U.S. Department of Veterans Affairs SUZIC January/February 2008 **New Secretary Peake** Adapted Housing Grant Program Five Years of My HealtheVet **VA and the New Deal**









VAnguard

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On the cover

The sixth Secretary of Veterans Affairs, James B. Peake, M.D., is the first physician and the first general to lead the department. A combat veteran of the Vietnam War, Peake is a former Army surgeon general. He was sworn in by Vice President Cheney at VA Central Office on Dec. 20, with President Bush looking on. photo by Robert Turtil

Where Are the Gloves?

I always enjoy reading the *VAnguard*, but this time I do have a comment about one of your photos. I am a safety professional (in Research and Development) and was dismayed to see the photo of David Wofsy, M.D., on page 35 of the November/December issue, working in a bio-

logical safety cabinet. He was wearing a lab coat (yea) but not gloves (boo).

One of the most difficult parts of a safety officer's job in research is reminding folks to protect themselves, and their products, through use of appropriate personal protective equipment (gloves, gown, goggles, etc., when required). I remember a poster that was sent from the VA Office of Research and Development in which a charming young lady was pipetting radioactive material. She wore a lab coat and goggles—no gloves again.

Corinne Gajdusek, Ph.D. R&D Safety Officer VA Puget Sound HCS Seattle

Correction

In our article on page 29 of the November/December issue about the special edition Cheerios box featuring 12 gold medal winners from the 2007 National Veterans Wheelchair Games, the name of one of the athletes, Wayne Field, was misspelled.



Deputy Secretary of Defense Gordon England presents the Robert Dole National Award for Service to VA Deputy Secretary Gordon Mansfield as VA Secretary Dr. James Peake, left, and Sen. Dole look on

High Honors for Mansfield

Deputy Secretary Gordon H. Mansfield was named the first recipient of the Robert Dole National Award for Service on Jan. 28 during the annual conference of the Military Health System, which provides health care for the Department of Defense.

The award was established in Dole's name to recognize veterans who continue to serve the nation through public service. Mansfield described the former Kansas senator as "one of my personal heroes."

"I cannot think of anyone, in my experience, who has done more [than Senator Dole] for the military and veterans health care systems," Mansfield said. "As a patient and as a proponent in Congress, he did everything he could to improve the care we provide for our active-duty personnel, our veterans and their families."

Last year, Dole served as co-chair of the President's Commission on Care for America's Returning Wounded Warriors, a landmark look at ways to improve VA's and the Defense Department's help for injured servicemembers returning to civilian life.

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.

Veterans Day 2008 Poster Contest

Attention artists, graphic designers and photographers. The Veterans Day National Committee is seeking submissions for the 2008 national Veterans Day poster.

The poster is distributed to more than 110,000 schools nationwide, military installations around the world, and to federal agencies in the nation's capital. It also graces the cover of the official program booklet for the Veterans Day ceremony at Arlington National Cemetery. The committee will convene in May to review all submissions and select a finalist.

The final poster must be 18x24" at 300 dots per inch, but please scale down submissions to 9x12" and submit electronic versions as JPEG images or PDF files via e-mail to: vetsday@va.gov. Alternatively, send copies of artwork or a CD with artwork files to: Department of Veterans Affairs (002C), 810 Vermont Ave., N.W., Washington, D.C., 20420. Please do not send originals.

The deadline for submissions is May 1. To view Veterans Day posters from previous years, please visit www.va.gov/vetsday and click on "Poster Gallery."

Submissions should include sufficient information to demonstrate that the image is the work of the artist and is not copyrighted material (i.e., photos and concepts). The committee may select a particular submission but ask the artist to make modifications to the original design. Additional changes may be required prior to printing.



Charting a Course Forward to Serve Our Veterans

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

Though VA Central Office is only a block from the White House, it is a rare event for a President to pay a personal visit. I can't tell you how proud I was to be introduced as Secretary of Veterans Affairs by President Bush and sworn in by Vice President Cheney right here in Central Office on Dec. 20.

The President's visit honored all of us working in VA. His remarks underscored his belief in the importance of your work and the priority of the VA mission.

"Our nation has no higher calling than to provide for those who have borne the cost of battle," he said. "I am confident in the future of this department because I have seen firsthand the dedication of the men and women who work here."

I can only echo those words. I am privileged to join a great team deeply committed to veterans and to a mission that I, too, deeply believe in.

I join VA at a critical period in the history of this department. Our nation is at war and many new veterans are leaving the battlefield and entering our system. The care we provide is the best, but access and administrative issues sometimes get in the way.

The transition from active duty servicemember to veteran for this newest generation of combat veterans is an important challenge. It is a challenge we must meet with renewed energy and new ideas.

In my short time at VA,

I have had the opportunity to witness firsthand the compassion of federal, state and local partnership displayed at the Washington, D.C., VA Medical Center's Winterhaven Stand Down for homeless veterans. I also had the opportunity to visit with our staff at the D.C. VAMC, where our clinicians demonstrated the power and promise of our electronic health records.

During my first visit to our Richmond polytrauma center, I was able to see firsthand the progress of a patient the continuum of care our nation's veterans deserve.

The Dole-Shalala report the President commissioned gives us a powerful blueprint to move forward in partnership with DoD and other federal agencies. I intend to strengthen our current relationships and joint ventures with Defense and forge new ones that work for servicemembers and veterans alike. As I told Secretary of Defense Gates on Dec. 20, I don't want "seamless" to be a buzzword—I want it to be the way we do business.

therapies and the spectrum of traumatic brain injury impairment—vital issues for our newest generation of veterans.

Access to care is a dominant issue for veterans. Whether our veterans live in cities or rural areas, we need to ensure their access to care with compassion, timeliness and without hassles. Our community-based outpatient clinic program will grow, new medical centers will open, and older facilities will be modernized and expanded. We will leverage technology and serve more veterans through tele-

As I look at history, I cannot think of a recent time with more focus on our veterans or more in-depth looks at veterans' programs.

injured in Iraq who came to us several months ago as a quadriplegic, and is now using his upper body, breathing on his own, and looking forward to joining us at the upcoming Winter Sports Clinic.

I have visited our staff at Walter Reed Army Medical Center and Bethesda Naval Medical Center and was impressed with their hard work on behalf of our returning servicemembers. I recently spoke at the Military Health System annual conference, where our own Deputy Secretary Mansfield was honored. With more than 3,000 health care professionals in attendance, the event demonstrated for me there is an unprecendented opportunity for collaboration with our colleagues in the Defense Department as we work to build

I will closely follow work on developing a joint DoD/ VA disability rating system that will reduce time, paperwork and confusion for applicants. We must address the time required to provide benefits through reproducible, thorough and accurate ratings.

VA is in the midst of a major expansion of its mental health treatment resources. A national suicide prevention hotline with coordinators and counselors at our medical centers is providing direct help to veterans and their families everv day. PTSD and TBI screening of all OIF/OEF veterans seeking VA care is identifying the sometimes subtle symptoms that lead to diagnosis and treatment. Our growing treatment capabilities and research will increase our understanding of effective PTSD

medicine and monitor their health through the Internet.

As I look at history, I cannot think of a recent time with more focus on our veterans or more in-depth looks at veterans' programs. This provides us the opportunity to chart a course forward to serve the needs of the new generation of veterans returning from Iraq and Afghanistan while honoring our nation's commitment to the generations of World War II, Korean War and Vietnam War veterans. It is an opportunity we must pursue.

I have hit the ground running thanks to the environment of compassion, action and success you have created. We have a special mission, and I am delighted to be part of the VA team. I'll see you on the high ground!

VAnguard outlook



In VA Voluntary Service, the Focus is on Veterans

Laura B. Balun Director, Voluntary Service Office

My greatest privilege and responsibility as director of the Voluntary Service Office is to advocate for our 86,000 volunteers who selflessly give of themselves to serve veterans and their families. Have you ever wondered what VA would look like without volunteers? Most would agree that we would be much less able to offer so many services that put the "care" into VA health care.

Volunteers are essential to VA and have a positive impact on VA health care. They help lower costs and increase patient services. Excellent patient service is just as essential as excellent clinical care. Without volunteers, the quality of programs and services designed to enhance patient care would be compromised. We thank VA volunteers for their caring and devotion.

The VA Voluntary Service (VAVS) program has given outstanding service to America's veterans since 1946. Our volunteers have donated 689 million hours of service over the past 62 years. Volunteers and their organizations annually contribute \$59 million in gifts and donations, providing vital programs and resources to veterans that otherwise would not be available.

VAVS establishes challenging goals to ensure we remain focused on improving our services. Looking back over the past year, we worked to accomplish a number of priorities. Together, our staff and volunteers:

supported Echo TapsWorldwide by organizing

more than 3,000 volunteers who participated in a cascading musical performance of taps on Armed Forces Day 2007 to honor and remember America's veterans;

- promoted volunteer support for Advanced Clinic Access by implementing new volunteer assignments and initiatives that improve quality and service to veterans;
- improved volunteer recruitment and retention by decreasing the volunteer turnover rate to less than 25 percent:
- supported the Volunteer Caregiver Support Network by developing recruitment and training materials that will prepare well-trained volunteers to provide compassionate services to the primary caregivers who give care to veterans in their homes:

supports the VA mission, and continually strives to provide the best possible service to veterans and their families.

As we reflect on our past accomplishments, we also look forward to reaching new milestones in 2008. We have established four major initiatives that will strengthen the VAVS program and improve the services we provide veterans:

enhancing the Voluntary Service Timekeeping System (VSS), which will improve VAVS recordkeeping, data collection and overall program management. Plans include developing a tracking module in VSS for volunteer training and security requirements, and automating the Healthcare Integrity and Protection Data Bank (HIPDB) comparison with Health and Human Services;

tionwide, in both VA and private sector facilities, a renewed focus on improving volunteer recruitment and retention is critical.

