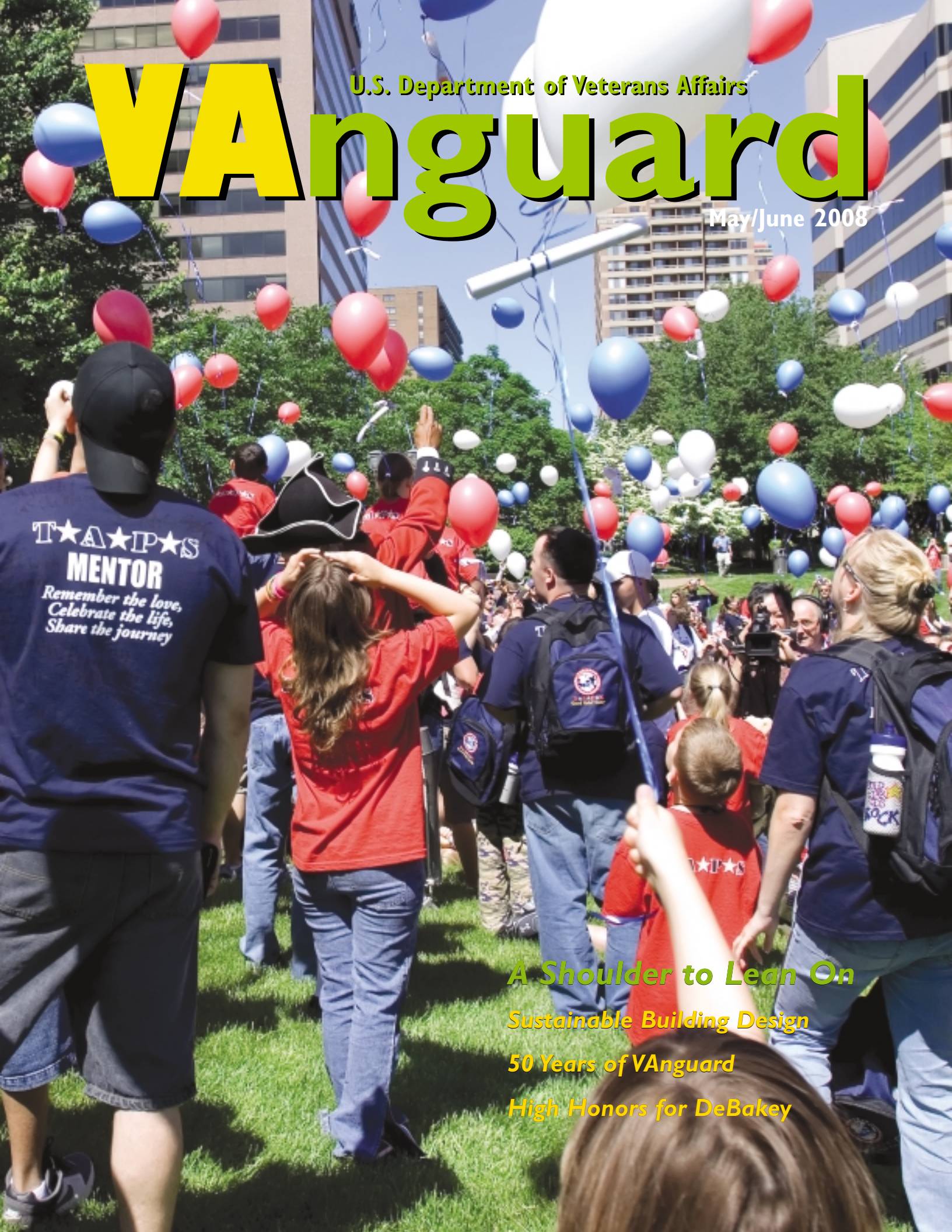


U.S. Department of Veterans Affairs

# Vanguard

May/June 2008



T★A★I★P★S  
MENTOR  
*Remember the love,  
Celebrate the life,  
Share the journey*

*A Shoulder to Lean On  
Sustainable Building Design  
50 Years of Vanguard  
High Honors for DeBakey*



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### Vanguard

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### On the cover

Participants in the Tragedy Assistance Program for Survivors (TAPS) Good Grief Camp for Young Survivors released balloons into the air as part of their healing process during TAPS' 14th Annual National Seminar in Crystal City, Va. The Pentagon granted special permission, and flight paths to and from Ronald Reagan Washington National Airport were altered to accommodate the ceremony. Handwritten notes addressed to lost loved ones were attached to the balloons. *photo by Art Gardiner*

### Appreciation to a VA Employee

VA is enormous, and it appears to be difficult to contact the appropriate administrative personnel to express my appreciation for a somewhat rare and very much appreciated act by a VA employee. It would be very much appreciated if you could award a very kind and honest act within your publication, as it is my belief the following most certainly deserves proper recognition.

I have been a patient at the G.V. (Sonny) Montgomery VA Medical Center in Jackson, Miss., since 2003. On April 17, I had a scheduled appointment for an MRI. This procedure, due to the location of my MRI, required that I remove all jewelry, my belt, and any other personal effects that could interfere with the test. I did so, had the test, and left the facility.

Almost an hour later, I noticed I was missing two diamond rings, both custom-made and very special to this veteran. I remembered I had left them in a plastic basket in the MRI examination room

and automatically feared the worst. Not to question the honesty of any one person or establishment, but today's society has taught us to expect the worst from our peers rather than the best, even though we hope for the best.

In a panic, I contacted the MRI department of the VA facility at approximately the time that day's shift ended. I spoke to a very sweet young lady who stated she had discovered the two diamond rings in the MRI room as she was cleaning up at the end of the day, traced them back to me, and they had been given to an administrative employee who had left for the day but had placed them under lock and key.

The next morning, I picked up my rings from the MRI department's administrator and asked to meet the young lady whose honesty will leave a lasting impression upon this aging veteran. May I mention that retail on these two rings is greater than \$10,000? My sincere appreciation to MRI Technician Delecia Perry, a very humble and truly honest government

employee who, if I had any control over the process, would indeed receive an honor, or at least an honorable mention within *Vanguard*.

My thanks to Delecia and the G.V. (Sonny) Montgomery VA Medical Center.

*William C. Smith  
Patient/Vietnam Veteran  
Jackson VAMC*

### Cancer Killers

Little did I know 43 years ago when I enlisted in the Army that I would appreciate the services of VA. After all, I was a healthy young stud with the whole world in front of me. Little did I know one year ago that I would be writing this letter to thank VA for single-handedly wiping out the cancer that threatened to deprive me of my golden years.

When I was diagnosed with Stage 4 non-Hodgkin lymphoma in the form of a grapefruit-sized tumor in my lower abdomen, I was understandably stunned. But thanks to Dr. Lewis Slater, head of hematology at the Long Beach, Calif., VA Medical Center, and his expert staff of doctors, nurses and pharmacists, the nine chemotherapy treatments, CAT scans, PET scans and myriad blood tests proved lifesaving.

Today, I am cancer-free, or in remission. I hope that

my experience with VA and its excellent health care system will serve as a beacon of hope and inspiration for others suffering from the dreaded disease. Let it demonstrate that, while absolute cures are still on the horizon, there are remarkable medical advancements that VA is bringing to the table. It proves that the "C" word no longer equates to gloom and doom.

*Les Goldberg  
Patient  
Long Beach VAMC*

### Patients Read Vanguard, Too

I want to tell you what an interesting magazine you publish. *Vanguard* is often in the waiting areas of the Iron Mountain, Mich., VA Medical Center. I have just finished reading the November/December 2007 issue.

Your stories are of interest to patients, too, not just to employees. The stories are timely and topical. The writing is crisp and clear. The photos and layout give an overall professional appearance to the publication.

Sometimes I share the magazine with my fellow members of the county veterans council.

*Phillip Solom  
Patient/Vietnam Veteran  
Iron Mountain VAMC*

## VA Facts on Demand

Talking to a local group? Responding to a question? Preparing for a meeting? You just might need a copy of a newly updated three-fold, single-sheet pamphlet put out by the Office of the Assistant Secretary for Policy and Planning. The sheet is a cram course on VA with current facts and statistics covering benefits, health care and memorial affairs, plus a look at the veteran population and VA's focus on OEF/OIF veterans. All that on both sides of a standard letter-sized sheet folded to pocket size; there's even a section listing toll-free help and information phone numbers.

Policy and Planning's National Center for Veterans Analysis and Statistics provided the information and plans to update the pamphlet annually. Download it from the Web at [www.va.gov/vetdata/docs/Pamphlet\\_2-1-08.pdf](http://www.va.gov/vetdata/docs/Pamphlet_2-1-08.pdf) and print locally as needed.

## We Want to Hear from You

Have a comment on something you've seen in *Vanguard*? We invite reader feedback. Send your comments to [vanguard@va.gov](mailto:vanguard@va.gov). You can also write to us at: *Vanguard*, Office of Public Affairs (80D), Department of Veterans Affairs, 810 Vermont Ave., N.W., Washington, D.C., 20420. Include your name, title and VA facility. We won't be able to publish every letter, but we'll use representative ones. We may need to edit your letter for length or clarity.



## Keeping Our Promise to Reach Out to OEF/OIF Veterans

James B. Peake, M.D.  
Secretary of Veterans Affairs

On May 2, I sat down at my desk in VA headquarters and called Andrew Neumeayer, a 28-year-old Operation Iraqi Freedom veteran living in Milwaukee. Andrew was an Army National Guardsman on duty in Iraq almost two years ago when injured by mortar fire. This kicked off a telephone outreach campaign to highlight VA services available to our returning combat veterans.

I asked him how he was doing; whether he had visited the Milwaukee VA Medical Center—he had; how he liked his treatment there—he said it was fine; and whether he had been assigned a care manager—he had. “Whenever I need anything, I just call her,” he told me.

I then handed Andrew over to a call manager who discussed a number of other questions with him to make sure he was aware of what VA has to offer and how he can access VA services if and when needed. I stayed on the line and heard more good news—Andrew said he was planning to be married in November and that he now has his driver’s license back with restrictions due to his eye loss.

I enjoyed that call. It was good to hear that this young combat veteran was plugged into our system, getting good service and working with a VA care manager dedicated to making sure that service continues to meet his needs.

And it was good to be at the start of something big and something quite new for VA—phone calls to more than

500,000 recent combat veterans to ensure they know about VA medical services and other benefits.

First, we (our contractor-operated Combat Veteran Call Center) will call some 17,000 veterans we know were sick or injured while serving in Iraq, like Andrew. We will offer to appoint a care manager to work with them if, unlike Andrew, they don’t already have one. Care managers make sure

**One of the main messages our callers will deliver is that these combat veterans have special access to VA health care for five years.**

“their” veterans receive health care and know how to access their other benefits; they stay with the veteran for the long haul.

One of the main messages our callers will deliver is that these combat veterans have special access to VA health care for five years—an increase from two—and that when they do visit a VA medical facility they will be screened for signs of traumatic brain injury and post-traumatic stress disorder.

Making sure these veterans know we are there for them in their communities is the right thing to do. Connecting with them in a meaningful way and offering services now that may prevent or mitigate long-term problems is good medicine. Building a real relationship with each of them will serve these veterans and us well through the years.

The second phase of the call center program will target

more than 500,000 Operation Enduring Freedom/Operation Iraqi Freedom veterans discharged from active duty who have not contacted VA.

I’ve been asked if we are creating a two-tier system of care for veterans—a priority system for OEF/OIF veterans and a lower level of service for older generations of veterans.

My short answer is “no.” We in VA are obligated to offer all veterans the care they

fresh generation of combat veterans who will make up the major part of our veteran population for the next 60 years. They have different needs from their predecessors. It’s clear we learned lessons after Vietnam. Now is the time to put those lessons to work.

This is an important thing for VA to do. It’s good for the veterans. I am confident we are capable of handling any workload surges that

need, when they need it, in a manner that will make their lives better in the future.

We are dealing with a

may result, and will reduce or eliminate many long-term problems and crises by acting now. [VA](#)



ROBERT TURTEL

Secretary Peake places a call to an injured Operation Iraqi Freedom veteran in his office on May 2. His call kicked off an outreach campaign to highlight VA services available to returning combat veterans. In the first phase of the campaign, some 17,000 OEF/OIF veterans identified as being ill or injured are being called and offered a care manager to work with them if they do not already have one. The second phase involves calling more than 500,000 OEF/OIF veterans discharged from active duty who have not contacted VA for health care and informing them of the benefits and services available to them.



## Protecting Sensitive Information Remains a Top Priority

Robert T. Howard

Assistant Secretary for Information & Technology and Chief Information Officer

Protecting sensitive information remains a top priority for VA. Highlighted as one of the five principal objectives in the fiscal year 2006-2011 VA Strategic Plan, it is a high priority for all VA employees, volunteers, supporting contractors and anyone who handles the sensitive information of veterans or VA employees.

A major crisis for VA, and a turning point for the protection of sensitive information, was the May 2006 theft of a laptop, which led to the temporary loss of personally identifiable information (PII) of up to 17.5 million veterans, spouses and some active duty personnel. Although the FBI confirmed that PII was never accessed, it was a wake-up call, not only for VA, but also for the entire federal government and private sector. As a result of that incident, VA began to improve its information security posture and create an environment that better protects the sensitive information entrusted to VA.

Clearly, the establishment of a "Single Authority for Information and Technology (IT)" within VA has had a positive impact with regard to the protection of sensitive information. The decision to begin IT consolidation had been made prior to the May 2006 loss, but that event accelerated the move to complete centralization and a much expanded IT organization (more than 6,500 employees). The centralization has been most helpful in the implementation of a wide variety of activities oriented to establishing a more

secure environment throughout VA.

The newly established Information Protection and Risk Management office within OI&T is dedicated to improving VA's overall data security posture. That office is examining every aspect of the Department's information protection in cyber security, privacy, records management, incident response, field security and business continuity to ensure that sensitive protected information, primarily PII and protected health information (PHI), is not compromised.

**There are a variety of aggressive and effective programs that will ultimately help achieve the 'gold standard' in data security.**

The goal is to protect the integrity, authenticity and confidentiality of sensitive information. VA is committed to ensuring that data is protected from unauthorized access, modification, destruction, disclosure or disposal, at the same time making it readily available to those who are authorized to use it.

One of the most important initiatives we've taken to create a robust information security environment is a comprehensive action plan called *Data Security-Assessment and Strengthening of Controls*. The plan includes several hundred specific actions in three key areas: managerial (policies and directives); technical (better software tools and equipment such as encrypted thumb drives); and operational (such as improved employee train-

ing).

We published VA Handbook 6500, the VA Information Security Program, last September—an especially important action. It contains procedural and operational requirements to ensure compliance with the Federal Information Security Management Act of 2002 (FISMA) and information security provisions of Title 38 of the U.S. Code, and also ensure the security of information systems administered by or on behalf of VA.

The handbook also includes the National Rules of

technologies that have passed rigorous government testing requirements and comply with mandates, regulations and standards.

