



U.S. Department of Veterans Affairs

VANGUARD

November/December 2007

*The Twilight Brigade
Transition Patient Advocates
Cemetery Expansions in Florida
Veterans Day 2007*



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Vanguard

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Editor: Lisa Respass Gaegler
Assistant Editor/Senior Writer: Renee McElveen
Photo Editor: Robert Turtill
Photographer: Art Gardiner
Staff Writer: Amanda Hester

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U.S. Department of Veterans Affairs
810 Vermont Ave., N.W.
Washington, D.C. 20420
(202) 461-7427
E-mail: vanguard@va.gov
www.va.gov/opa/feature/vanguard

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On the cover

Twilight Brigade (Compassion in Action) volunteer Sari Honig spends time with VA Greater Los Angeles Healthcare System hospice patient Herman "Marty" Aguilar in the labyrinth at the Sepulveda facility. Twilight Brigade volunteers bring comfort and companionship to dying veterans at VA facilities around the country. The Greater Los Angeles chapter will celebrate its 10th anniversary next year. *photo by Paula Berger*

Green VA

In the May/June issue on page 32 you state the new Fort Harrison, Mont., benefits claims office is “VA’s first energy efficient and environmentally certified building.” I would contest that the VA Pacific Islands Health Care System in Honolulu is a “green” building and has been such well before the Montana office.

Please correct me if I’m wrong. We are very proud of our building for its “green” status in the beautiful state of Hawaii. This building has received numerous awards.

Just trying to get the details straight, and let the colors fall where they may. I may be incorrect by a technicality, but I’m just bringing the possibility to your attention that you may have overlooked our beautiful green Spark Matsunaga VA Medical Cen-

ter, which is located on the grounds of Tripler Army Medical Center.

*Nancy W. Winters, M.D.,
Ph.D.
Staff Psychiatrist
VA Pacific Islands HCS
Honolulu*

Editor’s note: We won’t dispute your points. Claims of “first” often do come down to a technicality or careful wording. The larger issue is that VA has been putting increased emphasis on “going green,” not only in building construction but in many other areas, as well. Look for more coverage of “the greening of VA” in future issues of *VAnguard*.

Drew Mays

I was excited to see the article on Drew Mays on page 30 of the July/August issue, but disappointed that it didn’t mention the city in which the

competition is located: Fort Worth, Texas. There is a VA presence in Fort Worth, an outpatient clinic that is growing by leaps and bounds. I went to school at Texas Christian University around the time that the Van Cliburn International Piano Competition started there. Not the amateur competition, but the original.

The amateur competition

started more recently and amazes me—these people have various ordinary kinds of jobs and play almost as well as the professionals. Extend my congratulations to Drew Mays. Job well done! Thanks for covering this in *VAnguard*.

*Shirley Campbell
Medical Librarian
VA North Texas HCS
Dallas*

We Want to Hear from You

Have a comment on something you’ve seen in *VAnguard*? We invite reader feedback. Send your comments to vanguard@va.gov. You can also write to us at: *VAnguard*, Office of Public Affairs (80D), Department of Veterans Affairs, 810 Vermont Ave., N.W., Washington, D.C., 20420. 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.

Ready for Flu Season?

The single best way to prevent seasonal influenza is by annual vaccination. Both staff and patients should be vaccinated to keep themselves and those around them healthy during the flu season. Although many people get their flu vaccinations in the fall, the flu season runs through winter and into the spring. Says Dr. Michael Kussman, VA Under Secretary for Health, in the foreword to the 2007-2008 VA Influenza Toolkit Manual: “I am proud of VA’s track record in promoting influenza vaccination for veterans and staff and I encourage you to keep up the good work.”

Here the good work of VA is evident. The Southern Arizona VA Health Care System in Tucson is one of several VA facilities that run drive-through flu vaccination clinics. VA medical centers also offer indoor vaccination clinics, include vaccination as part of regular appointments with patients, provide flu vaccination at employee and patient health fairs, use mobile carts to visit offices and health care units, and employ other creative ways to ensure that patients and employees, trainees and volunteers are offered vaccination.

Right: Roll in and roll up your sleeve! On a sunny day in Tucson, Ariz., veteran and hot rod driver Wendell Avery gets his flu shot from Kay Morris, R.N.



JOHN SOKOLOWSKI



Building a Veteran-Centered System of Care and Benefits

*Gordon H. Mansfield
Acting Secretary of Veterans Affairs*

As I continue guiding the department through this period of transition in our leadership, I am meeting regularly with top Department of Defense officials to plan and monitor implementation of recommendations made by the President's Commission on Care for America's Wounded Warriors led by former Senator Bob Dole and former Health and Human Services Secretary Donna Shalala.

The commission's recommendations focus on close VA-DoD coordination in providing care and seamless transition of military personnel injured in the Global War on Terrorism (GWOT). Much has been done already to put those recommendations into action, and I'd like to update you on our progress.

■ VA is hiring "federal recovery coordinators" who will help develop and implement individual recovery plans for seriously injured service-members. They will stick with their veterans as they move from military to VA care and make sure full and complete care is provided. Look for the first of this new cadre to be in the field just after New Year's.

■ A major change in the veterans' compensation program is being initiated through a pilot program underway in the Washington, D.C., area. Following the commission's recommendation that the military and veterans' disability compensation system be restructured, VA came up with a "single physical" disability concept combining the VA and military compensation

processes into a simpler streamlined program for disabled military members and veterans alike.

■ One thing every employee in VA can do is recruit veterans to fill VA jobs and I'm particularly excited by the 10 full-time "veterans employment coordinators" I'm bringing on board. They will focus efforts to attract, recruit and hire veterans throughout the department and work closely with the federal recovery coordinators mentioned earlier to assist GWOT veterans in coming to work at VA. Employing veterans is good government and good business and VA will lead by example.

Initiatives in mental health care are also underway. PTSD and traumatic brain injury are part of routine screening exams for GWOT veterans entering the VA health care system. VA held a national conference of its mental

health providers in September and is sponsoring a national meeting of experts from VA and other organizations inside and outside of government in January on PTSD therapy programs and approaches.

In December, VA and other leading prosthetics practitioners gather in Florida to review the latest products and technology available to them and the veterans they serve and introduce a new amputa-

tion care system being implemented throughout VA. A recent Gallup poll of major limb amputees showed general satisfaction with VA care; in fact, 84 percent of the veterans questioned said they would return to VA to continue their care.

While GWOT veterans are an important driver in VA planning and program development, we can't forget that they make up less than 20 percent of our overall workload. While we research and develop more effective treatments for PTSD, TBI and polytrauma cases, we must also focus our resources and brain power on helping older generations of veterans manage chronic and long-term health problems such as diabetes and heart disease.

The quality care and service we provide our younger combat veterans of today will keep them with us as they,

sixth Secretary of Veterans Affairs, Dr. Jim Peake, should he be confirmed by the Senate. I know that filling this position and getting on with the business of meeting the nation's obligations to its veterans is a priority of both the President and the Senate.

Dr. Peake is set to hit the ground running as Secretary. No one could bring more to the department as we work ever more closely with the Department of Defense to meet the needs of our newest generation of combat veterans and their families.

His career spans more than 40 years in military medicine, during which he held several medical commands and is credited with improving the training and techniques of the Army medical force. From 2000-2004, he served as Surgeon General of the Army.

Dr. Peake began his mili-

While we research and develop more effective treatments for PTSD, TBI and polytrauma cases, we must also focus on helping older generations of veterans.

too, age. Our goal must be to build and maintain a veteran-centered system of health care and benefits for all veterans—one that not only meets their needs as they age, but anticipates them and is ready to provide them the right care in the right place at the right time.

As we move toward that goal in the new year, I look forward to working with President Bush's nominee to be the

tary career in 1966 with service as an Army infantry officer in Vietnam. He received the Purple Heart with Oak Leaf Cluster for wounds sustained during that service.

His military experience, combined with his civilian work in management of medical examinations and electronic data, frame Dr. Peake as the right person at the right time to be Secretary of Veterans Affairs. [VA](#)



Supporting Health Care Worker Retention, Recruitment

Marisa Palkuti
Director, Healthcare Retention & Recruitment Office

The Healthcare Retention & Recruitment Office (HRRO) is a special program office of VHA's Workforce Management & Consulting Office that provides support to top management in the retention and recruitment of highly qualified health care professionals.

Through advertising, outreach activities, scholarships, and other initiatives, HRRO helps managers meet their workforce planning needs, staff development education goals, and recruitment and retention initiatives. The programs offered also help solve some of the challenges that the health care industry and VA human resources face today by helping to position VA as an employer of choice.

Retention and recruitment solutions include VA scholarship programs that provide funding up to \$35,000 for VA employees to further their education and obtain degrees qualifying them for health care positions such as nurses, pharmacists, blind rehab/low vision specialists, physical or respiratory therapists or any of a large number of health care occupations.

The Education Debt Reduction Program (EDRP) provides education loan repayments to newly appointed health care professionals in occupations for which recruitment and retention is difficult. Title 38 and hybrid title 38 occupations are covered by EDRP. Local VA medical center managers decide which occupations will be included in EDRP for their local recruit-

ing efforts. More than 800 VHA employees have participated in these programs since 2000. More than 4,000 employees have graduated from the scholarship program.

HRRO enhances recruitment by spearheading the development of national recruitment materials for VHA, including public service announcements, recruitment brochures, print and Internet advertisements, career fair booths, giveaway items, and more. The nationally developed materials promote the

Our office provides support to top management in the retention and recruitment of highly qualified health care professionals.

VHA recruitment message, "The Best Care – The Best Careers" as the primary branding element in the VA health care recruitment campaign.

With online advertising campaigns, HRRO has a unique ability to generate leads that support and complement VHA recruitment efforts. Web advertising attracts interest in and awareness of VHA health care occupations through job postings on commercial employment sites and an online health information network that is affiliated with more than 5,000 Web sites. These Web-based initiatives generate national and local exposure targeted at health care professionals, students and transitioning military personnel and veterans. HRRO online advertising programs generate millions of ad

impressions and account for more than 100,000 visits to the VHA recruitment Web site every month.

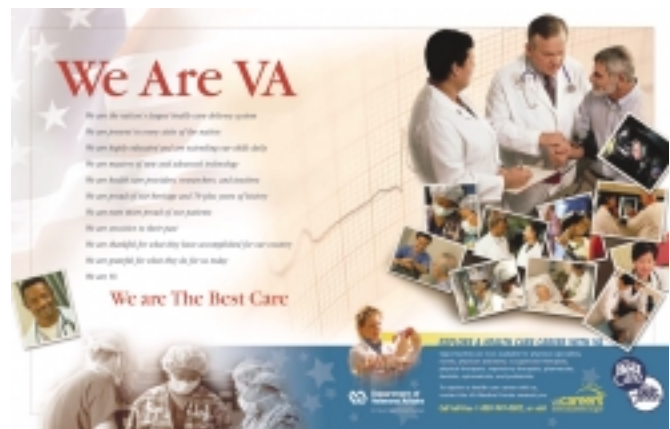
HRRO also develops print advertising programs that provide local direct classified advertising and national employment branding. Classified advertising plans are built around single job announcements and use journals, newspapers and the Web to promote positions. The national program provides ongoing exposure of VHA messaging to potential hires.

can Nursing Student, the Journal of the American Medical Association, the New England Journal of Medicine, Radiologic Technology and many others, we are able to reach more than 1.5 million potential candidates.

Program elements come together in the VHA Healthcare Recruiters' Toolkit, which puts recruitment and retention information, recruitment brochures and much more into a unique virtual online site that helps coordinate national and local recruitment

The purpose of the print advertising program is to establish VA as an employer of choice in the health care community, to promote VHA as a leader in patient care, and to clearly state the benefits of VA employment. By advertising in such publications as *Ameri-*

efforts. The kit helps recruiters combat the national health care professional shortage by placing all available recruitment tools and information at their fingertips. For more information, visit the toolkit at www.vacareers.va.gov/hrrotoolkit. VA



One of the generic ads available in the toolkit, accessible online.

Bill Smathers, left, a transition patient advocate with VISN 4 in Pittsburgh, confers with Michael Clark, of the Army Wounded Warrior Program, on a veteran's case.



GLENN HANGARD

Smoothing the Way

Transition patient advocates bring passion and commitment to their mission of helping severely injured veterans access VA care.

Passion and a heartfelt commitment to the mission of helping severely injured veterans access and coordinate care at VA.

These are the qualities the Veterans Health Administration looked for when they hired 100 transition patient advocates nationwide some eight months ago at the direction of former VA Secretary Jim Nicholson.

The transition patient advocates serve on four-member teams within the OIF/OEF Case Management Pro-

gram, according to Kristin Day, acting director of Social Work Service at VA Central Office in Washington, D.C., who oversees the national program. The three other members serving on each team are a program manager, clinical case manager and a Veterans Benefits Administration manager.

The program was established in May after former Secretary Nicholson completed a series of town hall meetings around the country with severely injured veterans receiving treatment

at VA medical centers. Day said the feedback veterans provided fairly consistently around the country was that while they were pleased with their quality of care while inpatients at VA, they found it more difficult to navigate their way around the VA system while receiving care as outpatients.

The majority of the 100 transition patient advocates hired are OIF/OEF veterans themselves; the rest are career VA employees. While their

(continued on page 8)

Progress on the Dole-Shalala Commission Recommendations

On Oct. 16, Defense Secretary Robert Gates and acting VA Secretary Gordon Mansfield transmitted to Congress the Administration's proposed legislation for recommendations from the President's Commission on Care for America's Returning Wounded Warriors that require statutory changes. The transmittal was kicked off by remarks from President Bush in the White House Rose Garden after he met with commission co-chairs Bob Dole and Donna Shalala and the two Cabinet secretaries.