We are excited about these initiatives, and look forward to collaborating with our volunteers and partner organizations to advance VAVS to a higher level of excellence.

Volunteers sponsor special events throughout the year, like the National Salute to Hospitalized Veterans each February, which focuses community attention on the veterans we care for and on the vital role volunteers play in that care. This year, up-and-coming young movie actor Mike Vogel serves as our National Salute chairperson.

We will honor our volunteers during National Volunteer Week April 27-May 3,

Without volunteers, the quality of programs and services designed to enhance patient care would be compromised.

- provided support to Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF) veterans and their families by coordinating Welcome Home celebrations and using donations to provide lodging and other services;
- supported the professional development of VAVS staff by conducting a national training conference for program managers to develop and share new ideas, resources and best practices in volunteer management.

These initiatives are just a few examples of how VAVS

- supporting Welcome Home celebrations, which will help improve the lives of OIF/OEF veterans and their families, and enhance the services we provide them;
- developing resources for patient feeding volunteer programs, which will support the growing need to recruit and train volunteers to assist with patient feeding programs in VA health care facilities nationwide;
- improving volunteer recruitment and retention. At a time when health care volunteerism is declining na-

recognizing them all, young and old, for the hours they give to VA and our veterans, but a smile or a sincere thank you from a VA staff member is reward enough for most volunteers—something to remember the next time you are working alongside one.

We appreciate the diversity and strength of our volunteer workforce, and hope you will join us in extending your appreciation to our volunteers for their tireless efforts, and for the great service they give to America's veterans and their families every day.

FY 2009 Budget Proposal: \$93.7 Billion

Seamless transition, compensation and pension initiatives top the list of priorities in President's request.

eamless transition and compensation and pension initiatives top the list of priorities in the President's 2009 budget proposal for VA. New VA Secretary Dr. James B. Peake testified before Congress Feb. 4 to give an overview of the request, which totals nearly \$93.7 billion—\$46.4 billion for entitlement programs and \$47.2 billion for discretionary programs.

The total request is \$3.4 billion

above the funding level for 2008. Secretary Peake told Congress that this proposed budget is 17 percent higher than in 2007 and is more than double the funding level in effect when the President took office seven years ago.

Peake stated that one of VA's highest priorities is to ensure that veterans returning from service in Operation Iraqi Freedom and Operation Enduring Freedom receive everything they need to make their transition back to civilian life as smooth and simple as possible. He pledged to take all measures necessary to provide

them with timely benefits and services, to give them complete information about benefits they have earned through their service, and to implement streamlined processes free of bureaucratic red tape.

Additionally, he stressed VA's priority of improving delivery of compensation and pension benefits to all veterans in the coming year with the hiring of an additional 3,100 new staff and by working more closely

with the Department of Defense through the Compensation and Pension Records Interchange project that grants VA greater online access to DoD medical information as more categories of DoD's electronic records are made available.

The President's request for 2009 will allow VA to achieve performance goals in four areas critical to the achievement of its mission:

provide timely, accessible, and



VA officials participate in a media briefing on the FY 2009 budget proposal in VA Central Office on Feb. 4. Left to right: Principal Deputy Assistant Secretary for Management Rita Reed; Under Secretary for Health Dr. Michael Kussman; Under Secretary for Benefits Daniel Cooper; Under Secretary for Memorial Affairs William Tuerk; and Assistant Secretary for Information and Technology Robert Howard.

high-quality health care to the highest priority patients—veterans returning from service in Operation Iraqi Freedom and Operation Enduring Freedom, veterans with service-connected disabilities, those with lower incomes, and veterans with special health care needs;

advance collaborative efforts with the Department of Defense to ensure the continued provision of world-class health care and benefits to VA and DoD beneficiaries, including the development of secure, interoperable electronic medical record systems;

- improve the timeliness and accuracy of claims processing; and
- ensure the burial needs of veterans and their eligible family members are met and maintain veterans' cemeteries as national shrines.

Highlights of the request include: ■ medical care: \$41.2 billion, an increase of \$2.3 billion over 2008.

- OIF/OEF veterans health care: \$1.3 billion, 21 percent higher than in 2008.
- mental health services: \$3.9 billion, a 9 percent increase over 2008.
- non-institutional longterm care: \$762 million, an increase of 28 percent over 2008.
- prosthetics and sensory aids: \$1.5 billion, an increase of 10 percent over 2008.
- CHAMPVA: \$1 billion, an increase of 17 percent over 2008.
- facility activations: \$83 million, a 19 percent increase over 2008.
- medical and prosthetic research: \$442 million, to fund 2,000 projects.
- general operating expenses: \$1.7 billion, \$1.4 billion for VBA.
- VBA improve performance initiatives: \$10.8 million.
- NCA operations and maintenance: \$181 million.
- IT: \$2.4 billion, an increase of 19 percent over 2008. •

By Jose Llamas

Honoring Distinguished Service in the Pacific

Coast Guard commandant visits the National Memorial Cemetery of the Pacific to dedicate the U.S. Coast Guard Pacific Veterans Memorial.

ommandant of the Coast Guard Adm. Thad Allen joined other federal, state and local officials at the National Memorial Cemetery of the Pacific in Honolulu Jan. 18 to dedicate the U.S. Coast Guard Pacific Veterans Memorial.

More than a thousand former and active duty members of the Coast Guard, their families and other guests were on hand to witness the unveiling of a memorial plaque honoring their distinguished service in the Pacific.

Cemetery director Gene E. Castagnetti was master of ceremonies for the program, welcoming the crowd and introducing Allen as the event's keynote speaker.

During his remarks, Allen praised the men and women of the Coast Guard for their service, sacrifices and dedication to duty. He traced the Coast Guard's wartime record from Pearl Harbor, only 10 miles from the site of the new memorial, through current deployments and maritime interdiction missions in the Middle East. Allen highlighted the service's vital role in World War II during landings throughout the Pacific.

"It was in the ships and landing craft of the amphibious landing forces where the Coast Guard played one of its most important roles in the Allied victory, bringing the assault troops to the beaches and providing reinforcements and support," said Allen.

One of the first places the Coast Guard distinguished itself in World War II was at Guadalcanal. The service landed Marines on the island in the Solomon chain in August 1942, the beginning of a six-month campaign. Signalman 1st Class Douglas



Rear Adm. Sally Brice-O'Hara, Coast Guard Fourteenth District commander, and Adm. Thad Allen, commandant of the Coast Guard, help Kahu Kordell Kekoa conduct a traditional Hawaiian blessing of the memorial plaque.

Munro, the Coast Guard's only Medal of Honor recipient, died there rescuing a group of Marines. A stone from Guadalcanal is the centerpiece of the new memorial.

The crowd also heard remarks from Hawaii Gov. Linda Lingle, Sen. Daniel Akaka (D-Hawaii), Honolulu Mayor Mufi Hannemann, and Rear Adm. Sally Brice-O'Hara, the commander of the Coast Guard's Fourteenth District, which covers the Pacific region. Retired Coast Guard Cmdr. Douglas Sheehan, Munro's nephew, was in attendance as well.

The ceremony included a national anthem performance by Jim Nabors (TV's Gomer Pyle), wreathlayings, a three-volley rifle salute, the playing of taps, an HH-65 rescue helicopter flyover and music by the Marine Forces Pacific Band.

The driving force behind the memorial was Coast Guard Capt. Barry Compagnoni, commander of USCG Sector Hawaii.

"For more than 217 years, the United States Coast Guard has served our nation with distinction and honor, yet no single memorial at the National Memorial Cemetery of the Pacific marked the significant role of our service in the Pacific," he said. "On a visit to the cemetery in the spring of 2007, my father-in-law, who is a Coast Guard veteran, recognized this oversight and I pledged to him that we would correct it." The captain put together a team of more than 40 volunteers to recognize and validate the service and sacrifice of the Coast Guard veterans. VA

By Jim Rich

'Granting' Independence

VA's Specially Adapted Housing grant program allows seriously disabled veterans to design, construct and modify homes to meet their needs.

Jeanne Neff retrieves them from their storage drawer to prepare dinner. "Bzzzz." She turns and heads to the laundry room to move a load of whites from the washer to the dryer. On her way back to the kitchen, she calls to her daughter, Julie, asking her to take a break from her homework and music to set the table.

It's a scene played out countless times across the country every day. It occurs so often it is taken for granted.

That's not the case in the Neff household, though. Neff smiles to herself with appreciation and satisfaction at the ease with which those simple daily activities have been accomplished from the seat of her wheel-chair—her silent partner in her fight against the debilitating effects of amyotrophic lateral sclerosis (ALS), or Lou Gehrig's disease.

Neff, a 14-year veteran of the Air Force Reserve and West Virginia Air National Guard who was called to active duty in support of Operation Iraqi Freedom, received a Specially Adapted Housing (SAH) grant from VA to build a home that accommodates her needs.

"It makes me independent," she said. "You have no idea what that means. If you have never been where you have to depend on somebody else ... it is not a good feeling. But here, I can function and I can function well. Because of this house and the help I got from the VA, life at home is really, really good."

Veterans with service-connected disabilities who are entitled to compensation for a "permanent and total

disability" are eligible for the benefit. A grant may be used to build a new home with appropriate adaptations or to modify an existing one to meet the veteran's needs.

In fact, VA has three types of adapted housing grants available to qualified veterans. The Specially Adapted Housing (SAH) grant, currently limited to \$50,000, is generally used to create a wheelchair-accessible home for those who may require such assistance for activities of daily living, as it did for Jeanne Neff.