We have also made substantial improvements in internal assessments of compliance with Handbook 6500. With a comprehensive checklist, the Information Technology Oversight & Compliance program of 24 to 30 assessments per month is far more aggressive than the two per month of the past. The program is working Department-wide to correct deficiencies

Behavior—a document all employees must sign before they are given access to VA computer systems and sensitive information.

Our incident response program has been substantially improved. Incidents of possible exposure of sensitive information are quickly reported from the field, documented and assessed for possible follow-up. Simultaneously, notification is sent to the U.S. Computer Emergency Response Team (US-CERT), a requirement that all federal agencies must comply with.

Over the past two years, we have focused on providing better software tools and protected equipment that help to improve security when used properly. From laptop encryption to port monitoring software, we use many different

found by the Inspector General and General Accounting Office and to improve VA's FISMA compliance. It works with each VA administration and staff office to promote an environment of protection for sensitive information.

There are a variety of aggressive and effective programs that will ultimately help achieve the "gold standard" in data security. Much more remains to be done, but VA leaders are committed to working toward achieving this standard. And employees throughout VA increasingly recognize the need to establish a world-class information protection environment in which sensitive information of veterans and employees, and all sensitive information entrusted to VA, will be fully safeguarded. **VA**

# A Working Partnership

VA's Vocational Rehabilitation and Employment program teams with nonprofit, faith-based and community organizations to change lives.

Carl Walker was hesitant about starting a new career at age 54, but the self-employed contractor who specialized in remodeling apartments and homes knew that type of work was hard on his body.

"With my back problems and bad knees, the job was becoming a little too much," said Walker.

Walker realized that he had come to a fork in the road and decided to turn to VA's Vocational Rehabilitation and Employment (VR&E) program, whose primary mission is to help veterans who have service-connected disabilities become suitably employed, maintain employment, and achieve independence in daily living.

Walker, a Marine who spent a brief stint in Vietnam, traded hanging drywall for a managerial job at a Goodwill Industries retail store in the Atlanta area.

A quick study with a strong work ethic and winning personality, Walker excelled in the training program. In just four months, he went from being an intern in Goodwill's job resource training center to a permanent position as lead facilitator. Last December, Walker applied for a managerial position and he is now assistant manager at a Goodwill retail store in Covington, Ga.

Walker credits his success to his VR&E counselor. "I really appreciate what Roderick Cole did for me," he said. "He did not hesitate if someone was moving a little slow—he would contact them."

Cole worked diligently with Walker to develop a vocational reha-

bilitation goal. Various tests administered by VA and Goodwill revealed that Walker is customer service-oriented and "has a lot of people skills." Walker embraced Goodwill's values: respect, stewardship, ethics, learning and innovation, and in no time he attracted management's attention.

"After I got out of the Goodwill program, they would bring me back to be a motivational speaker," he said. "A lot of guys came in there saying, 'I don't think this program is going to help me.' So I tell them, 'Hey, look at me. I was sitting down there in that same seat where you are sitting. I moved up one step at a time, but you have to want to do this.'"

Walker knows that Goodwill is more than clothes and furniture. Last year, the international organization

that's been "putting people to work since 1902" provided employment and training services to more than 930,775 people, according to the organization's Web site.

Goodwill works closely with VR&E providing client services, evaluations, skills training and jobs.

"Goodwill has a long history of being associated with veterans since World War I," said Eric Olson, director of Workforce Development for Goodwill Industries International. "We believe our soldiers have a strong work ethic, and we reinvest those skills in the workforce. It is a good practice to support veterans."

In 2007, Goodwill, which has a network of 184 independent, community-based organizations in the U.S., Canada and 14 other countries, re-





*Navy veteran Walter Hall, an assistive technology navigator for Easter Seals, works with Shawn Hall, a traumatic brain injury client.*

played an important role in his ability to move from one job to another so easily.

He said the program “made me more employable,” allowing him to “bridge the gap by going back to school to get a degree” in business management and information systems.

“VR&E’s Chapter 31 program is probably one of the best programs around for a veteran with a disability who needs to rekindle or re-sharpen their tools to go back to work,” he said.

Todd Nichols is a purchasing manager for Habitat for Humanity in Jacksonville, Fla. The 20-year Navy veteran finds his new job to be a perfect fit compared to his last job at a for-profit business.

“I didn’t like the business ap-

ceived the first-ever VetSuccess.Gov Award from VA in the faith-based and community employer category. “It was a wonderful honor, an unexpected honor,” Olson said. “We value [partnerships] and are proud to talk about that.”

“If somebody would have told me two years ago that I’d be in the position that I’m in today, I don’t know if I would have believed them,” Walker said. “I’m thankful for the program and that VA and Goodwill collaborated.”

Twenty-year Navy veteran Walter Hall is an assistive technology navigator for Easter Seals of North Texas in Fort Worth. The former naval photographer worked as a case manager assisting Hurricane Katrina victims before coming to Easter Seals in December 2006, where he demonstrates assistive technology for people with disabilities.

“Our mission is to create an opportunity that will advance the independence of individuals with disabilities or special needs,” said Hall.

In January, Easter Seals launched a nationwide campaign to help veter-



*Navy veteran Todd Nichols, a purchasing manager for Habitat for Humanity, and purchasing assistant Patrick Madigan discuss their new paint mixing equipment at the main warehouse.*

ans returning from the wars in Afghanistan and Iraq suffering from traumatic brain injuries. The organization has been helping veterans with disabilities for nearly 90 years through job training and employment services. They help veterans learn skills to successfully enter the workforce, or to return to work after an illness or injury.

Hall believes that divine intervention, coupled with his military background, training and education,

proach of that company, so I fired them,” he joked.

As a worship pastor while in the Navy, Nichols wanted to work for a company where he “could be a blessing to other people,” instead of focusing on profits and a company’s bottom line.

“It’s very gratifying working for Habitat,” said Nichols, whose Jacksonville location builds about 100 homes a year, using a combination of

## Putting Veterans to Work Serving Their Communities

VA's Vocational Rehabilitation and Employment (VR&E) counselors help eligible veterans develop an individualized plan and select from one of five employment tracks: reemployment; rapid access to employment; self-employment; independent living services; and employment through long-term services.

"Every service-connected disabled veteran who applies to our program is provided a comprehensive vocational evaluation conducted by a professional rehabilitation counselor," VR&E Director Ruth Fanning explained. The VR&E counselor identifies the veteran's interests, aptitudes and abilities, conducts a needs assessment, develops detailed rehabilitation plans with various employment options, and helps the veteran implement a customized employment plan.

The VR&E program and VA's Center for Faith-Based and Community Initiatives (CFBCI) are working together to strengthen and expand partnership opportunities to better serve veterans looking for a new and rewarding career.

In an effort to help disabled veterans find jobs, VA created FBCI = VetSuccess, a program designed to encourage nonprofit, faith-based and community organizations to form partnerships with VR&E. Currently, VR&E partners with more than a dozen nonprofits and faith-based and community organizations to provide service-connected veterans with the training and skills they need to compete in today's competitive job market.

"For decades, faith-based and community organizations have provided assistance, support and help to America's heroes," said Darin Selnick, director of VA's CFBCI. "We work with a variety of nonprofits, faith-based and community-based groups, veterans service organizations and foundations across the country to fulfill VA's mission."

In 2005, the FBCI = VetSuccess program debuted with the announcement that VR&E and the YMCA of the USA developed a Memorandum of Understanding (MOU) and

formed partnerships with YMCAs in Montgomery, Ala.; Seattle; Detroit; St. Louis; Atlanta; Indianapolis; St. Petersburg, Fla.; and Oakland, Calif. (Sacramento location). The MOU cemented a partnership that had been in existence for several years. VR&E has also signed MOUs with Disabled American Veterans, Goodwill Industries International, and Jewish Vocational Services.

"Faith-based and community organizations can participate in FBCI = VetSuccess by hiring and identifying service-connected disabled veterans within their organization and community that are unemployed or under-employed or may need supportive services and inform them about this initiative," said Selnick.

Nonprofit, faith-based and community partners provide a variety of services, ranging from building homes to providing job training to the disabled and handicapped, and much more. One of the newest partners is Hire Heroes USA, a national nonprofit organization providing career placement assistance to disabled Operation Enduring Freedom and Operation Iraqi Freedom veterans.

"Employers continue to recognize the untapped labor pool in VR&E. Faith-based and community organization employers are hiring our skilled VR&E veterans who are dedicated to a new mission of serving their communities," said Fanning. In fiscal year 2007, faith-based and community organizations hired 673 VR&E veterans, earning an average monthly income of \$2,662, compared to 591 veterans in fiscal year 2006 with average monthly wages of \$2,580, and 362 in fiscal year 2005. Both the number of employers and the number of veterans invested in the program nearly doubled between fiscal years 2005 and 2007.

To learn more about VA's VR&E program, go to: [www.vba.va.gov](http://www.vba.va.gov); for more on VA's Center for Faith-Based and Community Initiatives, go to: [www.va.gov/fbci](http://www.va.gov/fbci) or call 202-461-7689.

vendors and volunteers, and is ranked the second largest Habitat affiliate. Responsible for an approximately \$8.5 million purchasing budget, Nichols started out as construction superintendent and was promoted to purchasing manager about six months later.

"My Navy experience taught me a lot about managing people, materials and budgeting, but I didn't have any experience as a purchasing manager," he said. "This program has given me an opportunity to grow and

learn skills that would have been very difficult for me to learn in a profit-sector construction company. I would have needed to show up there with the skills that I've been able to learn on the job here."

Nichols recently completed a Master of Business Administration program with an emphasis in Public Administration.

Habitat for Humanity International has built more than 250,000 houses worldwide, and provided more than 1 million people in more than

3,000 communities with safe, decent and affordable shelter.

Although Walker, Hall and Nichols are geographically separated by hundreds of miles and have vastly different careers, the trio shares a common bond—the VR&E program. All three applied for the program not knowing where the road would lead them. But to their delight, the journey has been rewarding and life-changing. **VA**

By Wanda D. Patrick



# Finding a Federal Family

The generosity and support of her co-workers gave a new employee the resources and strength she needed to care for her injured son. Now she has a renewed focus on serving veterans.

Lenora “Sue” Tewksbary left her job with a private law practice in October 2007 seeking the stability and benefits that come with federal employment. Working at the Cleveland VA Regional Office seemed like a natural fit for Tewksbary—her own son was serving in Afghanistan at the time.

“I had a hard time with my son being deployed,” Tewksbary said. “I thought that by working for the VA, I would be able to help veterans like my son.”

Tewksbary had no idea at that time just how immersed she would become in helping veterans like her son. Less than a month after starting her new career, while she was still in training for the job, Tewksbary received the dreaded call that haunts every parent’s dreams. The Department of Defense informed her that her son, Army Pfc. Justin Kalenits, had been shot and was in critical condition.

Tewksbary learned later that an ambush on a cliff in the Waygol Valley of Afghanistan left six of 12 soldiers in the 173rd Infantry Brigade

dead. The other half, including her son, were left injured and fighting for their lives. Over several hours the small element banded together and fired every round of ammunition, all while

round shattered his pelvis. Kalenits was in jeopardy of bleeding to death. He was placed on a ventilator immediately upon evacuation due to the

massive blood loss endured in the fighting.

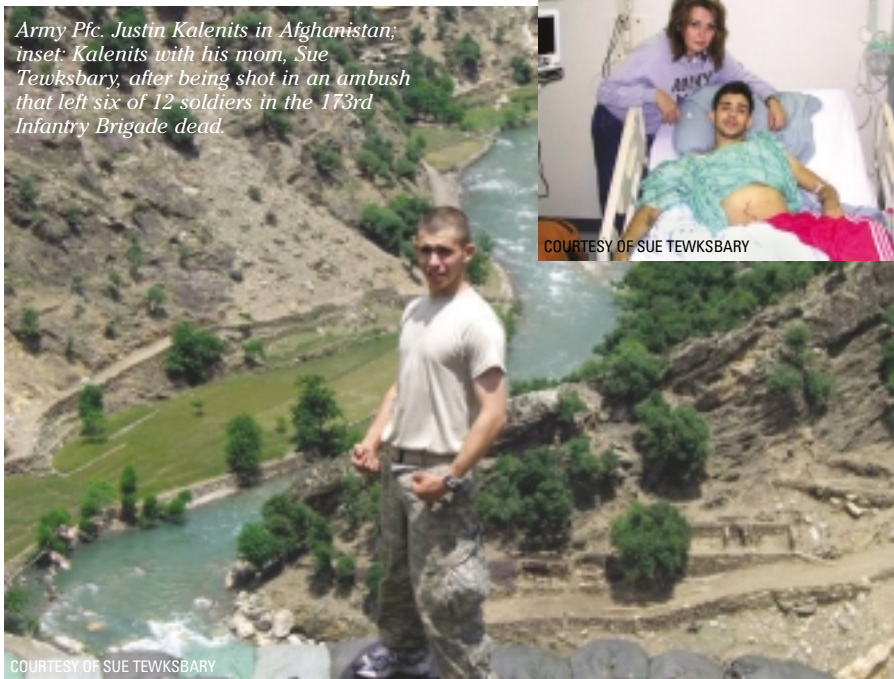
“I got the call and found out my son was very seriously injured,”

Tewksbary said. “They asked me if I could go to Germany to be with him, and of course I said yes.”

The following Monday, Tewksbary and Kalenits were on separate planes to Landstuhl, Germany. One,

in critical condition, receiving a Purple Heart while unconscious, the other sick with worry about her son and unsure what would happen with the job she had just started.

*Army Pfc. Justin Kalenits in Afghanistan; inset: Kalenits with his mom, Sue Tewksbary, after being shot in an ambush that left six of 12 soldiers in the 173rd Infantry Brigade dead.*



treating the wounded.

Kalenits was the most seriously injured. A bullet had knocked off his helmet and he was shot several other times in his body armor, but one

“Before leaving, I was trying to find somebody at VA to contact,” Tewksbary said. “I was new so I didn’t know what to do in this situation, but I had to be with him. I finally tracked down my trainer, Sean Ennis, and said, ‘My son was shot. I need to go to Germany.’ He said, ‘By all means go.’ He would tell the director and they would contact me. They made everything so easy for me and I hadn’t been there even a month.”

Tewksbary’s job worries were soon put to rest. She found out that Thursday, three long days after leaving Cleveland, that she had been ap-

would expect like, ‘Go be with your son and give us a call when you get back into town and we’ll see if there is an opening for you.’ I thought that would have been a reasonable response.”

Instead, Tewksbary was placed in the VA Voluntary Leave Transfer Program, which allows employees who are experiencing a medical emergency and who have exhausted their annual and sick leave balances to receive annual leave donations from fellow employees. Tewksbary did not have sick or annual leave saved and through the efforts of her trainer, supervisor

and director, she was approved for the program quickly and the hours started pouring in.