The proposed legislation would streamline and modernize the disability evaluation and compensation systems, authorize extended family job protection and certain aid and attendant care benefits, create incentives to complete education and rehabilitation programs, make improvements to the diagnosis and treatment of post-traumatic stress disorder, and strengthen support for servicemembers and their families as they transition from DoD to VA care.

DoD and VA have already implemented or are in the process of implementing through executive authority the non-legislative recommendations of the Dole-Shalala commission. Among the accomplishments:

■ Newly hired "federal recovery coordinators" will help ensure medical services and other benefits are provided to seriously wounded, injured and ill active duty servicemembers and veterans. The first 10 are scheduled to be trained and in place in January at four of the military's major health care facilities: Walter Reed Army Medical Center in Washington, D.C.; National Naval Medical Center in Bethesda, Md.; Brooke Army Medical Center at Fort Sam Houston, Texas; and Naval Medical Center San Diego. Additional recovery coordinators will be added in the future as needed. They will coordinate services between VA and DoD and, if necessary, private sector facilities, while serving as the ultimate resource for families with questions or concerns about VA, DoD or other federal benefits.

The coordinators have a background in health care management and will work closely with clinicians and case management teams to develop and execute another major recommendation from the Dole-Shalala panel: individual federal recovery plans for the wounded. Those plans specify what services are needed across the continuum of care, from recovery through rehabilitation to reintegration to civilian life. The coordinators will have access to and support from VA's Under Secretaries for Health and Benefits, DoD's Under Secretary of Defense for Personnel and Readiness, as well as the commanders of facilities where servicemembers and veterans receive treatment.

■ In addition to the commission's recommendations, acting VA Secretary Mansfield took action to hire 10 "veterans employment coordinators" to focus VA efforts to attract, recruit and hire veterans throughout the department. These coordinators will work closely with the recently formed Federal Recovery Coordination Program to assist Operation Enduring Freedom and Operation Iraqi Freedom veterans with potentially obtaining employment at VA. The new hires are expected to be on the job by the end of the year. The coordinators will work with veterans interested in employment with VA, including those who have completed one of VA's Vocational Rehabilitation and Employment Service programs.

An internal task force is also being established to examine the department's retention, training and development of veterans already in the VA workforce. The task force will be led by the Office of the Assistant Secretary for Human Resources and Administration, with employment experts from the Veterans Health Administration, Veterans Benefits Administration, National Cemetery Administration, and additional VA staff offices. Approximately 31 percent of VA's 230,000 employees are veterans, and 7.7 percent are service-connected disabled veterans.

■ VA and DoD have begun a pilot program to test a new single disability evaluation system for wounded warriors at the VA medical center and the three major military medical facilities in the Washington, D.C., area. This initiative is designed to eliminate the duplicative and often confusing elements of the current disability processes of the two departments. Key features of the disability evaluation system (DES) pilot include one medical examination and a single-sourced disability rating. This pilot program will seek to ease the transition of wounded servicemembers through the disability evaluation system to reentry into the civilian community with more efficient delivery of disability compensation at the time they leave military service.

VA is providing the medical professionals performing the examinations. The pilot is being conducted for servicemembers at the Washington, D.C., VA Medical Center, Walter Reed Army Medical Center in Washington, D.C., the National Naval Medical Center in Bethesda, Md., and the Malcolm Grow Medical Center at Andrews Air Force Base, Md., and will run for one year. Throughout the pilot, VA and DoD officials will monitor progress to determine potential expansion into other locations.

The pilot includes all non-clinical care and administrative activities, such as case management and counseling requirements, associated with disability case processing from the servicemember's initial referral to a Military Department Medical Evaluation Board to VA's compensation and benefits program.



President Bush speaks in the White House Rose Garden after meeting with commission co-chairs Donna Shalala and Bob Dole, seated.

Transition patient advocates (cont.)

professional backgrounds vary, Day said their common unifying bond is their passion for helping veterans.

VHA brought the newly hired transition patient advocates to VA Central Office for a weeklong training and orientation session in June. They met with military treatment facility liaisons, learned how to enter veterans into the VA computer system, received briefings on regulations governing VA benefits, and got a broad overview of the VA organization.

Day said at least one transition patient advocate is assigned to each of the 21 health care networks within VA. The number assigned to each network is based upon the OIF/OEF veteran population seeking treatment within the network's catchment area.

Tracey-Lee Baker, 42, works in Florida as a transition patient advocate for the Orlando VA Medical Center. The retired Army Nurse Corps officer was working at a civilian hospital when she saw the job advertised at the VA medical center. Her last assignment before retiring from the Army as a major in 2006 was working as the night shift charge nurse in ICU at Walter Reed Army Medical Center in Washington, D.C. There her job entailed receiving wounded soldiers being air evacuated from the OIF/OEF theatres.

Baker said she missed the camaraderie between the nurses and doctors at Walter Reed in addition to caring for wounded soldiers. She said she decided to apply for the transition patient advocate position for "the love of the soldiers."

Baker says having both a military and medical background really helps her in her new position. She helps injured veterans enroll in the VA system, set up medical appointments, find out why medical appointments are cancelled, and contact the Defense Finance and Accounting System when they fail to receive their

military paychecks.

"I know who to talk to," she said. "I am able to reach somebody that they can't. I know how to read the forms. I know the military lingo."

Baker has assisted one soldier at the Orlando VAMC whom she treated while a nurse on active duty at Walter Reed.

"The TPA is a really good piece that the VA added," she said. "It really helps the servicemembers. They know who their point of contact is."

Bill Smathers, 49, works as a transition patient advocate for VISN 4 in Pittsburgh. He supports severely injured veterans at five VA medical centers in Pennsylvania and West Virginia. The retired Army colonel said the job was "the perfect fit" for him since it allows him the opportunity to use his 24 years of military experience.

"If you weren't getting paid for it, you'd almost volunteer for it," he said.

Since he started the job in May, Smathers said he has assisted some 30 soldiers and Marines with ages ranging from 19 to 50. If the servicemember can no longer work because of their injury, he helps them apply for Social Security benefits. If the servicemember does not have a disability rating established with VBA, he helps them fill out the paperwork.

Smathers notes that the needs vary from servicemember to servicemember. For example, one young soldier had his leg amputated and wanted to be able to work out and run again. Smathers helped him obtain a running prosthesis. Another soldier was suffering from PTSD, so Smathers set up a counseling appointment for him at a vet center.

"Our challenge is making sure everyone who is seriously injured or wounded gets the services that they are entitled to," he said. "Most of our duties involve resolving problems and removing the barriers."

He said the severely injured veterans he works with are appreciative

of the assistance he provides.

"They are so motivated," Smathers said. "They want to get back on with their lives. One of our biggest challenges is helping them do that."

John Sanchez, 39, works as a transition patient advocate at the Audie L. Murphy Memorial Veterans Hospital in San Antonio. He describes his role as "a communicator, a facilitator, and a problem solver."


The OIF veteran not only has his Army experience as a flight medic to draw on, he was injured and is now a paraplegic.

"Being an OIF veteran and a paralyzed OIF veteran helps other servicemembers open up to you because you have experienced what they are going through," he said. "There's a certain number of servicemembers that won't open up to a person who hasn't been there."

Medically retired in 2006 at the rank of sergeant first class, Sanchez sees a real need for the role of TPAs in advocating for young veterans "who would be reluctant to seek VA assistance or health care for themselves" after experiencing a traumatic injury.

Transition patient advocates will travel to military treatment facilities to personally introduce themselves to seriously injured servicemembers and their family members before they transition to a VA facility located nearest their homes. Sanchez said they make these visits so that the servicemembers see the same face through the entire transition process and help them make a smooth transition to the VA health care system.

"They are surprised when we come see them," he said. "It's one of the things they least expect."

Sanchez said he feels "blessed" to be alive today, and "to be afforded the opportunity to be hired to help other veterans." He said he can't think of anything he would rather be doing. 

By Renee McElween

Serving Veterans Through the Firestorm

As the fires raged across Southern California, employees set their personal concerns aside to stay on the job.

By mid-afternoon, Wednesday, Oct. 24, wildfires burning across Southern California had charred more than 490,000 acres, destroyed 1,500 homes and forced upwards of 800,000 people into the largest evacuation in California history.

While fires raged through the San Diego foothills, VA employees and facilities as far north as Loma Linda were affected. More than 500 VA employees were forced out of their homes, most from the medical center and regional office in San Diego.

Three employees lost their homes and many more faced property damage and cleanup costs. And while the fires burned, the business of serving veterans went on.

San Diego VA Regional Office Director Lily Fetzter was one of the evacuees who stayed on the job managing continuity of operations.

“We came together as a family during the firestorm,” she said. “Supervisors were in daily contact with all their employees; many of our evacuees stayed with fellow employees.”

Fetzter noted that public contact coach Karen Como’s home became known as “Hotel Como” because she welcomed so many office evacuees, families and pets into her home.

The regional office maintained critical services throughout the fires as employees stayed on the job even though their families had evacuated their homes. Pay technician Kathy Cooke kept financial transactions on schedule despite being evacuated twice.

“Other regional offices pitched in

to make sure the toll-free telephone service continued and veterans could contact us,” Fetzter said. “I couldn’t be more proud to be part of an organization as I was of being a VA employee during this terrible disaster.”

Those sentiments were echoed by Gary Rossio, VA San Diego Healthcare System director.

“With almost 500 employees evacuated from their homes, they still came to work to care for our veterans,” Rossio recounted. “We kept our medical center and five clinics open and were able to provide outpatient

to work—even pets were sheltered by VA.

“This was one of San Diego VA’s finest moments,” Rossio said, “truly a reflection of the quality and dedication of our staff.”

The San Diego Vet Center offered immediate support to one client and his family whose house was lost to the fire and contacted all clients to offer support. Vet center staff volunteered as crisis counselors at the Qualcomm Stadium emergency shelter, which housed several thousand evacuees during the firestorm’s peak.

As the fires were brought under control, acting VA Secretary Gordon Mansfield activated the VA Employees’ Disaster Relief Fund, using the same collection process previously developed during the hurricanes in the Southeast and for those affected by the terrorist attacks of Sept. 11, 2001.

In collaboration with the Leadership VA Alumni Association and VA’s Central Office Employee Association, the Veterans Canteen Service served as the primary collection point for employee donations throughout November. Donations may still be sent to:

*VA Employees’ Disaster Relief Fund
c/o VA Central Federal Credit Union
(831)*

*810 Vermont Avenue, N.W.
Washington, D.C. 20420*

An impartial panel will determine amounts to be sent to employee associations at the VA facilities whose employees suffered losses in the fires. The local employee associations will determine actual amounts to give to individual employees. **VA**

The fires were relentless, destroying homes and property in their path.



care, pharmacy service, emergency surgeries and other essential services.”

Medical center public affairs officer Cindy Butler put the facility’s Web site to good use, constantly updating it with information informing employees and veterans of changes affecting operations and services.

The medical center also provided housing for five nights, with more than 80 employees and family members staying at the medical center one evening. All the county schools were closed, so the medical center provided secure child care for more than 30 children so their parents could come

Meeting a Growing Need in Florida

Major expansions of national cemeteries in the Sunshine State are underway to keep up with demand for burial space.

The department is expanding burial space for veterans across the nation at an unprecedented pace. In addition to the five new national cemeteries VA has opened since 2005, six more will be established by 2009. The newest national cemeteries will serve 1.3 million veterans who do not currently have access to a burial option near their homes.

The growth of national cemeteries in the state of Florida vividly demonstrates the need—and VA's planned response—to provide veterans with access to burial space that is convenient and close to home. Between 2006 and 2008, VA will have invested more than \$148 million to establish, expand and improve national cemeteries to serve the 1.7 million veterans of the Sunshine State.

Nationally, VA's objective is to provide an option for burial to 90 percent of all veterans. The objective is measured by veterans who have an open VA or state veterans cemetery within 75 miles of their residence.

However, in 2006, only about 52 percent of Florida's veterans had access to a national cemetery under this criterion—a situation that was not acceptable to veterans, to their elected representatives, or to VA.

In April of this year, a crucial milestone was achieved with the opening of South Florida VA National Cemetery in Palm Beach County. The 313-acre cemetery now serves more than 400,000 veterans who live in the region of West Palm Beach, an area with one of the largest veteran populations in the nation. Two more national cemeteries—to be established near Sarasota on Florida's west coast and near Jacksonville in the northeast portion of the state—are now in development.

VA is also expanding and improving existing cemeteries to ensure uninterrupted service in the future. Projects have been completed, or are underway, at Florida National Cemetery in Bushnell, Barrancas National Cemetery in Pensacola, and Bay Pines National Cemetery, in the

Tampa-St. Petersburg region. When all projects are complete by fiscal year 2009, just over 90 percent of Florida's veterans will be served by an open national cemetery, reflecting VA's objective for the provision of burial space.

Establishing new cemeteries

The President's fiscal year 2008 budget request includes funds for the initial Phase 1 establishment of national cemeteries at Sarasota and Jacksonville. In Sarasota County, VA will invest \$27.8 million to construct the initial burial area of a 295-acre site. Construction is expected to begin in summer 2008, with first burials occurring in the fall or early winter.

In northeast Florida, VA will obligate \$22.4 million to develop an initial burial area on a 525-acre site that is being purchased from the City of Jacksonville. The National Cemetery Administration will work closely with VA's Office of Construction and Facilities Management to ensure these vital projects are completed in a



South Florida VA National Cemetery opened in April in Palm Beach County.



NCA

113 acres of land are being developed at Florida National Cemetery.

timely and cost-effective manner in support of veterans. When these cemeteries are operational—complementing South Florida VA National Cemetery and the other existing national cemeteries—Florida veterans will have access to a burial option in virtually every corner of the state.

