage their loved ones to get needed care."

AROUND VA

Advisory Committee Management Office Expands After Reorganization



Meet the ACMO team: Director and Advisory Committee Management Officer Jeff Moragne, and Program Specialists Jelessa Burney and Rebecca Schiller.

By ACMO Staff

The Advisory Committee
Management Office (ACMO)
provides administrative oversight
and management support to the
department's 24 federal advisory
committees. In January, ACMO
reorganized and began to improve
collaboration with committees
and key offices such as the Executive Secretariat and Office of the
General Counsel.

ACMO's vision has remained consistent throughout the year: provide expert advice regarding the management of advisory committees and deliver exemplary support to DFOs (Designated Federal Officers) and committee support staff.

ACMO succeeds by establishing clear goals, standards, and uniform procedures for advisory

committee activities; ensures that all advisory committees comply with the provisions of the Federal Advisory Committee Act and other federal laws and regulations as applicable; and verifies that advisory committee meetings are open to the public, as appropriate, and that meetings are announced in the Federal Register.

In March, ACMO sponsored four half-day committee management training sessions, which included lectures, interactive exercises and, most importantly, enhanced collaboration among VA's committee management staff.

In May, the General Services Administration Committee Secretariat, which has oversight of all federally-chartered advisory committees, named this initiative a "Best Practice in the Federal Government." ACMO staff members continue to work toward improving the management of VA's advisory committees.

In September, ACMO published the updated VA Advisory Committee Management Guide and sent it to senior leaders, DFOs/Alternate DFOs and committee support staff. The Guide had not been updated in 11 years, and many processes had changed. ACMO will publish an addendum every six months, which will be published on the ACMO website in November.

VA's committees have made many recommendations, which have led to positive outcomes, such as:

- Establishing the Office of Health Equity to improve health outcomes impacted by racial, ethnic and gender differences;
- Discovering blood pressure can be managed with medication (which led to a Nobel Prize nomination);
- Preventing Shingles with a vaccine; and
- Finding that Gulf War Veterans have a higher risk for Amyotrophic Lateral Sclerosis (Lou Gehrig's Disease), which resulted in a VA decision for service connection.

For more information contact VA.Advisory.Cmte@va.gov.



Deployment and Reintegration Program

By Darrin Pope

Did you know that VA has a dedicated team of employees who provide outreach, consultation and support services to VA Reserve and National Guard employees?

The Deployment and Reintegration (D&R) team consists of five regional managers located within the Human Resource Services Section, Veteran Employment Services Office (VESO), Office of Human Resources and Administration.

The D&R team actively provides outreach, resources, consultation, and training pertaining to the deployment lifecycle. The DLC

is a 5-phase cyclic process that employees undergo from initial hire at VA through their return to VA after completing their military service. The VA for Vets website (http://vaforvets.va.gov) provides a comprehensive source of references and tools for our stakeholders pertaining to each phase of the DLC. A key component on this website is the Deployment Lifecycle Guide that provides useful tips for our stakeholders throughout the DLC.

As a preventative approach, D&R also focuses on reducing complaints related to the Uniformed Services Employment and Reemployment Rights Act (USERRA) which "protects individuals performing, or who have performed, uniformed service from employment discrimination on the basis of their uniformed service, and provides for their prompt restoration to civilian employment when they return to civilian life."

The regional managers have oversight and support responsibilities for five geographical regions. Those with questions or concerns relating to deployment and reintegration and/or have an issue that requires immediate assistance, please contact a regional manager via the contact information below.





Supporting our Veterans, their families and loved ones: VA nurse partners with Yellow Ribbon reintegration program

By Travis Bartholomew

When she's not working as a nurse practitioner and primary care provider at the VA's outpatient clinic in Ramsey, Minnesota, Cynthia Rasmussen, a retired lieutenant colonel, continues her support of our nation's military as a speaker for the Department of Defense's Yellow Ribbon Reintegration Program.

Yellow Ribbon hosts nation-wide events that connect National Guard and Reserve members -- and their families -- to find the support they need before, during and after deployments. Most Guard and Reserve members live far from a military installation and may not have the resources to navigate the challenges when they are called to duty.

Yellow Ribbon's Cadre of Speakers, including Cynthia, offers guidance at weekend-long events, on subjects ranging from financial and legal planning to family readiness and relationship building. Cynthia leads workshops, like Coming Home and Communication, that focus on helping single service members and couples work through deployment-related issues and strengthen their relationships.

"The impact of these events is tremendous: saving relationships and families, preventing suicides, supporting children, and building resilience," she said. "My background as a mental health professional and reservist helps me to understand what they may be experiencing."

