









Printed on 50% recycled paper

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On the cover

Marwah Ahmed, 17, is the 2009 recipient of the James H. Parke Memorial Scholarship for her volunteer work at the VA medical center in Washington, D.C. Ahmed, a high school senior, has been volunteering at the D.C. VAMC since she was 13. She has served in a variety of departments, including the lab, research, and the director's office. She volunteered more than 200 hours at the medical center during 2009. Ahmed received a \$20,000 scholarship. photo by Robert Turtil

Sumner G. Whittier: A Lifelong Commitment to Public Service

Not many VA employees remember the spring day back in 1959 when VA Administrator Sumner Whittier stood in front of the headquarters building and beamed with pride as two bronze plaques emblazoned with Lincoln's words "to care for him who shall have borne the battle and for his widow, and his orphan ... " were mounted on the front. Fifty years later, the plaques still adorn the entrance to greet employees, visitors and the public alike. That simple act became one of Whittier's many legacies and unintentionally gave VA its enduring motto.

capacities at the local level, he ran for state office and was elected senator, representative and lieutenant governor for the Commonwealth of Massachusetts. He joined VA in January 1957 as chief insurance director, and in December, after less than a year on the job, President Eisenhower appointed him to head the entire VA.

Whittier personified the humanistic leadership style and inspired his employees by leading through example: he was a morale builder. In 1958, Whittier established the first VA employee newsletter and held a contest to come

president were ever present and in use at VA during his tenure, and he infused them into the institutional culture.

He oversaw many changes that brought VA into the modern era. He ensured VA's continued progress to desegregate veterans' services that began in 1953, and witnessed VA's entry into the electronic age when the first computer system was installed at the Philadelphia district office in November 1959.

Whittier left VA in January 1961 to become executive

director of Blue Shield in Michigan. In 1963, he became executive director of Easter Seals. In 1972, he became a director at Social Security, where he remained until he retired in 1991 at age 80. Not content to sit on the sidelines, he continued to be active in politics, and at 94 published his second book, "Sonnets to a Saint," in memory of his wife.

After a long illness, Sumner Gage Whittier, VA's fifth Administrator (1957-1961), died on Jan. 8 at age 98. WA By Darlene Richardson

LETTERS

Women Veterans Program

I read with great interest the article, "She Served, She Deserves ..." (March/April). In the otherwise terrific article, I noticed an apparent oversight. The article by Connie Raab failed to mention the contributions of Susan H. Mather, M.D., under whom Ms. Raab and I served. Dr. Mather was an early and effective advocate for women veterans, especially in the health care arena. Indeed, many of the advances made by women veterans can in large measure be directly attributed to Dr. Mather's diligence and hard work.

It was no surprise that her accomplishments were recognized by an independent panel assembled by "Good Housekeeping" magazine to select one individual who had made the most significant achievement in government on behalf of women. That publication awarded her \$25,000.

> Donald J. Rosenblum Volunteer Washington, D.C., VAMC

Remembering a Hero

I believe that the back cover of the March/April issue was very disrespectful to Robert L. Howard.

This gentleman was a Medal of Honor recipient! He deserved to be remembered as a hero, not as an afterthought.

> Lynn M. Walter Accountant Administrative & Loan Accounting Center Austin





Whittier was unique among VA Administrators: he was not a military careerist or an industrialist like his predecessors, and he was the first ever to serve in elected public office prior to coming to VA.

Whittier graduated from Boston University in 1935 and served in the Navy for three years during World War II. He was discharged as a lieutenant. Later, he was elected to city council in his hometown of Everett, Mass., and became smitten with public service.

After serving in various

up with a name for it. We are all familiar with the winning name: VAnguard. Fifty years later, that employee newsletter has grown into a slick, modern magazine that serves as a unifying link for all employees.

That same year he instituted the VA pledge of service: "The VA is dedicated to administer veterans' laws effectively, expeditiously, and with sympathetic understanding, and to exercise constructive leadership in the field of veterans' affairs." As a Lincoln aficionado, quotes from the 16th

We Want to Hear from You

Have a comment on something you've seen in VAnguard? We invite reader feedback. Send your comments to *van-guard@va.gov*. You can also write to us at: VAnguard, Office of Public Affairs (80D), Department of Veterans Affairs, 810 Vermont Ave., N.W., Washington, D.C., 20420. Include your name, title and VA facility. We may need to edit your letter for length or clarity.



Helping Veterans Achieve their Employment Goals

Ruth Fanning Director, Vocational Rehabilitation and Employment

As director of VA's Vocational Rehabilitation and Employment VetSuccess program, I lead VR&E in fulfilling its mission to help veterans with service-connected disabilities and certain service members awaiting discharge due to a medical condition prepare for, find and keep suitable employment. For individuals with disabilities so severe that they cannot immediately consider work as a viable option, VR&E offers services to improve their ability to live as independently as possible.

In fiscal year 2009, more than 11,000 veterans successfully entered suitable employment or achieved their goals of living independently at home and in their communities.

The following are services and benefits that may be provided by VR&E to assist veterans in achieving employment goals:

- comprehensive vocational evaluation to determine abilities, skills, interests and needs;
- vocational counseling and rehabilitation planning;
- employment services such as job-seeking skills, resume development, and other work readiness assistance;
- assistance finding and keeping a job, including the use of special employer incentives;
- training such as on-the-job, apprenticeships, and non-paid work experiences;
- post-secondary training at a college, vocational, technical or business school; and
- supportive vocational rehabilitation service including case management, counseling and referral.

The independent living

program provides the services and assistance necessary to ensure each eligible veteran is capable, to the maximum extent possible, of living independently and participating in family and community life activities, with the added potential of eventually returning to work.

Services/benefits may include, but are not limited to, the following:

- assistive technology;
- specialized medical, health, or rehabilitation services;
- services to address personal or family adjustment issues;

Employment Opportunities Act, veterans recruitment appointment, veterans preference, 30 percent or more disabled veterans, disabled veterans enrolled in VA training programs—such as the VR&E program—and Schedule A. Federal agencies may also use VR&E's non-paid work experience program in conjunction with the Office of Personnel Management's hiring authorities to quickly employ veterans non-competitively.

The non-paid work experience is an internship program that provides veterans an level wages at the conclusion of the on-the-job training if the training progresses satisfactorily during the probationary period.

Whether hiring the veteran directly through a special hiring authority, an on-the-job position, or providing training through a non-paid work experience program, the manager also benefits from the continued involvement of the veteran's case manager, who provides ongoing support, assistance with any job-related issues such as accommodations, and continual follow-up

In fiscal year 2009, more than I I,000 veterans successfully entered suitable employment or achieved their goals of living independently at home and in their communities.

- independent living skills training;
- connection with community-based support services; and
- services that may eventually lead to veterans considering employment on a volunteer, part-time or full-time competitive basis.

This past year, President Obama signed an executive order aimed at hiring more veterans to work in the federal government. The order calls on each federal agency to establish a veterans employment program office designed to help veterans navigate the federal application process. To comply with this mandate, federal agencies can use federal hiring authorities, non-paid work experience and on-the-job training to hire eligible veterans.

Federal hiring authorities consist of the Veterans

opportunity to obtain training and practical job experience and allows the federal manager to "try out" a veteran in an entry-level position. The agency has the opportunity to evaluate the veteran prior to consideration for hiring in a temporary or permanent position. VA pays the veteran a monthly subsistence allowance during the program. There is no cost incurred to the agency and no obligation to hire the veteran.

When a veteran is participating in a training program through VR&E, the employer can hire that veteran noncompetitively. Employers may also hire veterans in on-the-job training positions. This allows employers to bring veterans in at the apprentice level, with a lower wage paid during the training period and the expectation of permanent journey-

until the veteran is determined successfully adjusted in his or her new career.

VR&E's new and improved Web site, www.VetSuccess.gov, allows hiring managers to post job announcements and search veterans' resumes for qualified applicants. Veterans can also upload their resumes and search for jobs and internships posted by employers. In addition to advocating for veterans to become VA employees, VR&E also partners with federal and private sector employers to create opportunities for hiring veterans in career positions.

For more information about VR&E VetSuccess hiring programs, contact your local Vocational Rehabilitation and Employment office by calling 1-800-827-1000, or visit the Web site.



Celebrating 85 Years of Research for Veterans' Care

Joel Kupersmith, M.D. Chief Research and Development Officer

Since 1925—the year, eight and a half decades ago, during which F. Scott Fitzgerald published "The Great Gatsby"-VA has been at the forefront of research to enhance veterans' lives. From the outset, the goal of the VA research program was defined in no uncertain terms: Do "research based on practicability," thenchief of research Dr. Philip B. Matz described in 1926—not academic in nature, but with concrete results in the form of veterans' recovery from illness and injury.

Medical understanding has advanced remarkably since the launch of the VA research program, but some things remain unchanged over the past 85 years: VA-conducted research meaningfully improves veterans' health, advancing health care not only for veterans, but also for other Americans across the country. From effective therapies for tuberculosis, to implantable cardiac pacemakers, to the first successful liver transplant, to the development of the nicotine patch and beyond, VA's trailblazing research accomplishments are a source of great pride to our Department and to the nation.

VA's research spans the full spectrum of health needs of primary concern to veterans, from disease prevention to rehabilitation. Among the areas of focus for today's VA investigators: traumatic brain injury; post-traumatic stress disorder and other mental health conditions; post-deployment health; neurological disease; cardiovascular disease; cancer; diabetes; prosthetic

care; women's health; and health equity and access.

One cutting-edge area of current VA research focus is the science of genomics—the study of genetic information toward tailoring therapies for an individual patient. Other high-priority areas include comparative effectiveness studies, which compare therapeutic options head-to-head and provide evidence-based information for use in shared decision-making by providers and patients, and other strides being made toward personalization of medicine to meet a patient's individual health care needs.

VA's rich and continuing legacy of accomplishment in research was celebrated during Research Week 2010, held in April. The theme: "85 Years of

to the United States and who volunteer to participate in VA research studies.

Two new publications address the extraordinary triumphs of VA research: a book titled "VA Research 1925-1980," and a first-of-itskind "VA Research Today" magazine. The book, written by Marguerite T. Hays, M.D., a longtime VA researcher and former director of VA's research program, contains a wealth of historical detail about our researchers' ambitions and breakthroughs over the years. I was especially fascinated by the determined, "can do" spirit of our research predecessors—investigators like Rosalyn Yalow, Ph.D., the 1977 co-winner of the Nobel Prize for Physiology or Medicine for her work on

conditions such as cancer, traumatic brain injury, and post-traumatic stress disorder.

Also in the magazine, you will find inspiring triumph stories of veterans who have returned from combat in Afghanistan and Iraq with polytrauma injuries, and read how VA researchers are learning to optimally involve family members in their loved ones' care.

For access to the complete book or magazine—and for additional information about how VA Research is turning hope into reality for veterans—visit our Web site at www.research.va.gov. Or you may request a copy of either publication by e-mail: research.publications@va.gov.

And stay tuned as VA Research continues to lead the way in medical investiga-

VA's research spans the full spectrum of health needs of primary concern to veterans, from disease prevention to rehabilitation.

Discovery, Innovation and Advancement." Events were held in Washington, D.C., and at VA medical centers throughout the U.S., in recognition of the long line of top-caliber VA investigators who have established the foundation for the Department's world-class patient care.

In the words of Secretary Eric K. Shinseki, "As we mark the 85th year of VA's research program, we celebrate our innovative researchers who helped turn so many hopes into realities." Research Week was also an opportunity to salute the courageous veterans who have sacrificed in service a sophisticated technique for medical diagnosis called radioimmunoassay.

The magazine, "VA Research Today," presents a few representative stories of promising VA research in the modern era: the state-of-the-art technology we are developing, such as advanced prosthetic devices and new electrodes for implantation in the brain; innovative studies that have already made a difference in the lives of veterans, such as those with chronic obstructive pulmonary disease, or serious mental illness; and researchin-progress that may revolutionize therapies for medical

tion in the 21st century. Of the enduring promise of our research program, Sen. Daniel K. Akaka (D-Hawaii), chairman of the Senate Committee on Veterans' Affairs, recently observed, "VA Research has yielded vital breakthroughs that have benefited all Americans, veterans and non-veterans alike. Looking back, we applaud VA Research's many award-winning discoveries; looking forward, we expect its greatest days are yet to come."

I echo those sentiments and am proud to count myself among the passionate advocates for top-notch care for veterans and all Americans.



VA joins the relief effort to help the island nation recover from a devastating earthquake.

t's been more than three months since the island nation of Haiti was rocked to its foundation by the devastating 7.0-magnitude earthquake that hit just 15 miles west of the capital, Port-au-Prince.

VA shared with all Americans a sense of shock at the overwhelming destruction and loss of life. Like many nations, organizations and individuals around the world, the Department extended its sympathy and a helping hand.

While the immediate effects of the tectonic tumult (including 59 aftershocks over the next 12 days) were obvious, continuously reported and easy to see, like the tip of an iceberg, the long-term recovery efforts and the impact on Haiti and its Caribbean neighbors are below the surface and harder to appreciate.

The same was true of the immediate rescue and relief efforts—much of their success depended on the hundreds of hours of planning, coordination, preparation and practice that few see. This was certainly the case for VA.

Many people asked why VA was not doing more. The simple fact is, while VA is prepared to provide significant support, that support must first be requested by another federal agency, such as the Department of Defense or Department of Health and Human Services; second, it must be part of the coordinated federal effort being handled by the U.S. Agency for International Development (www. usaid.gov/ht); and third, VA must be reimbursed for that support since VA cannot use appropriated funds for care of non-veterans.