Initially, Tewksbary was told to expect to be gone only two to four weeks for her son’s recovery. But when the two arrived at Walter Reed Army Medical Center in Washington, D.C., it soon became abundantly clear the stay would be far longer. Kalenits needed help getting around in his wheelchair. He was also having problems with memory, and experiencing vertigo, blurred vision and panic attacks.

“Just getting in and out of bed, using a wheelchair to get back and forth from the hotel to his four or five appointments a day at Walter Reed, he just wasn’t in any condition to do that by himself,” said Tewksbary. “So I stayed. I stayed until January 22.”

Each day was full of the challenges veterans face rehabilitating from wounds and injuries, and Tewksbary experienced them all up close, and at times, far too personally. The hill leading from Walter Reed to the Mologne House where Kalenits stayed became a daily trial that symbolized the entire process for mother and son.

“We called it ‘Hooah Hill,’”



COURTESY OF SUE TEWKSBAR

*Above and right: Kalenits was the most seriously injured of the six soldiers who survived the ambush on a cliff in the Waygol Valley. He was in danger of bleeding to death and was placed on a ventilator immediately upon evacuation. Soon after Kalenits and his mother arrived at Walter Reed Army Medical Center in Washington, D.C., from Landstuhl, Germany, they realized his stay would be far longer than they anticipated, and he would need lots of help.*

proved for VA’s leave donation program.

“I still have the e-mail from the director (Joyce Cange) saying, ‘Be with your son. We’ve put you in the VA Voluntary Leave Transfer Program and we’ll see if we can get leave donations for you,’” said Tewksbary. “I was just thrilled to get that e-mail. I thought when I called VA their response would be the typical response I



COURTESY OF SUE TEWKSBAR

Tewksbary said. “It was impossible at first and took so much effort. We would yell ‘Hooah!’ together every time we managed to get up it. It was little things like that that kept us going.”

Little things, and the regular support and communication Tewksbary received from VA. As weeks turned into months away from work, the natural tendency would have been to worry about the job back home, but regular e-mails from her supervisor, Todd Weber, kept Tewksbary assured that she still had plenty of hours to help her son.

Tewksbary’s story was also circulated by Allison Strickland, who had trained with her, in e-mails, newsletters and updates at several facilities, resulting in an unprecedented outpouring of generosity. Tewksbary received a total of nearly 1,013 hours from fellow VA employees.

“I didn’t miss a paycheck,” she said. “As a new employee I was receiving as many e-mails from VA employees as I was from my family. It was just a wonderful outpouring of concern and support. I remember one tearful day at Walter Reed when I was

**“As a new employee I was receiving as many e-mails from VA employees as I was from my family. It was just a wonderful outpouring of concern and support.”**

at my limit and I saw the VA office. I went in and Kathleen Dinegar (a social worker) listened to me. I really felt like part of the VA family.”

The donations went well beyond leave and even a shoulder to cry on. The Cleveland VA Regional Office adopted Tewksbary and Kalenits for Christmas, replacing a digital camera and portable gaming system Kalenits had left in Afghanistan and providing Tewksbary with some welcome relief in the form of a gift certificate to a popular spa.

“This never would have happened where I was working [before],”

Tewksbary said. “I wouldn’t have been able to get the leave time, let alone all of the support and well wishes. I’ve never been so proud of where I work and the people I work with.”

Tewksbary returned home to VA three months after leaving to be with her son and has since completed her training. She now works as a legal administrative specialist on the phones at the Cleveland VA Regional Office’s virtual information center.

“I love this job,” Tewksbary said. “A lot of people told me when I first came on that there would be angry vets eager to scream at me, but this experience has definitely given me what I need to be really kind and understanding with veterans. So far, I have been really good at diffusing the anger and it’s very fulfilling.”

Looking back at her decision that fateful October morning to leave the law practice where she had worked for 18 years, Tewksbary still can’t believe how much her life has changed for the better because of the place where she now works.

“The people I work with are amazing,” Tewksbary said. “Both classes that I trained with are wonder-

ful people, the supervisors are wonderful. I haven’t met anyone in this regional office that I wouldn’t be happy to have in my home for dinner. I feel welcomed back in such an emotional way by people that didn’t even know me except by my story. When I returned, Chuck Bonsell, my new boss, personally welcomed me without ever having met me. That is simply incredible. This is my career choice and it’s also now my family.”

Tewksbary’s welcome at the regional office wasn’t just perception, either. Cange, the facility director, coordinated much of the leave and

other efforts to support Tewksbary during Kalenits’ rehabilitation. She said she didn’t hesitate for a moment to approve the new employee’s entry into the leave program, recognizing it as exemplary of the kind of service VA strives to provide veterans. She’s also noticed the quality employee the experience has helped make out of Tewksbary.

“Since Sue’s return she has successfully completed all her training and is even more focused on providing accurate and timely service in a compassionate and respectful manner,” said Cange. “She is doing a great job. Locally, we are using Sue and Justin’s story to remind all of our employees why we are here: ‘To care for him who shall have borne the battle and for his widow and his orphan.’”

And as for Kalenits? As painful as it is for him to leave the Army, he is looking toward the future as a civilian. He is one of the first to process through the new fast track rating system for veterans entering into the VA system from DoD.

While at Walter Reed, VA’s Vocational Rehabilitation and Employment Counselor Jeannie Lehowicz enrolled Kalenits, 24, in an education track. With VA assistance, Kalenits will attend Cleveland State University with hopes of one day being a physical therapist or a psychologist, possibly with VA. Given his rehabilitation experience, he believes his contributions will make a difference.

“My son and I have been touched so much not only by the generosity of donated leave, but also through the prayers and the fundraisers from fellow VA employees,” said Tewksbary. Justin kept asking me at Walter Reed if I would lose my job and if I would be okay with money. I told him about the Leave Transfer Program. This was a real gift for both of us—peace of mind.”

Welcome to VA, Sue: Hooah! 

By Shannon Lehnbeuter and Ryan Steinbach

# Wanted: Nurses Looking for Adventure

The VA Travel Nurse Corps offers nurses a chance to see the country while fulfilling their career goals.

“Oh, I’m a travelin’ man.” Or maybe I’m a travelin’ woman. If you’re a nurse, you can start humming “I’m a travelin’ nurse”—at least you can if you’re working for the Department of Veterans Affairs.

To put a new twist on an old advertising slogan: “See the U-S-A, Join V-A’s Travel Nurses Today.”

Thanks to a new program launched nationally by VA, the Travel Nurse Corps will provide the means, the pay and the place for nurses to travel while fulfilling their career goals.

The goals of the Travel Nurse Corps include maintaining high standards of quality care and patient safety; improving recruitment of new nurses into the VA system; improving retention by decreasing turnover of newly recruited nurses; and providing alternatives for experienced nurses considering leaving the VA system.

The group also hopes to establish a potential pool for national emergency preparedness efforts, serve as a model for an expanded multi-disciplinary VA travel

corps, and reduce the use of outside supplemental staffing at the lowest possible cost to VA.

The first two nurses were both re-

cruited to the Phoenix VA Health Care System. One comes from the eastern part of the country, the other from the west.

*Cindy Cino, R.N., left her 550-acre ranch in Central Florida to join the VA Travel Nurse Corps.*



BRUCE BOWENS

Cindy Cino, R.N., is from the small town of Inglis, Fla., near Orlando; Tim McGhee, R.N., is from Golden Valley, Ariz., near Bullhead City. After completing a tailor-made orientation program, Cino is now working in long-term care, while McGhee is working in the emergency department.

“What I like about working within the VA system is that it is consistent throughout the country,” says McGhee. “After working in the private sector, I’m amazed at VA’s advanced electronic medical record and state-of-the-art computer systems.”

McGhee heard about the Travel Nurse Corps at a recruiting fair in Las Vegas.

“I’ve met numerous



*"I liked the idea of giving back to the men and women who have served our country," says Cino, who was recruited to work in long-term care at the Phoenix VA Health Care System.*

BRUCE BOWENS

nurses in just the last few weeks that have been with VA for more than 20 years, and I think there are good reasons for that," says McGhee. "The benefits, the staff, and caring for our nation's veterans are part of what VA uniquely has to offer. I'm just hoping to find a location that I want to be at, so that I too can look at VA as a future career."

"Since the actual shortage of nurses is the strongest in the hospital setting, I think that this job of serving veterans and helping to alleviate the nursing shortage one patient at a time by doing the best I can is what I can do at each location," says Cino.

"My husband and I are a long way from our 550-acre ranch in Central Florida," she added, "but we were always talking about traveling. It turned out that this opportunity worked for us and since he's happy with VA and I wanted to give back, this program is an ideal fit."

Cino heard about the program from her husband, a Vietnam veteran who receives VA health care and had the urge to travel.

"I liked the idea of giving back to the men and women who have served

our country," says Cino. "What I have found so far is wonderful support staff and true patriotism from the other employees. When it comes to health care, this travel nurse program has made us both feel young and excited about my nursing career."

VA's chief nursing officer, Cathy Rick, R.N., is pleased with the progress of this program.

"The staff joining the VA Travel

***"After working in the private sector, I'm amazed at VA's advanced electronic medical record and state-of-the-art computer systems."***

Nurse Corps are becoming key members of the talented group of professionals dedicated to our very special VA mission," says Rick. "The Travel Nurse Corps provides additional staffing options for our complex nationwide health care system with a continued focus on quality and safety to address supplemental staffing needs."

The program was launched in the summer of 2007 and is a joint effort between VA's Veterans Integrated Service Networks, Management Support Office and Office of Nursing.


Headquartered in Phoenix, the pilot program is slated to run three years and garners direction and guidance from a national steering committee. The VA travel nurses are compensated for their time on duty, travel and per diem allowances, which include lodging, meals and incidentals. They also get the adventure and flexibility of seeing the country while advancing their nursing careers. They do not participate in VA-sponsored life and health insurance, Thrift Savings Plan or retirement programs.

"We think this project will assist VA as we prepare for the future and meet the needs of many nurses interested in travel and the VA," says Jacqueline Jackson, Travel Nurse Corps director.

"This program is comparable and competitive with the private sector," she added. "Our health care system has state-of-the-art facilities, high-tech computer systems and professional colleagues second to none. VA is doing its best to create a vision for the future that can help us continue to provide the highest quality health care to our nation's veterans."

The VA Travel Nurse Corps program will eventually place as many as 100 nurses at VA medical centers across the country.

"We know that nursing can be challenging and rewarding wherever you go," says Jackson. "We're committed to making this program a win-win for all involved and to keep VA on the cutting edge of providing the best care possible to our nation's veterans."

For more information about the VA Travel Nurse Corps, visit the Web site at [www.travelnurse.va.gov](http://www.travelnurse.va.gov), e-mail [travelnurse@va.gov](mailto:travelnurse@va.gov) or call 866-664-1030 or 602-200-2398. 

By Paula L. Pedene

# A Sustainable Approach to Building Design



The VA regional office in Reno, Nev., is the first VA building to receive the LEED Silver certification for environmental design and energy efficiency.

SAEED NOORBAKSH

## The award-winning design of the Reno, Nev., VA Regional Office is a model for future energy efficient, environmentally friendly projects.

**K**ermit the Frog knows “it’s not easy being green,” but VA is making progress in “greening” its facilities—old and new. The Reno, Nev., VA Regional Office is the first VA facility to earn Silver certification from the Leadership in Energy and Environmental Design (LEED) program.

The 36,000 square-foot concrete building, which opened its doors to veterans on March 15, 2007, will save the facility an estimated 38 percent in annual operating costs.

Because of the arduous two-year application process, the two-story structure just received its certification in April. Although VA has been building Energy Star facilities since 2000, it now hopes to bring all new buildings to LEED status. In the Energy Star program, energy-efficient products are identified and promoted, with the goal of reducing greenhouse gas emissions. Although similar to the Energy Star certification, the LEED certification is more rigorous and strict, making it harder to achieve.

“LEED is rapidly becoming the

national norm in the design and construction industry for environmental and sustainable design,” said Leo Phelan, director of VBA’s Office of Facilities, Access and Administration. “With its commitment to energy, sustainability and local materials, LEED really is the wave of the future.”

Rating systems, which differ depending on the type and scope of the project, factor in such aspects as cost, feasibility, and owner’s commitment and requirements. Building types eligible for LEED certification include new construction, existing buildings, commercial interiors, core and shell, homes, and neighborhood development.

The Reno VARO facility, graded under the “new construction” rating system, met all seven prerequisites to be Silver-certified. To prevent false or exaggerated “green” building claims, the system calls for third-party verification of the design, construction and operation of the building.

Initial planning for a new VA facility begins three years before ground

is broken. Information is gathered about the potential site, along with data on the functions the new structure will perform and who it will serve. VA architects determine floor plan, finishes, layout, lighting, acoustics and other details to estimate funding costs.

Using the design-build process, VA architects complete 35 percent of the blue print, ensuring the Department’s requirements are met. Once approved by the Department, the VA architects work with local and national design firms to complete the project in compliance with industry norms and standards.

The Reno VARO’s state-of-the-art building has many features that make it a comprehensive energy saver. Tilt-up concrete walls, which are 7 inches thick, help insulate the building to keep heat inside during the winter and outside during the summer. Steel trusses and a pan roof system, along with the massive walls, help contribute to the heat loss and heat gain. The high-efficiency indirect lighting, which uses occupancy

sensors to ensure lights are turned off when not in use, reduces electricity consumption. Photo sensors known as “day-lighting” controls balance natural light from the outside with electrical lighting in the building, maintaining desired lighting levels in the space. Overall, the facility is expected to reduce energy use by 65 percent annually.

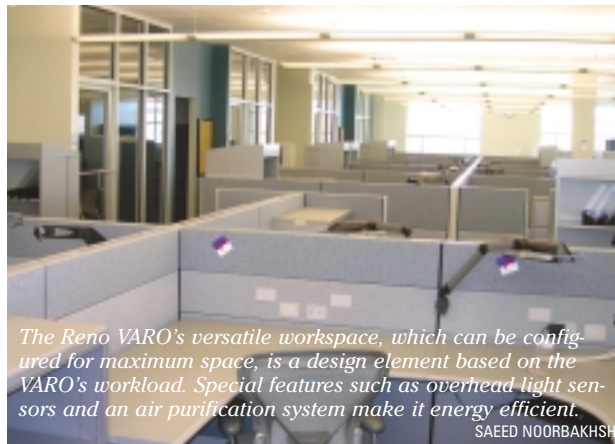
Light-colored roofing, commonly referred to as a “cool roof,” was installed to reflect the sun’s heat. Comprised of a white membrane layer, the roofing allows the surface to reflect the heat of the sun back to the sky instead of transferring it to the building below. In addition, the roofing system contains rigid R-30 insulation, twice that required by building codes. Standards on window types, size, and glass performance, all aimed at maximizing light penetration and minimizing glare, as well as high-efficiency glazing and exterior sun shades, help reduce heat gain and loss.