A second type is the Special Housing Adaptation (SHA) grant. Limited to \$10,000, it is generally used to assist veterans with mobility throughout their homes due to blindness in both eyes, or the anatomical loss or loss of use of both hands.

A third type, the Temporary Residence Adaptation (TRA) grant,

was recently established by a new law and is available to eligible veterans who are temporarily living in or intend to temporarily live in a home owned by a family member. This change allows veterans who may not yet own homes to have access to the adapted housing grant program.

VA has averaged about 1,000 adapted housing grant applications a year over the past 10 years. Since the program began in 1948, it has provided more than \$650 million in grants to about 34,000 seriously disabled veterans.

"The goal of all three grant programs is to provide a barrier-free living environment that offers the country's most severely injured veterans or servicemembers a level of independent living," said Secretary of Veterans Affairs Dr. James Peake.

The increased independence is



A grant may be used to build a new home with appropriate adaptations or to modify an existing one to meet the veteran's individual needs.

not limited to the veteran. Jeanne's teenage daughter Julie also benefits from knowing her mother is in a safe environment.

"Whenever I decide to go somewhere, I know that she can take care of herself and I am not worried about her tripping, because everything is flat," Julie explained.

"When you're handicapped, your child has to do a lot of things that other kids do not have to do," admits Jeanne. "The VA has made it possible for me to be as independent as I can be and that means she can just be a normal kid."

Getting these adaptations is a complex process involving paperwork and numerous details most of us don't have to think about, but Neff said the end result is well worth it.

This is where VA's expertise pays big dividends. VA works closely with veterans, contractors and architects throughout the entire process to design, construct and modify homes to ensure the individual veteran's or servicemember's needs are met and grant money is spent properly.

Neff encourages those who may be overwhelmed by the prospect of the challenge to get help. "You can do it and life is so much easier. You've just got to work through it."

People who design or build their own homes know the challenges and myriad decisions that must be made about every detail of the home's construction. To make those same decisions while considering the needs of someone who may have one or more physical limitations takes an experienced eye and a caring heart.

"It's the little things that nobody else thinks about, like drawers in the kitchen instead of cabinets that you have to open and climb under to get into them," Neff said.

Neff, who designed the house herself, remembers her surprise and initial resistance to advice she received to "build it big." Looking back, she now advises others to "make wide doorways, big showers and big rooms.



Home adaptations like a wheelchair-accessible shower allow seriously disabled veterans to live as independently as possible; inset: Jeanne Neff says similar adaptations in her home make it possible for her to raise her teenage daughter, Julie, "in a home we can enjoy and I can function in."

You need room to move around, to turn around. The grant makes that possible."

VA pays special attention to the bathroom to ensure ease of function for the veteran no matter what the challenges.

"I would have built differently," Neff admits, "if [VA] had not been involved and I'm glad they were, because things like the sink, you need to be able to pull up to it so you can get [the wheelchair] under it. I would never have done that, because in my head I'm not handicapped. But they knew that I would need that and I do."

After making hundreds of drawings and numerous changes, her joy and satisfaction are evidenced by her ready smile and enthusiasm for life.

"I got to watch my dream come alive," Neff said. "They built what I drew and it was wonderful. It was a long, hard process, but it was exactly what I drew on paper. I've been able to raise my daughter in a home we can enjoy and I can function in."

Neff is equally enthusiastic about the help she received from her VA contact through the whole process, Hugh Alley at the Huntington VA Regional Office in West Virginia.

"I think that was their whole goal, to make me as independent and comfortable and normal as I can be and they've done that," said Neff. "They've taken care of every need and made life easy."

The same holds true for Harry Currie, a Vietnam-era veteran who was stationed in Korea. Currie has been paralyzed for more than 20 years, but waited to use the grant until he was certain where he wanted to settle. He chose Phoenix.

"I thought it would be a long, difficult process, but after I met with the case worker here in Phoenix, Sally Driscoll, it went rather smoothly," said Currie. "I applaud her for the project. She was there when I picked

out the lot until the closing."

Currie not only made use of the \$50,000 SAH grant to make the home wheelchair-friendly and suited to his needs, he also used a second, Home Improvement and Structural Alteration (HISA) grant from VHA to add a walkway that gives him a smooth path to the garage on the other side of the home.

In addition to making the inside of the home user-friendly for the veteran, regardless of the disability, VA specifications also ensure the veteran can easily and safely exit the home in case of an emergency. However, not all emergencies require leaving the home.

One veteran, Harold Ettin, who depends on respirator equipment and an electrically-powered bed, used SAH grant money to add a back-up generator to his home's electrical system. When a storm knocked out power to his neighborhood, his generator kicked in within 10 seconds, providing the needed power to keep the equipment operating.

Ettin was the beneficiary of another change in the recent law that brought the TRA into being. Before the change, eligible veterans and servicemembers could receive specially adapted housing grants from VA only once. Now they may use the benefit up to three times, so long as the total grants stay within specified limits. Ettin purchased the generator with a subsequent grant from the SAH program.

"This change ensures that every eligible veteran and servicemember has the chance to use the maximum amount afforded to them," said Loan Guaranty Service Director Judy Caden. "To ensure all previous recipients are aware of this opportunity, VA mailed more than 16,000 letters to eligible veterans." The letters are aimed at those who used only a portion of their grant or who decided not to use the grant after initially qualifying.

The response over the past year has been dramatic, with more than 4,600 applications received so far. Of

these, approximately 3,900 veterans have been determined eligible under the new law, and more than 200 grants have already been awarded.

Martin Burrell is another veteran who was recently approved for a second SAH grant. At age 19, while serving as a member of the Army Combat Engineers during World War II, Burrell lost both legs in a tank attack on a German battlefield.

He returned home determined to live a full life. He used his GI Bill benefits to earn degrees in mathematics and physics and enjoyed a long and rewarding career in teaching and at Lockheed and NASA. He married and raised two sons and a daughter with his wife, Jennie.

Burrell used his first \$10,000 SAH grant to build an adapted home in Macon, Ga. The second \$40,000 grant will be used for adaptations to his current home in Hiawassee, Ga.

Specially adapted housing means just that—houses modified to meet the needs of the individual veteran. Whether it's extra grab bars around the house and a sit-down shower for Squire Turner, who retired from the Army in 1965 after 20 years of service and suffers from blindness and the effects of a stroke, or an elevator for James Latham, an Army veteran of the war in Iraq whose injuries left him paralyzed, to reach the second level of his home, VA grants are available to help seriously injured veterans live as safely and independently as possible within their own homes.

It's not just the money that makes these modifications possible. It's the people—VA's team of caring and committed staff who ensure these life-enhancing adaptations are done properly and meet the needs of the veterans for whom they are designed.

It's like the television ad. Specially Adapted Housing grant: \$50,000; A veteran's renewed sense of independence: priceless.

By Jim Benson

What Types of Grants Are Available?

There are three types of grants available through the Specially Adapted Housing grant program.

- The Specially Adapted Housing (SAH) grant is generally used to create a wheelchair-accessible home. This grant, currently limited to \$50,000, is available to both veterans and active duty servicemembers.
- The Special Home Adaptations (SHA) grant is generally used to assist in adapting homes for those who are blind or lost use of both hands. This grant is currently limited to \$10,000 and can be used on a home owned by a family member. It is available to both veterans and active duty servicemembers.
- A Temporary Residence Adaptation (TRA) grant is now available to eligible veterans temporarily residing in a home owned by a family member. Veterans eligible for an SAH grant would be permitted to use up to \$14,000 and veterans eligible for an SHA grant would be permitted to use up to \$2,000 of the maximum grant amounts. Currently, active duty servicemembers are not allowed by law to use the TRA grant.

These grants can be used to help construct, purchase or adapt a home to meet the individual's needs. Other VA adaptive housing benefits are currently available through Vocational Rehabilitation and Employment Service's "Independent Living" program, the Insurance Service's Veterans Mortgage Life Insurance program, and the Veterans Health Administration's Home Improvement and Structural Alterations grant program. More information about grants and other adaptive housing programs is available by calling 1-800-827-1000.

In Tribute to America's National Shrines

Author Tom Ruck publishes a book on national cemeteries, with the proceeds going to scholarships for veterans' children.

Coffee table books" have been around for decades. Topics have included nature, art, sports, and nearly anything else visually appealing. The TV show "Seinfeld" even offered up the idea of a coffee table book about coffee tables.

Now you can add VA's national cemeteries to the list of subjects covered by such a book.

In November, author Tom Ruck released his book Sacred Ground: A Tribute to America's Veterans, which features 189 extra-large glossy pages and about 200 full-color photographs of some of America's and VA's most strikingly beautiful national shrines.

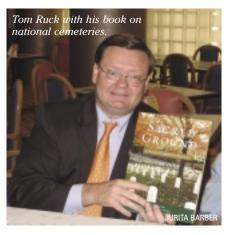
The idea to publish the book grew out of Ruck's fondness for Jefferson Barracks National Cemetery, where his father, a Navy veteran of World War II, was buried when Ruck was in seventh grade. In the years that followed, Ruck made frequent visits to Jefferson Barracks National Cemetery. His mother later remarried, to another World War II Navy vet Ruck calls his "second father." His mother and both fathers are now interred at the St. Louis cemetery.

The book was really a "way to show appreciation to the part the veteran has played in upholding American values, with the cemeteries as a vehicle to say 'thank you," said Ruck. "I wanted the citizens of this country to realize what beauty and serenity lie within VA's national cemeteries. Americans need to know how well their veterans are being cared for in these national shrines."