Nevertheless, after the quake was reported, VA moved quickly to identify people and material that could be made available to assist. Hundreds of VA staff with medical and technical skills maintain their readiness to deploy to areas hit by natural disaster or other emergencies. Because of the international nature of this crisis, language facility, passport and vaccina-



Left: Marie Mompoint, Haiti native and nurse practitioner with the Atlanta VA Medical Center, reviews a patient's medical record with the immigration team at Dobbins Air Reserve Base.

Below: VA Caribbean Healthcare System warehouse employee Javier Pastrana lifts a container of medical supplies onto a Puerto Rico Army National Guard truck as Specs. Marian Otero and Jonathan Peraza supervise. The VA Caribbean Healthcare System in San Juan, Puerto Rico, loaded 12 containers of supplies to be airlifted to Haiti. The pallets, which included basic medical supplies, oxygen tanks and pharmaceuticals, came from VA facilities in both Puerto Rico and Florida.



Yale
FELIX RODRIGUEZ

Above: A tent city outside Gheskio Field Hospital, where Thomas Broach, a nurse anesthetist with the VA Central California Healthcare System, was deployed as part of the relief effort. Broach described what he witnessed in Haiti as "surreal apocalyptic devastation" in a region already medically underserved. The retired Army colonel and Vietnam combat veteran was previously deployed with medical units in the Gulf War, Afghanistan, Germany, Kosovo and Iraq.

ANN HAMILTON

Right: Dr. Jose L. Lezama, chief of Medical Service at the James A. Haley Veterans' Hospital in Tampa, and Victor L. Ramos, area emergency manager with the Emergency Strategic Health Care Group and National Disaster Medical System coordinator for the Tampa Bay area, discuss the medical triage and transport of Haitian medical parolees, U.S. citizens and active-duty personnel.



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tion status were added criteria.

Within three days of the event, 579 personnel within VA's Disaster Emergency Medical Personnel System (DEMPS) had volunteered for immediate deployment and had been cleared by their supervisors and medical centers to assist as needed.

This information, along with information on 102 personnel possessing specific "critical" specialties, was passed to the Department's DoD and HHS partners during daily conference calls.

One critical skill, beneficial to both clinical staff and Haitian earth-quake victims—the ability to speak French or the Creole-based language of Haiti—brought Haitian-born VA nurse practitioner Marie Mompoint to the front lines. She greeted every flight of medical evacuees arriving at Dobbins Air Reserve Base outside Atlanta.

This was the site for one of two Federal Coordinating Centers VA set up and operated, in Atlanta and Tampa, to receive, assess and place quake victims, returning U.S. citizens and military personnel in appropriate medical facilities in the surrounding

A Catastrophic Quake

The 2010 Haiti earthquake was a catastrophic 7.0-magnitude with an epicenter approximately 15 miles west of Port-au-Prince, Haiti's capital. The earthquake occurred at 4:53 p.m. local time on Jan. 12. By Jan. 24, at least 59 aftershocks measuring 4.5 or greater had been recorded. As of Feb. 12, an estimated 3 million people were affected by the quake; the Haitian government reported that between 217,000 and 230,000 people died, an estimated 300,000 were injured, and an estimated 1 million were left homeless. They also estimated that 250,000 residences and 30,000 commercial buildings had collapsed or were severely damaged.

communities.

Good working relationships, coordination and communication are essential to successful FCC operation, and the Tampa center benefited from the experience of Jose L. Lezama Jr., M.D., chief of Medical Service at the James A. Haley Veterans' Hospital in Tampa.

Lezama has been serving as the deputy director for Mass Casualty Services in the Hillsborough County Emergency Operations Center since Hurricane Katrina in 2005.

"I have learned what resources I have available in the community to handle disaster situations, including volunteer nurses, local emergency room physicians ... and Tampa International Airport personnel, to name a few," Lezama said. "There cannot be a coordinated federal response ... without the coordinated involvement of multiple community partners in the process."

Together, the two FCCs quickly and efficiently coordinated the placement of 71 Haitian nationals, 16 active-duty service members and seven U.S. citizens. In addition, four other FCC sites, in Boston, Lyons, N.J., New York City and Philadelphia, were alerted and prepared to handle additional victims as needed. The FCCs were deactivated March 5.

In response to a request from the U.S. Southern Command, the VA medical center in San Juan, Puerto Rico, loaded 12 containers with \$50,000 worth of requested medical supplies that were airlifted to Haiti for an Argentinean field hospital set up there. The supplies, which included oxygen tanks and pharmaceuticals, came from various VA medical facilities in Florida as well as San Juan.

Responding to a request from HHS, a VA anesthesiologist who previously worked with a deploying surgical team joined them in Atlanta recently for a chartered flight to the ravaged area. VA supplied a total of five clinical personnel (three anesthesiologists and two surgeons) to provide

support to the surgical team in Haiti.

One of those was Dr. Allison Murray, an anesthesiologist from the North Chicago VA Medical Center and DEMPS volunteer who was able to respond to a short notice request. After her return, Murray was enthusiastic about the efforts of the team.

"My DMAT (Disaster Medical Assistance Team) was absolutely fantastic," she said. "The entire team came together under third-world conditions ... and the Haitian people were clearly thankful for our help."

Another indicator of progress in the recovery effort was marked when VA transferred responsibility for tracking patients who came through the FCCs to the Department of Homeland Security-Citizenship Immigration Services on March 30. DHS-CIS has contracted with Refugee Resettlement and Immigration Services of Atlanta and Catholic Conference of Bishops in Atlanta and Tampa, respectively, to follow these individuals through their recovery process.

Progress, however, does not mean the job is complete. Some experts estimate Haiti's recovery will take five to 10 years.

So how can individual VA employees help? First, if you are not a volunteer for DEMPS but are interested, contact your local DEMPS coordinator and sign up.

Second, if you want to contribute, there are numerous organizations handling contributions for the Haitian Relief Effort. One good place to look is the White House Haiti Earthquake site, at www.whitehouse.gov/HaitiEarthquake, that links to other sites.

Third, continue to support the various non-governmental relief agencies as they work to provide assistance in the months and years ahead.

Finally, keep the Haitian people in your thoughts and remember, this type of event could happen here in this country at any time. Be prepared and ask yourself, "Am I ready?"

By Jim Benson

War Stori

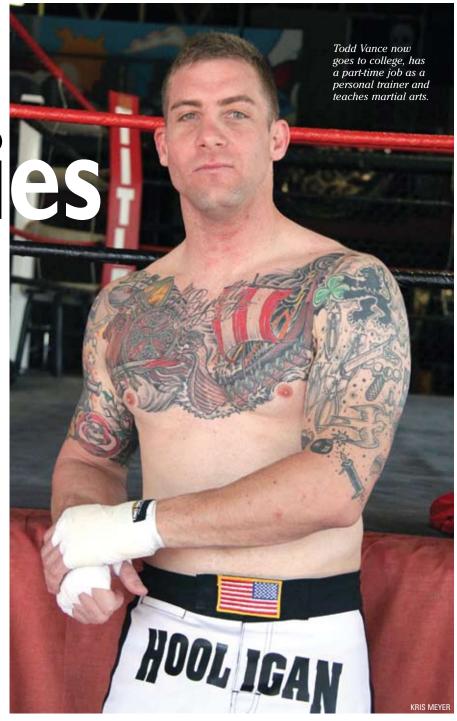
Iraq war veteran who served as inspiration for "Dear John" book and movie recovers from PTSD with help from VA.

raq war veteran Todd Vance's life in the Army has been portrayed in two books and a movie. He was the inspiration for the fictional main character in the best-selling novel and hit movie, "Dear John," and his experiences as a team leader for a Stryker brigade also were chronicled in Colby Buzzell's critically acclaimed book, "My War: Killing Time in Iraq."

But the latest chapter in Vance's life is not portrayed in either a book or a movie—he has successfully recovered from post-traumatic stress disorder as a result of counseling he underwent in the VA health care system.

Todd Vance the veteran now goes to college, has a part-time job as a personal trainer and teaches martial arts. He likes to tell veterans about his recovery and treatment at VA, and he frequently refers veterans to seek counseling and services.

"The therapy helped me learn who I am as a person," Vance said.



"Whenever I can, I encourage other veterans to go to VA and encourage them to do something physically active to help get rid of that pent-up energy they have."

The "Dear John" book and movie came about when novelist Nicholas Sparks, author of other best-selling books, such as "The Notebook" and

"Message in a Bottle," was inspired by stories he heard Vance (who is his cousin) tell about his combat experience in Iraq while sitting around a campfire when Vance was home on leave in 2004.

"We were just sitting around the fire pit in my Mom's backyard, and he (Sparks) kept asking me questions about deployment and this girl I met when I had come home on leave," said Vance, 28, who bears a strong physical resemblance—complete with large tattoos on the arms—to the actor, Channing Tatum, who plays him in the movie.

Several years later, Sparks drew upon Vance's war experiences, as well as his relationship with his thengirlfriend, in developing the fictional lead character, John Tyree, for the "Dear John" book. Sparks acknowledged that Vance was the inspiration for the John character in the book in a posting on his Web site: "I had never written a novel in which the main character serves in the military," wrote Sparks, "but I was well aware that I had to make John Tyree's experiences as accurate as possible.

"I drew heavily from a cousin who served in the Army. Like Todd, my character was in the Army, had nearly completed his tour when 9/11 happened, and chose to re-enlist (something he really didn't want to do), for duty's sake."

Sparks also romanticized part of the story: "When he finally returns, the girl he once loved is now married, and hence, they can no longer be together."

While Vance did not really receive a "Dear John" letter from his girlfriend while he was serving in Iraq, they did write each other constantly. The significance of exchanging letters became a key part of the story about John Tyree's relationship with Savannah, the fictional girlfriend in the book and movie.

"I can't begin to tell you how important those letters are when you are serving overseas, especially in a war zone," said Vance, who volunteered to be his battalion's mail guy in between missions. "You live to get one of those letters—especially if it has lipstick on the envelope."

Some aspects of the relationship with Vance's girlfriend and the timeframe were changed in the book and movie, but Vance said the portrayal of



Though never physically wounded during his time in Iraq, Todd Vance witnessed severe human suffering, and it took a toll.

their relationship in "Dear John" was accurate.

"We hit it off at her friend's party (on the beach)—all that stuff was right on," Vance said. "He got my girlfriend's personality spot-on too—she was a real caring person who had volunteered to care for orphans (Savannah, the girlfriend in the book, cares for a child with autism)."

While John Tyree is wounded in battle (in the movie, but not the book), Todd Vance did not suffer any physical wounds. However, some of his real-life combat experiences in Iraq are portrayed in detail in Buzzell's book.

Vance and Buzzell became good friends when they were stationed at Fort Lewis in Washington state. Buzzell describes in the book how Vance served as his mentor, and that he often turned to Vance for advice in times of crisis.

Buzzell began an anonymous blog while serving in Iraq. The blog described both battling the enemy and day-to-day life as a soldier. Buzzell's blog gained quite a following; his readership included other soldiers, families, the media, and even concerned Army brass.

After Buzzell returned from Iraq in 2004, he turned his postings and

notes in his journal into the book.

After Vance returned safely from his tour in Iraq, he went back to Fort Lewis, then moved to the San Diego area. At first, things seemed all right. Then problems started developing.

While he had not been physically wounded, Vance had witnessed severe human suffering during his time in Iraq, ranging from fellow soldiers killed from IED blasts and sniper fire to scenes in which young Iraqi children were blown up in front of his eyes. His experiences had taken a toll.

"Three or four months into it, I just had a crash," Vance said. "The nightmares got to a point where I could not function. My girlfriend became very worried and set up an appointment for me at the VA."

When he arrived at the main desk at the San Diego VA Medical Center, Vance was referred to Michael Kilmer, the medical center's Operation Enduring Freedom/Operation Iraqi Freedom case manager, who also served as a mental health provider. Kilmer's position was unique during the 2004-2005 timeframe. VA now has OEF/OIF case management teams in each of its facilities that include a program manager, case manager and transition patient advocate, in addition to expanded mental health programs and

post-deployment clinics.

Vance credits the counseling he received for several years at VA for re-adjustment challenges, including therapy for PTSD, with helping him get his life straightened out.

"Todd is an example of why educational outreach to family, friends and loved ones of returning veterans is vital," Kilmer said.

However, Vance was willing to work on transition, life and relationship challenges and coping skills to manage his anger, anxiety and hyperarousal symptoms so he could be the person he wanted to be for himself and his loved ones.

At first, he went to counseling three or four times a week. "First thing we did is we worked on the tools necessary to learn how to calm down and deal with anxiety and anger and all that stuff," Vance said. Later he moved on to working on positive thinking, "thinking about how we are going to stay calm and collected once we reach an elevated state."

Kilmer recalled that "despite a calmer life and coping skills, Todd realized by avoiding life situations that reminded him of his military experiences and avoiding his memories, his life was continually impacted by nightmares, poor sleep, hyper-arousal and vigilance." Vance was ready and willing to participate in 12 to 15 sessions of Prolonged Exposure (PE) Therapy for PTSD that Kilmer guided him through.

"Todd's devotion to recovery, with the support of his loved ones, by honoring his appointments, following through on his 'In-Vivo Exposure' (real-life exercises that exposed him to situations that he previously avoided), and other homework assignments was remarkable," said Kilmer, who is now network program coordinator for Returning Veterans Transition and Care Management at the VA Desert Pacific Healthcare Network.