Internal design of the facility, with the VARO’s mission in mind, maximizes space while encouraging flexibility. The office layout uses fewer walls, rolling carts and staging areas for easy access to files. Easily changed and modified, the office adopted mobile files, eliminating the need for conventional vertical file cabinets, thus using less space while promoting teamwork and communications. Recycling of paper, glass, plastic, aluminum and cardboard is encouraged by placement of bins throughout the building.

A Building Automation System (BAS) keeps office air as clean as possible. The BAS controls the air conditioner’s outside dampers, helping regulate the amount of fresh air introduced into the building. Carbon dioxide sensors, placed throughout the

building, are monitored by the BAS; based on the readings, the dampers are adjusted for air quality.

Areas that involve chemical mixing, such as the copy rooms and janitor closets, are separately exhausted so no contaminated air can escape. Walk-off mats, installed at all regular entryways, prevent dirt and particulates from entering the building. In addition, all paint, coatings, adhesives, sealants and carpet systems in-



*The Reno VARO’s versatile workspace, which can be configured for maximum space, is a design element based on the VARO’s workload. Special features such as overhead light sensors and an air purification system make it energy efficient.*  
SAEED NOORBAKHS



*The employee break room’s walls depict various military medals; it was designed to remind employees of VA’s mission.*  
KATHLEEN TAYLOR

stalled in the facility are low-Volatile Organic Compounds (VOC) products, meaning they contain lower levels of carbon than other chemicals.

The commitment to the environment is evident in the structure’s design. Xeriscaping—landscaping that does not require supplemental irrigation or pesticides—means low-maintenance grounds. The use of local indigenous plants, such as sumac and red yucca, fits the climate. Native

plants reduce irrigation often required by conventional landscaping by 79 percent. Internally, the building is also doing its part to reduce water usage. Plumbing fixtures, such as low-flow lavatories, showers, sinks and water-free urinals, helped create a 43 percent reduction in overall usage.

Sustainability doesn’t end with the construction of the building. The VARO provides reserved parking for hybrid, carpool and vanpool vehicles, and promotes use of public transportation. A bus stop is located less than a mile from the facility, and two more stops are planned nearby. The VARO also offers on-site storage facilities and encourages bicycling.

More than 10 percent of the materials used in the facility’s construction came from recycled materials. Local companies manufactured 30 percent of the materials and approximately 70 percent were harvested or extracted within 50 miles of the site. This effort not only supports the local economy, but also cuts down on costs associated with transporting materials to the site.

Next in the works for LEED certification are the Fort Harrison, Mont., VA Regional Office and the Boise, Idaho, VA Regional Office. Already built, the Fort Harrison facility is preparing all required documents to apply for LEED certification and is expected to achieve certification by the end of the year. The Boise steel-constructed facility, which is seeking LEED Silver status like the Reno VARO, is currently under design. The proposed site, which sits atop a volcanic caldera, will be the only VA facility to highlight the use of geothermal energy. **VA**

*By Amanda Hester*

# 50

## Reflections from the Editor

Good circulation. Good color. Youthful appearance. Most who have worked hard for VA for 50 years can't make those claims. But *Vanguard*, VA's premier employee publication, can claim all of that and more.

The first issue of *Vanguard* was published on June 25, 1958. Back then it was a bi-weekly publication for employees cranked out by the VA Central Office Personnel Service.

*Vanguard's* predecessor was a small newsletter for headquarters employees. But the VA administrator at the time, Sumner G. Whittier, wanted to expand the newsletter and make it a more effective communications medium. He wanted it to be for and about VA employees nationwide, not just headquarters staff.

Hundreds of employees from all over the country submitted entries in a contest to name the redesigned employee publication. One eager employee submitted 40 entries. Eight employees suggested "Vanguard" and won \$25 each. Though a satellite by that name had been launched into space three months earlier (and celebrated its 50th anniversary in orbit on March 17), that wasn't the reason the name was chosen. "Vanguard" was selected by the panel of three judges because of its dictionary meaning of "foremost"—the "VA" part probably didn't hurt, either.

Whittier was a progressive administrator. Shortly after his appointment, he began an initiative that came to be known as "Operation Handshake." Its goal was simple: Whittier wanted to personally meet and shake the hand of every employee in headquarters. Each day, he would carve out a block of time to walk the halls. He took a similar approach when visiting field facilities. He did it to emphasize the importance of the individual in carrying out the mission of a large organization.

If you've ever been to Central Office, you have no doubt seen the metal plaques flanking the main entrance to the building on Vermont Avenue featuring the quote from President Lincoln's second inaugural address: "To care for him who shall have borne the battle and for his widow, and his orphan." It was Whittier who introduced that quote as VA's motto, and had those plaques installed to remind employees of the mission each time they entered the building.

A redesigned publication, Operation Handshake and the adoption of a motto were not the only employee-focused initiatives undertaken on Whittier's watch. He had air-conditioning, new elevators and furniture, and modern lighting installed in Central Office. Fine paintings loaned from the Smithsonian Institution were hung on the walls. Employee associations were revitalized nationwide, and the VA Alumni Association, comprised of former and retired employees, was created.

A box in the upper-right corner of that first issue of *Vanguard* proclaimed the focus of the new national employee publication: "People, Purpose, Progress." And though the look and feel of the publication has changed over the years, that focus remains the same.

There have also been many staff changes in those 50 years, and responsibility for publishing *Vanguard* was transferred from Personnel Service to the Office of Public Affairs in 1980. But we still strive to produce a publication that is in keeping with the spirit Administrator Whittier brought to his tenure at VA: to humanize our workplace and foster a sense of community and shared mission among the disparate and widespread employees who serve those who served—the nation's veterans.

- Lisa Respess Gaegler

# Years of *Vanguard*





*Survivor Lauren Fritz rests her head on the shoulder of volunteer mentor Tech. Sgt. James Baird at Arlington Cemetery on the last day of the 2007 Good Grief Camp.*

TAPS helps families of military members who have died in service to the nation.

# A Shoulder to Lean On

©KATIE FALKENBERG/THE WASHINGTON TIMES

It was the second Thursday in November 1992 when a small, twin-engine C-12 Beechcraft left Elmendorf Air Force Base near Anchorage, Alaska, en route to Juneau. Onboard the plane was the Alaska Army National Guard's top officer, Brig. Gen. Tom Carroll, and seven other Guardsmen.

It seemed like an ordinary flight until the plane disappeared from Juneau Airport's radar. Something had gone terribly wrong. The plane crashed in the Chilkat Mountain Range, killing all eight men.

In an instant, Bonnie Carroll was a widow.

Grief and a host of heartbreaking emotions flooded her soul, just as they did with the other surviving family members. Wives lost husbands, children lost fathers, and parents lost sons.

"Grief is the price we pay for loving," said Carroll, who found a source

of relief in not shouldering the burden alone.

By sharing their grief, and drawing on each other's strengths, the surviving family members pulled through the ordeal and pledged to assist others who found themselves dealing with the loss of a service member. Two years later, Carroll founded the nonprofit organization TAPS, short for Tragedy Assistance Program for Survivors.

The heart of TAPS is the hundreds of surviving family members that have become peer mentors. These survivors volunteer their time to reach out to the newly bereaved who are experiencing a loss they themselves have experienced.

"Everybody deals with grief in their own way," Carroll said. "TAPS brings all these families together so they know they're not alone."

TAPS is America's only nonprofit veterans service organization char-

tered solely to assist the surviving families of military members who have died while serving the nation. A significant element of TAPS' mission is to minister to the mental, emotional and spiritual welfare of children who are a part of the military family and have suffered the traumatic death of a parent.

TAPS accomplishes this mission by providing compassionate care, age-specific information, national networks for children, counseling for all ages, and a range of other resources.

One of the flagship events under the children's outreach program is the Good Grief Camp for Young Survivors held annually over the Memorial Day weekend in conjunction with the National Military Survivor seminar. During the camp, youth have a chance to share, heal and have fun in a supportive environment managed by top adolescent grief and trauma experts.

“I had a little girl who thought her daddy died because she’d been bad,” said Air Force Master Sgt. Phyllis Oster, who has volunteered at the camp since 2005. “She asked me, if she was good for the rest of her life, would Jesus let her have one more supper with her daddy. By the end of the camp she was able to see that it wasn’t because she was bad that she’d lost him and that she wasn’t the only little girl who’d lost her daddy.”

TAPS is not just for children. Its services are open to all who are suffering the loss of a loved one in the

armed forces regardless of relationship, circumstance or geographic location. The organization works closely with numerous resource partners, including VA.

As a former White House liaison for VA, Carroll knows firsthand the importance of the agency’s benefits and services to veterans and their families. Among other VA services, TAPS refers survivors to one of the Department’s 207 vet centers across the nation for bereavement counseling.

From benefits, to burial, to addi-

another parent, spouse, sibling, significant other or friend to lend comfort, support and information. The Peer Support Network will provide someone that can offer a shoulder to lean on, an ear to listen and an understanding heart.


■ **Crisis intervention:** A network of trained crisis response professionals are on call in each state 24 hours a day, seven days a week.

■ **Casework:** TAPS’ toll-free number (1-800-959-8277) is a good starting point to ask questions and get answers. Upon request, TAPS will also place a call on the survivor’s behalf to local, state and federal agencies.

■ **Grief and trauma resources and information:** Offers information about bereavement support groups across the country through its membership with the Association of Death Education and Counseling, as well as the International Society for Traumatic Stress Studies.

■ **TAPS Annual National Military Survivor Seminar and Good Grief Camp for Young Survivors:** TAPS provides all survivors, caregivers, casualty officers and friends a weekend of healing and comfort. The seminar is held annually during the Memorial Day weekend in Washington, D.C. Workshops, support groups and special events are held in a caring, supportive environment and provide face-to-face interaction with survivors from around the country and across the globe.

■ **TAPS online community:** TAPS hosts chat room discussions and forums via its Web site to connect survivors across the country. The weekly chat offers general grief discussions plus special sessions on specific topics, relationships and issues.

TAPS supports more than 25,000 surviving families, friends and loved ones of deceased service members. To learn more about TAPS, call 1-800-959-TAPS (8277) or e-mail [info@taps.org](mailto:info@taps.org). 

By Art Gardiner



TAPS volunteer mentor Brock Ashbaugh, survivor Maria Cannon, and TAPS volunteer mentor Claire Hunter visited the caisson stables at Ft. Myer in Arlington, Va., during this year’s Good Grief Camp.

ART GARDINER



ART GARDINER

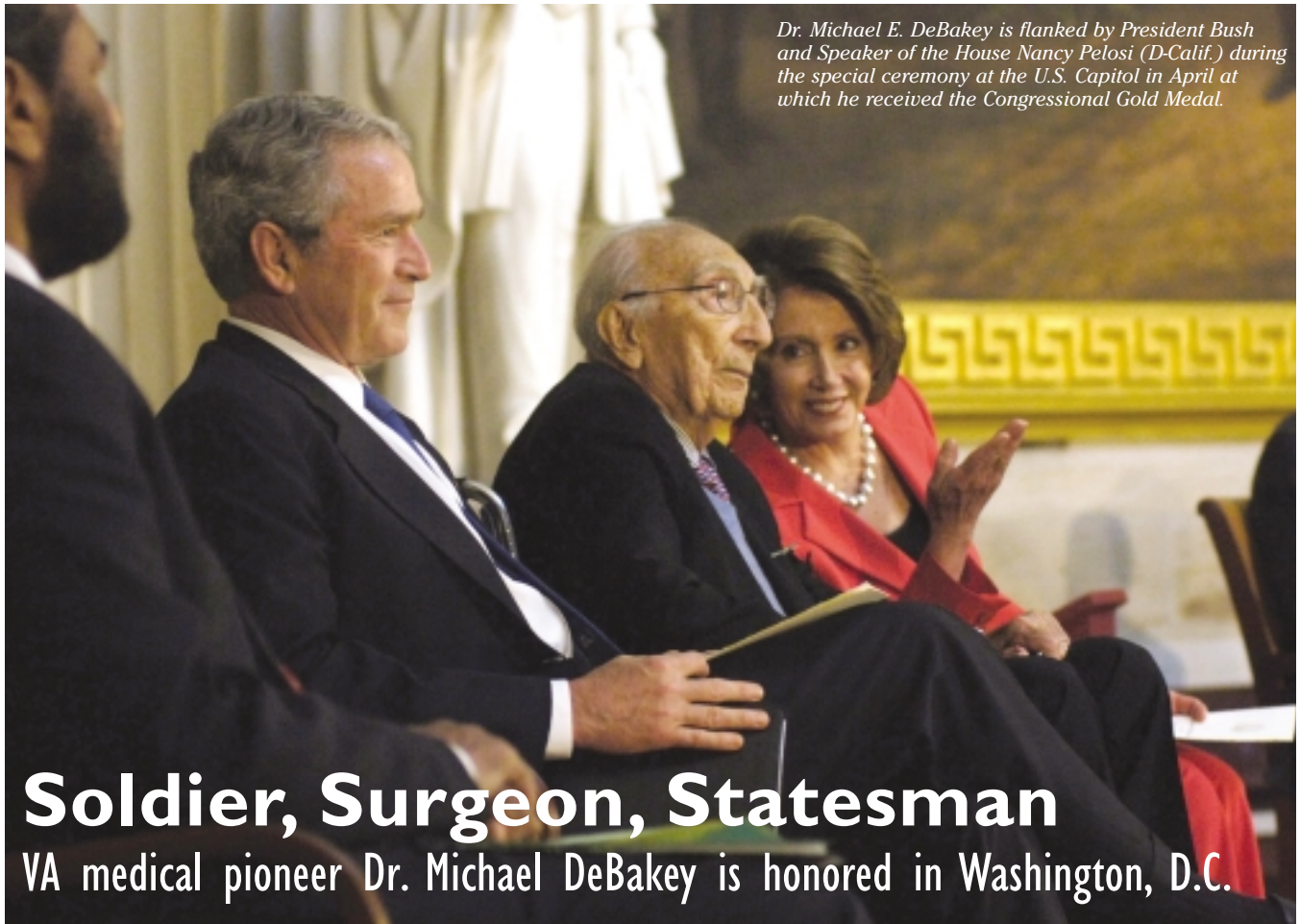
Left: Former VA employee Bonnie Carroll founded TAPS after the tragic loss of her husband in an Air National Guard plane crash.

tional resources and information, TAPS can assist in finding answers for those who lack the energy and perseverance to track down information during their time of grief. TAPS has experienced, empathetic caseworkers who act as liaisons between family members and the appropriate federal, state or private agency.

Services provided by TAPS include:

■ **Peer support:** A national survivor network can connect the grieving with others who have also suffered the loss of someone special. The service provides personal contact from

*Dr. Michael E. DeBakey is flanked by President Bush and Speaker of the House Nancy Pelosi (D-Calif.) during the special ceremony at the U.S. Capitol in April at which he received the Congressional Gold Medal.*



## Soldier, Surgeon, Statesman

VA medical pioneer Dr. Michael DeBakey is honored in Washington, D.C.