Construction at existing cemeteries

VA is extending the life of existing cemeteries through projects to expand burial space, construct columbaria, and add other features that enhance the appearance and operations at national cemeteries. At Florida National Cemetery, a \$17.7 million project is underway to develop 113 acres of newly acquired land, to include installation of 28,000 pre-placed crypts for full-casket gravesites. As with all major cemetery construction projects, this expansion is projected to serve veteran needs for an additional 10 years. However, usage at this cemetery has been very high, and it is ranked as the



The obelisk at Bay Pines National Cemetery, where a new columbarium opened in October.

NCA

second busiest national cemetery in the nation. Though it has been operational for less than 20 years, it is now on its fourth major expansion project.

At Barrancas National Cemetery, an \$8.3 million project will develop gravesites on the cemetery's remaining 10 acres. The project will include installation of 5,000 pre-placed crypts, new committal shelters, a satellite maintenance area and other features that will enhance operations.

Further to the south, at Bay Pines National Cemetery, space for casketed remains was exhausted in 1987. However, the cemetery has continued to serve veterans with an option for burial of cremated remains. A new columbarium, which opened in October, provided approximately 10,350 niches for inurnments, extending the life of the cemetery until 2019.

VA is establishing new cemeteries, and seeking opportunities to maximize the use of space available at existing cemeteries, to ensure that an opportunity for dignified burial continues to be available to those who served and sacrificed on our behalf.

As demonstrated in Florida, VA is committed to fulfilling our nation's final promise to veterans: to honor those who have worn the uniform, and to commemorate their service in perpetuity. VA

By William F. Tuerk

Under Secretary for Memorial Affairs

Clarifying Policy on Flag-Folding Recitations at Burial Services

To ensure burial services at the 125 national cemeteries operated by VA reflect the wishes of veterans and their families, VA officials have clarified the department's policy on recitations made while the U.S. flag is folded at the gravesite of a veteran.

"Honoring the burial wishes of veterans is one of the highest commitments for the men and women of VA," said William F. Tuerk, VA's Under Secretary for Memorial Affairs. "A family may request the recitation of words to accompany the meaningful presentation of the American flag as we honor the dedication and sacrifice of their loved ones."

Traditional gravesite military funeral honors include the silent folding and presentation of an American flag, a 21-gun rifle salute, and the playing of taps.

The clarification includes the following:

- Volunteer honor guards are authorized to read the so-called "13-fold" flag recitation or any comparable script;
- Survivors of the deceased need to provide material and request it be read by the volunteer honor guards; and
- Volunteer honor guards will accept requests for recitations that reflect any or no religious traditions, on an equal basis.



NAVY

Returning to a Place of Honor

They returned to Washington, D.C., the same way they arrived 10 years ago—riding a chartered bus filled with their “sisters,” their comrades in arms. On this trip, however, they were now fast friends.

In October 1997, 153 women veterans boarded four chartered buses to travel from their homes in Tennessee, Kentucky and West Virginia to the nation's capital to participate in the dedication of a memorial built in honor of their military service. The Women in Military Service for America (WIMSA) Memorial—commonly known as the Women's Memorial—is located just outside the massive iron and marble gates of Arlington National Cemetery.

They had such a good time reminiscing about their days in the service and meeting other women veterans that on the way back home, sitting in the back of the bus, they put their heads together and decided to form the Women Veterans Network.

“They didn't want this sisterhood to die,” said MaryAnn Woodward-Smith, of the VA Tennessee Valley Healthcare System in Nashville.

She had just been appointed as the full-time women veterans program manager when she heard about the WIMSA dedication and decided to plan a trip to the event as a way of conducting outreach to women veterans. To defray some of the cost of the trip for the women veterans, she helped them plan and conduct yard sales, bake sales and car washes. They raised \$17,000 for the WIMSA dedication trip.

Mary Ross, 51, said she felt lost and was really floundering when she retired from the Army in 1995 at the rank of sergeant first class after serving for 21 years. Joining the Women Veterans Network and participating in their community activities, such as revitalizing a house to serve as a shelter for homeless women veterans, gave her a sense of purpose.

“It is such a great feeling to be

among other women you can be yourself with,” she said. “I can just be me.”

Terri Klozik, 52, had been retired from the Air Force for about a year when she signed up for the dedication trip 10 years ago.

“I felt like it would be closure for my military service,” she said. Klozik served for nearly 23 years, retiring at the rank of master sergeant in 1996.

Rather than serving as closure, the experience actually opened a door for her. She joined the Women Veterans Network on that trip.

“We just wanted to continue the camaraderie,” she said. “It's really easy to be with people who have been there. You have a common bond.”

That common bond was obvious as 41 women veterans gathered in the lobby of their Falls Church, Va., hotel on the morning of Nov. 2, drinking coffee and ribbing one another as

“Too often when Americans think of our servicemembers and veterans, they think only of men.”

they waited for the bus to arrive. The first event of the day was a luncheon cruise on the Potomac River.

Still conscious of military rank, they insisted that retired command sergeant major Sue Williams be interviewed first. Wearing heart-shaped patriotic earrings and a gold necklace with her rank, Williams talked about her two tours of duty in the Army.

She was 18 when she first joined in 1955. When she got married and became pregnant, the Army discharged her in 1957. Back then, pregnant women were not allowed to continue serving in the Army. After giving birth to three sons and eventually getting divorced, Williams signed up again in 1974 with the Army Reserve. In 1981 she went on active duty and served until 2000. During her career, she held several stateside assignments in addition to short tours in Japan and Egypt.

Williams, now 71, said she joined the Army because “it's the only thing

I ever wanted to do in my entire life.”

She was on the original WIMSA dedication trip and decided to return for the 10th anniversary celebration to enjoy the fellowship with the other women veterans. Several of her “sisters” made the return trip for the same reason.

VA employee Corina Collins, 53, planned the 10th anniversary trip for the group. She spent 21 years serving in the Air Force, first as an avionics technician on jet aircraft and then as a maintenance analyst for computers. She decided to make the return trip because “this is a celebration of everything we have accomplished.”

After their luncheon cruise, the group headed to the reunion at the D.C. National Guard Armory, where they socialized with other women veterans. On Saturday morning, they arrived at the Women's Memorial

around 10 a.m. so they could secure seats together for the official 10th anniversary celebration. Their first marching order was to pose for a group shot in front of the fountain. There was no shortage of leaders barking out orders and commands to get the group lined up for the photo.

While waiting for the program to begin at noon, some of the women walked around, scanning the crowd for familiar faces. Ann Antomattei said she signed up for the trip for the express purpose of trying to reunite with women she had served with in Vietnam. She accomplished her mission. She found six women veterans who had served in Vietnam while she was there serving in an Army military intelligence unit from 1969 to 1970. They were wearing royal blue vests with white lettering on the back: “WAC, Army, 68-69, Long Binh, Vietnam.”

The group stood around laughing and teasing one another about how

different everyone looked after some 37 years—a little grayer, a little rounder, and a lot older. Antomattei, 61, said she used to see Precilla Landry Wilkewitz dancing at the NCO Club “all the time” with one particular servicemember. Wilkewitz, a statuesque redhead, laughed and informed her that she ended up marrying that dancing partner. After posing for photographs with one another, exchanging phone numbers and addresses, and talking to a CBS News crew about their reunion, they disbanded and found their seats.

The members of the Women Veterans Network all had their reasons for making the 10th anniversary trip, and they all had stories to tell about their military service.

Wanda Bruce Graham, 54, retired from the Army as a lieutenant colonel in 2003 after serving 24 years. As a young officer, she served with Air Force Brig. Gen. Wilma L. Vaught, whom she greatly admired. Vaught has since retired and is now president of the WIMSA Memorial Foundation. Graham said attending the 10th anniversary celebration “makes you feel good to serve.”

The formal program for the 10th anniversary of the Women's Memorial dedication was a celebration of military service by women through the ages. There were a number of guest speakers, including Gordon H. Mansfield, acting Secretary of Veterans Affairs.

“Too often when Americans think of our servicemembers and veterans, they think only of men,” he said. Mansfield credited a special group of women veterans with saving his life while he was on his second tour of duty in Vietnam; his words were met with cheers and applause

from the crowd.

“From the rice paddies of the Mekong Delta to the jungles near the DMZ, nurses served in hospitals and support areas everywhere our troops were stationed,” he said. “Because these patriots worked so close to the battle zones, less than two percent of all of the wounded died of their wounds, an extraordinary accomplish-



ROBERT TURTIL



ART GARDINER

Top: Mary Ross, foreground, stands by the Army sign as women veterans line up by branch of service for the Candlelight March; above: Members of the Women Veterans Network in front of the Women in Military Service for America Memorial on Nov. 3 in Washington, D.C. The group traveled from their homes in Kentucky, West Virginia and Tennessee to attend the 10th anniversary ceremony of the dedication of the memorial.

ment. Many Vietnam veterans are still alive today, and I count myself in that number, thanks to the courage and skill of our combat nurses.”

Later that evening, members of the Women Veterans Network gathered at the Lincoln Memorial to line up for a candlelight march and service of remembrance. After securing an electric candle, some of the veterans lined up behind signs indicating their branch of military service—Army, Marines, Navy, Air Force and

Coast Guard. Most of the group elected to stay together and march as a group at the end of the formation.

As they made their way across the Memorial Bridge, the sun dropped below the horizon and the only light came from the candles carried by some 1,400 women veterans. A group of Army veterans sang cadence in clear, strong voices as they led the march across the bridge.

Celestine McNeal, 47, was one of the first women veterans to arrive at WIMSA for the service of remembrance. She served in the Army from 1978 to 2004, retiring at the rank of sergeant major. McNeal was asked to participate in the rose petal ceremony near the end of the program. The ceremony paid tribute to the 99 fallen sisters who have lost their lives fighting the Global War on Terrorism.

McNeal, who is a veteran of Operation Desert Storm and Operation Iraqi Freedom, read the name of Spc. Ciara M. Durkin with the Massachusetts Army National Guard. After reading the name, she tossed rose petals into the fountain.

“It was an honor to be able to participate in the rose petal ceremony,” McNeal said. “It was sad and emotional throughout the entire time that the names were being called out.”

Vaught said she was pleased with the 10th anniversary event. She said a number of World War II veterans wrote to her and told her that they wanted to be there, but were no longer able to travel.

“I was very pleased in the context that those who were here were just thrilled and found the event to be meaningful in their lives,” Vaught said. **VA**

By Renee McElveen

Arlington Portraits

They came to Arlington National Cemetery on Veterans Day for many reasons: to make one last sentimental journey; to visit the graves of fellow veterans who gave their all; to proudly escort the colors.

Veterans Day at Arlington National Cemetery, across the Potomac from the nation's capital, began with a breakfast at the Women in Military Service for America (WIMSA) Memorial. Veterans, active duty servicemembers, veterans service organization representatives and VA employees gathered at the memorial for a buffet breakfast and to mingle with old friends and greet new faces.

Gordon H. Mansfield, acting Secretary of Veterans Affairs, welcomed fellow veterans and other guests to the breakfast, and thanked all for their service.

One of those veterans was Vietnam veteran Bob Howard, 69, of San Antonio. Wearing a dark suit with the light blue ribbon of the Medal of Honor encircling his neck, Howard sipped coffee while fellow veterans recognizing his award came up to him to introduce themselves and shake his hand.

Howard served five tours in Vietnam from 1964 to 1971.

"I had just about every position you could have in Vietnam, from squad leader to company commander," he said.

Howard retired from the Army in 1992 as a colonel and today serves as president of the Medal of Honor Society. He said he comes to Arlington National Cemetery every year on Veterans Day, noting that he has 78 friends buried in Arlington.

Howard's son, Pfc. Robert L. Howard Jr., is currently serving in Af-

ghanistan with the Army's 173rd Airborne. "Veterans Day is very special to me," Howard said.

A veteran from another war—80-year-old John Whalen—traveled from his home in Mesa, Ariz., to participate in Veterans Day activities in Washington, D.C.

"I feel it's my last sentimental journey home," he said. "I wanted to honor those who were not as lucky as

on active duty in a ceremonial unit in Washington, D.C., helped usher people to their seats in the amphitheater as the crowd streamed in for the 11 a.m. ceremony. Wearing his dress uniform and white gloves, he politely directed traffic and answered questions.

Lance Cpl. Craig Seaman, 20, of Humble, Texas, said it was "a great honor" for him to be working on Veterans Day and meeting veterans from other wars, from other times.

Thirteen Quantico, Va., Young Marines, wearing camouflage uniforms, caps and black leather boots, stood in formation outside the amphitheater waiting for their signal to escort the colors carried by members of veterans service organizations into the white marble and granite structure filled with more than 3,500 people. First Sgt. Jessica Mattson, 17, said the Young Marines organization works to improve communities and keep youth away from drugs and alcohol. The high school senior said they meet twice a month and participate in community

activities such as handing out water at the Marine Corps Marathon and cleaning up along highways.

Pfc. Caleb Venable, 9, joined the Quantico Young Marines about a year ago because he "thought it would be fun." He wears ribbons on his uniform that he earned for learning first aid and CPR, achieving his physical fitness level, and for participating in veterans' appreciation activities. The third-grader said he hasn't made up his mind yet about whether or not he wants to join the real Marines when he graduates from high school. **VA**



Bob Howard, right, with fellow MOH recipient Brian Thacker.

ROBERT TURTIL



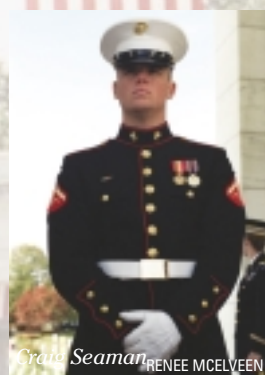
Caleb Venable

ROBERT TURTIL



John Whalen

RENEE MCELVEEN



Craig Seaman

RENEE MCELVEEN

I was."