Most of Vance's therapy focused on normal life situations for a veteran dealing with PTSD and transitioning from military service to civilian life. With Kilmer's guidance using PE, an empirically supported therapy, Vance got better. He no longer goes to therapy, though he and Kilmer stay in close contact.

Now, Vance likes to tell other veterans about his experiences at VA.

"I'm confident and I'm happy where I am in life," he said. "I don't have any embarrassment about it. People ask me about it at the gym and I tell them I went and that if you're a vet you should go to the VA."

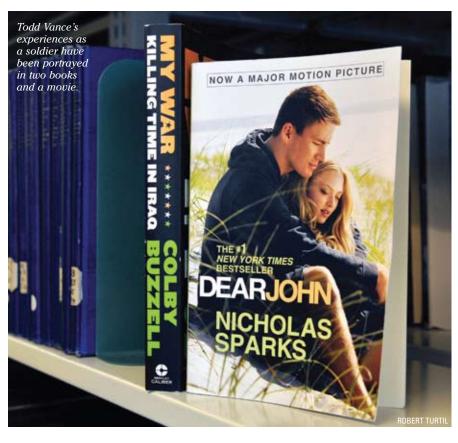
Vance also decided to make use of his education benefits, earning an associate's degree in history from Mesa Community College, and he is now pursuing a bachelor's degree in social work, with the goal of serving his fellow veterans. Kilmer helped him get into a work-study program to give him experience working with veterans.

He is working his way through school as a personal trainer, and teaches Muay Thai kickboxing and other martial arts classes at Undisputed Fitness and Training Center in San Diego. The gym's classes began filling up quickly when people found out who Vance was as a result of publicity surrounding the two books and the movie.

Vance is moving on with his life. Though his relationship with the girl he wrote letters to while serving in Iraq is now over, Vance says the two are still friends. While single, he has an active social life with good friends. He remains in touch with a lot of his Army friends, including Buzzell. He has a good relationship with his parents and he believes he is on a positive track.

Once he completes his four-year degree, he's considering a graduate-level degree, and he is interested in pursuing a job at VA.

"I would like to see if there is a way I can combine my two passions—helping veterans and teaching martial arts," Vance said.



By Bill Outlaw

Protecting Veterans' Information in the Digital Age

VAnguard sat down with Acting Deputy Assistant Secretary for Information Protection and Risk Management Jaren Doherty to get his thoughts on the use of social media within VA—and to hear how we all can safeguard sensitive information in the digital age.



"While social media tools improve communication," says Jaren Doherty, "it's a whole new ballgame in terms of security and privacy."

With social media recently unlocked at VA, what's the impact on how the Department does business?

After President Obama issued the Open Government directive, we knew it wasn't a question of if, but when VA would get out there. With its broad reach, it is clear social media can enhance communication for VA and help us improve service to our veterans. Still, when we unlocked the channels last November, we realized we would have to strike the right balance between access and maintaining the highest level of security controls. As a result, access to social media remains a business decision for each administration.

While social media tools improve communication, it's a whole new ball-

game in terms of security and privacy. While many social networks encourage users to share personal information, it's a very real threat that the personal information you share could be used against you.

Can you give us examples of the risks associated with social networking?

More than ever before, cyber criminals are using social media to gather personal information for malicious intent against individuals—even organizations. The practice is called spearhead phishing, and yes, it should scare you.

Let's take Facebook as an example. While Facebook offers a considerable amount of privacy settings, at the end of the day, an individual's account is still tied to a name and a valid e-mail address. So in the context of sharing information, you should be cautious about the type of information you are sharing. When you last updated your Facebook status, did you make sure to share your information only with your friends, as opposed to friends of friends and everyone? If you chose the latter, you can be sure Google found your update and saved it.

Be aware of what you share about yourself and never share any sensitive information about VA—unless you

have explicit approval from an authorized source. Additionally, you should have no expectation of privacy when using social networking sites; even with the strictest privacy settings, you still run the risk of your account being hacked.

What's your best advice for using social media securely? I'd like to emphasize that VA employees must be vigilant about using social media securely. The most important thing to remember is never use your VA password (or anything remotely similar) for a social networking account. Whether you're on a VA computer or you're posting information on behalf of VA (e.g., a VA medical center Facebook page), use a strong password, and make sure you are not sharing sensitive information or your VA user ID or password.

It's also important to update your anti-virus software frequently. More new malware appeared in 2009 than in the entire history of computer viruses. And finally, make sure you download all critical patches to your VA computer. If you're a fan of clicking "remind me to install later," drop the habit.

What steps is the Office of Information and Technology taking to protect veterans' in-

formation in this new medium?

The Office of Information and Technology has distributed memos on the secure use of social media. In March, we kicked off our Information Protection 2.0 campaign to raise awareness of security best practices and risks when using social media. You may have received communications by way of your information security officer or seen posters at a VA facility.

We can do everything at an enterprise level to make sure our systems are secure—but we're only as strong as our end users, so I encourage you to do everything you can to use social networking sites with caution and good judgment. If you would like to know more, I encourage you to reach for more information on the Information Protection and Risk Management portal, vaww.infoprotection.va.gov.

And how can we stay plugged into what's happening? We envision continuing communication and guidance on using social media so that users are aware of good information security practices that allow use of these communications tools without significantly increasing the vulnerability of veteran, staff or personal information. In the meantime, talk to your ISO or privacy officer about how they're working to protect information at your facility and how you can help. To learn more about using social media securely, visit the Information Protection portal at vaww.infoprotection.va.gov.

What is the biggest challenge VA faces in this digital age? From a security standpoint, we are fighting a cyber war and we face a determined enemy. We must stay on the offense, and we need every VA employee and contractor to take personal responsibility for following policies and cyber security best practices to protect sensitive veteran data. We simply cannot allow hackers and criminals to access our networks because of carelessness or human error.

How You Can Protect Veterans' Information Across Social Media

- Never use your VA password (or anything remotely similar) for a social networking account.
- Update your anti-virus software frequently.
- Make sure you download all critical patches to your home and VA computer.
- Never post sensitive information on non-VA systems without explicit approval.
- Be aware of your VA association in online social networks—unless you are authorized to post on behalf of your organization, be clear your comments are your own opinion and do not necessarily reflect the position of VA.
- Keep strangers at bay and away from your personal information—consider restricting access to your personal profile with privacy settings.
- Avoid posting personal information—search engines collect and save publicly available information on social networking sites (e.g., Facebook status updates).
- Do not download applications from social networking sites.



Putting Ideas into Action

VA to implement employee ideas to transform claims services.

hen VA Secretary Eric K. Shinseki asked employees to help improve the claims process by submitting their ideas, they responded with more than 3,000 submissions aimed at transforming the claims process and ultimately better serving veterans.

"I commend the innovative employees who submitted these creative ideas," said Shinseki. "The men and women of VA and the veterans service organizations who understand the challenges in our claims processing system have stepped up to deliver tangible results for our nation's veterans."

Shinseki called for the competition following President Obama's announcement last August at the Veterans of Foreign Wars convention: "We're going to fund the best ideas and put them into action, all with a

simple mission: cut those backlogs, slash those wait times, deliver your benefits sooner," the President said.

A four-judge panel consisting of former VA Under Secretary for Benefits Adm. Patrick W. Dunne; Craigslist founder Craig Newmark; Senior Advisor to the Secretary and Chief Technology Officer Dr. Peter Levin; and Deputy National Service Director for Disabled American Veterans Garry Augustine was appointed to pick the best of the best.

Ten Innovation Initiative winners were selected by the judges. Here's a look at the winning submissions.

■ Employees of the Phoenix VA Regional Office submitted an initiative to work simple claims first. There are several types of disability claims that are fairly straightforward in the adjudicative requirements, such as

- hearing loss and tinnitus, and once claimed should automatically establish eligibility for service-connected benefits. These benefits can be compensable or non-compensable, but in either case would establish eligibility for medical treatment for veterans through VA medical centers. By isolating specific types of claims, VA can work toward automating these claims and adjudicating them much quicker, in turn providing better service.
- Employees of the VA Records Management Center in St. Louis suggested providing regional offices with digital images of claims-related records held in VA's centralized storage facility as well as those records located at the VA Liaison Office at the National Personnel Records Center. These records, which are required to process claims, would be immediately available to the Veterans Benefits Administration's 57 regional offices and centers—eliminating the wait for transfer and shipping of paper copies.
- Rating Veterans Service Representative Jeff Myers of the San Diego VA Regional Office submitted the idea to develop an "SMC Calculator"—a computer application to calculate entitlement to additional benefits payable to veterans with the most serious injuries. SMC, or Special Monthly Compensation, is a special allowance for certain severe disabilities that's paid in addition to the basic rate. The application will allow difficult cases to be rated faster with increased accuracy and consistency. The current process is manual and involves lengthy and multiple regulations as well as reviews and signatures to move forward.
- Pre-Determination Team Coach Maria Barajas of the San Diego VA Regional Office submitted the idea to customize the Modern Award Processing—Development (MAP-D) database to facilitate communication between call center agents, veterans service representatives and veterans. MAP-D contains records for claims cases and was developed to reduce the amount of manual data entry required

- and potential input errors.
- VA Central Office and the St. Paul (Minn.) Pension Management Center submitted an idea to implement rules-based processing for VA pension programs and other benefits. Andrew Graf's idea would streamline the processing of dependency compensation and pension benefits through the implementation of a rules-based system modeled after technology used to develop tax software programs. His idea lays the foundation for further implementation of rules-based technology to be applied to compensation claims for increased evaluations and has the potential to allow for claims to be completed outside the current people-centric system.
- Veterans Service Representative Ben Rogers, of the Hartford (Conn.) VA Regional Office, suggested creating an interactive chat application that would allow veterans to engage in an online dialogue with VA employees about disability compensation benefits. The Veterans Interactive Online Assistant, or VIOLA, would help to: inform veterans during the application process about what is needed to process their claim; reduce the number of days it takes to complete a claim by empowering veterans to have an active role in providing VA the exact information needed to process their claim more efficiently; increase transparency between VA and veterans by giving veterans a personal and tailored approach to the claims process; and provide veterans with general information on VA benefits and services.
- Employees of the Albuquerque (N.M.) VA Regional Office submitted an idea to revise the front-end claims development process to include a specialized interview with the veteran by phone or in person, a letter summarizing the interview, and an informational DVD. This approach is aimed at increasing veterans' understanding of the claims process, resulting in better service and improved timeliness. The initiative differs from

- telephone development currently used by some VA regional offices in that it mandates a philosophical change of development procedures where public contact is initiated by VA and is consistent at all offices.
- Employees of the Atlanta VA Regional Office submitted an idea called Rapid Evaluation of Veterans' Claims. In this scenario, veterans may choose to have their claims for increased evaluations of service-connected conditions rated based solely on the information the veterans provide in addition to any electronic records from VA medical centers. In effect, the veterans waive the VA examination process because they understand the information needed to be granted the benefit they seek and have submitted that information. The Atlanta VARO will process REV claims within 30 days of receipt, thereby providing more timely service to veterans.
- Assistant Veterans Service Center Manager Jack Hudson of the Pittsburgh VA Regional Office submitted the idea to lessen the need for VA medical examinations by providing veterans with standardized medical questionnaires to be completed by their private physicians. Veterans could use these medical questionnaires as an alternative to waiting to get a full assessment from a VA physician before their claims move forward. The idea would also allow more time for VA doctors to treat patients. In western Pennsylvania, VA performs about 7,000 exams for disability claims annually.
- Veterans Service Representative Todd Bonn of the Togus (Maine) VA Regional Office suggested aligning employee performance standards with VA goals. Specifically, when veterans service representatives and rating veterans service representatives are working toward making their production-based performance standards, their actions will reduce claims processing times and the claims backlog.

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By Gary Hicks



Jeffery Anderson is an Army veteran who served two tours in Iraq; he's now working as a mailroom clerk at the Waco VARO and is making progress on re-paying the family medical bills that led to his nine months of homelessness.

Hiring Homeless Veterans: A Promising New Initiative

The Waco VA Regional Office responds to the Secretary's charge to end homelessness among veterans.

s a formerly homeless veteran, Jeffery Anderson is grateful that his new job at the Waco VA Regional Office is helping him achieve stability for his family. He landed the job through the Waco VARO's new Homeless Veterans Hiring Initiative, created in response to VA Secretary Eric K. Shinseki's charge to end homelessness among veterans within five years.

"These veterans truly appreciate the opportunity to work. They arrive promptly every day, and they're among the most productive employees we have."

Anderson, 26, an Army veteran, served two tours in Iraq. His nine months of homelessness began when his wife, Adrienne, suffered severe medical problems while pregnant with their fourth child. Despite sending out numerous job applications, Anderson didn't even get an interview. Now that he's employed at the Waco VARO, he's making progress on repaying his family's medical bills.

The Waco VARO has hired six formerly homeless veterans so far, most of whom were referred by Paula Wood, who coordinates housing assistance to homeless veterans through the VA Supportive Housing program at the Central Texas Veterans Health Care System. "The regional office was kind of the answer to my prayers," Wood said. "We work with many employment resources, but only the regional office has told us, 'We will take your referrals directly to hire veterans."

"Getting a homeless veteran into housing is highly valuable," said Carl Lowe, Waco VARO director. "But if the veteran doesn't have a job, then he or she won't have the means to get permanent housing."

Lowe developed the initiative for hiring homeless veterans to fill vacancies at the Waco VARO for entry-level positions, such as file clerks (GS-4) and claims assistants (GS-4/6). At the outset, Lowe met with representatives of the VA Health Care for Homeless Veterans program, the VASH program, the Central Texas VA medical centers in Temple and Waco, and the VA domiciliary in Temple. The officials and staff of these organizations participate enthusiastically in the initiative.