In the summer of 2006, Ruck, a sales and marketing executive, approached the National Cemetery Administration with a proposal for a book that would be a tribute to

America's veterans, raise awareness of VA's national cemeteries and educate future generations about the service and sacrifices made by our military members. Although many such ideas never make it past the idea stage, NCA granted permission and recommended dozens of cemeteries to be photographed.

The author recruited volunteer photographers from around the country to photograph VA's national cemeteries through the change of seasons, to include Memorial Day ceremonies and traditions in May 2007.



In all, 36 photographers participated. In some towns, several photographers came forward, including four in his hometown of St. Louis.

The hard part, said Ruck, was getting a publishing house interested in the idea. "Some said it wasn't 'high-volume' enough. Others wanted to know what celebrities I had lined up to provide commentary."

After some recommendations from other publishers, Ruck found Washington, D.C.-based Regnery Publishing to support his vision. In November 2006, Ruck was introduced to Ward Grant, the longtime

manager of comedian and military supporter Bob Hope. Unfortunately, Grant passed away last January, but not before putting Ruck in touch with several notable figures who were enthusiastic about the project.

Former Sen. Bob Dole provided a foreword. Essays on honor and sacrifice were provided by prominent citizens like astronaut Buzz Aldrin. Important speeches and quotes, such as President Lincoln's Gettysburg Address, are scattered throughout the book to remind readers of the sacrifices of America's men and women in uniform.

Deputy Secretary Gordon H. Mansfield presented Ruck with a Commendation Award in a small ceremony at VA Central Office Nov. 6. Ruck also signed copies of the book at VACO's canteen during his Washington visit.

All royalties from the book are being donated to the Freedom Alliance Scholarship Fund, which provides educational scholarships to the children of Americans in the armed forces who have been killed or wounded. Since its founding, the fund has raised more than \$600,000.

The author is quick to share credit for the book.

"My name may be on the book," Ruck said, "but it was very much a team effort—NCA, all of the cemeteries, and everyone who wanted to recognize vets, help kids, and increase awareness of our national cemeteries. It is obvious from my visits to these cemeteries that the people who maintain them truly understand and respect the jobs they have—keeping hallowed grounds."

By Jim Rich

feature VAnguard



CHRIS BAROODY

ioneering. Innovative. Ambitious. Award-winning. All words used to describe VA's personal health record, My HealtheVet, a Web health portal launched nationwide on Veterans Day 2003. Celebrating its fifth anniversary this year, My HealtheVet will expand a number of features to enhance patient-provider relationships and continue integrating into VHA's much-lauded electronic health record.

More than access to online health information and a gateway to online benefits and services, My Healthe Vet enhances veterans' communication with their primary health care team and allows them to become active partners in their health care. With more than 500,000 users now registered at www.myhealth.va.gov, it is clear that the integration of features like online VA prescription refills—which tops searches on www.va.gov—

access to health measurements and a one-stop shop for VA benefits, anywhere, anytime Internet access to VA health care improves patient satisfaction and enhances quality health care.

My Healthe Vet currently contains data entered by health care consumers, both veterans and employees, who have harnessed the power of online access to health care information. As VA celebrates five years of online access, veterans can look forward to accessing key portions of the electronic health record, extracted and integrated securely into the patient's personal health record. In the near future, patients will be able to delegate access to one or all parts of the record to another person (such as a health care provider, family member or advocate).

"With the 2008 enhancements to My HealtheVet, America's veterans,

their caretakers and caregivers will soon have access to personal, secure, convenient and informed personal health information not only to improve their health but to become partners in their health care as well," said VA Secretary Dr. James B. Peake.

My HealtheVet has begun testing "secure messaging," providing almost anywhere, anytime Internet access to VA health care staff, at VA medical centers in Boston, Bay Pines, Fla., Portland, Ore., and Washington, D.C. This new online tool will allow registered My HealtheVet users who have gone through the in-person authentication process (IPA) at a local VA facility to correspond directly with their primary health care provider teams.

With secure messaging, registered patients with an IPA, or upgraded My Healthe Vet account, will not only communicate non-urgent and non-emergent issues with their health care

provider teams, their online conversations have the potential to integrate into their existing electronic health record, which health care providers see as part of VA's Computerized Patient Record System (CPRS). "Our goal is to increase the number of veterans with an IPA VHA-wide this year so they can get the full benefit of their online personal health record," said VA Undersecretary for Health Dr. Michael J. Kussman.

Secure messaging is expected to be released nationally during the year with a strategic, integrated and incremental approach, according to My Healthe Vet Program Director Theresa Hancock, with VHA's Office of Information. "That's why we encourage all veterans, their caregivers and care providers to register by completing

the in-person authentication process at their local VA medical center or outpatient clinic, and watch for additional announcements of this exciting new feature," said Hancock.

But don't take her word for it. Veterans like Melvin Marks know firsthand that My HealtheVet is "... about living my life." As a dedicated volunteer at the Ralph H. Johnson VA Medical Center in Charleston, S.C., the Navy veteran supports My HealtheVet by helping to spread the word as he processes ID cards for fellow veterans. Marks assists in processing approximately 30 to 40 in-person authentication registrations per month.

A Vietnam veteran, he acknowledges that World War II veterans have some trouble getting started

with the username and password set up, but after that, they are self-sufficient. His generation and younger veterans are more comfortable with computers and have an easier start at the registration process.

"The IPA registration is key to all the features My HealtheVet can provide," said Marks. "With IPA registration, you get full access to health calendars, your own information, and soon lab information and even messaging with your health care team."

Marks personally uses My Healthe Vet to order his medications each month, which helps him instruct other veterans. He also uses the graphing functions for his high blood pressure, pain and diabetes.

He printed out the diabetes chart to take to his doctor, who adjusted his medication to eliminate the peaks and valleys in the blood sugar readings. Now, Marks' blood sugar remains fairly normal.

Marks has even become part of the local My Health<u>e</u>Vet "road show." Susan Haidary, the My Health<u>e</u>Vet point of contact at the facility, takes him along to new employee and patient orientations, as well as servicelevel briefings on My Health<u>e</u>Vet.

Marks recently prepared a presentation for nurses using My HealtheVet's online library of health information. "Melvin is definitely a key champion at Charleston and the Savannah CBOC, and he also helps train physicians on My HealtheVet," said Haidary.

From veterans and volunteers to the network of My Healthe Vet points of contact throughout VHA, the portal owes its success to innovation, communication and collaboration.

"I've been a user of the My Healthe Vet 'pilot' for quite some time," said Geoffrey S. Parker, of Dunkirk, Md. "I am still impressed with the access it provides to my health records and other information."

By Stacie M. Rivera

Some Reminders

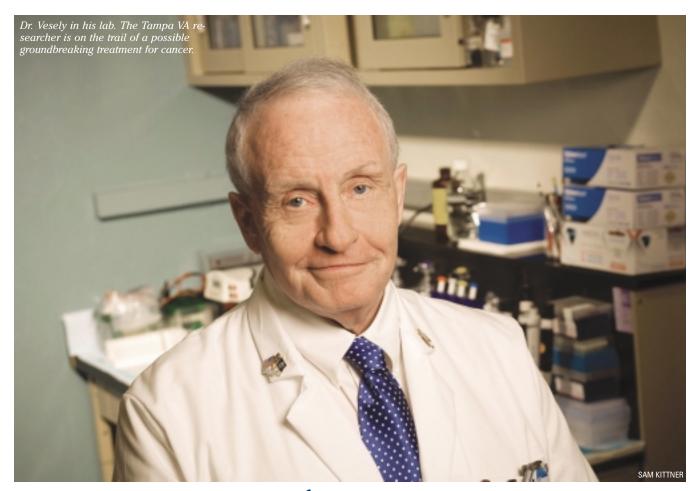
- Web site visitors may access patient health education content through the site's evidence-based health information libraries without registering or logging in
- My Health eVet registration is required before users can access additional program features. Initial registration is accomplished using a Web-based form on the site, and complex passwords are required to safeguard user information. Once registered, users have access to self-entered information features such as health journals and health e-logs.
- To enable the inclusion of personally identifiable health information from the electronic health record, "heavy proofing" is required through in-person authen-

tication (IPA). To accomplish this level of authentication, veterans must present at a VA facility or VA-designated location and display a photo ID or a new Veterans Identification Card (VIC). Valid photo ID may include a driver's license, passport or other government ID.



My Health<u>e</u>Vet registration then initiates a transac-

tional process to match the user's information with the VA Master Patient Index (MPI), using the Social Security number as a key identifier. This matching is critical to connect the patient to functions like prescription refill (which is available now) and health information extracts (which will be available later this year). VA medical centers that have satellite clinics are encouraged to ensure that staff members are available to perform IPA at the clinic.



On the Cusp of a Breakthrough

The loss of his wife spurred Dr. David Vesely to expand his research from heart disease to cancer. And now that research is showing real promise in the fight against cancer.

hen Dr. David Vesely's wife, Clo, died of breast cancer in 2002, it led the heart and gland physician and researcher at the James A. Haley Veterans' Hospital in Tampa to expand part of his research to include cancer.

After successfully focusing his research on congestive heart failure and kidney failure, Vesely may be on the cusp of a major breakthrough in the battle against cancer. He recently completed laboratory tests showing that certain heart hormones are successful in combating human cancerous growths in mice.

Vesely's early research led to the discovery of three peptide heart hormones in 1987. (Since his original discovery, he now uses three other

peptide hormones in his research).

The peptides have been used to help reverse congestive heart failure in humans. They also have proved to help ameliorate renal failure in animals, with the tubules in the kidney regenerating after six days of treatment.