Wearing an olive drab garrison cap with the Marine Corps insignia and his red, yellow, blue and gold service medals pinned to the left side of his olive jacket, Whalen ate hash browns and sipped coffee as he talked about his service during World War II. He served in the South Pacific from 1944 to 1948 with the Fleet Marine Force in an Amphibious Tractor Battalion.

In addition to attending the formal ceremony at the Arlington National Cemetery amphitheater later at 11 a.m., Whalen said he planned to visit the graves of two of the Marines who raised the flag on Iwo Jima—Ira Hayes and Rene Gagnon.

A young Marine currently serving

By Renee McElveen



ART GARDINER



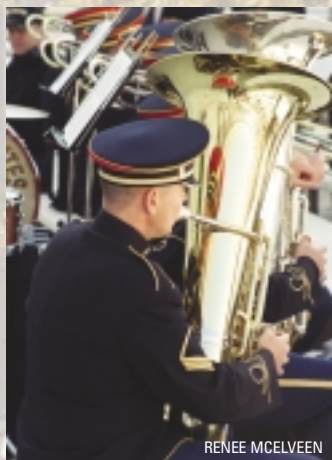
MICHAEL L. MOORE



ROBERT TURTIL



ART GARDINER



RENEE MCELVEEN



ROBERT TURTIL



ROBERT TURTIL

Clockwise from top left: The Vietnam Veterans of America sponsored a 25th Anniversary Parade celebrating and commemorating the dedication of the Vietnam Veterans Memorial on Nov. 10 on the National Mall. Another anniversary event was the reading of all 58,256 names on The Wall; Vice President Dick Cheney lays the traditional wreath at the Tomb of the Unknowns at Arlington National Cemetery on Nov. 11; Retired Army Gen. Colin L. Powell addresses the crowd gathered for the Veterans Day ceremony at the Vietnam Veterans Memorial; Staff Sgt. Alicia Woolard, of the Young Marines, Prescott, Ariz., greets World War I veteran Frank Buckles, 106, during the Veterans Day ceremony at the grave of Gen. John J. "Blackjack" Pershing at Arlington National Cemetery. Pershing commanded U.S. forces in World War I; Staff Sgt. Tom Bratten plays the tuba as the U.S. Army Band "Pershing's Own" performs a musical prelude at Arlington National Cemetery on Veterans Day; Calvin Howes, 74, of the Marine Corps League, carried the American flag into the amphitheater at Arlington National Cemetery as part of the Veterans Day ceremony's procession of colors; The crowd at Arlington National Cemetery watches the flag procession at the start of the Veterans Day ceremony.



DEREK GEE/THE BUFFALO NEWS



WALT CODY



AL BLOOM



BRAD GARNER



BERHARD LASHLEYDNER/FREIHAND PHOTOGRAPHY



EDGARDO CABALLERO

Clockwise from top left: Mary Buerster, wife of a former POW and volunteer with the VA Western New York Healthcare System in Buffalo, at the facility's Veterans Day ceremony on Nov. 11; Members of the Korean War Veterans of the Navajo Nation participated in the Veterans Day parade at the Bob Stump VA Medical Center in Prescott, Ariz. They are frequent participants in the annual parade; Veterans gathered in front of the Montgomery, Ala., VA Medical Center at the Central Alabama Veterans Health Care System's traditional Veterans Day celebration; The Millennium High School Tigers Band marches during the Phoenix Veterans Day Parade put on by the Carl T. Hayden VA Medical Center. The parade drew nearly 200,000 spectators; 95-year-old World War II veteran John Alexander welcomed Speaker of the House Nancy Pelosi (D-Calif.) to the San Francisco VA Medical Center's nursing home care unit during her Veterans Day visit to the facility and served as her official escort; A soldier from the 82nd Airborne Division at Fort Bragg salutes during the Veterans Day program at the Fayetteville, N.C., VA Medical Center.



Above: Gerald Alperstein, commander, Jewish War Veterans, Manhattan-Cooper Post 1, plays the trumpet at the VA New York Harbor Healthcare System's Veterans Day ceremony at the Manhattan Campus; right: Shiny new wheelchairs lined up in the lobby of the Washington, D.C., VA Medical Center. VA facilities in Washington and three other cities—Chicago, Los Angeles and Dallas—received wheelchairs donated by the Wheelchair Foundation and the Knights of Columbus on Veterans Day weekend. Facilities in each of the four cities received 500 wheelchairs. Most of the wheelchairs were distributed to veterans who needed them; the rest are being used to transport patients within the facilities. The total value of this donation by the organizations is



more than \$1 million. The Wheelchair Foundation is a nonprofit organization whose mission is to provide wheelchairs to those in need. The chairs bring independence to those deprived of mobility by war, ill health or poverty. Their global network delivers 10,000 wheelchairs a month. The Knights of Columbus is a Catholic fraternal benefit society celebrating 125 years of offering assistance to the sick, disabled and needy.

Editor's Note: On Veterans Day, National Public Radio featured this moving piece written by VA Northern California Health Care System clinical psychologist Joel Schmidt, who works at the Oakland Outpatient Clinic. The piece was part of NPR's essay series "This I Believe."

Resilience Is a Gift



I listen to people for a living. As a psychologist in the Department of Veterans Affairs, I hear about some of the worst experiences humans have to bear. I have sat face-to-face with a Bataan Death March survivor, an airman shot down over Germany, a Marine who was at the Chosin Reservoir, veterans from every region of Vietnam, medics and infantry soldiers from Afghanistan and Iraq. I have spoken with people who have been assaulted and brutalized by their own comrades, and parents who've had to attend their own children's funerals.

I have gained a surprising belief from hearing about so much agony: I believe in the power of human resilience. I am continually inspired by the ability of the emotionally wounded to pick themselves up and keep going after enduring the most traumatic circumstances imaginable.

Iraq veterans describe to me the constant hell of unpredictable IED attacks and invisible snipers. By the time they get home, many can't drive on the freeway or be in the same room with old friends. One vet described being locked in an emotional cage between numbness and rage.

Emerging from this terrible backdrop, many Iraq vets have surprised me with their drive to recover and their unpredictable ways of giving back some meaning to their lives. For example, there was a veteran whose most powerful therapeutic experience was helping his grandmother keep her small business running. This cause gave him a reason to care, someone to emotionally connect with and ultimately a reason to get up in the morning.

This might sound like naïve optimism when in fact treatment is often long and hard, and not every story has a happy ending. Some days when I go home my head hurts. I feel sad or worried or angry or ineffective. On these days, I have to appeal to my own strategies for self-care, pick myself back up and keep going.

I went to school to learn how to help people get better. Instead, it is often the very people I have spent my career trying to help that remind me how to care for myself. I keep a catalog of them in my head and I try to use this list as a road map, an inspiration and a reminder of what human resilience can achieve.

I make it a point to complement the strength and ingenuity of the people who sit in my office. But the truth is, I don't think many of them realize the depth of my admiration. Sitting in the room with these people every day allows me to hope that I might also find strength to face future problems. This solid sense of hope is a gift and it is my humble desire to share it with the next person who sits with me.

"Resilience Is a Gift," ©2007 by Joel Schmidt. Reprinted by arrangement with This I Believe, Inc. To read and hear other essays, and to submit your own, visit www.thisibelieve.org.

'No one wants to die alone'

The Twilight Brigade brings comfort and companionship to dying veterans.

There are real angels in the City of Angels serving tirelessly at the VA Greater Los Angeles Healthcare System.

"Serving at the bedside of vets is the most meaningful thing I do," said volunteer Marsha Oseas. A legal secretary at a large Los Angeles law firm, she is one of the 12 to 15 active volunteers for the Twilight Brigade (Compassion in Action) program at VA Greater Los Angeles.

Oseas and her fellow volunteers provide daily reassurance and human companionship to the dying, relief and support to loved ones and caregivers, and compassionate 24-hour attention through the veterans' last hours, allowing them to die in peace and dignity.

The national Twilight Brigade program, founded by Dannon Brinkley, has been around since 1997; the Greater Los Angeles affiliate will celebrate its 10th year in 2008. The organization works with VA Greater Los Angeles at the hospital and nursing home care unit, offering its services at no cost to either the patient or the family.

Brinkley's service to dying veterans began in 1984, when the Aiken, S.C., native took his father, a World War II veteran, to VA for care. While waiting for his father, he visited hospitalized patients.

Some of the patients he looked in on were dying of AIDS. In those early years of the AIDS crisis, with fears about how the disease was transmitted running high, they had few visitors. Brinkley saw how lonely and afraid of dying they were.

"It started with visiting the AIDS patients and then branched out from there," he said.

Brinkley, 57, had some idea of what it was like to be in their situation.

"I got struck by lightning in 1975 and was paralyzed for six days," he said. "I was partially paralyzed for seven years and it took two years for me to learn to walk again and feed myself."

Brinkley's wife, Kathryn, and three of their six children volunteer

ing and giving back to those men and women who so gallantly made the personal sacrifices necessary to keep our great country free."

In addition to the national headquarters in Los Angeles, Twilight Brigade has offices in San Diego; Long Beach, Calif.; Loma Linda, Calif.; Palo Alto-San Francisco; Portland, Ore.; Seattle; Spokane, Wash.; Chicago; Dayton, Ohio; Birmingham, Ala.; and Atlanta, with smaller groups in 10 other states.

They began with four volunteers



PAULA BERGER

Twilight Brigade volunteer Sari Honig visits VA Greater Los Angeles hospice patient Ronald Stovall.

with the organization.

"We are so very dedicated to the power and purpose of the Twilight Brigade that we have made it a family affair," said Kathryn. "It is our form of spiritual activism, our way of honor-

and now have 5,000.

James Lewis, a health technician with VA Greater Los Angeles, has been a volunteer for six and a half years, logging 8,500 hours of service with the Twilight Brigade.

Twilight Brigade founder Dannion Brinkley checks in with VA Greater Los Angeles Healthcare System hospice patient Gaylen Braxton as Jennifer Gomez-Grabot, R.N., looks on.



"We satisfy the religious, spiritual and emotional issues and try to maximize that end-of-life time," Lewis said. "We become friends and sometimes a surrogate family."

Volunteers free up the medical professionals by performing mundane tasks like running prescriptions, helping with oxygen bottles, and moving and acquiring furniture.

But most of all, the Twilight Brigade volunteers are there to give the patient someone to talk to. "Sometimes the doctors become white coats that talk about you instead of to you," Lewis said.

Rosanna Guidi has volunteered with the program in Los Angeles for seven and a half years, spending some of her time working in the Twilight Brigade office. What does she think it takes to be a Twilight Brigade volunteer?

"Volunteers should be good listeners, authentic and comfortable with who they are," Guidi said.

Persistence is sometimes needed, too, for those rare occasions when a

patient is stubborn or obstinate. "One guy didn't want me to visit him," Guidi said. "He told me that he didn't want to talk to anyone. He said, 'What are you getting out of this?' Finally, after I kept coming back, he did a full 180. He looked forward to my visits."

"It takes about three visits for the patient to realize that the volunteer is serious," Brinkley explained. "The first reaction is, 'What are you doing here?' The next time, the patient wonders if the volunteer feels guilty and that's why they're showing up. By the third visit, the patient actually wants to know about the volunteer. They want to know who the volunteer is."

Dr. Kenneth Rosenfeld, director of Palliative Care at VA Greater Los Angeles, works closely with the Twilight Brigade. "I make referrals, coordinate visitor relationships, and find out the interest of the patient in having the volunteers come," he said. "It's a patient-centered program."

Rosenfeld is also involved in the

recruitment and training of the volunteers. He takes part in the mandatory 20 hours of training every volunteer goes through, giving a presentation on clinical programs and the value of the Twilight Brigade to patients.

Oseas, one of the trainers for the program, said role-playing exercises are used to help volunteers learn to develop empathy and listen to the patients.

"The volunteers learn that they can't fix things," Lewis said. "They learn to be in the moment."

Once they've completed training, volunteers must go through "VA processing," where they are interviewed, checked for tuberculosis, and educated on HIPAA policies and patient privacy issues. They also fill out all the required VA and federal government forms, get fingerprinted, and get photographed for their ID badge.

After processing is completed, volunteers work hand in hand with a fully trained Twilight Brigade volunteer. They receive 10 hours of mentoring by having an experienced volunteer go along with them when they visit patients.

"During the mentoring, you connect with a patient," said Lewis. "Your trainer wants you to do that so you will go back. But you have to show up regularly, because the patient depends on you."

Twilight Brigade volunteers become a great source of comfort and assistance to the patients.

Guidi has brought chocolate chip cookies to patients, and when one patient told her that he didn't trust the water and thought it was making him sick, she brought him bottled water every day.

"The experiences are life-altering," Oseas said, "and our volunteers have a connection to each other through the work they do."

Volunteers include active duty military personnel and veterans.

"We have a lot of doctors and nurses who are trained volunteers,"

said Brinkley, “including six in VA headquarters.” And he is always recruiting more. “The need for people is what’s so important,” he said.

Volunteers often have to determine where the patient is in the process of dying. By the simple fact of being there at the veteran’s bedside, Twilight Brigade volunteers give the dying someone to talk to about the experience.

“Some speak up easily,” Guidi said. “Others don’t. When we visit them, they get permission to speak. Sometimes they don’t want you to say anything. They just want you to hang out or watch a ball game. It’s important that they are visited every day.”

Pain is a major issue.

“There’s a point when a patient can’t communicate their pain,” Lewis said. “You have to be sensitive to their body movements and gestures for signs that they want more medication. And pain can [keep the person from dying].”

In the final stages of dying, some VA Greater Los Angeles patients go home if there is someone to take care of them. But many go to the hospice at the Sepulveda facility. It has rooms for family members and is homier than a hospital setting.

Some of the dying don’t want to go to Sepulveda because it means they are really dying, and they haven’t come to terms with it yet.

Some patients have no family and the volunteer becomes their surrogate family. Other patients’ families live a long distance from them, so the patient often has a sense of abandonment.