Health Care for Homeless Veter-

ans officials say they have seen an increasing number of homeless veterans who are well qualified for employment and are homeless as a result of changes in economic conditions—not through any fault of their own.

The Waco VARO's Homeless Veterans Hiring Initiative could serve as a model for other regional offices in support of the Under Secretary for Benefits Strategic Plan: 2009-2014. Under action item 2.1.4 of the plan, each regional office is charged with developing a homeless interdiction plan that identifies the segment of veteran homelessness they can best address, specific goals to assist them, and the resources required to execute the plan.

The state of Texas has about 15,967 homeless veterans, according to data from the National Coalition for Homeless Veterans. To be considered for immediate employment through the Waco VARO's Homeless Veterans Hiring Initiative, the homeless veteran candidates must have at least a 30 percent service-connected disability rating.

"I had one veteran come in here for an interview," said Lowe. "He walked in, and I told him, 'You're hired. We just have to determine which one of two positions you can be placed in." That veteran was Anderson.

While Anderson was on active duty, the family had been living at Fort Hood; they had to move once Anderson was discharged. They lived in hotels until Anderson had depleted his \$15,000 in savings.

After applying for many jobs, "I couldn't get anything," Anderson said. "And so, finally, I called the VA and told them that my family and I were

basically homeless, and we didn't have a place to stay. They got me entered into the VA system, and then help started coming."

Central Texas VA staff helped place the Andersons at Family Promise, a homeless shelter for families, last April. They stayed there until being granted a housing voucher last September. Days after the family moved into a house in Temple, Anderson said Wood called him to find out if he would be interested in working at the Waco VARO.

Anderson has been working as a mailroom clerk at the Waco VARO since Sept. 24. He helps receive and distribute the more than 3,300 letters, benefits applications and medical records packages that come in to the regional office each day.

Lowe said the Homeless Veterans Hiring Initiative serves two main purposes:

- it places more veterans in employment at the regional office, where they help their fellow veterans with claims needs; and
- it helps give the homeless veterans a chance to gain financial independence and stability.

For Anderson, the Waco VARO's Homeless Veterans Hiring Initiative is providing an important opportunity for a fresh start. "I just want to pay down all that debt, and then things can be stable again," he said.

The initiative is a win/win for veterans and the Waco VARO. "These veterans truly appreciate the opportunity to work," said Lowe. "They arrive promptly every day, and they're among the most productive employees we have."

By Tom Morley



Falling Waters: A Wellspring of IT Training

New center delivers training to thousands of information technology professionals nationwide.

s you might expect from its name, Falling Waters, W.Va., is a small town—population 650. It's nestled amidst hills, highways and history in the far northeast corner of the state where, on the map, it looks like the crest of a wave breaking over the northernmost part of Virginia.

This region has many of the small springs that bubble up from deep below the surface to feed larger streams that join with other tributaries, building in strength to become major waterways like the Shenandoah and Potomac rivers.

No, this isn't a travel brochure. But the physical setting for VA's new Office of Information and Technology National Training Academy, head-quartered here, provides an analogous backdrop for the academy itself and the way it pushes the latest in IT knowledge "downstream" to the thousands of IT professionals in the field.

Like a wellspring, the academy is the source of VA-wide training, workshops and certification programs for OI&T professionals. Regional training centers use state-of-the-art video conferencing systems and desktop virtualization to deliver training from any training center to all other RTCs throughout the distance learning training network simultaneously.

Delivering training to the more than 7,000 members of VA's IT workforce takes time and money. Terri Cinnamon, director of the academy and of VA's information technology workforce development, explained the impact of the new system on costs.

"It does cost quite a bit to bring somebody to the training facility," she said. "If you can make it where they are traveling to a hub ... the flights are cheaper, they are not flying across the country, so they're not away from work as long ... they don't have that loss of production ... and the amount of time they have to train is cut down."

The benefits are obvious.

"We are able to train more people in a shorter amount of time," Cinnamon said. By using this system, the regional training center network can accommodate more than 200 students in one training session.

And the savings are significant. If all those people were flown to Washington, D.C., and put up in hotels, it would cost VA nearly \$3 million just in travel costs, according to Cinnamon.

Desktop virtualization allows instruction to be delivered using different operating systems, such as Windows and Linux, and multiple software applications directly to the desktop with the highest availability and performance in the industry today.

This technology permits a more adaptable approach to training; the academy will be able to select multiple formats, such as interactive video, Web-based, on-demand recordings, and MS LiveMeetings. This flexibility will allow the academy to offer courses in the most effective format for their students. It also enhances the timeliness and consistency of training.

In fact, VA is a government leader in using this technology and responds to VA Secretary Eric K. Shinseki's priorities to:

- improve business processes through more transparency and accountability, and by leveraging the power of information technology;
- transform VA to a veteran-centric,

results-oriented and forward-looking 21st-century organization; and

■ foster innovation and collaboration—getting the best value on the investment.

Like the confluence of three great rivers, the academy pulls together theories on distance education, the latest in technological developments, and the synergy of collaboration to build a strong workforce.

"It was amazing the way we were all able to receive the same training," said Ken Farley, information security officer for the academy. "The groups were able to ask questions, answer from this site and other sites and network with ISOs throughout the country.

"The way that we were able to interact at this site with those locations was just a fabulous way of training and the feedback has been very positive. And it does save a lot of money," Farley added.

By providing training on a more frequent basis and being able to accommodate a large audience, the academy will enhance the knowledge and development of VA's IT professionals, which in turn enables better customer service to all Department administrations and the veterans they serve.

"We always want our training to be an ultimate benefit to the veteran," Cinnamon said.

OI&T regional training centers are located in Arlington, Texas; Denver; Orlando; and Washington, D.C. Two more classrooms are scheduled to open this year in Salt Lake City and Vancouver, Wash.

By Jim Benson

Opportunities to Give: Made in America

Youth scholarship award winner puts her "passion to help others" toward serving veterans.

iven the lure of our consumer-driven economy, the challenges it has faced recently, and the media's focus on who is getting or losing more, it would be understandable if you harbored some doubts about the continued viability of the "American Dream."

Rest assured—you needn't look any further for proof, or inspiration, than the Washington, D.C., VA Medical Center and the personification of that dream in one Marwah Ahmed.

The 17-year-old senior and fouryear honor roll student at Gaithersburg High School in Maryland began volunteering at the D.C. VAMC when she was 13.

Her work ethic, communication skills, sincere interest in a medical career and a level of maturity beyond her years got her noticed by Voluntary Services Director Stephanie Burns.

"Her sense of duty is remarkable, not just for her age, but for an individual of any age," Burns wrote in a letter nominating Ahmed for the 2009 James H. Parke Memorial Fund Youth Scholarship Award.

Her intellect, curiosity and dependability soon had other hospital departments in a bidding war for her time and opened a series of opportunities beyond the scope of traditional volunteer duties.

According to Burns, Ahmed's first-year performance was so note-worthy she was immediately requested to work in the director's office when she reapplied the following year. She accepted each assignment, whether

handling routine clerical duties or helping to greet visiting VIPs, as an opportunity to learn and to serve.

Ahmed, a first-generation American, is motivated by family values, a respect for military service and a genuine concern for others, continuing a family tradition.

Her father, Muhammad Ahmed, recounted the efforts of his father,

Ahmed spoke of her numerous opportunities.

"I started out in the lab ... they did blood work to figure out what disease a veteran had," Ahmed recalled. "I volunteered in research and learned about clinical trials that veterans volunteer for to come up with new medicines and vaccines."

Her career goals notwithstanding,



a World War II veteran, to provide medical supplies to neighboring villagers in their native Pakistan, often to those too poor to pay.

"Others have helped her and then she helps others," said her mother, Shabnam Ahmed. "So, it's a give and take."

With genuine enthusiasm,

it was not all about the clinical side of delivering care.

"Sometimes we'll help out in the nursing center and hand out gifts or flowers to the veterans and talk to them for a little bit," explained Ahmed.

The impact of such visits, on one veteran in particular, was witnessed by

TV Star Volunteers at Albuquerque VA Medical Center

Hollywood celebrities frequently visit patients at VA medical centers, shaking hands, signing autographs and posing for photographs. But one TV star enjoyed visiting veterans in Albuquerque, N.M., so much that he became a medical center volunteer.

Bill Daily starred as Maj. Roger Healey on TV's "I Dream of Jeannie," starting in 1965. The series about two astronauts and a beautiful genie in a bottle ended in 1970, after which Daily was a regular on "The Bob Newhart Show" from 1972 to 1978.

These days, the 82-year-old actor makes Albuquerque his home and continues to make his fans laugh every Wednesday when he visits veterans at the Raymond G. Murphy VA Medical Center. Daily's warm heart and gift of gab keep patients entertained for about four hours each week. Making patients laugh was just what Daily said he needed at this stage of his life.

"In my time, people died at age 50, and 60 was considered old," Daily said. "So, all of a sudden, I'm 75 and I thought, I could live another 15 years and I've got to do something."

He's been a medical center volunteer for about a year, and the room-to-room visits with veterans fill a void in his life, he said. Some friends of his

also volunteer at the medical

center, and suggested he join them. When Daily first thought about coming to volunteer, he worried about just doing a stand-up routine. Realizing a routine would work only once, he decided to simply meet with patients.

"I love to talk," he said. "I can't remember jokes, but I have a story about everything. So when I'd go in, some people would be angry about something, but they would be laughing by the time I left. So then I decided that I was in and this was it."

The number one topic patients bring up with Daily is "I Dream of Jeannie," he said. And Daily doesn't disappoint, bringing an armful of photographs of himself, flanked by costars Barbara Eden and Larry Hagman, to give away.

"This works out perfectly," he said, "because ninety-nine percent of the patients are fans of 'Jeannie,' and only about one percent liked the Newhart show."

Though it's been 45 years since "Jeannie" first aired on NBC, Daily said he remains friends with Eden and Hagman, but one of his closest friends from his show business days is Newhart.

"Let me tell you how brilliant [Newhart] is," said Daily.
"I was 16 years old when I met him at a Halloween party. He comes in dressed as Leonardo da Vinci. Under his arm, he has a painting of the Mona Lisa. Half of the painting is done, and half of it is paint by numbers. I said to myself, 'I've got to meet this quy.'"

The two friends' paths would cross again nearly 30 years later when Daily played Howard Borden, a flight navigator for a commercial carrier, and Newhart's neighbor, on "The Bob Newhart Show."

The patients he visits are well aware

of Daily's successful entertainment career. What many of them may not know is that Daily served in the Army during the Korean War. Before the war began, Daily was a professional bass player. Because of his musical talent, the Army sent him to Special Services School.

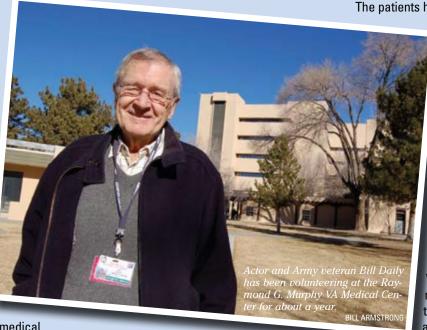
The Special Services Agency was launched after World War II to increase troop morale through crafts, theatrical productions and parties. But instead of using that training, Daily

was shocked to learn that his first assignment would be with an artillery unit in Korea. He said he cleaned howitzers until an Army jazz band picked him up. As an Army entertainer, Daily sang, did stand-up comedy and played bass.

"It was better than what you saw on 'M*A*S*H'—a big improvement from that artillery unit," Daily said.

But the current source of fun and fulfillment for Bill Daily is the time he spends signing autographs and swapping tales with fellow veterans.

"People here are so happy to see me and I'm so grateful," he said. "It's beyond wonderful and I can't believe I'm not crying now. I feel so good." - Bill Armstrong



fellow volunteer Peter Ahearn, who shared the comments of a Vietnam veteran still hurting from the public's treatment of him when he returned from the war more than four decades earlier.

Following a Christmas Day visit and "Thank you" from Ahmed and others, he turned to the knot of fellow veterans and said, "... today some complete strangers got up early on Christmas morning to bring me presents and thank me for what I did forty years ago. My own kids couldn't make it down to see me, but some kids came down to thank me. You know ... I think it made everything alright. I think I'm OK." The others nodded their concurrence.

"You really get to see what they've done for us," said Ahmed. "They're heroes, each and every one of them."

Consistently performing her duties at the level of a full-time employee brought Ahmed attention and respect from many senior managers. It also brought her the 2009 Parke Award. As the recipient, she will receive \$20,000 in scholarship funds toward her college education.

The scholarship is named after the founding father of the Department of Veterans Affairs Voluntary Service National Advisory Committee. The memorial fund, established in 1976, is the nonprofit source of funds for a VAVS youth scholarship.

Asked about her motivation and commitment to volunteer, she explained, "I think everyone has the

Volunteers of the Year

Gary L. Thomas, the latest recipient of the Male Volunteer of the Year Award presented by VA Voluntary Service's National Advisory Committee, is a VAVS and Knights of Columbus representative who has volunteered at the West Haven (Conn.) VA Medical Center for the past two years. After recognizing the need for a specially equipped wheelchair van for the dozen or so amputee veterans who had no means of transportation to attend community events, Thomas spearheaded the "Vans for Vets" project. Under Thomas's leadership, more than \$100,000 was raised in iust under 18 months for the purchase of a new wheelchair van, able to transport eight wheelchairs and three able-bodied attendants. The van was presented to the VA Connecticut Healthcare System on Dec. 16, 2009.