His shift from heart and gland research to cancer research came about

after his wife's death, when his son Brian, then a high school student who had been working in his dad's lab to earn credit for graduation, suggested he expand some of his laboratory research to include cancer.

"I wanted a way to help Brian deal with his grief," Vesely said. "I was intrigued by the fact that these hormones prevented heart cells from growing too big. If they could regulate normal cell growth, I found myself wondering whether they could alter cancer cell growth."

Working in his lab with Brian, the two made cultures of human cancer cells and mixed in the heart hormones. Brian was to observe them under a microscope and make note of any changes. Brian's first observation was that the cancer cells looked blown apart after they had been mixed with the hormones, but he did not realize how different that was until he compared those cancer cells to untreated ones.

To their amazement, Vesely and his son observed about a 97 percent obliteration of cancer cells within 24 hours. And even more amazing—the destruction of human cancer cells was taking place in all cancers!

After receiving VA funding and other seed money from the private sector, Vesely expanded his research. He hired additional scientists, and he moved from testing the hormones on human cancer growth in test tubes to testing them on mice that had been injected with cancer cells.

They conducted test after test using the heart hormones on various forms of cancers the mice had been injected with—including the deadly pancreatic cancer. One breakthrough after another occurred.

"The results were incredible," Vesely said. "The mice that had been injected with cancers lived to a ripe old age, and they did so without any return of the cancer or any side effects."

The heart hormones work inside cancer cells by preventing DNA syn-

thesis to keep the cancer cells from multiplying and spreading. The heart hormones also work to destroy the cancer cells.

His initial laboratory test results over the past five years on cancerous cells in test tubes showed that up to 97 percent of human pancreatic, prostate, breast, colon, ovarian and kidney adenocarcinomas were eliminated within a 24-hour period.

Vesely published his most recent research results in the May/June 2007 issue of the medical journal *In Vivo*. The title of the article is "Elimination of Up to 80 Percent of Human Pancreatic Adenocarcinomas in Athymic Mice by Cardiac Hormones." The key finding published showed that deadly human pancreatic cancer tumors implanted in mice were completely eliminated in up to 80 percent of the mice, and in all treated mice the tumors were reduced in size to less than 10 percent of the size of the tumors in untreated mice.

In recognition of his work, Vesely recently was awarded the Service to America ("Sammie") Career

merit review research program, which helps physician-scientists more than any other funding source to investigate programs directly related to a person's health, and because of the sacrifice of our veterans—one of my close friends was killed in Vietnam," Vesely said.

Vesely is now the Tampa VA's chief of endocrinology, diabetes and metabolism. He also serves as a professor of medicine, molecular pharmacology and physiology at the University of South Florida.

"The VA has been very supportive of my research, providing me with research funding for more than 20 years in the form of peer-reviewed merit review awards," Vesely said. "Without the support of VA for this research, it would not have been possible."

One newspaper article noted that his accomplishments "are equated to picking a winning lottery number—twice. First, he found new pathways for treatment of heart and kidney disease, then he found pathways for treatment of cancer."

"There are millions of people with cancer we may be able to help if these tests prove successful."

Achievement Medal medical research award given annually to a federal employee by the Partnership for Public Service, becoming the first VA employee to win the honor.

A Nebraska native, Vesely once dreamed of playing shortstop for the St. Louis Cardinals. He was good enough for the Cardinals to offer him a big-league contract. But his father was a dentist and his parents wanted him to go to dental school. After three years in dental school, he switched to medical school.

He began his VA career in 1985 at the Little Rock, Ark., VA Medical Center; he's been at the Tampa VA since 1989.

"I first went to VA because of its

The next steps for his research will be to have clinical trials on humans, which he hopes could begin within a year as soon funding is obtained from a biotechnology firm to which the cardiac hormones have been licensed.

"We're excited about moving ahead with these clinical tests," Vesely said. "There are millions of people with cancer we may be able to help if these tests prove successful."

Finding a successful treatment for cancer is a long way from playing shortstop for the Cardinals. Vesely may be on the verge of winning the World Series of Cancer Research.

By William Outlaw

VA and the New Deal

This year marks the 75th anniversary of the New Deal, the comprehensive social and economic programs instituted by President Franklin Roosevelt immediately following his election in the wake of the Great Depression, to the early years of World War II. New Deal programs, including the Works Progress Administration (WPA), Civilian Conservation Corps (CCC), Federal Writers Program (FWP) and many others put millions of unemployed citizens, mostly men, to work during one of this nation's darkest times.

Many know about the great work done constructing parks, stocking fish in rivers, and funding arts projects. Few realize that the WPA also had a direct effect on the Veterans Bureau, predecessor to the Veterans Administration and the Department of Veterans Affairs, which oversees what are now historic medical campuses. Many national cemeteries—at the time run by the Army, and transferred in 1973 to what is now the National Cemetery Administration—also saw improvements thanks to WPA labor.

Veterans Health Administration and National Cemetery Administration historians are actively researching the role the WPA played in VA's past. From renovating buildings and grounds at the Augusta, Ga., hospital, to landscaping at the Salt Lake City hospital, to raising and realigning headstones at Los Angeles National Cemetery, to commissioning unique artwork for the Albuquerque, N.M., hospital, the New Deal legacy lives on at VA.

This article provides details on one rare WPA project—the construction of VA's Baltimore National Cemetery.

- Kathleen Schamel, VA Historic Preservation Officer

In the 1930s, the United States was in the midst of the Great Depression. To stimulate the economy and fight the high unemployment rate, which surged past 25 percent at times, President Franklin Roosevelt established a series of programs collectively known as the New Deal.

The Works Progress Administration (WPA) was one of the largest and most comprehensive of these work-relief programs. Established in January 1935, the WPA employed more than 3 million men and women before it ended in 1943. The War Department collaborated with the WPA for improvement projects in many national cemeteries, including the construction of new outbuildings, the rehabilitation of cemetery lodges, and the cleaning, raising and realignment of headstones.

During this period, the War Department was under increased pressure to create more burial space for veterans. On April 15, 1920, Congress enacted Public Law 66-175, which extended the right to burial in a national cemetery to the veterans of

all wars. As a result, approximately 5 million new veterans were eligible for interment in a national cemetery, many of whom served during World War I.

In response, the War Department began a systematic expansion of the national cemetery system. From 1933 to 1941, seven new national cemeteries were established near large cities, including New York, Minneapolis and San Francisco. WPA laborers contributed to the development of many of these new national cemeteries. In particular, WPA laborers played a large and unique role in the development of Baltimore National Cemetery.

The property that became Baltimore National Cemetery was historically known as "Cloud Capped." Immediately following the American Revolution, the property was owned by Charles Carroll, a signer of the Declaration of Independence. Carroll sold the property in 1810, and around this time the original Federal-style house at Cloud Capped was constructed, with two stories, four rooms, and an attic.

Located on the highest elevation

of the rolling estate, legend has it that in 1814 the invading British fleet sailing into Baltimore Harbor was first spotted from the house. A messenger was sent into Baltimore to warn the populace of the invading British forces. Subsequently, the bombardment of Fort McHenry during the Battle of Baltimore inspired Francis Scott Key to pen "The Star-Spangled Banner"

During the 19th century, Cloud Capped was sold multiple times until Blanchard Randall purchased it in 1890. A prominent Baltimore lawyer, Randall used the estate as his country residence while maintaining a house in downtown Baltimore. Over the years, multiple additions to the house, including an Italinate tower and a Beaux-Arts wing, transformed it into a sprawling, eclectic mansion.

By the 1930s, it became apparent that more space was needed in the Baltimore area for the interment of veterans. At the time, the only national cemetery in the Baltimore area was Loudon Park National Cemetery, which totaled 5.2 acres in size and was running out of burial space. Local

veterans organizations recognized the gravity of the situation, but no progress was made until the Baltimore chapter of the American Legion began lobbying Sen. Millard E. Tydings (D-Md.) to create additional cemetery facilities in Baltimore.

Initially, the War Department planned to expand Loudon Park National Cemetery, but no suitable adjacent parcel of land was available. In 1936, after conducting a thorough evaluation of sites in the area, the War Department purchased the 72-acre Cloud Capped estate, located

by grading and developing the site under supervision from War Department staff.

The War Department considered the hilltop mansion too large to maintain as the cemetery superintendent's residence. The WPA demolished it in the summer of 1937, salvaging building materials from the oldest wing, the original brick Federal-style house. The WPA used the salvaged materials in the construction of the original two-story, five-bay house with a full front porch. The new lodge was placed close to the

into a lodge for the "assistant superintendent," a position not found in other national cemeteries. It was unusual for the War Department to reuse older buildings on a site purchased for a cemetery and more so, as Tudor Revival buildings are rare within the national cemetery system.

Over the years Baltimore National Cemetery has evolved, but it is historically significant because the WPA played a larger role in its development than in any other national cemetery, and because of its unique historic buildings. In a larger context,



Clockwise from above: Modern view of the lodge at the Baltimore National Cemetery; Works Progress Administration laborers dismantling the Cloud Capped Mansion in 1937; WPA laborers raising the flagpole at Baltimore National Cemetery.

two miles west of Loudon Park National Cemetery along Frederick Avenue. A local newspaper reporter envisioned the new facility to be Maryland's "Little Arlington."

The War Department sponsored the WPA to develop Baltimore National Cemetery. Under this arrangement, the War Department applied for project funds from the state WPA administrator. Once the WPA accepted the project, the War Department generated plans for the landscape design and construction. The WPA provided the labor for building these projects from work-relief rolls beginning in February 1937, starting

Frederick Avenue entrance to the cemetery, marked by formal granite and iron gates completed in 1938.