Many patients have concerns about being the only support for their families. They are afraid the family won’t get along when they are gone. Some believe they have unfinished business with family members. Volunteers learn to interact with family members while avoiding being pulled into family dynamics.

Lewis said volunteers are often present at the patient’s bedside during

their final moments.

In their initial training, the volunteers learn to examine their own fears about death and dying by participating in structured exercises to resolve those fears.

“You learn to act and not be frozen by the situation,” Lewis said. “Once you come to know it, you lose your fear. It’s the unknown that makes us fearful. And God bestows special gifts [on] those who serve.”

“It is daunting at first,” Guidi said. “The first time I went into the ICU, I was a little afraid of seeing people all hooked up to machines. But I’ve learned a lot about courage from the patients.”

The Twilight Brigade volunteers say religion often plays a part in the final stages of dying. They frequently send for chaplains and other clergy at the patient’s request.

During their training, volunteers learn to respect spiritual, religious and cultural differences and not impose their own beliefs or values on the pa-

“It is daunting at first. But I’ve learned a lot about courage from the patients.”

tients. The volunteer and patient often talk about the afterlife as the end of the patient’s life draws near. “One veteran was afraid he wouldn’t be forgiven for all the people he had killed in the war,” Guidi said.

In that case, her objective was to alleviate his concerns.

“In the final stages of dying, the patient many times is at peace with their [God] and everything,” said Guidi.

Once the veteran dies, Twilight Brigade volunteers say they sometimes second-guess themselves and worry that they didn’t do enough to help that person while they were alive.

“But you really can’t say the wrong thing,” said Guidi. “You can’t push yourself beyond what you can do. Personalities of the volunteer and patient come together. It is our job to

make it a safe place for them. Wonderful things happen.”

Given the emotional toll it is bound to take on them, why do Guidi and the others volunteer as members of the Twilight Brigade? Their reasons are varied.

“I became a hospice volunteer after a year of dealing with a life-threatening illness of my own,” Oseas said. “I did inner work having to do with facing my own mortality and other existential and spiritual matters. I picked up my life again knowing that I would be living very differently than I had before. For me now, ‘service’ is the most cherished piece of the fabric of my life.”

Service is also what motivated Lewis to volunteer.

“I realized our lives are about service,” Lewis said. “You have to act to make a difference in the lives of others.”

Guidi learned about the volunteer opportunity through a friend and decided to sign up for the training.

“Service in the program is beneficial to both the volunteer and the patient,” Guidi said. “There is an exchange of love as you stand by and listen and connections are made.”

“Veterans wonder if anyone will appreciate what they did,” said Brinkley. “They were there for us when we needed them. We need to be there for them.”

Families appreciate the work of the volunteers, too. “I have received beautiful cards and letters from family members,” Guidi said, “but you shouldn’t do it expecting a pat on the back.”

Oseas has a mantra that she shares with other volunteers: “Just show up. It’s not about you. It’s lonely to be sick in the hospital. No one wants to die alone.” **VA**

By Pamela Wills

"Hangin' Ten!" Iraq veteran David Vidano shows how it's done.



California Healin'

PAULA BERGER

Disabled veterans learn to catch a wave at adaptive surf camp.

In a scene reminiscent of D-Day, a platoon of former soldiers, sailors and Marines recently assaulted a local Southern California beach as part of an invasion dubbed "Operation Amped." But instead of wearing body armor and riding in on a tank landing ship, they wore wetsuits and rode in on surfboards.

Held Sept. 19, the event marked the first time that any VA medical center was involved in an adaptive surf camp held solely for disabled veterans, according to Randi Woodrow, chief of Physical Therapy at the VA Greater Los Angeles Healthcare System. Physical Therapy and Voluntary Service joined forces with the William Morris Agency and the Skylar Peak Surfing School for a truly

unique, California approach to rehabilitation.

This surf camp differed from previous events, which were targeted at Operation Enduring Freedom/Operation Iraqi Freedom veterans and focused on the challenges of amputations, severe burns, spinal cord injuries and traumatic brain injuries. Instead, this camp was open to *all* Greater Los Angeles disabled veterans of any age, even if their disability was not service-connected.

Fourteen veterans participated in the event, and their disabilities were as varied as their ages and military backgrounds. The youngest, a 22-year-old woman veteran, was severely injured while serving in Iraq; the oldest, a 68-year old Vietnam veteran,

had suffered a serious stroke. Not all of their disabilities were visible.

"Some of the younger veterans here have traumatic brain injuries," Woodrow explained. "They may look normal and sound normal, but they have trouble processing. What I have found in dealing with patients with TBI is that less is more. The best way to teach them is to show them, not tell them, with short, simple instructions and lots of positive reinforcement."

The veterans' teacher was none other than Shaun Tomson, the 1977 world champion big wave surfer from South Africa. Tomson, who is still recovering from the accidental death of his teenage son Mathew, gave an inspirational pep talk.

“Surfing teaches you so much about life,” he told the veterans. “It teaches you about independence, commitment and courage, which you guys know about. But it can also help you with terrible challenges in your life. I lost my beautiful boy last year.”

His voice breaking, Tomson paused and glanced out at the ocean, trying to control his tears. “He was only fifteen years old and surfing has really helped me get through the pain of his loss.

“You guys have had a similar loss,” he continued. “A piece of you is gone and a piece of me is gone, too. But I think what surfing teaches you is you should just paddle back out, you know? It teaches you that there is always going to be another wave out there.”

That was all the motivation these veterans needed, as they donned wetsuits and headed for the surf. Led by Jeff Kolodny, a former surfing magazine editor and now a vice president and talent agent at William Morris, the surfers-turned-instructors each paired up with a veteran and stayed by their side all day, providing some valuable one-on-one instruction.

In addition to the surfers from William Morris, a few of VA’s own helped teach the veterans and even managed to catch a few waves of their own: Dr. Peter Glassman, staff physician; Kurt Bormann, Health Services specialist; and Jeff Blake, an administrative fellow assigned to the director’s office.

The event even had its own physician, Dr. Doreen Opava-Rutter, the OIF/OEF polytrauma doctor at the West Los Angeles VA Medical Center. Even though she declined a surf lesson, she was always close at hand, at times wading out into the water to help a veteran get to his feet after “wiping out.”

For some of the veterans, it was a challenge just to get through the sand to the water. John Dunbar, a former Marine corporal who served in Iraq,



PAULA BERGER



PAULA BERGER

Top: After practicing in the sand, the disabled veterans were ready to charge the water. By the end of the day, a few managed to ride a wave all the way in, grinning proudly from ear to ear. But even those who “wiped out” laughed and went right back out to try again; above: After several hours in the surf, Iraq veteran John Dunbar hitches a ride in the sand-adapted wheelchair, pushed by VA physical therapist Randi Woodrow and Robbie Fraser, an agent with William Morris. Doreen Opava-Rutter, a VA polytrauma doctor, accompanies them along the beach, with veteran Bilal Hassan, left, and surfer Tom Tapp bringing up the rear.

lost an arm and a leg in a motorcycle accident only a year ago. Unable to wear his prosthesis near the water, Dunbar declined the offer of a special sand-worthy wheelchair.

Fiercely independent, the determined Marine hopped down the sand to the water on one foot, eager to hit the surf. “I’ve never done this before, but it’s good to try something new,”

he said. “I’m glad they arrange therapy events like this outside of the clinic.”

Was the event a success? Watching Dunbar hop down to the water and crawl on his stomach onto the surfboard, eagerly waiting to catch the “perfect wave,” was answer enough. **VA**

By Becky James

Powerful Therapy: When Alvis Met Stevie

For wounded Iraq veteran Alvis Burns, meeting a rock star turned out to be an inspirational experience for them both.

Imagine meeting a famous singer but not remembering it. That's what happened to Army Staff Sgt. Alvis Burns, a wounded Operation Iraqi Freedom veteran.

In 2005, Burns was recovering at Walter Reed Army Medical Center in Washington, D.C., when Stevie Nicks, who rose to fame in the '70s as a member of legendary rock group Fleetwood Mac and has since enjoyed a long and successful solo career, visited on a morale tour. Nicks, whose foundation, Band of Soldiers, helps wounded veterans, stopped by Burns' hospital bed to lift his spirits.

Back then, a severely injured Burns could barely speak or respond to questions because of a traumatic brain injury he suffered while serving in Iraq. Still experiencing memory loss, he has no recollection of his first encounter with Nicks.

After he was released from Walter Reed, Burns entered the VA polytrauma center in Palo Alto, Calif., to continue his rehabilitation. He later transferred to the Northern Arizona VA Health Care System in Prescott to be closer to his wife, Elizabeth, and their three young daughters. Once there, Burns made tremendous progress, working with multiple therapists to improve his reflexes, motor skills and other functions.

In early 2007, staffers learned that Nicks' concert tour was coming to town and wondered if they could arrange for Burns to attend. After contacting Nicks' personal assistant, they were surprised to find out Nicks remembered Burns and, inspired by his progress, she arranged for free VIP tickets and backstage passes.

Deciding to use the concert as a

motivational tool, the therapists worked together to create a powerful therapy plan. In preparation for the backstage meet and greet, his speech therapist helped him practice talking and reading a card to the singer. His occupational and physical therapists helped him get comfortable in a loud concert venue and worked with him on getting up, walking to Nicks, and giving her a hug.

On July 27, Burns, his wife, sister, and three VA therapists attended the long-awaited concert in Prescott Valley. During the performance, Burns surprised everyone by singing along to the songs and remembering the correct lyrics.

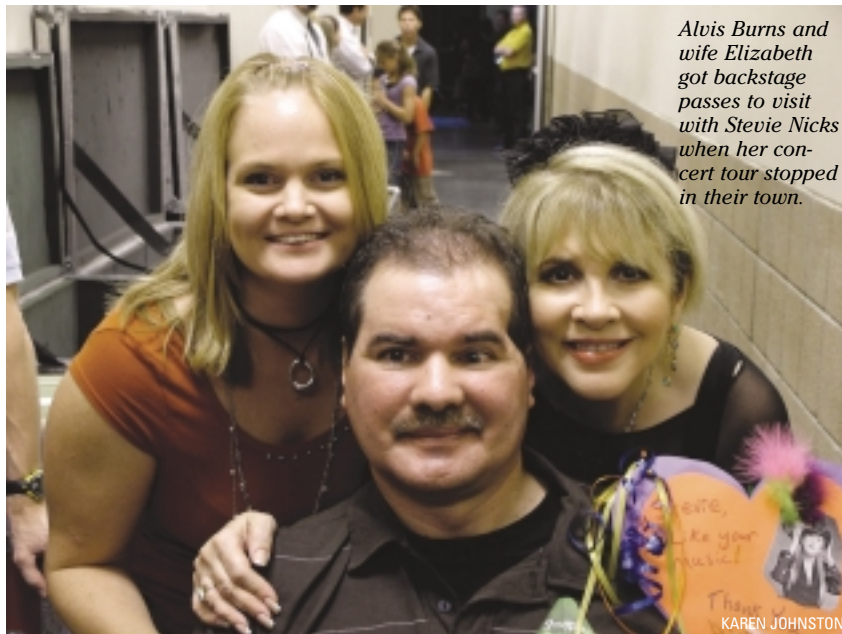
Afterwards, the group headed backstage, where they were greeted by Nicks, who reminisced with Elizabeth about the original visit and Burns' remarkable improvement since then. Burns' therapists were pleased to witness their hard work paying off, as they proudly watched him read the card he had made for Nicks, thanking her for her generosity.

Now living at home with Elizabeth and their children, Burns is able to walk with assistance and has regained active use of his right side. His therapists continue to be impressed with his gradual but steady progress.

"Considering Al's significant communication and cognitive deficits, it was inspiring to see him singing along with the music and being able to present a card he had made to Nicks," said speech therapist Colleen Robbins Pouquette.

As he looks forward to his next meeting with his favorite singer, Burns is confident that with time and the help of his therapists, he will regain more of the functions he lost as a result of his injuries. **VA**

By Amanda Hester



Alvis Burns and wife Elizabeth got backstage passes to visit with Stevie Nicks when her concert tour stopped in their town.

KAREN JOHNSTON

Mental Illness Awareness Week

Spreading the Word that Recovery is Possible



The "Recovery Rover" roamed the halls of the Little Rock, Ark., VA Medical Center.

In 1990, Congress designated the first week of October as Mental Illness Awareness Week, offering an annual opportunity to increase public awareness of the challenges the mentally ill face and the stories of those who overcame diseases of the mind.

VA's Office of Mental Health Services worked closely with facility local recovery coordinators and public affairs officers to promote Mental Illness Awareness Week activities as part of its efforts to help ensure that mental health is viewed as essential to overall health and to let veterans and staff know that recovery is possible and attainable, according to Dr. Susan McCutcheon, director of family services, women's mental health and military sexual trauma in the Mental Health Services office.

More than 60 VA facilities participated in Mental Illness Awareness Week this year, McCutcheon said. While some used the program prepared by the Mental Health Services

office, others developed unique approaches that addressed the needs of their veteran patients and local communities. Activities ranged from one-day informational sessions and table displays to weeklong celebrations, including exhibits of veterans' artwork and presentations by nationally known mental health professionals and VA leaders.

"Personal stories of individuals with mental illness and their experiences working toward recovery were an important part of Mental Illness Awareness Week," said McCutcheon. "One of the most effective ways to combat stigma is for people to be able to meet individuals with mental illness and understand their challenges."

Activity coordinators worked with medical center directors, mental health leadership and clinicians, peer support groups, day treatment centers, community providers, local National Alliance on Mental Illness (NAMI) affiliates, and veterans and their family members to promote awareness of

mental health services and the concept of recovery-focused treatment.