Cynthia spent more than 23 years as a psychiatric nurse in the Army Reserve and served as the Sexual Assault Prevention & Response Coordinator and Director of Psychological Health for the 88th Regional Support Command (RSC). Her unique experience as both a retired Service member and VA employee help her relate to the Yellow Ribbon participants, who may be silently struggling and unsure how to find help.

"I'm able to walk people through the processes and see the bigger picture, since I understand the VA system and know what it's like to be a reservist," Cynthia said. "At some point, these Service members will transition to Veteran status and I can provide insight about that transition as a speaker at Yellow Ribbon events."

Cynthia supported the 88th RSC's deployment cycle preparation program before the Department of Defense launched Yellow Ribbon in 2008. She has been a member of Yellow Ribbon's Cadre of Speakers ever since she retired from active duty. Cynthia has been a VA employee for the past 15 years and believes the Yellow Ribbon is integral to helping Service members move from active to veteran status.

"Yellow Ribbon is the only program for the reserve components that provides information and resources to help service members reintegrate with their families, employers and communities," she said.

"At Yellow Ribbon events, we help service members and family members gain skills to successfully reintegrate and to understand their benefits and how to navigate the VA system. Working together, Yellow Ribbon and VA can ensure that we take care of the next generation of Veterans and their families."

To learn more about the Yellow Ribbon Reintegration Program, visit www.yellowribbon.mil. To find an upcoming event in your area, visit www.yellowribbonevents.org.

Germ-fighting Robots join the ranks at VA Medical Center in Fayetteville

By Sarah McBride

"Meet George Jetson, His boy Elroy, Daughter Judy, his wife Jane," greeted Veterans, family, and staff earlier this year as they entered the clinical addition at the Fayetteville medical center in Arkansas. The song, being sung by Chief of Environmental Management Service (EMS) Mitch Goodwin, was his way of bringing attention to a robot naming contest EMS was having for their new germ-fighting robots.

The medical center took a giant leap into the future with the addition of five germ-fighting robots that can eliminate hard-to-kill bugs in hard-to-clean places. These robots, vaguely resembling

R2D2 from Star Wars, use pulsed xenon ultraviolet (UV-C) light that is 25,000 times more powerful than sunlight, to destroy harmful bacteria, viruses, fungi, and even bacterial spores.

In just 5-10 minutes each device can disinfect a patient room by pulsing ultraviolet light, which washes over the surfaces where germs reside without leaving a chemical residue. This is all done while staff completes their standard cleaning procedures in other rooms.

"Our robots don't replace what a staff member can do, nothing can replace the physical cleaning that EMS staff go in and do, but these robots are an extra safety precaution, and we want people to know that they are stepping into, what we strive to make, the cleanest hospital in Arkansas," says Dr. Mark Enderle, medical center director.

As a way to not only personalize these new tools at VHSO, but also to lessen the stigma of using robots, EMS staff at VHSO set out to give life to these robots. The final selection of names was the 5 most popular name submissions: Rosie, Violet, Xena, Germinator, and R2D2.



New Tele-ICU unit "Goes Live" at Dorn VA

By Chris Conklin

The Wm. Jennings Bryan Dorn VA Medical Center continues to take leaps into becoming the VA of the 21st century by implementing the latest technology to serve Veterans at its various sites of care in Columbia and the upstate region. On October 21, the facility unveiled its latest healthcare tool as it initiated its new Tele-ICU unit.

This new patient care asset allows for Veterans to be monitored via telemetry units to VA providers based out of Cincinnati, Ohio. The system works through a remote controlled high-definition camera and networking capabilities that allow real-time patient data and vital signs to be monitored at the Cincinnati location.

According to Dr. Myron Kung, of Dorn VA, the Tele-ICU staff who monitor patients at Dorn are a fully functioning ICU staff that have critical care experience and serve as an extra set of eyes and ears for patients being treated at the Dorn VA.

"We certainly have many more patients and Veterans than we do providers and the demand for care is great," said Kung. "What this system does is provide a force multiplier for our population of providers, so this allows us to bring on extra help to provide care for Veterans," he said.

The system is not intended to take the place of bed-side physicians, according to Kung. It will be used to supplement care at Dorn for the Veterans

The program is part of a \$15 million investment to partner with *PHILIPs Healthcare* to provide Tele-ICU units at VA hospitals at sites across the country.

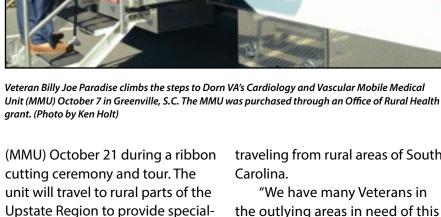
Would you like to share your VA facility's story? Submit it to newmedia@va.gov.