ROBERT TURTEL

**W**hen Dr. Michael E. DeBakey was an Army surgeon during World War II, he observed that many American soldiers' lives were lost on the battlefield while most of the best surgeons were stationed far from the front lines.

He was assigned to the 5th Army in northern Africa as it prepared to go into Italy as part of the Allied invasion to reclaim Europe from the Nazis. DeBakey had an idea he thought would help save countless lives—create mobile surgical teams that could be moved to the battlefield to immediately treat the wounded.

“One thing I noticed was we did not have the most experienced surgeons assigned to the field or evacuation hospitals. The most experienced surgeons were in the general hospitals

in the rear, doing almost nothing,” DeBakey said. “It seemed obvious to me that if we had the personnel, we could create a team and move them where the soldiers needed them.”

After convincing the Army his idea could work, the plan was tested and put into effect in time for the D-Day invasion of Normandy. As a result, thousands of American lives were saved at Normandy, and 80 to 90 percent of those wounded received care within 10 minutes after they had been hit.

Literally hundreds of thousands of lives have been saved since that time. DeBakey's mobile surgical teams were used throughout the remainder of World War II; they became the basis for the Mobile Army Surgical Hospital (MASH) units that were used in Korea and Vietnam and are the foundation for medical treatment used in

today's Global War on Terror in Afghanistan and Iraq.

When DeBakey returned to the states at the end of World War II, he had yet another “obvious” idea that would revolutionize treatment of soldiers returning home from the war. He became concerned that the then-Veterans Administration wasn't equipped to handle the daily load of 3,000 to 5,000 wounded soldiers who were returning to the states from the war.

“VA was not prepared to take over,” DeBakey said. “It did not have facilities or personnel to be able to deal with the large numbers returning from the war.”

At the time, the existing VA hospitals operated more like homes for veterans—there were not many specialized medical facilities. VA needed to set up an infrastructure,

and DeBakey knew how to make that happen.

The idea was to join medical surgical teams from local hospitals with VA hospitals to provide care and treatment for veterans. And the model for today's VA health care system was developed: "Make the VA hospital a teaching hospital with medical school doctors in charge of patient care," DeBakey said.

Based on his own position on the faculty at Baylor University, he provided the Houston VA hospital with its first surgical staff, and, as chief surgeon, he created the facility's accredited residency program. VA began affiliating with major medical universities throughout the country during that period.

His story could end right there with more than enough justification for him to receive the nation's highest civilian honor. On April 23, President Bush presented the Congressional Gold Medal to DeBakey, 99, and a VA conference room used by Veterans Health Administration leadership was dedicated on April 24. DeBakey is only the third person to have a major conference room at VA headquarters named in his honor; the others were Gen. Omar Bradley and Congressman G.V. "Sonny" Montgomery.

DeBakey's leadership in laying the foundation for today's VA also includes numerous other significant achievements. He has served as an adviser to nearly every U.S. President for the past 50 years. He helped establish the National Library of Medicine in Washington, D.C., in the early 1950s, which now ranks as the world's largest and most prestigious repository of medical archives.

As a cardiac surgeon, he was one of the first to create artificial vessels to replace damaged vessels and to use a mechanical heart as a substitute for the heart. He developed other key surgical instruments, including a continuous-flow roller pump for blood transfusions, a blood transfusion

needle, suture scissors and a colostomy clamp.

He created the first Dacron prosthetic artery. In 1954, he used a Dacron graft successfully in patients for the first time, thereby advancing the use of vascular surgery. He performed the first patch-graft angioplasty to reverse the narrowing of an artery caused by endarterectomy, or surgical removal of plaque from a blocked artery.

DeBakey was awarded the prestigious Albert Lasker Award for Clinical Research in 1963 in recognition of his "pioneer contributions in cardiovascular surgery." The next year, he successfully performed the first coronary bypass.

In 1964, he became the first to use a partial artificial heart during open-heart surgery, and he later supervised the first successful multi-organ

### ***"On his visits to see patients, veterans flock to him and express their thanks and admiration."***

transplant, in which a heart, both kidneys and a lung were transplanted from a single donor to four separate recipients.

He also pioneered the field of telemedicine with the first demonstration of open-heart surgery to be transmitted overseas by satellite, enabling the medical staff at a hospital in Geneva, Switzerland, to view an aortic valve replacement procedure that DeBakey performed in Houston.

In the mid-1980s, DeBakey furthered his research on the artificial heart, perfecting a Ventricular Assist Device, which helps restore function in failing hearts.

He founded the Cardiovascular Research and Training Center at the Texas Medical Center in the early 1970s. Later, he established the DeBakey Heart Center for research and public education in the prevention and treatment of heart disease at Baylor College of Medicine.

"I am honored to have the chance to thank you personally on

behalf of this organization for all that you have done across the entire spectrum," said VA Secretary Dr. James B. Peake at the April 24 dedication ceremony at VA headquarters.


Peake cited President Bush's quote at the previous day's congressional award ceremony: "Dr. DeBakey has an impressive resume, but his truest legacy is not inscribed on a medal or etched into stone. It is written on the human heart. His legacy is the unlost hours with family and friends who are still with us because of his healing touch. His legacy is the grandparent who lives to see their grandchildren. His legacy is holding the fragile and sacred gift of human life in his hands—and returning it unbroken."

Edgar Tucker, director of the Michael E. DeBakey VA Medical Center in Houston, said DeBakey

may be a physician and adviser to Presidents, but he always finds time to visit the veterans and patients there and has high regard for the dedication of the staff.

"His deep respect for veterans is obvious," Tucker said. "On his visits to see patients, veterans flock to him and express their thanks and admiration."

DeBakey, whose post-war career included being chairman of surgery at Baylor University College of Medicine and chief surgeon at the VA hospital in Houston, which now bears his name, spoke at the dedication ceremony about how his own admiration for those who serve has been the inspiration for his achievements.

"Anyone who is going to sacrifice his life for his country deserves not only our highest esteem, he deserves whatever is needed to support him," DeBakey said. "It is our obligation to provide that." 

By William N. Outlaw

# Restoring Congressional Cemetery

To help mark the cemetery's bicentennial, the National Cemetery Administration funded a repair and rehabilitation project.

**C**ongressional Cemetery, located at 1801 E Street in Southeast Washington, D.C., was established in 1807 as the cemetery for the local parish of Christ Church, but also for the larger community of Washington. Originally named the Washington Parish Burial Ground, soon after it was established the cemetery became the traditional burial location for members of Congress, and has been known ever since as Congressional Cemetery.

Many of these interments are among the 806 "government lots" in the cemetery managed by the National Cemetery Administration. In 2007, to help mark the cemetery's bicentennial, NCA funded a \$1.75 million project to repair and rehabilitate 169 "cenotaphs" and two other historic memorials. The cenotaphs, which were erected roughly between 1820 and 1875, are among the oldest and most significant historic resources overseen by NCA. A cenotaph is defined as a tomb or monument erected in honor of a person or group of people whose remains are elsewhere.

To undertake the specialized work on the cenotaphs, NCA partnered with the masonry experts at the Historic Preservation Training Center (HPTC) of the National Park Service. HPTC's mission includes training Park Service employees in the preservation crafts of carpentry and masonry by rehabilitating Park Service installations, or those of other federal agencies.

The Congressional Cemetery cenotaphs are attributed to America's first professional architect, Benjamin Henry Latrobe. Latrobe was one of the architects who contributed to the design of the U.S. Capitol; he also de-

signed St. John's Episcopal Church (next to VA Central Office), and the Baltimore Basilica, the first Roman Catholic cathedral in the U.S.

The cenotaphs are carved from Aquia Creek sandstone, quarried 40 miles south of Washington in Stafford County, Va. This stone was used extensively in the construction of early public buildings in Washington, including the White House and the

a building material, and it soon fell out of favor after marble became more readily available.

The cenotaphs weigh about 7,500 pounds each, and are carved in blocks with a squat base and a conical cap; inscriptions are on small marble panels affixed to the middle block or die. Latrobe's design, characterized by clean, straight lines and a lack of ornamentation, was quite distinct from



*A Historic Preservation Training Center worker installs a stone dutchman.*

COURTESY OF ASSOCIATION FOR THE PRESERVATION OF HISTORIC CONGRESSIONAL CEMETERY

U.S. Capitol gateposts (currently located on the National Mall—one example is on the corner of 15th Street and Constitution Avenue). While the quarry was convenient to the city, Aquia Creek sandstone was inherently soft and unsuitable as



*The cenotaphs at Congressional Cemetery are among the oldest and most significant historic resources overseen by NCA.*

COURTESY OF NCA HISTORY PROGRAM OFFICE

the typical grave markers of the period, and foreshadowed modern architecture by almost a century.

The oldest cenotaphs are not true to the definition of the term, as they mark the burials of senators, congressmen and others who died in the city before scientific improvements in the areas of embalming, and later refrigeration, expanded post-mortem travel options. In general, from 1820 until about 1835, deceased legislators were buried in Congressional Cemetery. After 1835, interments of federal officials began to wane, but true cenotaphs continued to be erected in the cemetery honoring legislators.

Of the 169 cenotaphs, 113 remain true to the term, while 56 mark a grave. The exact date the first cenotaph was placed in Congressional Cemetery is unknown. Latrobe's earliest sketch dates to 1812, but it is unclear if any cenotaphs were found in the cemetery at this time; it is likely that the cenotaphs were installed years after the date of death.

Whether these markers function as cenotaphs or are true burial markers, the geometric design is the same. Use of the cenotaphs reportedly ceased in 1876 when Rep. George Frisbie Hoar of Massachusetts caustically remarked that being buried beneath one would "add new terrors to death ... I cannot conceive of an uglier shape to be made out of granite or marble than those cenotaphs now there."

By the end of the 20th century, many of the monuments and markers in Congressional Cemetery were in poor condition. Specifically, many of the cenotaphs were in an advanced

state of deterioration, due to the poor-quality sandstone. Many were cracked, chipped, eroded by wind, or stained by pollution. In 2007, in response to this situation, NCA entered into an Interagency Agreement with HPTC to rehabilitate and stabilize the cenotaphs, and address unique problems at two other monuments in the cemetery.

Initially, HPTC conducted a series of tests to develop the most effective method for cleaning the cenotaphs, including using chemical detergents, and even a laser. Through this process, HPTC determined that the best cleaning technique is to use a micro-abrasive glass powder at a low pressure, which is effective in removing dirt and grime, while sensitive enough to avoid damaging the stone.

On certain cenotaphs with significant material loss, HPTC is installing "dutchmen," replacement stone cut to fit into voids and epoxied into place. This method, historically practiced by tradesmen, continues to be the industry standard for preservationists.

The HPTC team is also resetting the cenotaphs and repairing the mortar joints as needed. In rare cases, all three components of a cenotaph require replacement, but the HPTC team is following the preservation ethic of "replacement in kind." Both the dutchmen and the large, new components are being fashioned from Aquia Creek sandstone, donated to the project by the Architect of the Capitol. And in case of future repairs, NCA will be retaining two badly damaged blocks as a source of stone.

In addition to ongoing work on the cenotaphs, HPTC is repairing other NCA monuments in Congressional Cemetery. The U.S. Arsenal Monument honors the women who died in an explosion at the Washington Arsenal on June 17, 1864. The tragedy resulted from the accidental ignition of fireworks stored in a lot next to the arsenal building. Lit by the summer heat, sparks from the fire-

works blew into the arsenal as 108 women were making gunpowder cartridges. The explosion killed 21.

The 25-foot-tall marble and granite memorial was erected on the first anniversary of the fire. A small, allegorical female figure of Grief sits atop a shaft inscribed with the names of the dead. Today, the memorial is in the process of "sugaring"—the stone grains on the surface are disintegrating, causing much of the inscription and carving to lose detail.

This June, HPTC is repairing the 13-foot-tall marble obelisk that marks the remains of Maj. Gen. Alexander Macomb, a War of 1812 hero and commanding general of the Army from 1828 to 1841, and his wife. During an initial inspection, HPTC determined that the vault underneath the obelisk was damaged, leading to concerns that the obelisk would collapse. Subsequently, HPTC dismantled the obelisk, in preparation to repair the vault, after which the obelisk will be reassembled in its original location.

In conjunction with this project, staff from the Smithsonian Institution's National Museum of Natural History will exhume the remains and any funerary artifacts in the vault, and keep them in storage while the repairs are made. The exhumation is being conducted as part of the Smithsonian Institution's community outreach.

All work on the cenotaphs, the Arsenal Monument and the Macomb grave marker is scheduled to be completed by November, but for the next several months, visitors can still get a glimpse of the work going on at Congressional Cemetery. Upon completion of this work, the historic cenotaphs and other monuments will be restored to a condition deserving of National Shrine status typically found in national cemeteries—it's a 200th birthday salute of sorts, to Congressional Cemetery. **VA**

By Alec Bennett

#### For more information

The official Web site for Congressional Cemetery, including information on the current rehabilitation work underway, is at [www.congressionalcemetery.org](http://www.congressionalcemetery.org). For more information about HPTC, visit: [www.nps.gov/training/hptc/index.htm](http://www.nps.gov/training/hptc/index.htm).

# The Backbone of the Winter Sports Clinic

Hundreds of dedicated VA employees and volunteers working behind the scenes ensure the event's success year after year.

Last April, millions of Americans experienced VA's *Miracle on a Mountainside*. Featured on NBC's "Today" show and CBS' "The Early Show," the National Disabled Veterans Winter Sports Clinic shined brightly before a national audience.

At the center of the coverage were amazing stories about a cross-section of newly injured veterans and veterans from other eras displaying their courage and strength. But in the background of this unprecedented coverage, the nation also caught a glimpse of VA's dedicated employees and event volunteers—all working together with different skills and responsibilities to ensure the event's success.

There were approximately 500 volunteers and 80 VA staff from around the country at this year's event. One of those volunteers was Mary Lane, of Clifton, Colo., who has volunteered at all 22 Winter Sports Clinics. "This event gets into your soul," said Lane. "If one life can be made better here, then it's worth any time I can volunteer."

Lane and her co-coordinator, Dixie Aljets, begin their days at 6 a.m. and usually end at 6:30 p.m. Lane and Aljets are there with smiles on their faces welcoming participants to their daily meals. "Veterans are so excited to see us to share what they learned that day or how well they did on the mountain," said Lane.

Many volunteers pay their own way to be a part of this unique reha-

bilitation event. Some take leave without pay from their jobs or use their vacation time to volunteer. Lane is no exception. "I never want to be without the Winter Sports Clinic," she said.

The dedication of volunteers like Lane and Aljets is also evident in the VA employees who staff this event each year. Alan Baugh, the assistant manager of acquisition at the Grand Junction, Colo., VA Medical Center, has worked at every Clinic for the last 22 years.

Baugh, a Navy veteran with 34 years of VA service, is the team leader coordinator for the Clinic. In that role, he recruits volunteers (usually

rehabilitation therapists) from VA facilities nationwide to serve as team leaders, and serves as a point of contact for them before and during the event. Team leaders are the liaisons between the Clinic and the participants, ensuring that the skiers have everything they need to enjoy the event to its fullest. This year there were 58 team leaders guiding all 391 participants during the week.