The staff at the Central Arkansas Veterans Healthcare System in Little Rock created something unique for Mental Illness Awareness Week—a "Recovery Rover." The mobile wooden display case was built by veterans in the Compensated Work Therapy Program and completed through the contributions of more than 45 team members. It took about five months from concept to completion of this innovative outreach tool, said Dr. Erin Williams, local recovery coordinator with the Central Arkansas Veterans Healthcare System.

During the week, the Recovery Rover traveled to 16 different lobbies throughout the medical center. Balloons bobbed en route, cascading posters crowned the roof, and shelves were filled with multi-media presentations, hands-on exhibits and novelties. At each stop, passersby could watch a documentary on the Nobel Prize-winning mathematician John Nash—whose struggles with schizophrenia were chronicled in the movie *A Beautiful Mind*—or hear the music of famous singers who have been diagnosed with mental illness.

Peer specialists and providers engaged participants in conversations about various displays and offered printed information about recovery-oriented services and NAMI resources.

"The Rover experience was dynamic and unique for each passing individual," said Williams.

Although Mental Illness Awareness Week has come and gone, the Recovery Rover has not retired. It will travel the corridors each month with new exhibits and up-to-date resources. For more information, contact Williams at erin.williams3@va.gov. VA

A Century of Service in South Dakota

Hot Springs VA Medical Center celebrates its 100th anniversary.

The Hot Springs VA Medical Center—formerly known as the Battle Mountain Sanitarium—celebrated its 100th anniversary Sept. 14-15. The celebration events featured speeches, dignitaries, a parade with more than 150 entrants including one of the last surviving World War II code talkers and the Oscar Mayer Wienermobile, an inter-tribal honor guard, family games and activities, a dunking booth, and a picnic on the front lawn.

For centuries, the healing waters of the warm springs in southwestern South Dakota had been known and used by American Indians. As Europeans settled further into the American West during the 19th century, the curative qualities of the water and delightful climate at Hot Springs lured many people to this community near the south edge of the Black Hills.

Located 3,482 feet above sea level, Hot Springs' weather was never temperately extreme and was naturally free of malaria. In July 1893, Dr. R.D. Jennings, chief surgeon for the Western Branch of the National Home for Disabled Volunteer Soldiers at Leavenworth, Kan., accompanied 30 disabled soldiers to Hot Springs for a 60-day special treatment in the healing waters. During that time, 44 percent of those treated for rheumatism were cured and all others benefited.

Shortly afterwards, a movement began within the Grand Army of the Republic and among many prominent citizens to establish a new national soldiers' home at Hot Springs. After nearly 10 years, the bill was signed into law on May 29, 1902, by President Theodore Roosevelt. The 92-acre site, along with two of the best hot springs in the city, were donated by the citizens of Hot Springs to the National Home for Disabled Volunteer Soldiers.

Named after a nearby mountain, the Battle Mountain Sanitarium became the 10th facility within the national

soldiers' home system. Unique from the outset, it was never intended to serve as a long-term residential home. According to a February 1904 Johnson City, Tenn., newspaper article: "The Battle Mountain Sanitarium at Hot Springs, South Dakota, begun about 2 years ago, is not yet finished. It is intended for members of the homes to be sent there who are troubled with their lungs. It will cost about \$250,000."

Its purpose was to provide short-term therapeutic treatment to members of the other national soldiers' homes who had respiratory or rheumatic diseases. The sanitarium was not a home—it was a hospital.

Groundbreaking for the sanitarium took place on Aug. 17, 1903, and the main buildings were completed on April 1, 1907. Constructed in the "old Spanish mission style," by architect Thomas R. Kimball of Omaha, Neb., its spoke wing design facilitated fresh air and natural light within the wards.

The sanitarium featured two plunge baths and medicinal hot waters furnished by nearby Mammoth spring. In 1907, the sanitarium had 336 beds and a tubercular barracks. The sanitarium, along with all of the national soldiers' homes, became part of the Veterans Administration in 1930.

The Hot Springs VA Medical Center operated as a tubercular care facility until the 1950s, when it became a general medical care facility. Located geographically in an area formerly occupied by the Great Sioux Nation, the Hot Springs medical center provides care and services to a significant number of American Indian veterans who live on nearby reservations. The facility has the only surviving original conservatory from the soldiers' home era in the entire VA system. **VA**



DARLENE RICHARDSON



DARLENE RICHARDSON

Top: The medical center's two-day celebration of the anniversary included a number of special events on the grounds; above: The facility has the only surviving original conservatory from the soldiers' home era in the VA system.

er medical care facility. Located geographically in an area formerly occupied by the Great Sioux Nation, the Hot Springs medical center provides care and services to a significant number of American Indian veterans who live on nearby reservations. The facility has the only surviving original conservatory from the soldiers' home era in the entire VA system. **VA**

By Darlene Richardson

Durham, Miami VA Medical Centers Share 2007 Carey Trophy

VA Under Secretary for Health Dr. Michael J. Kussman presented the top honor in the 2007 Robert W. Carey Performance Excellence Awards program to the Durham, N.C., VA Medical Center and the Miami VA Healthcare System during a Nov. 1 ceremony in Washington, D.C.

The facilities were among 15 organizations competing in this year's 16th annual awards program. Kussman praised the award winners for embracing a difficult process by competing in the Carey Awards.

"It's that unflagging commitment to excellence that sets one organization apart from others," he said.

Kussman noted that there have been more than 300 applicants in the past 16 years since the Carey Awards program began at VA.

"We had some strong applicants this year," said Eric J. Malloy, Carey program manager.

The Durham VAMC, winner of the Trophy Award, serves as a major center for radiation therapy, therapeutic endoscopy, and high risk open-heart surgery. Special programs include a comprehensive Women's Health Center, a Home Based Primary Care program, and a Geriatric Research, Education and Clinical Center (GRECC).

It also has an active research program with 419 active projects. The research and development program includes: the GRECC; the Center for Health Services Research in Primary Care; and the Epidemiology Research and Information Center. This center is one of three national centers in epidemiology.

Ralph T. Gigliotti, direc-

tor of the Durham VAMC, described receiving the Trophy Award as "a wonderful honor."

"It's a nice reflection of the hard work and dedication of all 1,700 employees," he said. "The Carey Awards for us is a nice road map which helps us provide the best quality care to our veterans."

Also receiving the Trophy Award was the Miami VA Healthcare System, which provided superior response to Hurricanes Katrina and Wilma. It is recognized as a leader in developing a successful Operation Enduring Freedom/Operation Iraqi Freedom Seamless Transition Outreach Program for veterans returning home from fighting the Global War on Terrorism. In June, the Miami VA Healthcare System received Florida's premier award—the 2007 Governor's Sterling Award.

Its radiology report verification within 48 hours is the VHA benchmark performance. Its preventive screening (alcohol) is the best performance in VHA. Its preventive cancer screening meets top VHA performance.

Paul Magalian, acting director of the Miami VA Healthcare System, said he is proud to be a part of the Miami team as they celebrate "this truly remarkable achievement" of winning the Trophy Award.

"Our entire organization has had this vision of providing the best health care in VHA," he said. "This vision has helped the staff to really focus on creating a culture that across the board is characterized by excellence—to focus on the things that are important to us in providing great health care to our veterans."

The Circle of Excellence



ROBERT TURTIL



ROBERT TURTIL

Surrounded by members of their staffs, Durham VAMC Director Ralph Gigliotti, top, and Miami VA Healthcare System Acting Director Paul Magalian, above, hold their Carey Trophy awards.

Award was presented to the Cooperative Studies Program, Clinical Research Pharmacy Coordinating Center, located in Albuquerque, N.M.; the Michael E. DeBakey VA Medical Center, located in Houston; and the White River Junction, Vt., VA Medical Center.

The Minneapolis VA Medical Center received the Performance Excellence Award. The facility's culture of communication and collaboration has facilitated many clinical initiatives that have won national recognition. Among these are the Medical Intensive

Care Unit Collaborative and the Anxiety Interventions Clinic, which won the Under Secretary for Health's Innovations Award.

There were three recipients of the Performance Achievement Award: the Louisville, Ky., VA Medical Center; the VISN 19 Rocky Mountain Network, located in Glendale, Colo.; and the VA Southern Oregon Rehabilitation Center and Clinics, located in White City.

Recognizing the opportunities for sharing of health care resources, the Louisville VAMC and the Ireland Army


Community Hospital at Fort Knox, Ky., have long engaged in a sharing agreement. The Louisville VAMC manages the outpatient primary and specialty care of 14,000 Department of Defense beneficiaries. In addition, a VA outpatient clinic that serves 5,120 patients is located on the Army post. For fiscal year 2007, the Louisville VAMC was recognized nationally as third out of 80 in VA/DoD sharing reimbursement.

Delivery of health care within VISN 19 is influenced by many factors, including the large geographic area impacted by extreme weather conditions. Health care services are provided to veterans in four states—Colorado, Montana, Utah and Wyoming—and portions of five bordering states. Other factors include rugged terrain making travel to health care facilities difficult, wide-ranging population density, being designated as a

health care shortage area for both primary care and mental health, and socioeconomic conditions in the region. VISN 19's key process is providing health care to veterans for disease prevention and management.

As VA's only free-standing rehabilitation center, VA Southern Oregon serves as a regional and national resource for underserved special populations such as the homeless, chronically mentally ill, and

substance abusers. The center provides quality residential treatment in psychiatry, addictions, medicine, bio-psychosocial, and physical and vocational rehabilitation.

The Carey Awards program is open to all VA field facilities and headquarters staff offices. For more information, contact Carey Awards program manager Eric Malloy at (202) 461-5771 or e-mail him at Eric.Malloy@va.gov. 

New Initiative Ensures Veterans' Calls Receive Focused Attention

The Customer Service Initiative (CSI) has finally arrived, and veterans are the beneficiaries. Consisting of a series of recommendations and initiatives designed to improve the way VA Central Office employees handle incoming phone calls, the CSI will ensure VA lives up to its motto of "Putting Veterans First."

With basic phone etiquette training already conducted, VACO staff learned how to correctly handle phone calls from a veteran or a member of a veteran's family in a prompt, efficient and courteous manner. And what exactly does this mean? It means picking up the phone within two rings. It means speaking in a clear and friendly voice and identifying yourself and your office. It also means finding out what the caller needs and where to refer them for that information. And finally, it means following up to make sure the veteran's questions were addressed and answered satisfactorily.

This new effort is spearheaded by Debi Bevins, director of Customer Relations & Executive Projects in the Office of the Secretary. According to Bevins, "The key message is based on the concept of



VA Central Office employees munch popcorn in the lobby while learning about the new Customer Service Initiative Sept. 19.

ROBERT TURTIL

'call ownership,' the idea that whenever a Central Office employee receives a call from a veteran or a veteran's family member, that staff member takes ownership of that call and ensures the caller gets the answer he or she seeks."

While this notion of customer service is implicit in VA's mission statement, "To care for him who shall have borne the battle and for his

widow and his orphan,"

Bevins wants employees to remember the veterans, hoping this will be the key to the initiative's success. Bevins, who has worked directly for four VA Secretaries, expects the new training to greatly improve the quality of service to outside callers and reduce the number of misdirected calls.

To ensure this level of service, VACO will be imple-

menting the following:

- New digital phones are being installed within the entire VACO campus. This will allow accurate call tracking to identify where problems occur and where interventions may be necessary to improve customer service;
- New call handling procedures will be introduced to all VACO staff;

(continued on page 28)

VA Supports Public Education Efforts on Conversion to Digital TV

Television enters the digital age for good on Feb. 17, 2009. That's when Congress has decreed that all television broadcast stations end analog transmissions and broadcast only in digital format.

Analog technology has been in use for the past 50 years to transmit conventional TV signals. Most current television transmissions are received through analog television sets. Those signals vary continuously, creating fluctuations in color and brightness.

Digital TV (DTV) is an advanced broadcasting technology that will transform the television viewing experience. DTV enables broadcasters to offer television with better picture and sound quality. It can also offer multiple programming choices, called multicasting, and interactive capabilities.

The law requiring this change applies only to stations broadcasting over public airwaves. Those receiving transmissions via satellite or cable will have to contact their specific service providers to determine if their current communications box will receive a digital broadcast. If not, they may be required to upgrade to digital to receive local programming.

Those who have old analog sets and don't subscribe to cable or satellite will have to purchase a digital-to-analog converter box to receive programming. That has officials like VA Assistant Secretary for Public and Intergovernmental Affairs Lisette Mondello concerned.

"When I think of those most disadvantaged by this change, I think of the older veterans who rely on VA for health care and income support," she told an industry conference sponsored by the National Telecommunications and Information Administration (NTIA) this fall. "That's why VA is going to publicize this change date prominently throughout our system over the com-



The National Telecommunications and Information Administration hosted a conference at the Commerce Department in Washington, D.C., this fall to demonstrate the variety of efforts underway to educate Americans about the digital TV transition.

ing year and make sure older and lower income veterans know some help is available."

That help comes in the form of a coupon issued by NTIA worth a \$40 credit toward purchase of a digital-to-analog converter box (two coupons per household). The coupon program begins Jan. 1, 2008, and ends March 31, 2009.

For more information on the digital-to-analog conversion, visit the NTIA Web site at www.ntia.doc.gov, the Federal Communications Commission site at www.fcc.gov/cgb/consumerfacts/digitaltv.html, or the commission's DTV site at www.dtv.gov. **VA**

CSI (cont.)

■ The VACO switchboard is being strengthened and transformed into the VACO Customer Service Center, staffed by employees with specific customer service qualifications, and knowledge of veterans' health care and benefits programs, as well as VA's organizational structure;

■ Video training will be provided to all current VACO staff; and

■ New hires will receive a specific training segment in the biweekly new employee in-processing sessions.

In addition, the CSI Task Force and Steering Committee are asking that:

■ All staff receive a customized telephone reference guide

specific to the needs of veteran callers;

■ New performance standards relating to telephone service for front-line telephone staff be introduced; and

■ A management and monitoring element for accountability and quality assurance be created.