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MOBILE MEDICAL DEBUTS IN DORN

By Chris Conklin

U.S. Army Veteran Billy Joe Paradise was a little uncertain as he walked up the stairs to his cardiology appointment at the Greenville VA Clinic. According to Paradise he was not sure what he was going to be in store for at this appointment at the newest VA specialty clinic. This clinic was different than anything he had seen before. He was confident with the staff and clinicians he would see,



The MMU was the idea of Yvette Twum-Danso, Cardiology Clinical Nurse at the Dorn VA. Twum-Danso saw a need for Veterans in the rural Upstate areas where Veterans would have to

ized cardiology and vascular care

to Veterans.

traveling from rural areas of South Carolina.

Departmen Veterans A

"We have many Veterans in the outlying areas in need of this type of care," said Twum-Danso. "As a cardiology team, we looked at every option; nothing was really off the table. Our goal was to be able to continue the quality care we provide at our main facility in Columbia with easier access. We understood the burden of



but what was a little perplexing was that this particular clinic was stationed more than 100 yards from the clinic in the parking lot and had wheels.

The Wm. Jennings Bryan Dorn VA Medical Center (VAMC) unveiled its new Cardiology and Vascular Mobile Medical Unit

drive up to hundreds of miles to attend appointments for cardiology and vascular care. She began the process of brainstorming how to ease the burden for those Veterans and knew there was a better way. A way that would open up access to care and positively impact quality of life for Veterans

travel to the Veterans in rural areas and also understood that it is not ideal in regards to their health for these patients to have to travel that far—not to mention quality of life," she said.

What Twum-Danso found was the opportunity for a grant through the VA's office of Rural

Health to purchase and equip the MMU, bringing care to Veterans instead of those in the Upstate Region having to make the lengthy drive to Columbia for care. The outcome of the grant is the MMU with the capability for heart and vascular testing including EKG, echocardiography, and peripheral vascular imaging. It is staffed by trained cardiovascular providers of the Dorn VA Medical Center. This unit will provide care in six federally-designated rural countries near the Orangeburg Community-Based Outpatient Clinic and the upstate Greenville, Spartanburg and Anderson areas.

Veterans who used the MMU for their appointments in the first week of its operation were overwhelmingly pleased by it, including Paradise who had his appointment the second day the MMU was put into service.

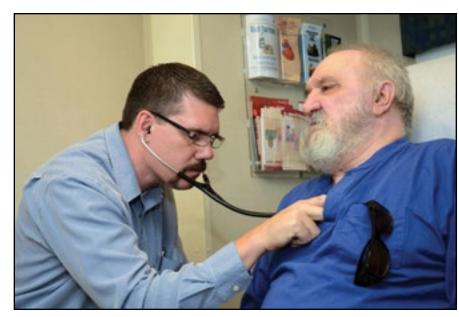
"I really did not know what to think of it at first, but I did know it was saving me a trip to Columbia," said Paradise.

Paradise and his wife in the past have had to drive more than 300 miles round trip from Seneca, S.C. to Columbia for cardiology appointments at the Dorn VA Medical Center. For many appointments the couple would have to leave before 5 a.m. to be on time.

"Coming to my appointment (on the MMU) has cut my drive by more than half. This is a benefit to me, especially when I have an appointment at 8 a.m.," said Paradise.

Paradise said the Dorn VA's investment in the MMU is telling of its commitment to give Veterans better services and easier access to care.

"It's definitely a step in the



Stephen Coffey, cardiology nurse practitioner, examines Army Veteran Billy Joe Paradise at Dorn VAMC's Cardiology and Vascular Mobile Medical Unit. (Photo by Ken Holt)

right directions. I think the VA can use more of these. This will come in handy for all kinds of tests and care that Veterans need," said Paradise. "Things like tests that don't take a lot of time, this is great you don't have to drive all the way to Columbia," he said.

The VA staff members who operate the MMU say Paradise's reaction to the unit was very similar to all of the Veterans who had received their care in the previous day.

Stephen Coffey is the MMU's Nurse Practitioner providing care for Veterans. Coffey said the response has ranged from curiosity of Veterans just stopping in to see the unit to absolute disbelief of the capabilities of it.

"All the Veterans we have seen have been happy with the unit, not only because of the reduced travel time for appointments, but because of the ability to address virtually all their needs," he said.

Coffey said this platform for

Veteran care has the ability to extend the services well beyond the confines of the Dorn VA. And as he has seen in the MMU's short time in service, Veterans will only continue to see its value in regards to access and quality of life.