Baugh's daily job at the hospital does not offer a lot of patient interaction, so he relishes his time working with veterans. "The Winter Sports Clinic is the highlight of my year," said Baugh. "Seeing the faces of veterans as they overcome the mountain

*Left to right: VA employee Randi Woodrow and volunteer Jackie Gislar are all smiles with volunteer ski instructor Chris Collier at the Clinic's equipment truck. Woodrow and Gislar work all week long to ensure that veterans have the right equipment, while Collier focuses on teaching adaptive alpine skiing.*







*Navy veteran Terence Travers skis in a bi-ski with the help of his volunteer ski instructors Korey Hamel and Daniel Swanson. Travers, who has multiple sclerosis, is from Webster, N.Y.*

VA WINTER SPORTS CLINIC PHOTOGRAPHY TEAM

and other life obstacles puts a smile on my face year after year.”

Often considered medical care in a non-traditional setting, the Winter Sports Clinic challenges participants’ strength with a myriad of activities, ranging from adaptive Alpine and Nordic skiing to sled hockey, rock climbing, fencing and trap shooting.

To enjoy the mountain fully, participants must prepare with their rehabilitation therapists in advance. The therapists work daily with their patients to strengthen their bodies and minds.

“Veterans receive tremendous physical benefits from the Clinic, such as improving their strength, endurance, balance and coordination, and it’s also a major boost for their mental fitness,” said Randi Woodrow, physical therapy director at the VA Greater Los Angeles Healthcare System. Woodrow has worked at 16 Winter Sports Clinics and has been

with VA for 17 years. She can be found in the equipment truck all week at the Clinic.

She says the Clinic is staffed with the highest caliber of professionals. “Every rehabilitation therapist brings a unique contribution to the team,” said Woodrow. “When all of the therapists come together here, this diverse group’s professionalism and knowledge is unsurpassed.”

Rehabilitation therapists are a crucial part of the VA team at the event, according to Sandy Trombetta, Clinic director. “The rehabilitation therapists are not only a veteran’s friend, coach and caregiver, they are all three on site,” he said. “These trained and skilled professionals are the backbone of this great event for all the work they do in advance and



*Marine Corps veteran Jonathan Lujan, who served in Operation Iraqi Freedom, was one of the 391 veterans who came to Snowmass Village in April. Lujan, 37, is from Littleton, Colo.*

VA WINTER SPORTS CLINIC PHOTOGRAPHY TEAM

during the Clinic.”

And when all the players come together as a cohesive unit, the healing mission of the Winter Sports Clinic is achieved. One veteran who said he benefited greatly from the event was first-time participant Jonathan Lujan. Lujan, 37, a Marine Corps veteran who served in Operation Iraqi Freedom, said he’s grateful to the VA staff, the Disabled American Veterans and all of the volunteers who work at the event.

“For so many people to give up their time and energy to make our rehabilitation part of their work is humbling,” said Lujan. “The Clinic is therapeutic and it taught me that I can live with my disability and live normally.” When asked if he will return to the Clinic, Lujan said, “Absolutely! I can’t wait to stand at the top of the mountain again next year.” VA

By Richard Olague

## About the Winter Sports Clinic

The National Disabled Veterans Winter Sports Clinic takes place annually in Snowmass, Colo. The event is co-sponsored by VA and the Disabled American Veterans. Participation is open to U.S. military service veterans with traumatic brain injuries, spinal cord injuries, orthopedic amputations, visual impairments, certain neurological problems and other disabilities, who receive health care at a VA medical facility or those selected from military treatment facilities. For more information about the Winter Sports Clinic, contact your local recreation therapy office, or go to [www.wintersportsclinic.va.gov](http://www.wintersportsclinic.va.gov).

## Six Honored With 2008 Secretary's Excellence in Nursing Awards

VA Secretary James B. Peake, M.D., paid tribute to VA's top nurses and medical professionals during the Secretary's 2008 Excellence in Nursing and the Advancement of Nursing Programs Awards Ceremony held May 12 at VA Central Office. The Secretary's Award is given to individuals nominated by their colleagues for outstanding service to veterans and the Department.

"Today, our honorees are recognized by us, by their VA peers, and by the veterans they serve as being among the best of the best," said Peake. "That says a lot considering VA's nursing staff is 61,000 strong. They are the backbone of our entire health care system."

Lenora Scroggins, a licensed practical nurse with the VA Eastern Kansas Health Care System in Topeka, received the top award in the licensed practical nurse role category for her role as a patient advocate and role model at the mental health clinic and day treatment center.



EMERSON SANDERS

*Left to right: Shirley Cutler, Christine Lund, Joy Edvalson, Secretary Peake, Chief Nursing Officer Cathy Rick, Under Secretary for Health Dr. Michael Kussman, Michael Lawson, Lenora Scroggins and Natalie Russell at the Secretary's nursing excellence award ceremony.*

cility. With highly marketable skills in the private sector, Russell said she and many nurses choose to work at VA because of the mission and atmosphere.

"To me the VA is like

seey Health Care System in East Orange, who was honored with the nursing assistant role award for excellence in improving, and delivering, outstanding patient care to veterans. She takes an active

"The care and caring are delivered by nurses and they are the only constant presence in the hospital," he said. "The patients repeatedly tell us, in this computerized world, that the things that make a difference are the human face and the human touch. Nurses provide that connection and that support."

Nurse Executive Christine A. Lund, of the Minneapolis VA Medical Center, received the Secretary's Award for the Advancement of Nursing Programs (nurse executive category) for effectively integrating nursing-related activities and organizational goals. She is a leader in developing nursing strategies to achieve patient care quality and has been heavily involved in implementing interventions recommended by the 5 Million Lives Campaign, a patient safety initiative led by the Institute for Healthcare Improvement. **VA**

***"The real honor is being able to take care of our deserving veterans and having an opportunity to give something back for all they have given to us."***

"I'm delighted to be here," she said, "but the real honor is being able to take care of our wonderful and deserving veterans and having an opportunity to give something back for all they have given to us."

Natalie Russell, a registered nurse with the Harry S. Truman Memorial Veterans' Hospital in Columbia, Mo., received the award in the registered nurse staff role category for developing total joint-replacement protocols for the nursing staff at her fa-

home," she said. "The veterans are wonderful and the employees are like family. We know each other well and it's just a wonderful place to work."

Also receiving nursing awards were:

■ Joy Edvalson, a registered nurse with the VA Greater Los Angeles Healthcare System, who was honored in the registered nurse expanded role category for establishing a wound care practice;

■ Shirley Cutler, a nursing assistant with the VA New Jer-

role in the care of her patients and has conducted weekend groups focusing on orientation and current events.

The award program also recognizes health care executives who advance nursing programs. This year's recipient of the Secretary's Award for the Advancement of Nursing Programs (medical center director category) is Michael M. Lawson, director of the VA Boston Healthcare System. Lawson believes nurses truly are the backbone of VA's success and world-class care.

## 'Sesame Street' DVD Series Launched to Help Military Families



Army Staff Sgt. Ramon Padilla and his family were featured in the DVD series. Padilla was injured in Afghanistan.

Sesame Workshop, the non-profit educational organization behind the award-winning children's television show "Sesame Street," recently launched phase two of its military outreach project.

Titled "Talk, Listen, Connect: Deployments, Homecomings, Changes," the two-DVD set is meant to help military families with young children cope with the stress of deployment and adjust when a parent suf-

fers a combat-related injury.

Designed for children ages 2 to 5, the DVDs feature "Sesame Street" characters Elmo and Rosita, as well as footage of real military families and their unique situations. The episodes follow Elmo's adjustment to his father's deployment and long-awaited homecoming and Rosita's feelings about her father's life-changing injury. The bilingual series, a follow-up to the 2006 DVD titled "Talk, Listen, Connect: Helping Families During Military Deployment," was officially launched April 29 at the Women in Military Service for America Memorial at Arlington National Cemetery.

According to the Workshop's statistics, as many as 700,000 children under the

age of 5 have a parent in the military. The Workshop is producing and distributing 500,000 kits, which include two "Talk, Listen, Connect" "Sesame Street" DVDs, a parent/caregiver magazine, a children's activity poster, and Muppet postcards.

The kits are free of charge to families, schools, childcare programs, family support programs, hospitals and rehabilitation centers. In addition, the Workshop plans to unveil the enhanced "Talk, Listen, Connect" Web experience this fall.

"Sesame Street" is the single largest informal educator of young children in more than 120 nations. For more information or to request a "Talk, Listen, Connect" kit for your facility, visit [www.sesameworkshop.org/tlc](http://www.sesameworkshop.org/tlc). **VA**

## Three New VA Police Awards Handed Out at Biennial Conference

Three new awards, the first of their kind, were presented at the 2008 VHA Chiefs of Police Biennial Training Conference banquet in San Antonio on March 5.

Richard Varns, an officer from the VA Illiana Healthcare System in Danville, Ill., received the 2007 VA Patrol Officer of the Year award. In recognition of his accomplishments, Varns was recently promoted to captain. Varns, who has 18 years of federal service, served as a military police officer in the Army before joining VA.

The 2007 VA Chief of the Year award was given to John "Jack" Crawford, from the VA Pittsburgh Healthcare System. Throughout his 29-year career, Crawford has served as a VA police officer, detective and assistant chief

before becoming chief of police in 2003.

Kevin M. Grady, an Air Force veteran and sergeant with the Battle Creek, Mich., VA Medical Center, was named 2007 VA Supervisory Police Officer of the Year.

To be nominated for the personal achievement awards, individual police officers had to provide a high level of leadership both at their home facilities and to the overall VA police program. Currently, VA employs around 3,000 police officers nationwide.

In addition, the 2008 facility awards for the highest achieving VA facility police programs went to the VA medical centers in: Altoona, Pa.; Beckley, W.Va.; Central Alabama Health Care System; Chillicothe, Ohio; Coatesville, Pa.; Fayetteville, N.C.; Hines,



Left to right: Frederick R. Jackson, deputy assistant secretary/director, Security & Law Enforcement; Richard Varns; and Charles L. Hopkins III, assistant secretary for Operations, Security and Preparedness.

Ill.; Iowa City, Iowa; Lebanon, Pa.; Madison, Wis.; Northport, N.Y.; Pittsburgh Healthcare System; Sierra Ne-

vada Health Care System; Salem, Va.; San Juan, Puerto Rico; Wilkes-Barre, Pa., and San Diego. **VA**

## FedTraveler.com: A Success Story for Travelers and Managers

VA's successful implementation of the General Services Administration (GSA)'s E-Gov Travel Service (ETS) moved the Department to the forefront in bringing this streamlined online service to its frequent travelers and managers. Led by the ETS Implementation Team at the Financial Services Center (FSC) in Austin, Texas, and with the support of VA station travel managers nationwide, the Department—the largest civilian federal agency, with 260,000 employees—met its December 2007 deadline for agency-wide implementation, fulfilling a mandate of the President's Management Agenda.

The VA E-Gov Travel Service, also known as FedTraveler.com, gives approximately 70,000 VA frequent travelers and managers a much more efficient and accountable way to plan, book and track travel arrangements as well as request and approve expense reimbursement. The new service eliminated four separate older travel systems with its one-stop, self-service Web-based site.

VA also contracted with a new Travel Management Center (TMC), Duluth Travel Service. This small business, owned by a service-disabled veteran, will interface with FedTraveler.com. The Department will save approximately \$1.6 million annually in lower software/hardware maintenance costs, reduced licensing fees, TMC fees and lower contract management costs. Even greater savings will result because the automation streamlines processing, translating to increased administrative productivity.

The percentage of travel episodes using the online

booking engine is monitored closely by GSA and the Office of Management and Budget (OMB). GSA set a goal of 70 percent for the online adoption rate for all agencies. VA is the civilian agency leader in use of the online booking engine, with an online adoption rate of 82 percent for fiscal years 2007 and 2008 (to date).

VA kicked off this initiative with the award of a contract in late 2005 to Electronic Data Systems (EDS) to provide a Web-enabled travel service for the thousands of VA employees who travel for business. The FSC worked closely with EDS and VA stations over three years to develop the new service and to ensure that it operates smoothly.

The scope and complexity of the project made communication and attention to detail essential throughout the process. The E-Travel Executive Steering Committee was formed and included members of all three administrations to provide program support and guidance at all levels. EDS, the FSC and field experts communicated weekly and often daily to solve problems and keep the schedule on track. Off-the-shelf software was tested and re-tested until it met VA's needs.

To prepare everyone for the new service, 5,274 users received intensive training—including a train-the-trainer program—and ongoing training and help desk staff continue to support travelers and managers.

Besides the advantages to travelers, the consolidated service makes travel policies simpler and easier to enforce. ETS supplies travel data to managers on the use of air-

lines, lodging and car rentals. With more than 50,000 vouchers processed in fiscal year 2007 and nearly that many through February of fiscal year 2008, accuracy and accountability are vital. "Not only does the service make travel arrangements faster and easier for employees, but FedTraveler.com also strength-

ens control for managers by permitting them to identify spending trends," said Ed Murray, VA's deputy chief financial officer. "Going forward, we will have much greater insight into how our travel dollars are spent, which will help make sure that employees travel in the most cost-effective way." VA

## VA Participates in PSRW Event on the National Mall

The 24th annual Public Service Recognition Week event took place May 5-7 on the National Mall in Washington, D.C. More than 100 government agencies, including VA, participated in this year's event, designed to educate the public about the services of local, state and federal government agencies, as well as recognize and honor civil servants.

Sponsored by the Public Employees Roundtable at the Council for Excellence in Government, the exhibition featured interactive displays along with special programs designed to showcase and highlight government services.

Employees from VA's National Cemetery Administration, Veterans Benefits Administration and Veterans Health Administration were on hand to assist veterans and family members with any questions, concerns or information they needed on VA benefits and eligibility. Among the many VA exhibits displayed were VA Voluntary Service, Center for Women Veterans, Center for Veterans Enterprise, and the Center for Minority Veterans, along with several state-of-the-art prostheses for hands-on interaction.

New this year, 20 citizen finalists in the first "FedPitch" competition were on-site to present 2-minute "pitches" of their ideas for how to improve the federal workplace. The competition was initiated by 13L, a group of mid-career federal employees including VA's Susan Reed, program management officer with the Office of Information and Technology. VA



State-of-the-art prostheses for hands-on interaction were part of the VA display.

## Secretary Hosts Foreign Delegation of Veterans Affairs Ministers

Providing health care and benefits to veterans is not unique to the United States and VA. Other countries are dedicated to the challenging task of caring for a booming population of aging veterans as well as a new generation of veterans returning from the battlefield.

On April 30, Secretary James B. Peake, M.D., hosted a delegation of his counterparts from Australia, Canada, New Zealand and the United Kingdom at VA Central Office to share ideas, technology and best practices to better serve veterans.