From 1938 to 1940, the WPA continued to develop the cemetery infrastructure, including the rehabilitation of two large Tudor Revivalstyle outbuildings. A large stable was rehabilitated and remodeled into a maintenance-utility building containing a garage, shops, chapel and morgue. Salvaged materials from the mansion were used in this effort. The cottage, which served as a residence for domestic help, was rehabilitated





it is significant as one of seven national cemeteries to be established in metropolitan locales between the two World Wars, during the largest expansion of the national cemetery system since the Civil War.

The NCA History Program is currently in the process of developing a National Register of Historic Places nomination for Baltimore, with other intra-war cemeteries to follow.

By Alec Bennett, NCA Historian



Soon after being sworn in by Vice President Cheney at VA headquarters as the nation's sixth Secretary of Veterans Affairs, Dr. James B. Peake sat down for a wide-ranging interview covering his background, leadership style, and goals and priorities for the department. The former Army surgeon general becomes the first physician and first general to lead VA.

Peake, who retired from the Army in 2004 as a three-star general, is a board-certified thoracic surgeon. A native of St. Louis and graduate of the U.S. Military Academy at West Point, the new Secretary attended medical school after serving in Vietnam, where he earned the Silver Star and the Purple Heart.

Q: At your swearing-in ceremony, President Bush said, "Doctor Peake takes office at a critical moment in the history of this department." Why is this a critical moment for VA?

A: It's been awhile since we have had a war where we have significant numbers of soldiers in harm's way, many returning to the United States with significant injuries. It is this population that we are going to be dealing with in the VA for years to come. And so it is important that we get their care and services right, now.

Q: You've referred to the Dole-Shalala commission (the President's Commission on Care for America's Wounded Warriors) recommendations as your blueprint

for action. What is being done to implement them in VA?

A: We've been working on those recommendations for some time. Many of the recommendations don't require legislation and I am pleased that VA has already made much progress in accomplishing many of them.

We're hiring the federal recovery coordinators recommended by the commission. They are actually in training this week (Jan. 14-18) and that program is really moving forward. The idea of providing better care by reaching out

Above: President Bush traveled the short distance between the White House and VA headquarters for Peake's swearing in on Dec. 20. Peake's wife, Janice, and daughter, Kimberly, joined him for the ceremony. "We had a long ride over here, Jim," the President joked.

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and embracing the families of these wounded men and women is happening right now, as I saw during my visit to the Richmond VA Medical Center polytrauma unit this week. I've seen it with our own people at Walter Reed Army Medical Center as they interface with the families of soldiers there, so I know that this commission recommendation is already moving along.

I think the opportunity for simplifying and improving the veterans disability system looks very promising now with all the different commissions that have looked at this issue coming together as we move into a new era. The opportunity to take these studies and those done here at VA and bring them together creates momentum behind the Dole-Shalala commission work and its recommendations.

Q: What are the key elements necessary to create a truly seamless transition for today's military men and women as they leave the service for civilian life?

A: This is a complex issue. It has to do with the incentives and the perceptions—the cultural issues that the soldier and his family face in the new environment they find themselves in. I've met with soldiers and their families at Walter Reed, and I've met with Walter Reed staff and our VHA and VBA staff that work there. The VAmilitary staff interplay there is really important and begins to break down cultural barriers as trust is built between VA, the military and, most importantly, with the veteran.

It's an important thing for a wounded soldier to see VA staff there working in a military setting. We want them to know we're going to be there for the long run, even if they return to military service. Many of our servicemen with serious wounds are actually going back into the service, but someday they'll come to us and we want to make sure they know we are there for them.

Q: Mental health conditions, including post-traumatic stress disorder and traumatic brain injury, are major issues in the treatment of OIF/OEF veterans. What are your goals for VA mental health treatment?

A: There are a number. First, I want access for those who need counseling because we know these conditions are treatable. The earlier you get people engaged in treatment and they actually accept their condition and deal with it, the less likely long-term consequences are.

We don't know all we need to about PTSD and TBI and where they might overlap. We want to break down the stigma around both of these issues. We want to be careful of labeling people for the rest of their lives with something that may not really be an issue for them as they move forward. I want to make sure we are at the forefront of understanding that and doing the right thing by our veterans.

Q: That's a difficult challenge, to educate everybody who's concerned.

A: Sure, and there are employers out there that worry about it too. We don't want unnecessary barriers for our veterans who really are perfectly able to go back to work created by some artificial label that may not even be meaningful when it comes to what they're able to do.

Q: During your confirmation hearing you cited four

characteristics VA health care should possess: compassion, quality, timeliness and freedom from hassle. VA has been praised for the quality and compassion of its health care, but has been criticized for its timeliness and red tape. How can these issues be resolved?

A: I'm impressed by the compassion that I've seen. I'm impressed with the quality. But we're a big organization and we always have to be on the lookout for improving our quality—monitoring it, measuring it and

making corrections in a large system operated by a quarter of a million people. We can't just rest on our laurels.

Timeliness is related to the hassle-free goal and it affects the veteran's family as well. We need to work on this in all areas; it's not just a benefit claims issue. However, I want us to really understand the various pieces of the claims process and know where to put the resources to make a difference. We must move the claims process into the modern era of automation. We're already hiring new people to work in VBA and I think initiatives like the Benefits Delivery at Discharge program and the work of Under Secretary for Benefits Daniel Cooper to centralize certain claims functions will allow things to move more quickly.

All of these changes are important, and now we are looking at the disability system, itself. How do we simplify it? Everybody who's looked at it says we've got to make it



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simpler and easier for the veteran and the adjudicator. When it takes three years to train somebody to adjudicate a claim, that suggests to me that there's an issue we need to deal with. This is something we need to work on with all of our stakeholders—with Congress, with our committees, the veterans service organizations.

Q: We've talked about issues and initiatives driven largely by OIF/OEF veterans. Yet VA is charged with caring for all our veterans.

A: Yes, I was a soldier once and young, and I say that because different groups have different needs. I believe we have a trimodal patient population in terms of needs. We have great heroes of the Greatest Generation—World War II and Korea—approaching the twilight of their years. We want to make sure that geriatric care is there for them, that we can provide all the things to allow them to enjoy their

old age, and that we give them the appropriate tribute to their years in service.

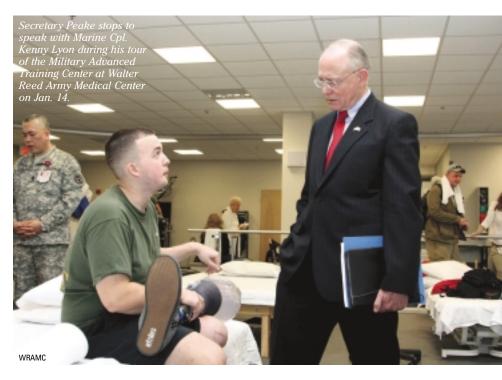
We have the Vietnam veterans, my generation, now approaching retirement and starting to discover health issues they didn't deal with or things related to their service they want to bring forth that they have not dealt with before. We need to be able to deal with that because they're entering a different period of their lives.

And our youngest veterans—I've seen them coming back to us at Walter Reed and VA polytrauma centers and I've had the privilege of knowing them and training those kids on active duty. They want to get back into society. They want to come back and take care of their families. They want to get into the driver's seat of their own lives. They've got their lives ahead of them, so they've got a different set of needs and expectations that demand a different environment of care. That's part of our challenge and it's part of the great opportunity that we have to really be a world-class system that spans all ages.

We must do our best for all of them. Someday these young kids, even though they're invincible now and don't believe it, they're going to look like me, and we will be there for them when they do.

Q: You are the first physician and the first general to hold the position of Secretary of Veterans Affairs. How will your past medical and military leadership help you lead VA?

A: I understand today's military. I've done a lot of work in the joint military environment. Health care has brought great pieces of the Army, Navy, Air Force and Marines to-



gether. I have a lot of contacts there that I have tremendous respect for and collegial relations with. So I think I can work across the organizational lines and help VA to work as a member of a great federal team.

I guess having spent 38-and-a-half years in the Army, I bring a passion—I care deeply about these kids. These are America's finest. They are our soldiers, men and women we've put in harm's way, and it is a blessing for me to continue to be a part of their care.

From a physician's perspective, I would say that when it comes down to touching the individual, a big chunk of what we do really relates to health care. That's why we have Mike Kussman, an absolutely superb leader, as VA Under Secretary for Health. When he comes to me with issues, I understand them. We've been on the same team before and we share an understanding of the health issues of soldiers. As a heart surgeon, I've dealt with an older population as well. So I think that will help inform my support of VA health care too. I think it's a good combination.

Q: And you're no stranger to VA.

A: True. For about 10 years I had the privilege of being a member of the VA Special Medical Advisory Group. I was here when Ken Kizer was doing the great work of re-structuring VHA and really putting us on this road to excellence continued now under Dr. Kussman's leadership.

Q: You come from a medical family, but started your military career as an infantry officer. Was your interest in medicine there from the start, or did it come later?

A: Actually, I was on my way to Vietnam and had a couple of weeks of leave during which I interviewed with a number of medical schools. I was accepted into medical school while in Vietnam, but I got shot and made my final decision while I was a patient at the 8th Army Field Hospital.

Q: So medicine was always your career goal?

A: Well, my dad was a Medical Service Corps officer, my mom an Army nurse. I tell people I'm a genetic defect, so I had no choice.

Q: Your Army career took you to the top of Army medicine, where you served four years as Army surgeon general before retiring. Later you served as executive vice president and chief operating officer for Project Hope. What leadership lessons did you learn from that unique position?