June Valdivia is the latest recipient of the Female Volunteer of the Year Award, Valdivia, who turns 89 in June, serves as the American Gold Star Mothers representative at the Miami VA Medical Center. Her first job at the hospital was filing, but she soon gravitated to the nursing home unit, where she was a dedicated volunteer for vears. After meeting and marrying a veteran in the unit, Valdivia became his caregiver, all while continuing to volunteer at the hospital. After his death, she returned to the unit and "adopted" a veteran that could not move or speak and had trouble swallowing. When he died, Valdivia transferred to the Patients Educational Library, where she continues to serve today.



Gary L. Thomas



June Valdivia

passion to help others ... and once you get started, it just keeps going."

True to the "American Dream" formula, Ahmed was not "lucky" to

win the award. Her recognition was the result of hard work, dedication and a deep concern for others, especially veterans.

"Veterans deserve so much, but unfortunately sometimes they don't get recognized as much as they really deserve to," said Ahmed. "They gave us everything, and I feel helping them out is something so small that I can do for them."

She may not sing for millions of fans, but Marwah Ahmed has become an "American Idol" to the veterans she serves. VA

By Jim Benson

VAVS Offers Many Opportunities to Give

Thankfully for VA, and the veterans it serves, Marwah Ahmed is one of more than 84,000 VA Voluntary Service volunteers who showed their devotion to the nation's veterans by donating nearly 12 million hours in fiscal year 2009.

The fiscal year 2009 total VAVS hours equate to 5,700 full-time employee equivalent (FTEE) positions. The current monetary value of the 11,897,208 hours from all VAVS volunteers is \$240.9 million, based on the 2008 Independent Sector's formula of \$20.25 per hour. VAVS volunteers and their organizations contributed an estimated \$82.6 million in gifts and donations in fiscal year 2009 for a total value of \$323.5 million in volunteer giving.

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Going to their 'Happy Place'

Each year, an army of volunteers descends on Colorado to help make the National Disabled Veterans Winter Sports Clinic a week to remember.

force of more than 800 volunteers rushed to Colorado March 28 through April 2 to ensure more than 350 veterans attending the 24th National Disabled Veterans Winter Sports Clinic experienced a week to remember, restart and rejuvenate their souls.

"We provide a full-service experience for the veterans who come, so it takes a lot of people," said Kris Baugh, voluntary service specialist at the Grand Junction VA Medical Center and key volunteer coordinator for the Clinic. "From the time veterans arrive in Denver to the time they go back

on their planes to their homes, there is never a moment when a veteran should feel unappreciated. Our volunteers ensure they are up on time, motivated all week, and that all their needs are met."

Volunteers fulfilled all sorts of roles at the Clinic: instructing and catching on the ski slopes; coordinating and cheering at alternate activities; moving veterans; handling luggage; offering educational courses; providing public affairs, information technology and food services; and meeting any other needs that arose.

Teams amassed in Denver to wel-

come veterans flying in for the Clinic and transport them to hopper flights to Aspen. More teams waited to greet the veterans at Aspen, transport them to Snowmass and handle the luggage. Then, of course, there were more than 600 volunteers actually on the mountain providing all the services that make the Clinic an event that veterans talk about until they can return again.

"They go way above and beyond to make sure we are safe, comfortable and happy the whole week," said John Maher, an Air Force veteran. "Hopefully they realize how grateful we are because their sheer joy in being here is incredible and infectious."

Veterans on the slopes aren't just grateful to have so many people volunteering at the Clinic. It's the kind of people that volunteer and show up year after year that brings grins to their faces and tears to their eyes.

"They do so much for us, and if you ever need a hand, you won't have to wait long for someone to be right there," said Fred Colson, a Coast Guard veteran attending the Clinic for the first time. "But they aren't in our face, mollycoddling us or showering us with sympathy. We joke, laugh and share stories. There is some true bonding here."

The shared experiences between veteran and volunteer create genuine friendships on the slopes, in the dance halls, and at impromptu parties throughout the week. Stories also

abound of practical jokes and challenges more descriptive of siblings than servers.

"They must check the sense of humor on the volunteers before they can come," Maher said. "They are all so great and they get us. They know that we want to be treated like anyone else. It's more than a job for these guys and it shows. It's a relationship."

Many of the volunteers shared the same smiles and stories when talking about the veterans they serve. In fact, some of them insisted they return each year to serve for their own, selfish reasons.

"Oh, I wouldn't miss this," said Thirza Johnson, who retired from VA in 2006 yet has returned to the Clinic for her 16th straight year. "I do it for me as much as I do it for the veterans. The Clinic is the most rewarding, challenging and wonderful experi-

ence I've ever had. Each year, I see lives changed and I get to be a part of it. Veterans who came here thinking they could never have active lives again leave talking about competing the next year, and I get to play a part in that change. Where else can you do that?"

Indeed, the emotional high of wielding life-transforming power becomes so addictive, some volunteers pay their own way back to Snowmass Village to be able to serve veterans and make miracles on the mountain once again.

"It's an amazing experience. Try it once and you are hooked," said Kristen Reinhart, who has returned from Chicago for her second year on her own dime. "Last year, I saw an 80-year-old veteran ski for the first time and I don't know if I've ever seen a bigger smile. I would never



Ready to Represent their Country Again

Since November 2005, veterans have been able to use the National Disabled Veterans Winter Sports Clinic and the National Veterans Wheelchair Games to qualify for the U.S. Paralympic team.

In October 2009, VA and U.S. Paralympics strengthened their resolve to help veterans speed their recovery and therapy through sports competition. The Veterans' Benefits Improvement Act of 2008 authorized VA to award \$8 million in annual grant support to U.S. Paralympics to plan, develop, manage and implement an integrated adaptive sports program for disabled veterans and disabled members of the armed forces.

Now, VA and U.S. Paralympics expand rehabilitative support at the community level by providing potential Paralympic athletes with better access to training, equipment, Paralympic mentors and ongoing sports programming in communities across the country.

The annual Winter Sports Clinic, sponsored by VA and Disabled American Veterans, has proven fertile ground for Paralympic potential. Of nine current veteran Paralympians, four were introduced to their sport at the Winter Sports Clinic.

John Register, U.S. Paralympics associate director of community and



VA Secretary Eric K. Shinseki (center) and John Register (right), of U.S. Paralympics, visit with Paralympic hopefuls Aubrey Youngs (lower left) and Dana Liesgang (lower right).

military programs, watches and recruits veterans at the Winter Sports Clinic. He spoke with more than 40 veterans who showed potential during the week about the possibility of becoming involved in the Paralympics.

"We look for a general level of fitness," said Register. "At first, it is not much different from choosing kids on the block for kick-the-can back in the day. We talk to the athletes who stand out."

If the veteran shows interest, Register encourages them to try a Paralympic Sports Camp, where they can take a general skills assessment test that measures hand-eye coordination, and features a 600 meter push/run and fivestation spider drill.

"When I'm talking to someone about the Paralympics, I also try to measure their initiative because it takes a lot of investment from the individual," said Register. "I need the people who are going to go home and train with their local high school, college or sports club. I need people who are going to go home and create avenues to train."

Register encourages aspiring athletes to go to www.usparalympics. org to read through the 24 different sports Paralympians currently compete in and to read more about the military community program. Information about Paralympic Sports Camps is also on the site for those ready to compete.

have imagined such joy like that in my wildest dreams, but once I saw it, I had to come back."

According to Baugh, the biggest asset a volunteer needs is the ability to motivate.

"As the week progresses, the events can get a little overwhelming, especially for first-timers," Baugh said. "Our challenge as volunteers is to keep the week exciting instead of tiring and I am really proud of the people who come here each year to do that."

As Baugh sees it, the draw of

changing a veteran's life for the better makes recruiting volunteers an easy task and explains how the volunteer force is more than double the number of participants. Still, there is a second draw Baugh and her fellow volunteers readily admit to. Just as many veterans return to the Clinic year after year for the camaraderie of their fellow veterans, the volunteers keep returning to rekindle the bonds of fellowship forged from serving those who served them first.

"It's like coming home. We become family," Baugh said, smiling at

fellow volunteers who offered hearty nods. "We all share a sense of honor to be here and it leaves a lasting impression. Yes, we put a lot of work into the Clinic, but we get so much more in return.

"The rest of the year, when the inevitable doldrums of office life set in, I'll take a few moments to remember the Clinic, the veterans and my fellow volunteers, and I'm ready to keep going. What else can I say? This is my happy place." M

By Elaine Buehler

Nationwide Advertising Campaign Aimed at Student Veterans

VA launched a two-month, nationwide advertising campaign in February to assist student veterans and service members applying for the Post-9/11 GI Bill.

The GI Bill advertising campaign included half-page ads in top college publications, online and social media, print, radio, and outdoor advertising such as posters and flyers. Public service announcements were delivered to approximately 150 college radio stations and 750 local stations in areas where there is a high density of students, as well as military installations.

Student veterans on college campuses also saw a variety of posters in registrars' offices, dormitories, cafeterias, student union buildings and other high-traffic areas.

"This comprehensive, nationwide advertising campaign helped us reach those student veterans, service members and educational administrators who need help understanding the GI Bill and their role in the benefits process," said Keith Wilson, director of VA's Education Service.

Social media and online advertising were extensively used to reach the younger generation of student veterans. VA placed banner ads on social media sites such as Facebook, Google, MySpace, Yahoo and other outlets.

Text messaging ads also linked student veterans to VA. By texting "GIBILL," veterans received the basic message: "You Served. Get Benefits." Veterans were then directed to follow three steps: "Review your benefit options online. Submit your application. And check with your school certifying official to confirm that your VA enrollment certification has been sent to VA."

VA also developed a hip pocket guide and checklist with helpful tips to assist veterans and service members in the application process.

The Post-9/11 GI Bill, passed by Congress in 2008, is the most extensive educational assistance program authorized since the original GI Bill was signed into law in 1944.

Information about the Post-9/11 GI Bill, as well as VA's other educational benefit



The ad campaign included posters like this one, which went up in registrars' offices, dorms, cafeterias, student unions and other high-traffic areas on college campuses.

programs, is available at www. gibill.va.gov, or by calling

1-888-GIBILL-1 (or 1-888-442-4551).

Second Volume of Veterans Law Review Published

What do the Harvard Law School and VA's Board of Veterans' Appeals have in common besides great legal minds? They both publish law reviews. In January 2009, the Board published the first volume of the Veterans Law Review, a journal focused on veterans' benefits law.

The Board adjudicates and makes final decisions on behalf of the Secretary of Veterans Affairs on appeals of decisions made by local VA claims offices. It is comprised of attorneys and veterans law judges who review all appeals for entitlement to veterans' benefits, including claims for service connection, increased disability ratings, pension, insurance, educational benefits, home loan guaranty, vocational rehabilitation, dependency and indemnity compensation, and health care eligibility.

The second volume of the Veterans Law Review was released this spring. It contains several notes and articles regarding current "hot topics," including the paperless appeals push and the proposed amendment to the stressor verification requirement for post-traumatic stress disorder claims. For more information about the Veterans Law Review, visit www.bva.va.gov/VLR.asp.

Regulation Change Would Aid Veterans Exposed to Agent Orange

Well over 100,000 veterans exposed to herbicides while serving in Vietnam and other areas will have an easier path to qualify for disability pay under a proposed regulation published by VA that adds three new illnesses to the list of health problems found to be related to Agent Orange and other herbicide exposures.

The regulation follows VA Secretary Eric K. Shinseki's October 2009 decision to add the three illnesses to the current list of diseases for which service connection for Vietnam veterans is "presumed." The illnesses are B cell leukemias, such as hairy cell leukemia, Parkinson's disease, and ischemic heart disease. The Secretary's decision is based on the latest evidence of an association with widely used herbicides such as Agent

Orange during the Vietnam War, as determined in an independent study by the Institute of Medicine.

Even though this is a proposed rule, VA encourages Vietnam veterans with these three diseases to submit their applications for compensation now so the Department can begin development of their claims and so they can receive benefits from the date of their applications once the rule becomes final.

The final regulation will be published after consideration of all comments received during a 30-day comment period.

More than 80,000 of the veterans will have their past claims reviewed and may be eligible for retroactive payment, and all who are not currently eligible for enrollment into

the VA health care system will become eligible.

The new rule will bring the number of illnesses presumed to be associated with herbicide exposure to 14 and significantly expand the current leukemia definition to include a much broader range beyond chronic lymphocytic leukemia, previously recognized by VA.

In practical terms, veterans who served in Vietnam during the war and who have a "presumed" illness don't have to prove an association between their illnesses and their military service. This "presumption" simplifies and speeds up the application process for benefits.

Other illnesses previously recognized under VA's "presumption" rule as being caused by exposure to herbicides dur-

ing the Vietnam War are:

- AL amyloidosis;
- acute and subacute transient peripheral neuropathy;
- chloracne or other acneform disease consistent with chloracne;
- chronic lymphocytic leukemia (now being expanded);
- diabetes mellitus (type 2);
- non-Hodgkin's lymphoma;
- porphyria cutanea tarda;
- prostate cancer;
- respiratory cancers (cancer of the lung, bronchus, larynx or trachea); and
- soft tissue sarcoma (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma).

More information about Agent Orange and VA's services for veterans exposed to the chemical is available at www. publichealth.va.gov/exposures/agentorange.

VA Recognizes 'Presumptive' Illnesses in Iraq, Afghanistan

Following recommendations by VA's Gulf War Veterans Illnesses Task Force, the Department is publishing a proposed regulation in the Federal Register that will establish new presumptions of service connection for nine specific infectious diseases associated with military service in Southwest Asia during the Gulf War, or in Afghanistan on or after Sept. 19, 2001.