For more information on the Dorn VA or the Cardiology and Vascular MMU go to www.columbiasc.va.gov

MIND & SOUL | Mental Healt Clergy Unite

Mental Health,



Chaplain James Luoma and Dr. Mary W. Tibbetts

By James Luoma and Dr. Mary W. Tibbetts

Collaboration and integration between service lines have always enhanced Veteran-centric care. At VA Maine Healthcare System in Augusta, the chiefs of Mental Health Service and Chaplain Services have made this a priority. VA Maine serves a state that is largely rural and has over 125,198 Veterans with a current enrollment of 54,986. In order to reach all of its Veterans

"It has been estimated that one-fourth of individuals who seek help for a mental health problem do so from clergy," said Tibbetts. "Many people are exclusively seen by a member of the clergy, and not by a physician or mental health professional. Veterans also see their prime care providers so mental health professionals usually see the more severe cases in the community. It is therefore important that VA mental health professionals and chaplains work closely with the community health providers and clergy."

Chaplain Luoma also a coach consultant with the VA's Office of Integration of Mental Health & Chaplaincy at Durham VAMC, has noted "Each generation of Veterans has its own particular health issues and we have veterans in Maine from the WWII era through Korea War, Vietnam War and the recent conflicts in Iraq and Afghanistan that

motivation to seek care. Therefore it is vitally important that clergy recognize the presence and severity of mental health problems and know when and how to collaborate with health care professionals. With this thought in mind Dr. Tibbetts and Chaplain Luoma began planning the Combined Mental Health and Clergy Summit. The planning for the event, the first of its kind as a combined summit within the VA, took 10 months. In concert with the Office of rural health and the Veteran-Clergy Partnership Team of Central Arkansas Healthcare System their plans culminated in the three day event taking place in Augusta from September 24 through 26, 2014.

The first day was a dinner with local mental health and clergy providers and community officials. The intent was to establish relationships and bonds with the community clergy and mental health providers

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Maine has eight Community Based Outpatient Clinics (CBOCs) and two outreach clinics.

The Veterans Health Administration and The Joint Commission have long mandated spiritual care for Veterans be included in their overall treatment and care plans for Veterans. Mary Tibbetts, M.D., chief of Mental Health and Chaplain James Luoma, chief of Chaplain Services at VA Maine Healthcare System have collaborated to make this a practical reality in their service's care of Veterans.

still experience ongoing emotional and spiritual issues. VA Studies show that rural Veterans will contact a clergy member for help before any other kind of mental health provider."

There are 5.3 million (24 percent of all Veterans) Veterans living in a rural area that have limited healthcare options, especially for mental health care. In small communities and military culture, the stigma associated with mental health problems can be quite strong, reducing

interested in meeting on a monthly basis to seek ways to increase access to spiritual and mental health care for rural Veterans.

The second day was a working group formed of 24 clergy and mental health providers that was led by the Arkansas VA Team, Dr. Tibbetts and Chaplain Luoma. A central highlight was Kennebec County Sheriff Randall Liberty who spoke about his experiences as an Iragi Combat Veteran and what he experienced upon returning home. Sheriff Liberty

credits Dr. Tibbetts' Mental Health Service for saving his life from the effects of Post-Traumatic Stress Disorder (PTSD).

The final day was a training seminar for community clergy and mental health providers by VA Maine mental health experts and was attended by 72 clergy and mental health providers. Topics covered included moral Injury; a community pastor's response to moral injury; suicide prevention; Military Sexual Trauma; evidenced based therapies in the VA, Acceptance & Commitment therapy (ACT) for Chronic Pain; Traumatic Brain Injury and Neuropsychology. There was a lively question and answer period and additional tables set up with VA experts in the area of Veteran's benefits; Post-Traumatic Stress Disorder, OEF/ OIF/OND Center; and other VA services. Dr. Tibbetts and Chaplain Luoma view their summit collaboration as the beginning of many collaborative initiatives to benefit the Veterans VA Maine serves.

In a season when many communities and Veterans are skeptical of the VA, VA Maine's Combined Mental Health and Clergy Summit is a positive step bringing the community and the VA together in a partnership where our Veterans are the beneficiaries. As the conflict in Afghanistan wears down and our troops return, the VA Maine Healthcare System is gearing up to assist veterans as they return from war, not just to return to the VA, but to return to their community who the VA partners with in Maine.

PLANNING THE COMBINED MENTAL **HEALTH AND CLERGY SUMMIT**



VA Maine Heathcare System, Augusta, Main or "Togus Springs"



Dr. Tibbetts plans the Summit



VA Maine HCS Community Partners Action Group



Commuinty Kick-off Dinner



Dr. Kate Mocciola trains Community Providers

Explore VA to see how VA benefits help Veterans live life to the fullest after military service