So far, the CSI team seems to be making significant headway. Implemented this past summer, the Basic Telephone Etiquette training sessions grouped organizations into three levels based on their degree of contact with veterans. The classes covered such topics as "How to Treat Every Caller as a Welcomed Guest," "From Curt to Courteous"

and "How to Handle theirate Caller." In addition, certain high-profile organizations received advanced training on topics such as "Strategies for Effective Customer Satisfaction" and "Managing Difficult Situations and Difficult People."

A communications campaign designed to bring a focus on telephone customer service was held in the VACO lobby. The event honored employees who strived to be "Courteous, Sensitive and Informative" in dealing with customer requests.

Mac Barnes, of the Media Services Division in the Office of Administration, was selected from more than 90 sub-

missions to be "The Shining Star" of the CSI program and received a certificate of appreciation from Paul Hutter, executive in charge of Human Resources. Almost 350 employees browsed around the movie theatre-themed lobby, with popcorn machines, movie reels, balloons, food and giveaways.

Looking ahead, members of the CSI Task Force, the CSI Steering Committee and the Office of Administration, who spearheaded the implementation, are hopeful that the success of this effort will contribute to an enhanced "culture of customer service" not just in VACO, but throughout VA. **VA**

Teague Award Recipient Created Polytrauma Manual for Families

Sharon Benedict, Ph.D., is the recipient of the 27th annual Olin E. Teague Award—the highest VA honor recognizing employees whose achievements have been extraordinarily beneficial to the rehabilitation of combat-injured veterans.

Benedict is the polytrauma counseling psychologist at the polytrauma rehabilitation center in Richmond, Va. VA established four regional polytrauma rehabilitation centers to provide specialized care for military servicemembers and veterans who sustained multiple and severe

injuries.

Through her interaction with family members of polytrauma center patients, Benedict recognized a need for traumatic brain injury (TBI)-specific education in advance of transition from a military treatment facility or other referring institution.

Although there was already a lot of good information available on TBI, Benedict said it was obvious to her that the transition of servicemembers from military treatment facilities to VA medical facilities for further rehabilitation was a confusing

and sometimes frightening prospect for servicemembers and their family members. They often didn't know what to expect or how long they might be staying at the VA facility for treatment. She decided to bridge that information gap by developing the "Family Education Manual" for use by family members of incoming Richmond polytrauma center patients.

"What I felt we needed was information that was tailored toward the unique needs of our polytrauma population," she said. "I wanted family members to feel like the information we provided to them was sensitive to their specific concerns as active duty servicemember or veteran families."

The 35-page manual is divided into four sections. Section 1 provides an overview of the anatomy of the brain and what happens to the brain after it is injured. Section 2 explains in simple terms the roles of interdisciplinary team members and what to expect during the acute rehabilitation phase of recovery. Section 3 promotes a healthy lifestyle and self-care for family members who are oftentimes accompanying their loved ones to the acute rehabilitation environment. Section 4 includes a glossary of medical terms.

Benedict said she has had several family members tell her that having a manual available to explain their loved one's rehabilitation process at the Richmond polytrauma center has helped alleviate many of their fears about the future.

Benedict recruited polytrauma nurse and Puerto Rico native Marta Riquelme,



Dr. Sharon Benedict

ART GARDINER

Wheelchair Games Athletes Featured on Special Edition Cheerios Boxes

The Veterans Canteen Service (VCS) has joined with General Mills to salute 12 gold medal winners from the 2007 National Veterans Wheelchair Games in Milwaukee by featuring them on a special edition Cheerios box that will be sold in military markets and the VCS retail stores around the nation in early 2008.

The twelve athletes and the VA medical centers they receive care from are: Debbie Dones, San Juan, Puerto Rico; Wayne Fields, Denver and Colorado Springs Outpatient Clinic; David Fowler, Houston; Fain Grogg, Mountain Home, Tenn.; Holly Koester, Cleveland; Jesus Torres Martinez, San Juan, Puerto Rico; Orlando Perez, Augusta, Ga.; John Tuzzolino, Phoenix and San Diego; Mohan Prasad Vallabhapurapu, Loma Linda and Long Beach, Calif.; Bennie Wansley, Jackson, Miss.; Scott Winkler, Augusta, Ga.; and Charlie Wittwer, Minneapolis.

In celebration of this event, VCS has partnered with HealthierUS Veterans to encourage Veterans Health Administration employees and veterans to increase their physical activity by taking part in the "Champions' Challenge." The program, which kicked off on Veterans Day, challenges participants to walk or roll "100 miles in 100 days." A host of motivational incentives and events are planned throughout the challenge, including special appearances by the 12 gold medal athletes. VA



R.N., to translate the manual into Spanish with additional editing provided by other medical center staff. Recently, Benedict and representatives from the three other polytrauma rehabilitation centers in Tampa, Palo Alto, Calif., and Minneapolis collaborated to adapt the manual for use at those facilities. The manual is also now available to families of polytrauma patients at Walter Reed Army Medical Center in Washington, D.C., and National Naval Medical Center in Bethesda, Md., who are referred to a VA polytrauma rehabilitation center for TBI rehabilitation.

Benedict said she was "very surprised" to discover that she won the award.

"I feel there are any number of people I can name working in polytrauma right now that would be just as deserving of this award," she said.

(continued on page 30)

Richard Serrao, M.D.

The winning design in the 2007 Veterans Day Poster Contest was created by a doctor who spends his days treating veterans.

Dr. Richard Serrao, 37, combined two photographs he had taken of an American flag backlit by the sun at a park in Boston, and clouds shot through with sunlight taken from the window of an airplane when he was traveling to Africa. Approximately 20 additional photographic and graphic elements and filters were incorporated to construct the final inspiring image. It took him about two weeks to create the design using Adobe Photoshop and After Effects software and Apple's Motion software.

While he was experimenting with various designs, Serrao took an informal poll among the veterans he treats as a staff physician in Internal Medicine and Infectious Diseases at the VA Boston Healthcare System. He has worked for VA since 2001. His patients helped him decide which design to submit by the May 1 deadline.

Serrao was one of 80 artists to submit designs for the poster contest, according to Matt Bristol, coordinator of the National Veterans Day Program.

"He used very traditional design elements of the flag and the sun, but he arranged them in such a way that his

poster really stood out from the others," Bristol said.

VA's Office of National Programs and Special Events printed 155,000 copies of the poster and distributed 118,000 copies to schools nationwide. The remaining 37,000 copies were distributed to VA facilities, Veterans Day regional sites, Department of Defense commissaries and Post Exchange facilities worldwide, veterans service organizations, state veterans nursing homes, state veterans affairs directors, the National Archives, and federal buildings in Washington, D.C.

The poster was also used as the cover of the 2007 National Veterans Day Program held in the amphitheater at Arlington National Cemetery on Nov. 11. Some 6,000 copies of the program were printed for the event.

"It's quite an honor," Serrao said. "It's definitely the widest, largest distribution of anything I've done."

Although he has never had any formal art training, Serrao said he has been taking photographs and painting since he was a kid. He had to put his interest in art on hold from 1992 to 2001 while attending medical school at the University of California, Los Angeles, completing his residency in internal medicine at UCLA Cedars-Sinai Medical Center, and completing his fellowship in infectious dis-



Dr. Richard Serrao with his winning Veterans Day poster design.

ease at Boston University Medical Center.

"Medical school, residency and fellowship training afforded me little time to do anything beyond medicine," he said. "Now I want to come back to doing the art that I used to do. I love doing paintings, film and graphic arts."

When Serrao saw the contest announcement on his VA computer in a Hey VA! message, he decided to enter. The appeal to graphic artists and illustrators caught his eye. He said the opportunity to use

his artistic skills attracted him to the poster contest.

"It reminded me of my life before life got chaotic," he said, adding that art gives him a chance to do something "completely fun."

"I view art as a way to go beyond the structure that I have in medicine," he said. "Art is much more free. The practice of medicine and how it is approached is very structured and very logical. Art gives me a chance to be more expressive." **VA**

Renee McElveen

Teague Award (cont.)

Benedict accepted the award on behalf of her Richmond team and her colleagues at the other three polytrauma rehabilitation centers, whom she described as "a group of dedicated, hard-working, zealous individuals." She said

their jobs in polytrauma are "challenging and sometimes difficult, but always rewarding. We never forget that we are there to serve those who risked their lives to protect and defend us."

Acting VA Secretary Gor-

don Mansfield presented the award to Benedict at a Nov. 5 ceremony on Capitol Hill. Also on hand to present the award was Teague's daughter, Jill Cochran.

The Teague award is named after the late Texas

congressman who represented the state's 6th District for 32 years. A highly decorated World War II veteran, he served for 18 years as chairman of the House Veterans' Affairs Committee. He retired in 1978 and died in 1981. **VA**

Study Shows Increased Use of Flu Shots By Elderly Would Prevent Deaths

Increased use of flu shots by elderly people at high risk of complications would prevent thousands of deaths and hospital visits annually, according to the results of a recent study published in the *New England Journal of Medicine*.

Flu shots, which cost as little as \$6, are more cost-effective and could save more lives among people 65 and older than screenings for cancer, heart disease and blood disorders, according to study author Dr. Kristin Nichol, chief of medicine at the Minneapolis VA Medical Center.

The annual death toll from flu complications—about 36,000 in this country—and the threat that a new strain might set off a pandemic, have drawn more attention from researchers. Peak flu season generally runs from November through March.

The new study compared medical records of elderly people in four states plus New York City every flu season from 1990 through 2000. About 415,000 had been vaccinated; 300,000 had not. “Influenza vaccination is associated with significant reductions in hospitalizations for pneumonia and influenza—a 27 percent reduction—and a significant percent reduction in the risk for dying—about a 48 percent reduction,” Nichol said.

A national health goal in the United States is to vaccinate 90 percent of seniors against influenza by the year 2010, Nichol said. The rate is currently at about 65 percent. She hopes that the clear benefits of immunization for the elderly demonstrated in her study will lead to more senior citizens getting flu shots.

“Vaccination prevents hospitalizations, prevents deaths and saves money,” Nichol said. “So what are the implications? Well, this should be another wake-up call to all of us that influenza is a bad disease and vaccination is good.”

Lizard Spit Helping Some Type 2 Diabetics Lose Weight

Lizard spit is helping some Type 2 diabetics lose weight. Don't worry. They don't have to drink it. They inject it.

Byetta, a drug whose active ingredient is the synthetic version of a protein produced



Dr. John Eng

in the spit of the Gila monster, has been found to cause considerable weight loss in some of its users. The Gila monster is a poisonous lizard found in rapidly declining numbers in the American Southwest and northern Mexico.

Byetta was developed after Dr. John Eng, an endocrinologist at the James J. Peters VA Medical Center in Bronx, N.Y., convinced Amylin and Eli Lilly of the potentially therapeutic benefits of a protein he had discovered in the Gila monster's saliva. Some 200 patients taking the drug were monitored for three years. The patients lost an av-

erage of 11 pounds, with the most pounds shed in the first year.

Considering that the average Body Mass Index (BMI) of patients in the study was 33.5, the weight loss was described as “modest” by lead researcher Dr. John Buse, chief of endocrinology at the University of North Carolina-Chapel Hill's School of Medicine. But the findings are promising for patients with Type 2 diabetes since obesity is a major contributor to the disease and some diabetes treatments can cause weight gain. Buse noted that no other diabetes drug on the market is associated with weight loss.

Byetta is a self-injected synthetic hormone that was approved by the U.S. Food and Drug Administration in 2005. In addition to boosting insulin production in patients, Byetta curbs the rate at which the stomach empties itself and may interact with the region of the brain responsible for the sensation of fullness.

Folic Acid, B Vitamins Do Not Benefit Kidney Disease Patients

Roughly 8 million Americans have some form of kidney disease, which puts them at high risk for stroke and heart attack. Researchers thought folic acid and other B vitamins might help fight those problems, but the benefits did not pan out, according to the results of a new study.

Folic acid is a B vitamin that helps our bodies make healthy new cells. It is especially important that pregnant women take it to prevent major birth defects in the baby's spinal cord and brain.

Researchers thought folic acid and B vitamins would help patients with kidney disease because they lower a



Dr. Rex Jamison

chemical in the blood called homocysteine. If those levels are high, stroke, heart attack and vascular disease are more frequent. In a three-year study of more than 2,000 VA patients with serious kidney disease and high homocysteine levels, half received daily treatment with folic acid and B vitamins while the rest received sugar pills. Of those enrolled, 40 percent died, which is consistent among end-stage renal disease patients.

“We did not reduce the number of deaths in the treatment group,” said author Dr. Rex Jamison, of the VA Palo Alto, Calif., Health Care System and Stanford University School of Medicine. “We did lower their homocysteine levels significantly, but despite this, there was no benefit.”

The study findings were published in the Sept. 12 issue of the *Journal of the American Medical Association*.

Kidney expert Dr. Glen Chertow, of the University of California at San Francisco, said the findings are valuable because now doctors know what's *not* the answer. “It allows us to concentrate our efforts elsewhere so we can focus on other aspects of care or other therapies that might improve the care of patients with chronic kidney disease,” Chertow said. **VA**



Acting Secretary Gordon Mansfield congratulates former astronaut James Lovell as Rep. Mark Kirk (R-Ill.) looks on.

New name for VA/DoD center

On Oct. 5, an historic merger between the North Chicago VA Medical Center and the Department of Defense's Naval Health Clinic Great Lakes was confirmed with the recent naming of the Captain James A. Lovell Federal Health Care Center. The center, scheduled to open in 2010, is named after former astronaut Lovell, a Navy veteran of the Korean War, participant in the Gemini and Apollo space programs and Presidential Medal of Freedom recipient. In 1970, Lovell and his crew successfully modified their lunar module into an effective lifeboat when their cryogenic oxygen system failed during the perilous Apollo 13 mission. The joint \$130 million initiative, expected to serve nearly 100,000 veterans, sailors, retirees and family members, marks the first time VA and the Department of Defense have fully integrated two of their facilities into one.