“We share the same mission in what is an increasingly small and shrinking world,” said Peake during his opening remarks at the 2008 Ministerial International Forum. “A forum of this nature affords us an opportunity to exchange ideas and explore solutions for the challenges we face in serving our nation’s veterans.”

Each of the ministers fol-

lowed Peake with opening comments, highlighting the current issues within their respective countries concerning veterans affairs. It quickly became apparent the countries shared similar difficulties and were eager to explore potentially successful solutions.

“We are making changes now due to the discussions we have had in this forum,” said New Zealand’s Minister of Veterans Affairs Rick Barker. “This is a group that takes veterans issues seriously. They are passionate about it and you get a perspective that you can’t get elsewhere.”

The group spent several hours discussing operational and policy issues relating to ongoing operations in Afghanistan and Iraq.

“With the high operation tempo and number of deployments, we are also faced with a new generation of veterans, a generation that doesn’t see themselves as ‘vets’ because



Secretary Peake and his counterparts from Australia, Canada, New Zealand and the United Kingdom met in VA Central Office to share ideas and discuss mutual challenges.

they aren’t old or broken,” said Australian Minister of Veterans’ Affairs Alan Griffin. “We have to remove that stigma and provide them with care, employment and the capability to successfully return to civilian life. We are trying to understand how to fit it all together.”

Greg Thompson, Canada’s Minister of Veterans Affairs, addressed certain stig-

mas attached to new veterans and their reluctance to ask for help, especially those with mental health issues. His country implemented a new charter for veterans that included opening Operational Stress Injury Clinics across Canada to provide services to veterans with post-traumatic stress disorder. The centers are currently treating 11,000 vet-

**continued on page 30**

## VA Hosts Events to Raise Awareness of Military Sexual Trauma

If you went through April not realizing it was Sexual Assault Awareness Month, you weren’t within range of a VA military sexual trauma (MST) coordinator. MST coordinators nationwide hosted a variety of events designed to increase staff and veteran knowledge of MST.

Susan McCutcheon, director of Family Services, Women’s Mental Health and Military Sexual Trauma in the Office of Mental Health Services, led the April effort. “Although people usually think of combat when they hear the words ‘trauma’ or ‘post-traumatic stress disorder,’ sexual assault and harassment in the

military can be equally destructive, leading to problems like depression, substance abuse disorders and interpersonal difficulties,” she explained.

“Sexual trauma is also associated with a number of physical health conditions, like higher rates of headaches, gastrointestinal difficulties, sexual dysfunction, chronic pain and chronic fatigue, making this an important issue to learn more about for all VA providers.”

The Office of Mental Health Services Support Team distributed educational and outreach materials to the MST coordinators at each VA

medical center. Coordinators put these resources to good use at lectures, on informational tables and in local publications.

VA provides free care for all mental and physical health conditions related to experiences of military sexual trauma. Veterans do not need to be service-connected and may be able to receive this care even if they are not eligible for other VA care.

Coordinators emphasized that MST is not just a women’s issue. “VA is legally mandated to screen all veterans for MST, but this makes good clinical sense,” noted Rachel Kimerling, the MST

Support Team’s director for monitoring. “We see reports of MST from veterans of all eras, and from both men and women. Though rates of MST are higher among women, because our patients are predominantly male, there are actually about equal numbers of women and men who report having experienced MST.

If you are among the few who didn’t hear from an MST coordinator in April, check the MST resource homepage at [vawww.collage.research.med.va.gov/collage/E\\_behav/MST](http://vawww.collage.research.med.va.gov/collage/E_behav/MST) for information about treatment resources, patient education materials and training opportunities. **VA**

## Leonard 'Rosie' Ross

Standing erect as in a military formation, the elderly gentleman carefully lifts the musical instrument that had been at his side and places it next to his lips. Then he solemnly belts out a familiar tune—24 notes that stir deep emotions in those present. Some shed tears; others cry softly.

While nearly everyone recognizes the military bugle call known as taps, few know that the music is coming from 102-year-old trumpeter Leonard "Rosie" Ross. The Air Force veteran has been playing taps at veterans' funerals since 1936, because he believes his fellow veterans "deserve a proper send off."

For more than eight decades, Ross and his trumpet have been entertaining audiences nationwide.

Most people hope they can continue an active lifestyle well into "old age," but few envision continuing to work into their 100s. But age certainly hasn't stopped Ross

from continuing his volunteerism and what he considers his patriotic duty to play taps at veterans' events.

Ross is believed to be the oldest active living bugler in the United States and has been a regularly scheduled volunteer at both the Northern Arizona VA Health Care System in Prescott and the Prescott National Cemetery since 1946. He was recently featured on a Barbara Walters special on aging called "Live to be 150."

In fact, Ross has been volunteering at VA since the inception of the VA Voluntary Service program. He has donated approximately 8,000 hours to serving veterans and is also a retired VA employee.

"Our veterans and employees here at the Northern Arizona VA Health Care System feel blessed to have such a patriotic volunteer willing to stand by our side for so many years," said Frank Cimorelli, public affairs officer. "The halls of our facility would not



Rosie Ross plays his trumpet at a Veterans Day ceremony.

be the same without seeing Ross' smiling face day in and day out."

A member of the American Legion Post #6 Color Guard, Ross was the official bugler on the staff of the Supreme Commander of the Allied Forces in World War II. Ross was asked to play his bugle many times for Gen. Dwight D. Eisenhower. He was also recognized by the state of Arizona in 2002 with the Arizona Outstanding Older Worker Award and in 2004, he served as Grand Marshal of the Veterans Day

Parade in Prescott.

Ross says the secret to his success is "to love life, love people and never stop doing what you love to do. I was still doing music gigs at the Pine Cone Inn in Prescott every Friday night until I fell and broke my hand a couple of months ago. But you can bet as soon as I can lift that trumpet, I'll be back doing what keeps me young."

No one who knows Rosie Ross has any doubt that he will be back playing music again for his many fans. **VA**  
By Jessica Jacobsen

### Ministerial Forum (cont.)

erans with a psychological illness stemming from their military service.

"When our soldiers take on a mission, they give 100 percent without reservation," he said. "When they come back, we have to take care of them in the same fashion."

Derek Twigg, who serves in two capacities—as the UK's Under Secretary of State for Defence and as Minister for Veterans Affairs—discussed issues that mirror those of the U.S. Topics included: health care, education, compensation, and the relationship between mental health and homeless veterans. Jonathan

Iremonger, director of the UK's Veteran Policy Unit, expanded on Twigg's mention of homeless veterans in England.

"A study at York University shows homelessness down by 25 percent, and that's due in part to the initiatives of service organizations," he said. "However, there is a correlation between mental illness and homelessness."

Iremonger said the key to battling homelessness in the long run is to identify those veterans with mental health issues and get them treatment.

While visiting VA, the ministers had an opportunity to tour Arlington National

Cemetery in Virginia and observe the changing of the guard as well as participate in a wreath-laying ceremony at the Tomb of the Unknowns. Following a tour of the cemetery, the delegation traveled to the Washington, D.C., VA Medical Center for a demonstration of VA's electronic health records system by Dr. Ross Fletcher, chief of staff. The ministers were impressed with the amount of information contained within the system as well as the ability for doctors to access a veteran's complete health record at any location instantly.

"This is world leading,"

Barker said. "This is another ambition that we are waiting to get that the United States VA has, and is already looking to improve on it again."

After a roundtable discussion on Afghanistan, Iraq, and policy issues of mutual concern, such as benefits delivery and two distinct veteran populations, the ministers wrapped up the conclusion of the forum on day two by presenting each other with symbolic cultural items from their respective countries.

This is the third time the leaders have met; the last forum was held in 2006 in France. **VA**

### Houston VA Researchers Get Grant to Develop New Cocaine Vaccine

VA recently awarded a research grant to three investigators at the Michael E. DeBakey VA Medical Center in Houston—Frank Orson, M.D., Therese Kosten, Ph.D., and Thomas Kosten, M.D.—to develop an improved cocaine vaccine. Testing will take place this year and the vaccine should receive FDA approval around 2010.

While substance abuse affects society as a whole, veterans and their families are particularly hard hit by this health problem. Military service, particularly in times of war, can raise the incidence of post-traumatic stress disorder (PTSD), and with it come increased problems with substance abuse.

“Development of the vaccines proposed by this research could have significant positive impact for our nation’s veterans,” said Orson. “Relapse to drug dependence most commonly occurs during the first several months after completing withdrawal treatment. An effective vaccine will induce antibodies that bind to the drug of interest. As a result, the antibodies can block the induction of drug craving and reduce the likelihood of relapse to substance abuse.”

Previous vaccine studies have demonstrated promising effects in human subjects. However, only about 30 percent of the subjects achieved levels of antibody sufficient to block the physiological effects of the absorbed doses. This research effort is designed to improve the quantity and quality of responses to such vaccines.

The study at the Houston VA facility brings together a group of investigators with substantial experience in substance abuse and vaccine de-

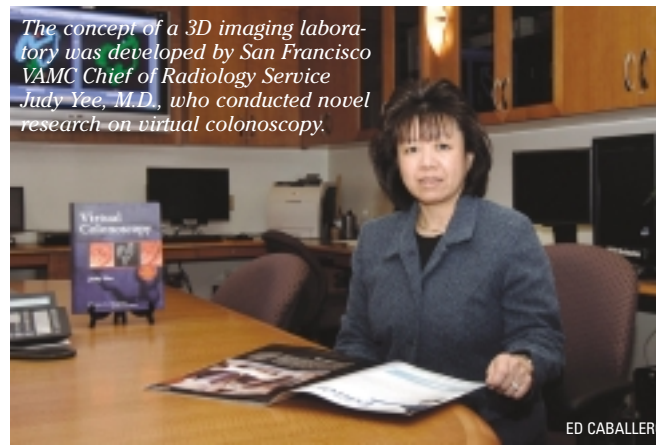
velopment in a focused effort to use this promising preliminary data to generate highly effective vaccines.

“This is a very exciting new era of prevention just now opening up to VA health care professionals to help our veterans avoid addiction problems,” said Thomas Kosten.

### Journal Supplement Examines Underlying Causes of Misdiagnoses and How to Avoid Them

How frequently do doctors misdiagnose patients? While research has demonstrated that the great majority of medical diagnoses are correct, the an-

*The concept of a 3D imaging laboratory was developed by San Francisco VAMC Chief of Radiology Service Judy Yee, M.D., who conducted novel research on virtual colonoscopy.*



swer is probably higher than patients expect and certainly higher than doctors realize.

In a supplement to the May issue of *The American Journal of Medicine*, a collection of articles and commentaries sheds light on the causes underlying misdiagnoses and demonstrates a nontrivial rate of diagnostic error that ranges from less than 5 percent in the perceptual specialties (pathology, radiology, dermatology) up to 10 to 15 percent in many other fields.

The sensitive issue of diagnostic error is rarely discussed and has been understudied. The papers in this volume confirm the extent of diagnostic errors and suggest

improvement will best come by developing systems to provide physicians with better feedback on their own errors.

Guest editors Mark L. Graber, M.D., chief of medicine at the Northport, N.Y., VA Medical Center and a professor at the State University of New York at Stony Brook Medical School, and Eta S. Berner, of the School of Health Professions at the University of Alabama at Birmingham, oversaw the development and compilation of these papers. Drs. Berner and Graber conducted an extensive literature review concerning teaching, learning, reasoning

and decision-making as they relate to diagnostic error and overconfidence and developed a framework for strategies to address the problem.

In the final commentary, Graber, who is a recognized expert in the area of diagnostic error research, identifies stakeholders interested in medical diagnosis and provides recommendations to help each reduce diagnostic error.

Drs. Berner and Graber are co-directing the first national conference focusing on diagnostic errors in medicine May 31-June 1 in Phoenix. The conference is co-sponsored by the Agency for Healthcare Research and Quality and the American

Medical Informatics Association. The program includes leaders in this field including the authors of the papers in the supplement.

### 3D Imaging Laboratory Opens at San Francisco VA Medical Center

The San Francisco VA Medical Center’s newly remodeled 3D Imaging Laboratory is based on a concept developed a few years ago by Radiology Service Chief Judy Yee, M.D., through research on virtual colonoscopy (CT colonography) as a new technique for colorectal cancer screening.

The test she developed combines data obtained from CT scanners with graphical software to create two- and three-dimensional images of the colon that radiologists can use for diagnosis. The clinical impact of this virtual colonoscopy has been significant and the San Francisco VAMC was one of the first in the country to make it available to veterans. It is now used clinically at other sites throughout the world.

The new 3D Imaging Laboratory houses many state-of-the-art post-processing workstations with the different computer platforms needed to address the expanding use of 3D imaging in everyday patient care. 3D imaging is now used for coronary CT angiography, aneurysm evaluation, musculoskeletal applications, CT urography, and brain/body perfusion techniques.

The new and expanded lab enables researchers to perform cutting-edge research using the best imaging tools available. Its computer platforms are also used to teach advanced 3D imaging to medical students, residents and fellows that rotate through the VAMC’s Department of Radiology. **VA**

*Eugene Roberts Sr. endured 120-degree temperatures navigating the desert highways of Arizona and California.*



COURTESY OF EUGENE ROBERTS SR.

## Cheers and tears at finish line

Hundreds of VA employees, veterans and onlookers cheered, waved U.S. flags and shed tears of joy as Marine Corps veteran Eugene Roberts Sr., turned into the Baltimore VA Medical Center to finish a 3,200-mile coast-to-coast run on April 7. People stopped and stared in amazement as Roberts sprinted the final block. A run across the U.S. is a feat worthy of celebration, but this Vietnam veteran did it on two prosthetic legs!

Roberts began his incredible journey in July 2007 from Camp Pendleton, Calif. He made his way across nine southern states to Parris Island Marine Corps Depot, S.C., and then to the VA medical center in Baltimore. He said he would not have been successful without the loving support of his wife of more than 40 years, Alicia, and continual assistance from the VA Maryland Health Care System prosthetics team.

## Renewable energy projects at VA facilities

VA will be installing photovoltaic (PV) systems at the VA medical centers in Loma Linda, Calif., and Dallas this summer to provide clean, natural, sun-powered electricity. By using sunlight, these systems will reduce electricity costs and provide environmental benefits to those communities. Last year, VA screened its major facilities for PV potential, as well as use of wind, geothermal and biomass energy, and solar energy for water heating.

The evaluation identified 16 candidate sites for solar PV projects, 15 for solar water heating, six for wind, and two for direct geothermal energy systems. VA plans to award a contract for a wind energy pilot project at the St. Cloud, Minn., VA Medical Center this summer and a contract for a geothermal energy pilot project at the Boise, Idaho, VA Medical Center this fall. E-mail inquiries can be sent to [energy@va.gov](mailto:energy@va.gov).