The proposed rule includes information about the long-term health effects potentially associated with the nine diseases: brucellosis; Campylobacter jejuni; Coxiella burnetii (Q fever); malaria; Mycobacterium tuberculosis; nontyphoid Salmonella; Shigella; visceral leishmaniasis; and West Nile virus.

For non-presumptive conditions, a veteran is required to provide medical evidence that can be used to establish an actual connection between military service in Southwest Asia or in Afghanistan, and a specific disease. With the proposed rule, a veteran will only have to show service in Southwest Asia or Afghanistan, and a current diagnosis of one of the nine diseases. A final regulation will be published after consideration of all comments received during a 60-day comment period.

The decision was made after reviewing the 2006 report of the National Academy of Sciences, "Gulf War and Health Volume 5: Infectious Diseases." The 2006 report differed from the four prior reports by looking at the long-term health effects of certain diseases determined to be pertinent to Gulf War veterans.

The 1998 Persian Gulf War Veterans Act requires the Secretary to review NAS reports that study scientific information and possible associations between illnesses and exposure to toxic agents by veterans who served in the Gulf War.

Because the Gulf War has not officially been declared ended, veterans serving in Operation Iraqi Freedom are eligible for VA's new presumptions. VA Secretary Eric K. Shinseki decided to include Afghanistan veterans in these presumptions because the NAS found that the nine diseases are prevalent in that country.

More information about health problems associated with military service during operations Desert Shield, Desert Storm, Iraqi Freedom and Enduring Freedom and related VA programs is available at www.publichealth.va.gov/exposures/gulfwar.

National Cemetery Administration to Introduce New Burial Benefit

The National Cemetery Administration will introduce a new burial benefit this summer. Veterans and family members will soon be able to order a bronze medallion that can be affixed to an existing privately purchased headstone or marker to signify the deceased's status as a veteran.

The medallion, depicting a three-dimensional folded flag surrounded by a laurel wreath with the veteran's branch of service displayed beneath, will come in three dimensions designed to fit on various-sized headstones, grave markers and columbarium niche covers. The sizes are 5 inches, 3 inches and 1 1/2 inches in diameter.

This new product will be furnished in lieu of a traditional government headstone or marker to veterans whose death occurred on or after Nov. 1, 1990, and whose grave is marked with a pri-



COURTESY OF NCA

vately purchased headstone or marker. Eligible veterans are entitled to either a traditional government-furnished headstone or marker, or the new medallion, but not both.

After accepting a claim for the new benefit, VA will mail the medallion along with a kit that will allow the family or the staff of a private cemetery to adhere the device to a headstone, marker or niche cover.

VA created the medallion in response to Public Law 110-157, passed by Congress Dec. 26, 2007. The law gave VA authority to "furnish, upon request, a medallion or other device of a design determined

by the Secretary to signify the deceased's status as a veteran, to be attached to a headstone or marker furnished at private expense."

NCA arrived at the distinctive folded flag design after a long deliberation process. Memorial Programs Service personnel, members of the Advisory Committee on Cemeteries and Memorials and the Army Institute of Heraldry participated in the development of the medallion. After months of exchanges in meetings, workshops and focus groups, NCA submitted the current design to VA Secretary Eric K. Shinseki. The Secretary approved it on Jan. 13.

The manufacture of the medallion is now in the solicitation phase and NCA is planning a publicity strategy to make the public aware of this new benefit. More information is available at www.cem.va.gov.

Veterans Health Administration Launches Recruitment Campaign

VA recently launched a major initiative to recruit nurses, doctors and pharmacists that includes a paid television advertising campaign. This new initiative focuses on VA's incentives and career opportunities in technologically advanced facilities.

The ads are running during highly rated programs such as the Grammy Awards and the Winter Olympics. They are also running on network morning and entertainment shows, sports and cable programs, and in select markets such as Spanish-language ads for Univision and Telemundo.

The messages emphasize the satisfaction of serving veterans, VA leadership in quality care, and the ability of licensed VA health care professionals to practice in any part of the country. The ads direct viewers to explore career opportunities at www.vacareers.va.gov.

Outreach includes distribution of public service ads to media outlets, video files promoted on



social networking and free entertainment sites, as well as Google and Yahoo search campaigns. The effort is part of VA's aggressive planning to hire nearly 40,000 new and replacement health care employees over the next five years.

National Program Supports Patient-Centered Care Initiatives

Veteran-focused. Veteran-centric. No matter how you say it, VA puts veterans first.

"Serving veterans, who served us, is one of the most rewarding careers anyone could choose," said Joan S. Van Riper, director of the Veterans Health Administration's National Veteran Service and Advocacy Program. "With the assistance of the Veterans Support Service Center and a national advisory board, we have several programs to keep our veterans centered in our jobs and hearts throughout the year."

VHA's formal Patient Advocacy Program is a customer service initiative that began in 1990 to ensure that all veterans and their families served in VHA facilities have their concerns and complaints addressed in a convenient and timely manner.

While patient advocacy existed in VHA facilities prior to that time, the formal program was established to ensure consistency and provide an organized approach to veteran advocacy.

"The Patient Advocacy Program has expanded a great deal in nearly 20 years with the incorporation of veteran customer service, service recovery and patient-centered care," said Van Riper. "The current program is an important element of patient satisfaction and contributes to VHA initiatives to provide world-class customer service."

Another program that actively pursues customer service improvements is the Fresh Eyes on Service Program. It was developed as a way to learn, share and improve successful customer service programs through direct observations of interactions between patients and staff, where successful practices can be identified, celebrated, shared and infused through the system.

"It reinforces a transitioning from a goal of courtesy to one of developing a nationwide focus on inspiring acts of compassion in the workplace," said Van Riper.

Good customer service also means following up with the customer. Phone calls to patients that have recently been discharged from VA inpatient units significantly contribute to VHA's efforts to be a patient-centered health care organization.

"The Post-Discharge Calling System facilitates a smooth transition for our veterans from inpatient to outpatient care," said Van Riper. "It's an opportunity to maintain the lines of communication that not only lead to improved health care, but improve customer satisfaction."

One of the most important ingredients in developing good customer service is feedback.

"To better serve your customer, you need to know what they like, what they don't like and what they want," said Van Riper. "Veteran feedback is solicited and welcomed through a variety of methods in VHA, including a yearly satisfaction survey sent to recently discharged veterans, as well as the ability for veterans to contact VA directly through the Web site. They can make suggestions, voice concerns or submit compliments any time they want to."

A useful way to keep the momentum behind any program and encourage improvement is awards programs. Awards have a way of inspiring people to put forth extra effort. Awards programs also afford an opportunity to share best practices, so that others can use proven methods to better serve their customers.

Each year, VHA solicits nominations for the Annual Under Secretary for Health Customer Service Awards to promote and share outstanding customer service programs and initiatives.

In fiscal year 2009, the Health Resource Center in Topeka, Kan., was selected for its implementation of a pharmacy call center in the VA Heart of Texas Health Care Network (VISN 17). The call center improves customer service by allowing pharmacy staff to devote time to answering clinical questions and filling prescriptions, while the call center staff handles administrative or routine requests.

The VA New Jersey
Health Care System was selected for their Oak Leaf Awards
Program, used to recognize
employees for outstanding
customer service. The program
provides veterans with a mechanism to nominate VA employees who exceed customer
service expectations. Awards
include the Pewter Oak Leaf
and the Gold Oak Leaf, borrowed from the oak leafs used
on military medals to show the
level of the award.

The VA Puget Sound Health Care System was selected for their multidisciplinary approach to scheduling urology consults, which saved 200 patients from making unnecessary trips to the clinic; they reduced additional trips by coordinating care and consolidating appointments. The end result decreased patient waiting time and increased customer satisfaction.

More than 40 nomina-



Joan Van Riper leads the Veterans Health Administration's national patient advocacy program.

tions were submitted for consideration. While there were only three official winners, employees and veterans benefited as all of the ideas were shared throughout VHA to be used and improved upon at other facilities.

As with any good program, education is the key to success. VHA promotes continuous customer service training to its employees through video and an online curriculum, and is currently developing a Web-based customer service education program. Customer service training is provided in new employee orientation and highlighted at staff meetings regularly.

The National Veterans Service and Advocacy Advisory Board is partnering with other VHA offices in developing a tool to assist facilities with assessing their "patient-centered-

continued on page 30

Andy Hendrickson

Andy Hendrickson knows all too well the stories and scars that veterans bring home from the battlefield.

While they fought the war, he helped repair their physical wounds as a nurse and officer in charge of the 452nd Combat Support Hospital during a 2003 deployment to Bagram, Afghanistan.

Now Hendrickson, part of an outreach group for Afghanistan and Iraq veterans at the Clement J. Zablocki VA Medical Center in Milwaukee, is helping to heal mental wounds, too.

Hendrickson, a certified master yogi, teaches a yoga class every Friday afternoon and evening classes once a week. While classes are open to everyone, they are particularly geared toward veterans looking for a way to relax and heal as part of an overall treatment plan.

"It can help you think more clearly and make sense of things," Hendrickson said. "There are a lot of things in life you can't make sense of. But during this time, the focus is on the here and now. In yoga, you focus internally, and you let go of those thoughts of the past and the future."

Hendrickson, 55, first took yoga classes as a physical education requirement while he was a student at the University of Utah in the early 1970s, then did it off and on over the years.

In Afghanistan, he treated not only wounded soldiers, but also children and other family members hurt by landmines planted decades earlier.

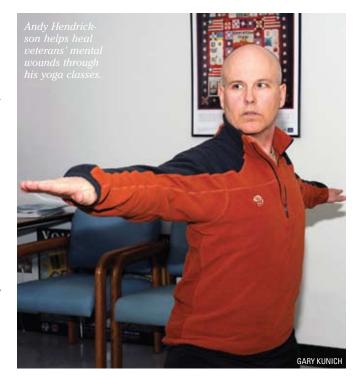
"I started doing yoga again every night to relax and calm down after working with blown-up people," he said. "It calms the body. It calms the mind and reduces the heart rate."

Hendrickson is someone who has been there, done that, and isn't afraid to talk about it with veterans, and he believes that helps him connect with veterans like Ben Sebena.

The 25-year-old Marine Corps veteran was wounded in a mortar attack in 2004, during his second tour in Iraq. He also suffers from post-traumatic stress disorder. Sebena met Hendrickson through the medical center's multi-faceted approach to treating Afghanistan and Iraq veterans, and has been coming to yoga classes for about a year.

"It's very relaxing,"
Sebena said. "I can come here
and let everything else go for
an hour, once a week. My
wife has supported me and
this is my gift back to her. She
doesn't want me to repress
feelings. I owe her."

On a quiet Friday afternoon at Zablocki—far removed from the fighting over-



seas—Hendrickson led Sebena and another man through a variety of yoga stretches and breathing exercises.

All is calm. All is right at least right now, in this moment. Hendrickson speaks in a soft, soothing voice as he leads the group through a variety of stretches and breathing routines.

"Let everything go,"
Hendrickson says quietly,
"and think about your breath.
Yoga can be selfish, because
you look at the here and now;
you let everything go and you
think about your breath."

For Sebena, it's one part of his overall treatment. He sees himself as a "big brother," encouraging other Marines to enroll in the VA health care system for treatment.

"I first came in because of the mental aspect, but I really enjoy it," Sebena said. "I tell my friends about it too, because they're coming back [from Afghanistan and Iraq]. Some of them still see the VA negatively, or they think it's not for someone their age, or there's a stigma to them coming here. But I like to tell them it can help, and to not be afraid to speak up.

By Gary J. Kunich

Patient-centered care (cont.)

ness." The future in customer service is to focus efforts on the principles of a veterancentric approach throughout VHA. Veteran-centered principles include:

honor the veteran's expectation of safe, high-quality and

accessible care;

- enhance the quality of human interactions and therapeutic alliances;
- solicit and respect the veteran's values, preferences and needs;
- systematize the coordination, continuity and integration of care;
- empower veterans through information and education;
- incorporate the nutritional, cultural and nurturing aspects of food;
- provide for physical comfort and management of pain;
- ensure emotional and spiritual support;
- encourage involvement of

family and friends;

- provide an architectural layout and design conducive to health and healing;
- introduce creative arts into the healing environment; and
- support and sustain an engaged work force as key to providing veteran-centered

Toxins as Therapy: Researcher Exploits Good Side of Substances

Most people know Botox the trade name for botulinum toxin—as a trendy treatment for facial wrinkles.

Long before its cosmetic use, though, the toxin became known as a potent muscle relaxant. Neurologists have used it for decades, in tiny doses, to treat spasms in the face or limbs, uncontrolled blinking, and other conditions. It's become standard therapy for the abnormal contractions that often occur in Parkinson's disease or after a stroke, or in a rarer ailment called dystonia.

Toxins may seem unlikely tools for doctors. But to VA researcher Paul Fishman, M.D., Ph.D., they are a treasure trove of therapeutic potential. The neurologist and his group at the VA Maryland Health Care System and the University of Maryland are now studying the use of toxins besides botulinum, such as tetanus and diphtheria, to treat disorders involving muscles.

In scientific terms, the toxins studied in Fishman's lab are proteins made by pathogenic bacteria. The diseases they cause are nasty and often lethal. Botulinum toxin was in Hitler's arsenal. It was loaded into bombs by Saddam Hussein's regime, according to United Nations reports. It is listed by the Centers for Disease Control and Prevention as a prime potential agent of bioterrorism.