A: I think running a big organization across the board offers common lessons, and Project Hope was an international organization—I worked in 24 countries in 22 months with them, including six trips to Iraq. The lesson I learned there is you've got to get out and see the troops—get out on the ground and talk to people. Understand what's really going on at the grass roots level and then be able to step back from that and understand strategically where to direct the organization to solve problems locally but from the larger perspective.

I've been so pleased to see some of the leadership development programs at VA, some going back to Max Cleland, who I had the privilege of meeting when he was the VA administrator. They are very important because

it's the leaders below the Secretary that are so crucial in a big organization.

Q: How would you describe your leadership style? Who's inspired you as a leader?

A: I've had the great privilege of working for a lot of excellent leaders, from company commanders in Vietnam to surgeons general of the Army, and I've had a lot of senior noncommissioned officers that have mentored me along the way—great leaders. Leadership isn't necessarily position-dependent.

You asked about my style. I believe in people—that's what makes this organization run. In VA, it's 250,000 of them out there doing good work every day, and I believe you need to engage them. I talked before about leader development because it's the leaders that wind up really making things happen. What you want are leaders at all levels synched with what you're trying to do from the strategic perspective. I believe my style amounts to a combination of engagement and trying to provide quality direction and example.

Q: During your confirmation hearing, a few of the committee members made no bones about saying you've got a limited amount of time to get things done at VA. What gives you confidence about meeting those expectations?

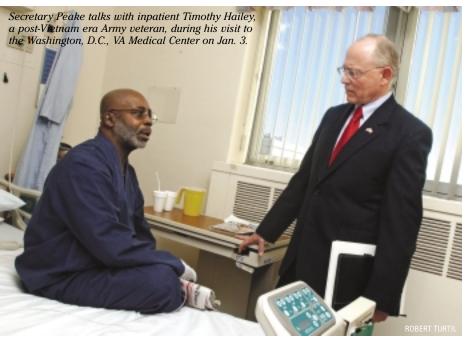
A: I share their sense of urgency, but what gives me confidence is the people I've met—the leaders we have in place and their desire to move forward—so I'm comfortable that we can make progress.

Q: What is your message to VA employees as you take the reins of the department?

A: This is what I said at my confirmation with the President beside me: I believe in them and I care about them and I know that together we can do the right thing by our veterans. I just absolutely believe that.

O: And to our veterans?

A: As one of them, I absolutely appreciate their service. I see it and feel it every place I go. At the Richmond VA Medical Center the other day, I stopped and talked to a gentleman in a wheelchair wearing a baseball cap that said World War II and Korea and Vietnam. And we had a chance to chat a little bit about where he'd been in each of those conflicts. That's sobering. And when I went later to Walter Reed, I talked to a young woman who showed me her prosthetic arm. That's sobering. These are the best of America. I appreciate them and I am sworn to take care of them.



The Dream Cutter

L.A. barber Tony Bravo donates his styling services to lift the spirits of his fellow veterans.

The going rate for a haircut at Tony Bravo's California hair salon is \$50 to \$200.

When you walk into his mobile hair salon at the VA Greater Los Angeles Healthcare System, it's a flat fee—no charge.

The 62-year-old master stylist has been cutting veterans' hair for free for the past 10 years. He keeps his red, white and blue trailer parked in the parking lot of the West Los Angeles VA Medical Center. Once a month, Bravo shows up with his son and other stylists from his hair salon for two or three days to offer free haircuts to some 100 veterans. He pays his stylists \$100 a day to help him.

"I think the veterans really look forward to it," he said.

The veterans—both male and female—line up to get their hair done during Bravo's monthly visits. He said the most popular cuts requested by the male veterans are a businessman's haircut, a short military haircut, and a high and tight fade. For women, the most popular cut is a low maintenance, high reliability haircut that can be washed and blown dry easily.

Bravo started the program after a number of veterans wandered into his hair salon—Bravo Haircutters—located on San Vicente Boulevard just two blocks from the West LA VA Medical Center.

"Usually they can't afford the upscale prices," he said. "I just thought there was a definite need to go take care of them."

He contacted Marianne Davis, chief of Voluntary Service for VA



Master stylist Tony Bravo, right, at work with his son, Tony Jr., in their mobile hair salon parked on the grounds of the West Los Angeles VA Medical Center. Bravo and his staff provide free haircuts once a month to some 100 veterans seeking treatment at the facility, including Andre Theus, seated, and Hank Bin, waiting his turn in the background.

Greater Los Angeles, and offered to come to the hospital to offer free haircuts. Davis said she took him up on his offer since her facility could no longer afford contract barber services at \$35,000 a year.

"Not only has Tony saved the VA this annual expense, but he has provided solace, comfort and companionship in his unique, vet-friendly environment," Davis said. "Tony is on a mission to help his fellow vets, and we are so lucky that he chose our site to carry it out."

Bravo is a veteran of the Army Reserve, having served from 1966 to 1967. Today he earns a living through his hair salon and real estate investments

"I can afford to do this," he said.
"I know how it is when you have your hair done and someone pampers you. I saw that this was more than just a haircut. It was bringing something to their lives. It was bringing their spirits up."

Bravo is the son of Native Americans from the Yaqui and Apache tribes. His Native American name is "Dreamer."

"I call myself the Dream Cutter," he said. "Your dream can come true and I'm here to help you not lose that dream." \[\sqrt{\sqrt{\text{M}}} \]

By Renee McElveen

Helping Veterans on the 'Road to Recovery'

VA employees lend their expertise to assist severely wounded OIF/OEF veterans and their families.

n December, Mickey Mouse hosted some special guests at "the happiest place on earth." Approximately 150 severely wounded Operation Iraqi Freedom and Operation Enduring Freedom veterans, along with their families, participated in the 4th Annual Road to Recovery Conference and Tribute held at the Walt Disney World Dolphin Resort at Disney's Magic Kingdom in Orlando, Fla. The event is sponsored by the

Coalition to Salute America's Heroes (CSAH), a nonprofit organization.

Participants were treated to an all-expense paid trip to Disney World with their caregiver or spouse and their family members. In addition to the vacation, these wounded servicemembers attended informational and breakout sessions on their rehabilitation, VA benefits and career goals.

For the first time, Deputy Secretary Gordon H. Mansfield spoke at the annual conference to the audience of recently in-

jured veterans, who had an array of disabilities and represented all branches of service, with ages ranging from 20 to 50.

Mansfield gave an emotionally charged speech that reached the audience on a personal level. He took questions from the group and received a standing ovation at the conclusion of his remarks.

VA employees provided a substantial amount of the conference's programming. An army of employees

from national, regional and local offices in VHA and VBA sacrificed their weekend to lend their expertise to the five-day event.

"The Road to Recovery Conference and Tribute owes so much of its success to VA, a loyal partner in planning the annual event since 2004," says Tom Palma, general manager for the Coalition. "The VA sends its top officials and experts to deliver key programming and educational courses

Veterans and their families were treated to a Disney World vacation as well as information on benefits and services available to them.

we offer there. Plus, the conference is the only place where these families are under the same roof with so many VA officials at the same time. Year after year, we always hear back from the attendees that they are grateful for the opportunity to ask VA staff questions, address issues and learn about resources."

VA employees held breakout sessions on topics that included vocational rehabilitation and employment benefits, adaptive sports, transition

patient advocates, federal recovery coordinators, vet centers, dependent and survivor benefits, general compensation, adaptive housing and family readjustment.

Along with staffing multiple breakout sessions, a team of vet center counselors were on hand to provide one-on-one counseling sessions to conference participants.

Orlando Vet Center team leader Bill Sautner coordinated Readjust-

ment Counseling Service Region 3A's participation at the event. A total of six counselors were on site providing a total of 57 scheduled counseling sessions to veteran participants and their families. Additionally, several afterhours emergency counseling sessions and informal sessions were provided to meet the emotional needs of the participants.

During the sessions, veterans could speak about any of their family problems or challenges accessing VA benefits. The counselor provided them a point of contact at their

local vet center, scheduling them an appointment with that counselor for when they returned home. Now, these veterans can receive ongoing support for the VA services in their local communities.

"This generation is resilient," said Sautner. "The earlier we can intervene and help our new veterans, the better the outcome ... and that's what we did here this week in Orlando."

By Richard Olague

'Wreaths Across America'

For the second year, veterans buried in VA national cemeteries and state veterans cemeteries were remembered with holiday wreaths.

oliday wreaths were placed at national cemeteries across the nation on Dec. 15.

"This generous and heartfelt gesture of remembering and honoring our veterans during the holiday season is proof that Americans cherish the service and sacrifices of these heroes," said VA Deputy Secretary Gordon H. Mansfield.

This is the second year the Worcester Wreath Company of Harrington, Maine, has sent holiday wreaths to VA national cemeteries and state veterans cemeteries to display in a nationwide tribute to veter-

ans called "Wreaths Across America." It is the 16th year the company has sent holiday wreaths to Arlington National Cemetery.

Again this year, the Civil Air Patrol organized the wreath-laying ceremonies with assistance from local veterans organizations. All 125 VA national cemeteries received seven wreaths, one for each service branch, one for prisoners and missing in war, and one for merchant mariners. Many veterans cemeteries received additional wreaths for gravesite display from local public donations.

Twenty-five cemeteries received

more than 100 wreaths. More

than 1,000 wreaths were laid at Great Lakes National Cemetery in Michigan and more than 2,000 were presented to Togus National Cemetery in Maine and Quantico National Cemetery in Virginia.

A total of 15,236 wreaths were donated to VA national cemeteries. The event at Georgia National Cemetery attracted Sen. Johnny Isakson (R-Ga.), while Kentucky Gov. Steve Beshear attended the ceremony at Camp Nelson.