Into the wild: 'VetsCamp' a success in New Jersey

Every August since 1993, the VA New Jersey Health Care System and the Salvation Army New Jersey Division have partnered to provide a five-day retreat for veterans known as "VetsCamp." Held at the Salvation Army's 400-acre Camp Tecumseh in Pittstown, N.J., the event is full of social, recreational and therapeutic activities, including the "VetsCamp" Olympic Games. This year, more than 100 veterans currently receiving outpatient mental health treatment at VA New Jersey's East Orange and Lyons facilities and their families attended the camp free of charge.

The Salvation Army receives donations that pay for the camp's lifeguards, food service workers, and maintenance staff, in addition to arts and crafts supplies, gifts and souvenirs for the participants. VA New Jersey coordinates all camp activities and provides 24-hour nursing coverage and charter bus transportation for veterans and family members.

Service of honor at Riverside National Cemetery

Every afternoon from Monday through Friday, Riverside National Cemetery in California holds a special memorial service to honor veterans whose cremated remains would otherwise be interred without military funeral honors. Each week, dozens of cremation urns are delivered to the cemetery without a request for a committal service.

The service, known as the "3:01 Service" because it takes place at 3:01 p.m., the conclusion of the day's burial schedule, was developed by the California State Honor Guard, in cooperation with Cemetery Director Gill Gallo. Open to the public, the service consists of three volleys of rifle fire, the playing of taps, and the folding and presenting of the flag. Approximately 100 people attended the first 3:01 service, honoring three veterans of World War II, at the cemetery's amphitheater Aug. 30.

Management skills extend to Junior League softball

When Joe Corretjer, assistant Veterans Service Center manager

Mayberry Deputy at Salem VA



The Mayberry Deputy with Salem VAMC patient George Mabery.

Employees and patients at the Salem, Va., VA Medical Center were recently treated to a special visit by impersonator David Browning. Posing as the "Mayberry Deputy," a character based on Barney Fife from "The Andy Griffith Show," Browning toured the inpatient units, talking with veterans about their favorite episodes of the classic TV show and thanking them for their military service. In addition to answering patients' questions, Browning handed out autographed "citations," told jokes and posed trivia questions to the audience gathered around him.

Browning, of Bristol, Va., has traveled the country portraying the Fife character since 1988. He has given more than 5,000 presentations as the Mayberry Deputy and has appeared with many of the original stars of "The Andy Griffith Show" at various reunions and convention appearances.

Remembering a fallen colleague



On Aug. 16, employees at the Grand Island, Neb., VA Medical Center dedicated the Fallen Soldier Statue, above, in memory of Staff Sgt. Jeffery J. Hansen, inset, a VA police officer who died during a deployment in Iraq. VA employees, along with Hansen's family, led a campaign to raise \$4,500 for the purchase of the statue. Hansen, 31, was employed at the medical center from October 2004 until the time of his death. He died on Aug. 27, 2006, from injuries he received when the Humvee he was riding in rolled into a canal near Camp Anaconda in central Iraq. Hansen, a Bronze Star recipient, had served in the Nebraska National Guard since 2000 as a fire team leader and a fire support sergeant. He is the third VA employee known to have been killed in Iraq.

at the Newark, N.J., VA Regional Office, decided to coach his daughter's softball team, he never imagined his managerial skills would take them all the way to the Junior League Softball World Series. For the past five years, Corretjer has been managing the Haverstraw, N.Y., Girls Junior League Softball Team, made up of girls between the ages of 13 and 14, including his daughter, Taylor.

At the Junior League Softball World Series, held in Kirkland, Wash., Aug. 12-18, the team reached the semi-finals, but finished fourth, losing to the eventual champions, Puerto Rico, in a hard-fought 2-1 game. Little League Baseball and Softball is the world's largest organized youth sports program, with more than 2.6 million players and 1 million adult volunteers in every U.S. state and scores of other countries.

A modern form of physical therapy for patients

The John D. Dingell VA Medical Center in Detroit recently received three new Nintendo Wii gaming consoles from Boy Scout Alex Carlstedt to help their long-term care patients.

Carlstedt donated the systems, along with additional money to purchase other equipment, as part of his quest to become an Eagle Scout. To make his donation, Carlstedt enlisted the help of other Boy Scouts and friends and collected bottles throughout neighborhoods near his home.

The Wii consoles come with tennis, golf, bowling and boxing games that make players use big arm and body movements that actually resemble playing the real sport. The lightweight, wireless, motion-sensor controller makes it good physical therapy because an individual can play with only one hand, in the event that the other arm or hand is disabled. Since their arrival, the Wii systems have been a part of the medical center's regularly scheduled activity programs. **VA**



Left to right: N. Clay Robbins, president, Lilly Endowment Inc.; Under Secretary for Health Dr. Michael Kussman; Dr. Craig Dykstra, senior vice president, Lilly Endowment Inc.; and Susan P. Bowers, Indianapolis VAMC director.

\$9.9 million grant for Indy VAMC

The Richard L. Roudebush VA Medical Center in Indianapolis will augment its health care services for veterans with a \$9.9 million grant from the Lilly Endowment Inc. The grant will provide \$5.8 million for a new 24,000-square-foot Seamless Transition Integrated Care Clinic, where injured servicemembers will receive comprehensive multi-disciplinary health care. Another \$3.5 million will be used to build a 28-suite "comfort home" that will provide accommodations for families of hospitalized servicemembers while their loved ones undergo rehabilitation.

The endowment will also fund retreats where veterans and their spouses can learn to work through readjustment issues typically associated with returning from deployment. Another \$500,000 is designated for rehabilitation events, including the National Veterans Golden Age Games, which the Roudebush VAMC will host next summer. Established in 1937, the Indianapolis-based philanthropic foundation is separate from the Eli Lilly and Co. pharmaceutical firm.

Presidential volunteer honors

President Bush presented the President's Volunteer Service Award to Patrick Kuykendall on Nov. 8. Kuykendall has been a volunteer at the Michael E. DeBakey VA Medical Center in Houston for 17 years and has logged more than 10,000 hours of service.



Houston volunteer Patrick Kuykendall receives his award from President Bush.

He began volunteering when his uncle entered the spinal cord injury (SCI) unit for treatment. He had been thinking about a medical career and started volunteering to obtain hands-on experience while also being near his uncle. "The patients and the nurses are the reason I kept volunteering," he said. "I grew attached to them."

Kuykendall supports the staff by assisting

with patient therapy, meal service, feeding, and anything else the veterans need. Although his volunteer assignment is in SCI, he volunteers in many other areas within the medical center. He assists Recreation Therapy by planning patient activities such as Halloween pumpkin carving contests and popcorn and movie nights. He has worked with Kinesiotherapy and Physical Therapy helping patients bake cookies, organize pots and pans for easy use, and plan their meals. "It's therapeutic for patients," he said. "It teaches them how to work around and use objects in the kitchen." According to Sally Ramanujam, R.N., SCI nurse manager, Kuykendall "personifies the extraordinary spirit of volunteerism."

Creative leadership in outreach activities

Carl E. Lowe II, director of the Waco, Texas, VA Regional Office, was named 2007 Air Force Association Employee of the Year in recognition of his exemplary, creative leadership in VA outreach initiatives. The award was presented during a special ceremony on Sept. 24 in Washington, D.C. Under his initiatives, more than 180 outreach seminars have been conducted during the past year.

The Waco Regional Office Reach Out Team conducted more than 20,000 hours of outreach activities during that period. These activities included demobilization briefings for National Guard and Reserve members, Transition Assistance Program briefings, Disabled Transition Assistance Program briefings, Medical Evaluation Board briefings, and retirement brief-

ings. Lowe personally calls or visits seriously disabled service-members to facilitate their transitions to civilian life. He discusses their plans with them and arranges for in-depth, follow-up interviews on the full range of VA benefits and services.

'Genius Award' to Boston VA psychiatrist

Dr. Jonathan Shay, a VA staff psychiatrist with the Boston Out-patient Clinic, has been awarded the "Genius Award" from the MacArthur Foundation. Shay is the author of two popular books about post-traumatic stress disorder and has been treating combat veterans with PTSD at VA since 1987.

Shay was one of 24 Americans who each recently received a \$500,000 grant from the John D. and Catherine T. MacArthur Foundation, one of the nation's largest philanthropic organizations. He received the award for his "exceptional merit and promise of continued creative work." Shay combines a study of classic literature with 20 years of experience treating veterans in Boston to explain PTSD to both the public and health care professionals. He also pioneered the use of certain anti-depression medications, called "selective serotonin reuptake inhibitors," for combat trauma, a treatment that now has broad endorsement for veterans with psychological injury.

Leadership honors for executive



Maryann Musumeci

Maryann Musumeci, director of the James J. Peters VA Medical Center in Bronx, N.Y., is one of the recipients of the 2007 Executive Leadership Awards from American University's School of Public Affairs. She shares the honor with John E. Potter, the U.S. Postmaster General.

The awards recognize exceptional leadership among individuals who have devoted themselves to a life of public service and honor the contributions of the many career executives who carry out the work of government and improve quality of life among the public at large. The criteria for this award for federal career executives are demonstrated exceptional capabilities in the following areas: superior leadership which has resulted in outstanding organization achievements; and a strong commitment to bringing about effective continuation of government by helping to develop the careers of individuals who will serve as managers and executives in the future federal service.

This is only the third time in three decades that a VA executive has received this award.

Health care communication honors for sociologist

Richard Frankel, Ph.D., senior research sociologist with the VA Health Services Research and Development Center of Excellence at the **Richard L. Roudebush VA Medical Center in Indianapolis**, is one of the recipients of this year's sixth annual Lynn Payer Award from the American Academy on Communication in Healthcare. He shares the honor with Howard Beckman, M.D., of Rochester, N.Y. They received the award for their outstanding contributions to the literature on the theory, practice and teaching of effective health care communication and related skills.

This is the first time that co-authors have received the Payer award based on the body of work contributed as a team. According to the award citation, Frankel and Beckman have produced a body of literature that is foundational to the academy and the work of health care professionals. They have been publishing works on patient-physician communication since the 1980s. The award was presented to the co-authors on Oct. 11 in Charleston, S.C.

Arthritis Foundation recognition

David Wofsy, M.D., a staff physician at the San Francisco VA Medical Center, recently was honored with the 2007 Lee C. Howley Sr. Prize for Research in Arthritis from the Arthritis Foundation, one of the most prestigious arthritis-specific research awards in the United States. The Lee C. Howley Sr. Prize for Research in Arthritis recognizes researchers whose contributions during the previous five years have represented a significant advance in the understanding, treatment or prevention of arthritis and rheumatic diseases. Wofsy's research program is devoted to the development of novel therapies for autoimmune diseases, particularly systemic lupus erythematosus.



EDGARDO CABALLERO

Researcher David Wofsy, M.D., of the San Francisco VAMC.

Herr: Prosthetics innovator

A double amputee whose trailblazing work in the emerging field of biomechanics has led to the development of new prosthetic innovations that merge body and machine has been selected to receive the 13th annual Heinz Award for Technology, the Economy, and Employment. The award is among the largest individual achievement prizes in the world.

Dr. Hugh Herr, 43, a VA-affiliated researcher and professor at the Massachusetts Institute of Technology (MIT)'s Media Lab, is among six distinguished Americans selected to receive one of the \$250,000 awards presented by the Heinz Family Foundation. Herr is the holder or co-holder of numerous patents, including the Computer-Controlled Artificial Knee, the Active Ankle-Foot Orthosis, and the world's first Powered Ankle-Foot Prosthesis. With more than 36,000 new amputees in the United States every year—including hundreds of American soldiers who have lost limbs fighting the Global War on Terrorism in Iraq and Afghanistan—Herr is helping improve mobility and enhance quality of life for many physically challenged people around the world.

At age 17, Herr lost both legs below the knee in a mountain climbing accident. He returned to the classroom after a few years to earn an undergraduate degree in physics, a master's degree in mechanical engineering from MIT, and a Ph.D. in biophysics from Harvard.



JIM HARRISON

Prosthetics researcher Dr. Hugh Herr in his lab.

DoD Employer Support Freedom Award

The **Wilmington, Del., VA Medical Center** was one of 15 organizations to receive the 2007 Secretary of Defense Employer Support Freedom Award from the Department of Defense. The award was presented Sept. 12 during a formal ceremony at the Ronald Reagan Building in Washington, D.C.

The Freedom Award is the highest recognition given by the U.S. government to employers for outstanding support of their employees who serve in the National Guard and Reserve. "These employers have provided exceptional support to the men and women serving in our National Guard and Reserve and now, more than ever, we appreciate and thank them for doing much more for these employees than the law requires," said Dr. L. Gordon Sumner Jr., executive director of the National Committee for Employer Support of the Guard and Reserve. **VA**



Creative Arts Festival

John Prather, 63, a combat-wounded Marine Corps veteran of Vietnam from Draper, Utah, sings "La Fleur," from the musical "Carmen," during the gala variety stage show at the National Veterans Creative Arts Festival in St. Louis on Oct. 28. The stage show, along with a visual art exhibit, was held at the Touhill Performing Arts Center on the University of Missouri-St. Louis campus. The show and art exhibit closed a week of rehearsals and workshops for the more than 110 veterans who participated in the festival. Open to all veterans receiving care at a VA medical facility, the Creative Arts Festival is presented by VA, the American Legion Auxiliary and Help Hospitalized Veterans. The culmination of a year-long fine arts talent competition involving nearly 3,000 participants nationwide, the festival was hosted this year by the St. Louis VA Medical Center.