Understandably, the debut of botulinum toxin in health care in the 1970s raised some eyebrows. Even Fishman was skeptical, to put it mildly, when he first heard of it being used to help patients. "I thought people were nuts. In my training, I had seen people with botulism. Everyone knew what a powerful toxin botuli-



Veteran Donald Ruth, who suffers from dystonia, receives an injection of botulinum toxin (Botox) from VA's Dr. Paul Fishman to help control severe spasms in his neck muscles. Ruth's sister, Jean Filetti, helps stabilize his head during the procedure. The toxin works by blocking nerve impulses to muscles in the injected area.

num was. Using it as a therapy seemed crazy and dangerous."

Fast-forward to 2009. After years of injecting minute doses of botulinum toxin into patients' muscles and seeing remarkable benefits, Fishman is a big proponent of its clinical use. "It's an enormously powerful and effective muscle relaxant," he says. "It's really been beneficial for conditions where there are no other effective treatments."

That is part of what triggered his interest in another toxin: tetanus. It has the opposite effect on muscles—it activates them—and Fishman believes it could play an equally important role in medicine. He and VA collaborator Chris Matthews, Ph.D., see the toxin as a possible tonic for muscles that have atrophied from disease. This is common in patients with severe injuries who are laid up in bed for

long periods.

Tiny doses of the toxin could also be used to energize muscles weakened by neurological conditions, he believes. "Could you take a small amount of tetanus toxin and amplify an inadequate contraction?" ponders Fishman.

He gives the example of a post-stroke patient whose hand is locked in a fist. Botulinum toxin could help ease the grip. But the patient might still have trouble fully opening the hand and extending the fingers. "Could we use tetanus toxin to enhance their ability to open their hand, activate those muscles? I view it as complementary to botulinum toxin," says Fishman.

Given the clinical success of botulinum toxin, why haven't others thought of using tetanus toxin in a parallel fashion, as Fishman envisions? The reason has to do with vac-

cination. Experts have assumed that since almost everyone in Western society is vaccinated against tetanus, the toxin could have no effect—good or bad—on people's systems. Thus, it would be of no use medically.

Experiments in Fishman's lab showed otherwise. Even in vaccinated rodents, the injected toxin evaded antibodies and found its target: nerve cells that control muscles. The toxin then works its way inside cells, where antibodies can't touch it.

Ironically, Fishman's early tetanus experiments were done with no intention of using the toxin itself therapeutically. In fact, his team was using only a segment of the tetanus molecule—the part that targets and enters motor neurons—in hopes of using it to ferry other therapeutic agents into the cells. The toxic part of the

MEDICAL ADVANCES

protein was irrelevant—or so they thought. Once they realized how good the toxin was at targeting nerve cells, they decided to repeat their animal experiments with the whole, toxic form of tetanus. They noted with great interest its activating effect on muscles.

Fishman says natural toxins are becoming a hotter topic among researchers. "There's

lots of precedent recently in the medical literature showing that we can harness the power of natural toxins," he notes. He cites the example of diphtheria toxin, which spurs the production of antibodies that kill some tumors.

Fishman's team is using diphtheria toxin in a different way: They are combining it with the part of the tetanus

molecule that targets nerve cells. The goal is a hybrid toxin that, like botulinum toxin, could be used to selectively kill motor neurons.

Fishman is also collaborating with Homeland Security researchers to develop antidotes to botulinum toxin. The project is important for national security, but there may also be a routine clinical

benefit, he explains.

"I tell patients all the time, 'I'm going to be very careful with dose, I'm going to stay in the lowest ranges, because if I overdose you, there is no antidote.' I'd like to be able to rephrase that and say, 'If I overdose you, I can give you something that will terminate the action of the toxin.'"

- VA Research Currents

VA Health IT Improves Quality of Care While Reducing Costs

VA has shown that health information technology provides improved quality of health care and substantial cost savings, according to a study in the public health journal "Health Affairs." The use of technology lowered costs while producing improvements in quality, safety and patient satisfaction.

The study, which covered a 10-year period between 1997 and 2007, found that VA's health IT investment during the period was \$4 billion, while savings were more than \$7 billion. The authors noted that most of the savings are in areas that also improve quality, safety and pa-

ROBERT TURTIL

Dr. Divya Shroff, associate chief of staff-informatics at the D.C. VA Medical Center, accesses VistA, VA's health IT system.

tient satisfaction.

More than 86 percent of the savings were due to eliminating duplicated tests and reducing medical errors. The rest of the savings came from lower operating expenses and reduced workload. The authors further noted that these were conservative estimates of net value, based on available literature and published studies.

VA has also begun piloting health record exchanges with the Department of Defense and private sector providers. These programs are paving the way for the seamless, lifetime exchange of the health care records of veterans, regardless of where they live.

VA has been using health IT systems for more than 20 years to improve medical outcomes and efficiency in delivering care. The use has grown to support the full range of patient care, including computerized patient records, barcoded medications, radiological imaging, and laboratory and medication ordering.

The study looked at the success in meeting clinical guidelines through the use of electronic health records and computerized physician alerts. Chronic illnesses such as diabetes, which impacts about 25 percent of VA patients, was a focus of the study.

VA patients with diabetes had better glucose testing compliance and control, more controlled cholesterol, and more timely retinal exams compared to Medicare's private sector benchmark. Retinal damage can be caused by diabetes. VA averaged about 15 percentage points higher than the private sector on preventive care for patients with diabetes.

The study authors are associated with the Center for Information Technology Leadership, a research organization in Charlestown, Mass., which is focused on guiding the health care community in making informed strategic IT investment decisions.

The health IT study is available on the "Health Affairs" Web site at *content.healthaffairs.org/cgi/content/full/29/4/629*.

Make-a-Wish Program Heads to the Florida Skies for a Veteran

Clarence "Chill" Fields, a resident of the Bay Pines VA Healthcare System's Community Living Center, was facing cancer and a life expectancy of less than a year. Fields, a Navy veteran, had one wish: "I want to go skydiving." But Fields didn't want to go by himself; he wanted a VA staff member to jump alongside him.

That's where the Bay Pines Make-a-Wish program stepped in. The program, coordinated by VA's Therapeutic Recreation Service, grants wishes to veterans facing a life-threatening illness. After Fields, who "always dreamed about flying," received medical clearance, he and VA recreation therapist Lin Hales traveled to Zephyrhills, Fla., to make his wish a reality. "When I was going through the clouds, it felt like heaven," says



Clarence "Chill" Fields fulfills his lifelong dream to skydive.

Fields of the 13,500-foot altitude jump. Funded through donations, the Make-a-Wish program has received more than \$11,600, granting 100 wishes since it started in 2002.

Houston Astros Team Members Visit Waco VA Medical Center

Houston Astros baseball fans were excited when pitchers Bud Norris and Matt Lindstrom, former player Jeff Bagwell, and broadcaster Jim Deshaies stopped by the Waco VA Medical Center to visit with veterans and sign autographs. Part of the 2010 Astros Caravan, the annual meet and greet takes players to 14 cities in nine days.

Edward Waldrop, a veteran and VA chaplain from Augusta, Ga., received an autographed baseball card from Norris. Waldrop, who is going through the blind rehabilitation program, said he was pleasantly surprised to find the team members at the medical center. "I thought it was delightful that we were able to meet with these Astros and that they were willing to sacrifice their time to visit veterans. They were very gracious and welcoming and seemed very genuine. To be in the presence of such large sports figures in such an intimate setting was a wonderful experience."



Left to right: Matt Lindstrom, Jim Deshaies, Jeff Bagwell and Bud Norris.

Richmond VAMC Clinic Has Something to 'Ring' About

Even after they've completed their military service, some veterans have to once again face the unknown and tap into their inner strengths. When diagnosed with cancer, veterans at the Hematology and Oncology Clinic at the Hunter Holmes McGuire VA Medical Center in Richmond, Va., receive another method to cope.

The clinic's philosophy is that patients and staff are comrades in the battle against cancer and share the journey. With the support of American Legion Post 284, the clinic installed a wall-mounted bell plaque for patients to "ring" at the completion of their cancer treatment. Stating, "Ring this bell three times well, a toll to clearly say, this course is run and I am on my way," the bell has proven popular. At the end of his treatment, one veteran recently said, "Finally, I get to ring that bell. It feels great to be done."

Large Attendance at D.C. VA Medical Center's Homeless Stand Down

More than 400 homeless veterans attended the 2010 Winterhaven Homeless Veterans Stand Down at the Washington, D.C., VA Medical Center Jan. 23. For the 16th year, the D.C. VAMC brought together more than 40 community agencies, along with veterans service organizations and businesses, to provide a full day of services for homeless veterans.

Veterans received medical screenings, mental health consultations, employment support, benefit claims assistance and housing services. In addition, veterans received hot meals, warm clothing, comfort kits, haircuts, and tokens for goods at local thrift stores.

A highlight of this year's event was a "Lease-up" station supported by the D.C. VAMC, HUD, and the D.C. Department



Social worker Kenneth Barnum helps out at the 2010 Winterhaven, where hundreds of veterans got assistance with benefits, housing, employment and more.

of Housing. At this station, veterans with vouchers and those in the process of receiving vouchers could be immediately placed in available rental units. Five veterans left the event with new apartment homes, seven were placed in transitional housing, and two were issued vouchers.



Woody Correll, Army veteran with the American Postal Workers Union Local 650, hands out backpacks in front of Borah Post Office in downtown Boise.

Boise VAMC Partners With Postal Union to Help Homeless Veterans

When the American Postal Workers Union challenged its members to help fight veteran homelessness by donating a backpack to the Winterhaven Stand Down in Washington, D.C., held Jan. 23, little did they know the effect. In Boise, Idaho, APWU Local 650 decided to raise the bar and put together 10 additional backpacks to give to homeless veterans in the Boise community. But by Dec. 21, they had raised enough donations for nearly 75 backpacks containing necessary items such as flashlights with extra batteries, first-aid kits, instant soup, wool socks, hygiene items, canned goods and insulated gloves.

Not knowing how they would distribute the backpacks, they turned to John Poarch, social worker for the Boise VA Medical Center's Homeless Program, for help. With Poarch's assistance, more than 50 homeless veterans came to the downtown post office to receive the backpacks. Leftover backpacks were divided up and donated to local homeless shelters in the area.

Vehicle Rollover Training Helps Staff at Tomah VA Medical Center Learn More About Injuries

In an attempt to better treat service members for injuries sustained in Humvee rollovers, three physical therapists from the Tomah (Wis.) VA Medical Center recently participated in vehicle rollover training. Taught by the Army's 181st

Infantry Brigade at Fort Mc-Coy, the Tomah VAMC Poly-trauma team learned about the physical forces placed on the body during a rollover. Humvee Egress Assistance Trainers (HEATs) are Humvee cabins, minus engines, transmissions

and wheel assemblies, that can be rotated 360 degrees to simulate a rollover. "We were able to see some of the sideto-side motion and different angles that the head, neck and spine go through in the rollover action," said Kris Valest, Tomah's preventive medicine and rehabilitation services supervisor. "This was some very unique training for us," Valest added. "The more we understand the nature of a soldier's injuries, the quicker we can devise a treatment plan."

VA Black Hills Health Care System Honors Fallen Heroes

The South Dakota Fallen Heroes banner display, honoring 28 service members who lost their lives during Operation Enduring Freedom/Operation Iraqi Freedom, was recently hosted by the VA Black Hills Health Care System. The VA's OEF/OIF team worked with several community businesses and military organizations to create the 6-foot-tall banners.

Each banner features the service member's photograph, name, rank, service branch, date of birth and date of death. All of the fallen had ties to South Dakota, either by hometown or because they



The South Dakota Fallen Heroes banner display honors 28 service members who lost their lives in Afghanistan and Iraq.

were stationed at nearby Ellsworth Air Force Base, and many are now buried at Black Hills National Cemetery. During the opening of the display on Jan. 17, family members, friends and comrades were asked to stand while the names of the fallen were read. The banners then went on a two-week "tour" to Rapid City, Sturgis and Hot Springs, allowing the public to honor the heroes.

New National Cemetery Opens for Burials in Pennsylvania, Another Dedicated in California

In January, VA opened the 131st national cemetery in Pennsylvania, and dedicated another new national cemetery in California. The first burials at Washington Crossing National Cemetery, located in Newtown, Pa., took place on Jan. 20. The 205-acre cemetery will serve approxi-

mately 580,000 veterans in the Philadelphia metropolitan area. A 12-acre early burial area with temporary facilities has been completed; a second, larger construction stage of the project will follow. When that stage is completed, the 64-acre development will provide 15,500 full-casket gravesites,

including 15,100 pre-placed crypts, 6,500 in-ground cremation sites and 4,100 columbarium niches.

In San Diego, Miramar National Cemetery was dedicated in a Jan. 30 ceremony. VA Acting Under Secretary for Memorial Affairs Steve L. Muro gave the keynote address and was joined by elected officials as the dedication plaque was unveiled. The 313-acre cemetery will include both gravesite and columbarium development, providing a full range of burial alternatives to approximately 235,000 veterans in the San Diego County area.



Left to right: Miss USA, Miss Universe and Miss Teen USA visit with veteran Josh Marello.

Bronx VA Medical Center Hosts Miss Universe, USA and Teen USA Winners

The 32nd annual National Salute to Veteran Patients was celebrated nationwide with events at many VA facilities, but none with such star power as the James J. Peters VA Medical Center in the Bronx. During the week of Feb. 7-14, the medical center hosted Miss Universe 2009 Stefania Fernandez, Miss USA 2009 Kristen Dalton, and Miss Teen USA 2009 Stormi Henley.