## Helping a high school band get to the Olympics

The employees at the Louis Stokes Cleveland VA Medical Center observed Black History Month by collecting money to assist

the Shaw High School Band to travel to China to perform at the 2008 Summer Olympics. The band is among only a handful of U.S. bands invited to Beijing. Andrea Freeman, president of the Cleveland VA Medical Center Employee Association, heard Shaw's call for citywide support to raise money for the trip and challenged fellow employees to help send Shaw's marching band to China. VA employees responded by donating more than \$2,000.

This is only one of the many ways employees have contributed to the community. The employee association has raised thousands of dollars for the American Cancer Society; contributed to the Northeast Ohio Harvest for Hunger food drive; and participates each year in the Department of Children and Family Services' Angel Tree gift program.

## Bay Pines VAMC: Celebrating 75 years of healing

The Bay Pines, Fla., VA Medical Center celebrated its 75th anniversary in March. It is one of the few remaining true "One VA" campuses, with VHA, VBA and NCA operations all on the same property. Over the years, other VA and non-VA organiza-

## A symbol of mutual respect



SUSAN HUFF

*Army Sgt. 1st Class Gordon Ewell, left, presents a hand-carved walking stick to Medal of Honor recipient George E. Wahlen.*

A Purple Heart recipient from Operation Iraqi Freedom and a Medal of Honor recipient who served on Iwo Jima have found common ground. Gordon Ewell, who went on 59 combat missions while serving in Iraq, earning a Purple Heart, faces one of the most challenging missions of his life as he recovers from a traumatic brain injury. George E. Wahlen received the Medal of Honor for his service during World War II. The VA medical center in Salt Lake City bears his name.

The two men have been together at several events and have gotten acquainted. "Everywhere I went I was looking for my friend George," said Ewell. "I saw him so much I considered him my friend and talked about him all the time." Ewell had a custom-made, hand-carved walking stick crafted for Wahlen to show his appreciation.



## Giving injured soldiers freedom



KATHLEEN FLYNN/ST. PETERSBURG TIMES

*The digital accelerator ring replaces standard mechanical hand controls used by disabled drivers in the U.S. since the 1950s. It allows the driver to keep both hands on the steering wheel.*

An innovative steering device that allows disabled drivers to drive cars with the same level of safety as other drivers is giving freedom back to severely injured soldiers recovering at the James A. Haley Veterans' Hospital in Tampa, Fla. The facility is the first in the nation to receive the new technology, which will ultimately benefit disabled people across the country. The technology was introduced in the United States from Europe and sent directly to the Tampa VA late in 2007 in response to a request by Kim Floore, driver trainer/rehabilitation specialist, who believed it could greatly help veterans at the Tampa VA's Polytrauma Rehabilitation Center, including amputees who have lost both legs and must use only their hands to drive.

tions have been added to the campus, expanding its capabilities and services. The campus sits on 337 acres of waterfront property along Boca Ciega Bay. The medical complex serves more than 94,000 veterans and consists of an acute care hospital, inpatient psychiatry, nursing home care unit, domiciliary, and various outpatient clinics offering primary and specialty care.

The Bay Pines National Cemetery has more than 26,000 interments of veterans from the Indian War to present-day conflicts. The VA regional office delivers benefits and services to 1.8 million veterans and their families.

### A new recreation bus for Amarillo veterans

On March 11, the Amarillo, Texas, VA Health Care System held a dedication ceremony for a new nursing home care unit recreation bus. The previous bus was approximately 13 years old and had seen much wear and tear over the years. When the health care system's volunteers heard of the need for a new bus, they quickly took on the project of getting the residents a new bus. One volunteer applied for grants from the Amarillo Area Foundation and the Brumley Foundation. They

provided the bulk of the more than \$70,000 needed to purchase the bus; additional funding was provided by veterans organizations and individual donors. Within two years, all of the funding was received and the bus was ordered.

### Jessica Lynch at Clarksburg VA Medical Center

West Virginia native Jessica Lynch stopped by the Clarksburg VA Medical Center on March 27 to visit with veterans and receive a Quilt of Valor. Lynch's story made national headlines five years ago when she was captured when her convoy fell into an enemy ambush. While many of the soldiers lost their lives during a horrific firefight, Lynch survived, although severely injured. U.S. troops were able to stage a rescue and deliver her from the hands of the enemy. Five years later, she's keeping busy as a full-time mom and student. Lynch says she's just happy to be alive and home.

VA presented her with the Quilt of Valor to show appreciation for her service in the war. The Quilt of Valor program has volunteers across the country. They hand-stitch quilts to give to soldiers returning home from Afghanistan and Iraq. [VA](#)



LAWRENCE MARCHIONDA

*The Military Order of the Purple Heart presented a special jacket to Robert Lovejoy in honor of his 100th birthday.*

## 100th birthday party in Detroit

Purple Heart recipient Robert Lovejoy celebrated his 100th birthday at the John D. Dingell VA Medical Center's long-term care unit with the help of several service organizations, auxiliaries and special guests, including Detroit Mayor Kwame Kilpatrick. Lovejoy received special birthday messages from President Bush, Michigan Gov. Jennifer Granholm and Rep. Dingell (D-Mich.), and Mayor Kilpatrick presented him with a \$100 bill. In addition to numerous other gifts, Lovejoy was given a special purple jacket from the Military Order of the Purple Heart. Lovejoy was a prisoner of war during World War II and retired from the U.S. Postal Service after 32 years of service following the war.

### Humanitarian award for cemetery director

Gene E. Castagnetti, director of the **National Memorial Cemetery of the Pacific** in **Honolulu**, recently received the Legion of Honor Humanitarian award from the Chapel of the Four Chaplains Memorial Foundation in recognition of his community service. The Chapel of the Four Chaplains Memorial Foundation, a national nonprofit organization, was founded to perpetuate the memory of the four chaplains serving aboard the *Dorchester*, a U.S. Army transport ship. After being struck by a German torpedo on Feb. 3, 1943, the chaplains opened a storage locker and began distributing life jackets to the men aboard the sinking ship. When there were no more lifejackets, the chaplains removed theirs and gave them to four young service men. Of the 902 men aboard, 230 survived, 672 died, including the Catholic priest, Jewish rabbi, and two Protestant ministers. A posthumous Special Medal for Heroism was authorized by Congress in 1961 and presented to the families.

### Blind worker of the year at Albany VAMC

Switchboard supervisor **Patricia Starson** was named 2008 Blind Worker of the Year by New York's Central Association for the Blind and Visually Impaired. Starson has been a switchboard operator at the **Stratton VA Medical Center** in **Albany** since 1997. The facility's call center handles about 40,000 calls a month and all of the operators are blind. Starson and the rest of the operators wear a headset with a microphone boom. In their left ear, they hear the voice of the caller and a voice with a British accent that repeats every key touched on their telephone. In their right ear, they hear the synthesized voice of JAWS, the software that reads anything their computer cursor lands on, allowing them to page doctors, connect patients to the medical services, or call the proper personnel when an emergency code is broadcast on a patient floor.

### Commission appointment for VR&E counselor

**Michael Anthony, Ph.D.**, has been appointed to serve on the Commission for Rehabilitation Counselor Certification (CRCC). Anthony is a vocational rehabilitation counselor for the **San Antonio VA Benefits Office** and the only member of the federal workforce appointed to the CRCC. His five-year appointment as commissioner will run until June 30, 2013. The CRCC is the accrediting body for rehabilitation counselors worldwide. It is the oldest credentialing body in the counseling field. The organization employs 17 commissioners, 15 of whom represent various appointing organizations. These include the National Council on Rehabilitation Education, National Rehabilitation Association and Council on Rehabilitation Education. The commission has six standing committees, including Appeals, Ethics, Examination and Research, Executive, Public Education and Information, and Standards and Credentials.

### High honors for Stroke Team at Bay Pines

The **Stroke Team** at the **Bay Pines VA Healthcare System** in **Florida** received the American Heart Association/American Stroke Association's Get with the Guidelines Stroke Performance Achievement Award. Bay Pines is the first VA health care system in the nation to receive this award, which recognizes commitment and success in implementing a higher standard of

stroke care. To receive the award, Bay Pines compiled an interdisciplinary Stroke Team, consisting of emergency department and hospital physicians and nurses, and neurology, imaging and laboratory staff. Team members developed a comprehensive system for rapid diagnosis and treatment of stroke patients admitted to the hospital. Now equipped to provide brain-imaging scans, Bay Pines has neurologists available to conduct patient evaluations and use clot-busting medications. The team also developed patient education tools, including clinical reminders to all veterans over 40, as well as education for stroke patients to manage risk factors, reducing chances of a second stroke.

### Critical care excellence honors for Brooklyn

The **VA New York Harbor Healthcare System Combined Intensive Care Unit (CICU)** at the **Brooklyn campus** has earned the Beacon Award for Critical Care Excellence. Specifically designated to recognize the nation's top hospital critical care units, the award is given by the American Association of Critical Care Nurses. The CICU at the Brooklyn campus is the first intensive care unit in New York City and the first unit within VA nationwide to be presented this prestigious award. The Beacon Award recognizes units for exhibiting the highest quality standards in nurse recruitment and retention, patient outcomes, staff training and healthy work environments. **VA**

## Honors for Atlanta surgeon

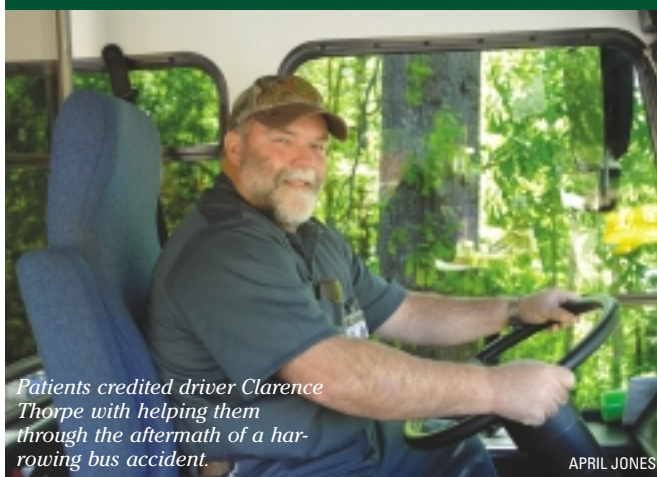


Cendales

The American Society of Transplant Surgeons (ASTS) selected Atlanta VA Medical Center surgeon **Dr. Linda Cendales** for its prestigious Astellas Faculty Development Award. As the 2008 recipient of the award, which recognizes a promising junior faculty member in transplant surgery research, Cendales will use a novel non-human primate model of composite tissue

allotransplantation that she recently developed to explore immunosuppressive regimens with reduced morbidity compared to current methods of transplantation. The research could help improve the options available to service men and women who have suffered limb loss. ASTS reviewed applications from across the nation before selecting Cendales for the annual award. The selection was made based on a competitive review of the candidates' accomplishments to date and their proposed research project, and was open to transplant surgeons who had completed a post-residency fellowship at an ASTS-approved training program.

## Calm and controlled in a crisis



Patients credited driver Clarence Thorpe with helping them through the aftermath of a harrowing bus accident.

APRIL JONES

Tuscaloosa, Ala., VA Medical Center motor vehicle operator Clarence Thorpe was driving patients to their appointments at the Birmingham VA Medical Center on April 8 when they were involved in a multiple vehicle accident that smashed their bus. Thorpe immediately made sure the patients were not injured and called 911. He reported the accident to the facility, and the steps he had taken to ensure that all patients were being cared for. He then called the Birmingham VA Medical Center to arrange transportation for the patients to their appointments once they had been assessed by emergency personnel.

Despite injuries to his eyes caused by shattered glass, Thorpe continued to put the veterans first when the paramedics arrived by relaying specific concerns to facilitate thorough assessments, and requesting that each one have their blood pressure taken. One of the patient-passengers on the bus later reported that the accident “could have been a lot worse. The driver remained calm and maintained control of the steering wheel throughout the harrowing experience. He took command of the situation and coordinated the relief efforts when help arrived.”

### Bringing chaos under control at an accident scene

Keith Harman, associate chief of nurse services and acute care services at the Grand Junction, Colo., VA Medical Center, heard “motorcycles screaming” by the facility, loudly announcing an illegal street race. As he turned to look, one of the three motorcycles struck a car broadside. Tracking the rider’s path through the air, Harman took off running to help. He arrived at the man’s side and immediately began to assess his injuries. Fortunately, other emergency professionals, including two nurses and an off-duty police officer, were driving by and stopped to help. The nurses assisted Harman while the officer organized onlookers into traffic control teams to help bring chaos under control.

Harman realized the motorcyclist’s trauma was extensive; little could be done for the 42-year-old man until the ambulance arrived. Turning his care over to the two nurses, Harman went to the aid of the car’s driver. With the temperature hovering at just below freezing, Harman immediately called the medical center for blankets, then held the driver, a 72-year-old man, in his arms to keep him warm until the blankets arrived. Emergency crews soon arrived and took responsibility for all of the accident victims. “Until [the accident], I had dealt with serious trauma, but in an emergency room, in a sterile environment,” said Harman. “I had also driven up on accidents and helped out, but this was an entirely different experience.”

### Going ‘above and beyond’ for a co-worker in distress

During the night shift, Miami VA Medical Center emergency room staff noticed that George Butler, a Vietnam veteran and one of their dedicated patient escorts, was missing from his post. Known for his promptness and work ethic, Butler’s absence raised further concern when he did not answer his pager or phone for more than 20 minutes. ER staff contacted Police Service and searched the hospital for Butler. Beverly Donohue, R.N., and Eddie Torres, R.N., found Butler unconscious, lying on the floor of a hospital staff bathroom. They immediately transported him to the ER, instituted resuscitative procedures and saved his life.

“This type of ‘above and beyond the call of duty’ makes me proud to work here,” said Laureitta Fealy, R.N. “George Butler asked me to express his gratitude to the Miami VA emergency room and VA staff for saving his life. He also said he enjoys working here because people care about each other and the veterans they serve.” [VA](#)

## First responder on the scene

On the evening of April 18, Jon Chitester, a program assistant at the Martinsburg, W.Va., VA Medical Center, was driving home when he noticed a huge cloud of dust marking the spot where an SUV had just rolled down an embankment. Chitester rushed to the smoking vehicle and found a victim, whom he carried to safety. Additional responders, including three fellow VA medical center staffers, stopped to assist Chitester as he rescued a second trapped victim. A former Army medic, Chitester worked with the injured until emergency assistance arrived. Both wreck victims were intoxicated, but grateful for the medical attention and support they received. One of them said to Chitester, “Thank you. You have given me a second chance to start doing things right.”



Chitester



## A White House Send Off for Soldier Ride

President Bush welcomed a group of wounded warrior bicyclists to the White House on April 24 to launch a three-day bike ride called the "White House to Light House Challenge." The Soldier Ride, sponsored by the Wounded Warrior Project, took participants from the White House to Walter Reed Army Medical Center and Baltimore before finishing in Annapolis, Md. VA Secretary James B. Peake was among the dignitaries participating in the send off. He told the riders they were sending "a great message" to the American people about their "sense of resiliency and commitment and caring and moving forward with life and with the mission."