"We're excited. Their participation just heightens the celebration and brings a special note of cheer to our veterans," said MaryAnn Musumeci, medical center director. "The National Salute gives everyone a chance to let our veterans know just how very much they are appreciated." During National Salute week, VA medical centers across the country invite local celebrities, elected officials and school children to visit veterans and bring them some cheer. To the delight of many, Fernandez, Dalton and Henley visited and signed autographs for the patients.

Environmental Certification Awarded to Boise VARO

The VA regional office in Boise, Idaho, was recently recognized by an independent group for reducing its environmental impact. The U.S. Green Building Council awarded its "gold" rating for the construction design of the 25,000-square-foot facility.

Three other VA facilities have been cited by Leadership in Energy and Environmental Design (LEED) for their programs. The Reno VA Regional Office in Nevada received a LEED "silver" rating. The Fort Harrison VA Regional Office in Montana and the Oakland Mental Health Clinic in California each received a LEED-certified rating.

LEED is a leading, independent rating system based on environmental assessments of buildings. It is used by the U.S. Green Building Council to certify sustainability of a facility. The LEED rating criteria include energy savings, water efficiency, carbon emissions reduction, improved indoor air quality, stewardship of resources and sensitivity to their impact. LEED and Green Globes are the only two "green" building rating systems developed by organizations accredited by the American National Standards Institute. Under LEED, a building can receive one of four ratings: platinum; gold; silver; and certified. To obtain its gold rating, the Boise VA Regional Office had to score 60-79 points out of 100.

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North Chicago VA Medical Center Primary Practitioner Nationally Selected 'Top Doc'

Silver Star Families of America and *Military Connection.com* recently selected Elaine Yildiz, primary practitioner at the North Chicago VA Medical Center, as their certified physician assistant "Top Doc" of the year. The patient-selected award is designed to recognize excellence in military and veteran health care, and is awarded solely by the nomination from patients.

"I'm really humbled by this award, because I was only doing what I'm expected to do—take care of my patients," said Yildiz. "I take care of them as individuals and veterans who deserve only the best treatment."

Yildiz was selected as the annual recipient in the Above and Beyond Primary Physician and Primary Practitioner Award category, where a top physician and primary practitioner are selected nationally. "Elaine puts her patients at the heart of everything she does, and exemplifies VA's commitment of integrating mental health and primary care," said Dr. Chowdary Jampala, of North Chicago VAMC's Mental Health Services and Yildiz's supervisor.



Elaine Yildiz was selected for a national award given annually to a top physician and primary practitioner.

"We're very proud that she's being recognized in this fashion, and feel it's only appropriate that she was nominated by those she helps each day."

South Texas Veterans Health Care System Recognized for Excellence

South Texas Veterans
Health Care System in San
Antonio is among six organizations recognized by The
Quality Texas Foundation
for Achievement in Organizational Excellence for
effective and systematic approaches to organizational
management. South Texas

is in good company, with Raytheon and Baylor Medical Center among those recognized by the foundation.

The Quality Texas Foundation is a nonprofit corporation focused on quality assessment and feedback, education, training and recognition to help businesses, schools, hospitals, nonprofits and government agencies improve performance. The foundation administers the Texas Award for Performance Excellence program (based on the Baldrige Criteria), the state's highest recognition for quality.

Student Nurses Select Charleston VA Nursing Academy Instructor for Award

Charleston (S.C.) VA Medical Center's Nicole Coxe recently received a Golden Lamp award from the 2009 graduating class of the Medical University of South Carolina nursing program. Each graduating class votes for one faculty member and one clinical faculty member they would most like to emulate.

"I'm very humbled to have received this award," said Coxe. "I feel honored and privileged that a VA Nursing Academy instructor was chosen. I love being with the students. They taught me to emphasize more the essence of nursing and not just the clinical skills. It is also exciting to see their transformation from not being sure about VA to loving it."

VA's Nursing Academy program was designed to address VA nursing shortages as well as help ensure the continued world-class care of veterans. The Nursing Academy program funds additional staffing positions at schools, allowing more students to attend while providing qualified VA nurses an opportunity to teach on the school's faculty.

The class of 2009 was the first to graduate since the VA academy partnership was formed with the school in 2008. Four graduates decided to join the VA workforce due to their exposure to VA through the program.

For more information about VA's Nursing Academy program, visit www.va.gov/oaa.



Patrick L. Sullivan, left, North Chicago VA Medical Center director, and Capt. James A. Lovell, Apollo 13 astronaut and retired naval officer, discuss the layout of the Captain James A. Lovell Federal Health Care Center with the new tollway signs in the background.

Signs Honoring Lovell in Place for Nation's First Federal Health Care Facility

When it is activated on Oct. 1, the Captain James A. Lovell Federal Health Care Center will be the nation's first fully integrated partnership between VA and the Department of Defense, integrating all medical care from the North Chicago VA Medical Center and the Naval Health Clinic Great Lakes into a federal health care system with a combined VA and Navy mission. In March, Lovell, Apollo 13 astronaut and retired naval officer, was on hand with Patrick L. Sullivan, North Chicago VA Medical Center director, to commemorate the placement of new highway signs in honor of Lovell.

"It's a privilege to honor an American hero like Captain Lovell," said Sullivan. "Seeing the tollway signs being put into place is another reminder that our integration is moving forward and that the new face of federal health care will soon be part of our landscape."

Hines Chief of Surgery Named President of Chicago Surgical Society

Dr. Raymond Joehl, chief of surgery at the Hines (Ill.) VA Hospital, was recently named president of the Chicago Surgical Society, an organization committed to cultivating and improving the science and art of surgery and to promoting education within the medical profession. It provides a professional and social forum for the mutual exchange of ideas, criticisms and amenities among Chicago surgeons.

The society was founded more than 100 years ago and Hines VA staff have traditionally played a key role in the organization, which includes prominent surgeons from throughout the area. Four former chiefs of surgery at Hines VA served as past presidents of the society.

"I am honored and humbled to be elected president of the Chicago Surgical Society in its 110th year," said Joehl. "Hines has a rich history of strong participation and leadership in this organization. I plan to do my very best to preserve the traditions that have served us well and that will add value to society members."

Denver Customer Service Center Wins LVA Alumni Association Team Spirit Award

The Leadership VA Alumni Association selected the VA Health Administration Center's Customer Service Center in Denver as the recipient of its annual Team Spirit Award. Nearly 200 Customer Service Center employees provide direct service to veterans and their dependents by phone, correspondence and online. Late in 2008, the Health Administration Center reorganized its Customer Service Center with the goal of having "the right people in the

right place at the right time." The result was improved service and efficiency; average response time to customer inquiries improved, along with quality of service provided to the center's customers-Civilian Health and Medical Program of Department of Veterans Affairs (CHAMPVA) beneficiaries and providers. The Customer Service Center achieved all organizational performance standards with minimal increase in manpower, amidst increasing orga-

nizational demands and health care program growth. Leadership set the course, but as the Team Spirit Award nomination noted, "It was ultimately the cooperation, focus and can-do spirit of CSC's employee team" that achieved results. Today, Customer Service Center employees maintain or exceed established standards of answering 90 percent of phone calls within 45 seconds (with an average wait time of 10 seconds); completing 100 percent of correspondence within

15 days; and maintaining a lost call rate of 1.5 percent. Customer satisfaction of both beneficiaries and providers is at an all-time high. "The VA Health Administration Center's Customer Service Center team truly embodies all that this award seeks to recognizeuncommon dedication to VA's mission, demonstrated achievement and outstanding team effort led by caring and dedicated leaders," said Health Administration Center Director Mary Beth Saldin.

Phoenix VA Health Care System Director Appointed to Four Prestigious Boards

The first Hispanic medical center director/health care system administrator of the Phoenix VA Health Care System, Gabriel Pérez, has been appointed to four prestigious posts for 2010.

Pérez has been named as the national president and chairman of the board of the National Forum for Latino Healthcare Executives. The mission of the NFLHE is to increase the representation of



Gabriel Pérez

Latinos at the executive level of U.S. hospitals and health systems and to provide a resource base of input from Latino executives in the areas of legislation, regulation and policy affecting the health and health care of U.S. Latino communities.

Other appointments include: the national board of the Institute for Diversity in Health Management, an affiliate of the American Hospital Association; the Arizona governor's team to represent the state at the 2010 "Returning Service Members, Veterans and their Families" policy academy in Washington, D.C., in June; and Phoenix city commissioner to the Sister Cities Commission, which creates and nourishes relationships between Phoenix and its sister cities.

Houston, Shreveport VAMCs Awarded Three Green Globes by Green Building Initiative

The Green Building Initiative recently awarded three Green Globe awards each to the Michael E. DeBakey VA Medical Center in Houston and the Overton Brooks VA Medical Center in Shreveport, La., for leadership in energy and environmental efficiency. The Green Globe awards encourage building owners to identify high-performing buildings in energy and environmental efficiency.

The program assigns points to various assessment areas and serves as a yardstick for measuring environmental and energy performance. The DeBakey VA Medical Center received a combined 757.5 points in the areas of energy, water, resources, emissions, indoor environment, and environmental management system documentation.

Overton Brooks is the only hospital in Louisiana to receive the designation. The Shreveport medical center also received "Energy Star" certification last year and is expecting the award again this year. VA hospitals must incorporate sustainable practices in 15 percent of their buildings by 2015.

Public Affairs Officer Elected Committee Chair of Professional Organization's Health Academy

Phoenix VA Health Care System Public Affairs Officer Paula L. Pedene has been elected executive committee chair of the Health Academy of the Public Relations Society of America for 2010. With approximately 800 members, the Health Academy is PRSA's largest Professional Interest Section, and the largest network of health care public relations and communications professionals in the world.

"The health care system is experiencing unprecedented change, and public relations professionals are facing unique communications challenges and opportunities," said Pedene.

"I am confident that the talented and diverse group of communication leaders represented on our executive committee can provide the best tools to help our members succeed in addressing these challenges."

The Health Academy promotes excellence in communications and an educational dialogue across the entire health care industry, enhancing the professional development and career growth of its members.

South Carolina Nurses Bring Home the Palmetto Gold Award for Commitment and Excellence

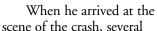
Ten South Carolina nurses were recently awarded the Palmetto Gold Award for their excellence and commitment to the nursing profession. Each year, the Nurse Recognition and Scholarship Program salutes 100 nurses from across

South Carolina with the Palmetto Gold Award. This year, each facility was limited to submitting five nominations for the prestigious award.

The Columbia and Charleston VA Medical Centers both batted a thousand, with all of their nominees bringing home the award, leading to a 10 percent sweep across the state. Receiving the awards were nurses Tammy Williams, Susan Finley, David George, Cynthia Brown, and Sandra Norcross, all of the Columbia VAMC; and Linda Victurine, Cheryl Pratt, Letha Rogers, Pamela Meadows and Rebecca Tiffault, from the Charleston VAMC. This year's winners were honored at a formal reception in Columbia on April 24.

Dentist Saves Motorcycle Crash Victim

Harry Gilbert, chief of Dental Service at the Michael E. DeBakey VA Medical Center in Houston, was at his beach house on Galveston Island when he heard the sounds of a motorcycle followed by a crash in the vicinity of a nearby bridge. He got in his car and drove in the direction of the noise. While en route he saw other people running in the same direction.





When he arrived on the scene of an accident near his beach home, Dr. Harry Gilbert took charge and began life-saving measures.

people who had already arrived were attempting to perform CPR on the victim. Gilbert noticed that they seemed disorganized and unsure of what they should do. Gilbert felt for a pulse and assessed the victim's breathing; the man did not have a pulse, he wasn't breathing, and he was bleeding from one of his ears. Gilbert opened the man's airway, began CPR and gave some initial supportive breathing. He continued CPR until an emergency crew arrived by helicopter to transport the victim to a hospital. The young man and his wife later expressed their appreciation to Gilbert for saving his life.

Nurse Helps World War II Veteran Hit by a Truck

Michael Bethel, R.N., nurse manager at the VA Central California Healthcare System in Fresno, was walking outside the medical center when he saw a World War II veteran get hit by a truck while crossing the street. As the first responder, Bethel instructed the veteran not to move while he checked for signs of serious injury. The truck driver stopped and directed traffic until police and an ambulance crew arrived. The veteran, who kept trying to get up, had to be gently restrained because of



Michael Bethel's quick actions helped prevent further injury to the elderly man.

head trauma and complaints of pain.

Bethel kept the veteran safe from further injury while administering basic first aid and reporting his observations to the ambulance crew. Bethel's quick actions were witnessed by several pedestrians in the area, including the veteran's family, who told emergency responders that Bethel's ability to take control of the scene while calming the veteran made the difference in preventing further injury.

Physician Aids Assault Victim

Dr. Shawn Cole, a primary care physician with the VA Connecticut Healthcare System in West Haven, came to the aid of a woman who was being assaulted on the campus of a nearby university. Cole heard the woman yell for help as he was walking to the VA shuttle bus stop after completing a physical examination session he regularly tutors with medical students. He began running toward the screams, yelling to the victim that he was on his way to help.



Shawn Cole, M.D.

As he approached, the assailant began running away. Cole chased the man for several blocks, all the while yelling for bystanders to call 911. A lifelong martial artist, Cole said he hoped to detain the man long enough for police to intervene. Cole caught the man and restrained him until police arrived minutes later.

Asked why he responded when other bystanders could have assisted the victim, Cole said, "As I have replayed the events of that day, I honestly would react in the same manner if another unfortunate situation presented itself. I only feel horrible about what the poor woman had to go through." Cole added that her brave screams for help interrupted the attack long enough for someone to intervene.