Six members of Congress attended events nationwide along with many other dignitaries at the state and local level. It received coverage in major newspapers like the Los An-

geles Times, the Arizona Republic and the Houston Chronicle and was covered by 48 television stations around the country.

The wreaths are made and decorated by Worcester Wreath Company employees. Company President Morrill Worcester said he wanted to recognize veterans, active duty military and their families, and—through these ceremonies—remind the public to honor veterans for their service and teach children the value of freedom. WA



Left: A volunteer helps place wreaths on graves at Bath National Cemetery in New York; below: Cemetery Director Gene E. Castagnetti welcomes visitors to the Wreaths Across America ceremony at the National Memorial Cemetery of the Pacific in Honolulu.



By Jim Rich

Celebrating the Holidays VA-Style





Top: Nurses on the spinal cord injury unit at the West Roxbury division of the VA Boston Healthcare System found a unique way to bring cheer to a patient on bedrest during the holiday season. Gloved and gowned, they made time in their schedules each day to sing Christmas carols at the bedside of George E. Gordon as he accompanied them on keyboard; above: Army veteran Scott Gillis, his wife, Melissa, and their three young daughters visit with Deputy Secretary Gordon Mansfield in his office. After the meeting with Mansfield, Gillis and his family were special guests at the VACO Office of Construction & Facilities Management's holiday party, where they were presented with gifts and a cash donation from the office staff. They learned about Gillis, who was injured while serving as an Army medic in Iraq, through Social Work Service at the Washington, D.C., VA Medical Center, and wanted to brighten the holiday season for him and his family; below: NBA star Shaquille O'Neal and some of his Miami Heat teammates visited OIF/OEF veterans at the Miami VA Medical Center during a mid-December rehab session.





Above: Korean War veteran Anthony R. "Tony" Turco with the 2007 World Series Trophy at the Edith Nourse Rogers Memorial Veterans Hospital in Bedford, Mass. The Boston Red Sox lent the trophy to the facility for a holiday program in the nursing home care unit on Dec. 20. Volunteers from Raytheon Corporation helped arrange the trophy's visit; below: Actor Danny DeVito, joined by "Santa's Helper" Lisa Peace, spread holiday cheer at the VA Greater Los Angeles Healthcare System's annual holiday visitation/gift distribution event on Dec. 21; bottom: Actress and 1940s "pin-up girl" Jane Russell, 86, visited veterans, including Bill Powell, at the Bob Stump VA Medical Center's Extended Care and Rehabilitation Center in Prescott, Ariz., on Dec. 26. She answered questions about her life and Hollywood career, signed autographs and posed for photos. Her son-in-law, who worked at the Prescott VA for more than 30 years, arranged the visit.





2008 Expected to be Another Active Year on the Legislative Front



ROBERT TURTII

2007 brought a turnover of leadership in the U.S. House and Senate and an extraordinary amount of VA activity on Capitol Hill, according to Deputy Assistant Secretary for Congressional & Legislative Affairs Christine Hill. She said the Office of Congressional and Legislative Affairs (OCLA) handled a record total of 199 congressional briefings and 145 veteran-related hearings in 2007.

Despite the brisk pace of VA briefings and hearings before the department's authorizing and other committees, when the gavel closed the first session of the 110th Congress in December, only a few legislative measures had crossed

the finish line to become law. But Hill said OCLA expects early 2008 to bring a large package of veteran and "Wounded Warrior" legislation to the President for signature.

In late December, Congress enacted VA's regular funding for fiscal year 2008, providing \$43.1 billion, excluding pension and compensation programs; \$37.2 billion of that is slated for VHA. As occurs every year, Congress also passed, and the President signed, a measure to provide a cost-of-living increase in disability compensation and other benefits programs.

Laws were enacted in 2007 to require a VA veteran suicide prevention program, improve disability benefits for certain visually-impaired veterans, expand certain cemetery benefits and programs, authorize more than \$20 million to modernize inpatient facilities at the VA medical center in Atlanta, and name numerous VA medical facilities.

Among the national cemetery provisions: authorization

for VA to provide a medallion or other device, signifying a deceased person as a veteran, to be attached to a privately-furnished headstone or marker; a measure permitting VA to award operations and maintenance grants to state cemeteries; and permanent and retroactive authority to provide headstones or markers for previously marked graves at private cemeteries.

A large number of veterans' provisions are in the bill that sets U.S. defense policy every year, the National Defense Authorization Act. That bill, H.R. 1585, has been passed by both houses of Congress, but was rejected by the Administration because of a non-veteran related provision. OCLA expects the bill to eventually become law.

H.R. 1585 contains an extension from two to five years of "automatic" health care eligibility for certain combat veterans and extends the period of eligibility after discharge for dental care.

The measure also has numerous provisions concerned

with the treatment of traumatic brain injury and measures aimed at providing a "seamless transition" from military service to veteran status. These include VA-Department of Defense joint initiatives for interoperable health records, and a requirement for a comprehensive policy review by DoD and VA on matters concerning seriously injured servicemembers.

The House and Senate in 2007 separately advanced legislation on issues across the spectrum of VA programs, but as of January these bills have not gelled into packages that can be made into a single bill to pass both houses of Congress. Those bills are still in play for 2008; different approaches to health care and benefits will be keenly dehated

"Legislators will seek to advance these existing bills, as well as introduce and move new ones, promising that VA will have another very busy year working with Congress to advance the interests of veterans," Hill said.

National Cemetery System Leads Nation in Satisfaction Survey

VA's national cemetery system again received the highest rating in customer satisfaction for any federal agency or private corporation surveyed, according to a prestigious, independent survey of customer satisfaction.

More than 200 companies and most of the federal sector take part in the American Customer Satisfaction Index (ACSI) survey, conducted by the University of Michigan Business School every three years.

"VA serves as an excellent

example of how government should provide services to its citizens," said John Cioffi, senior consultant with CFI Group USA, one of the customer satisfaction survey's sponsors.

This year's survey is the third consecutive one in which VA's cemetery system received the top rating in the nation. For 2007, VA's cemetery system earned a customer satisfaction rating of 95 out of a possible 100 points. The national cemeteries also ranked number one in customer satis-

faction both in 2001 and 2004.

The ACSI survey polled next of kin or other people who had arranged for the interment of a loved one in a VA national cemetery within the past six months to one year. Three thousand people received the survey and nearly 600 responded, which is a high response rate for a mail survey.

ACSI's index for "user trust" produced a rating of 96 out of a possible 100 points for the VA-run cemetery system, which indicates that respondents are exceptionally willing to say positive things about VA's national cemeteries.

Since 1994, ACSI has been a national indicator of customer evaluations of the quality of goods and services available to U.S. residents. It is the only uniform measure of customer satisfaction for government and industry. ACSI allows benchmarking between the public and private sectors and between one year's results and the next.

Secretary's 17th Annual EEO Awards Presented in Five Categories

Deputy Secretary Gordon H. Mansfield hosted the Secretary's 17th Annual Equal Employment Opportunity Awards ceremony on Nov. 15. These awards are the highest recognition given to VA employees who have excelled in promoting or have made significant contributions to the department's EEO program. Awards were given in five categories; each recipient got a cash award and a plaque.

The winner in Category A, non-supervisory employees, was Tammie R. Kierstead, EEO assistant at the VA medical center in Oklahoma City. As the liaison to the EEO Advisory Committee, she challenges committee members (and others) to stay finely tuned to the needs and goals of the entire workforce. Her enthusiasm and creativity in support of the medical center's extensive EEO initiatives help EEO representatives "think outside the box."

Sandra Simmons, EEO

manager at the VA medical center in Coatesville, Pa., was the winner in Category B, supervisors and managers through GS-14 (or equivalent). Through her visionary leadership, Simmons helped design the VISN alternative dispute resolution/mediation program.

The winner in Category C, managers and executives GS-15 and above, was Sande Jones, Veterans Service Center manager at the VA regional office in Waco, Texas. Jones has developed a unified team spirit in the Veterans Service Center, where her vision of fairness, respect, appreciation and valuing of individual differences is thoroughly communicated and shared.

Pamela McKinney, EEO program manager for the Oklahoma City VAMC, was the winner in Category D, EEO program representatives. She has been an effective facilitator of dispute resolution and is a key ingredient in the



Deputy Assistant Secretary for Diversity Management & Equal Employment Opportunity Susan McHugh, far left, with the Secretary's EEO Awards recipients (left to right): Tammie R. Kierstead, Sandra Simmons, Sande Jones, Pamela McKinney and Tristen Wendland.

successful alternative dispute resolution/mediation program in place at the medical center.

The winner in Category E, employees promoting programs for disabled veterans and people with disabilities, was Tristen V. Wendland, vocational rehabilitation counselor at the VA regional office in

Denver. She recently accepted the responsibility of coordinating and managing the Coming Home to Work program. This initiative provides early outreach and job experience to severely wounded OIF/OEF servicemembers awaiting medical discharge from the military.

Federal Employees Need to Be Aware of Hatch Act Restrictions

As employees ponder candidates during the election season, they should realize there are limits placed on their involvement in certain political activities.

The VA Office of General Counsel reminds employees that the federal Hatch Act (5 U.S.C. 7321-7326) delineates what federal employees, including those working for VA, may or may not do in the political realm.

For example, federal employees may attend political events like meetings and rallies. Most federal employees may also be active in and speak before political gather-

ings or serve as officers of political parties or partisan groups; career SES employees may not. Most may also manage political campaigns, distribute literature (except at work), write political articles, or serve as spokespersons for political parties or candidates. Again, career SES employees are more restricted.

Federal employees may campaign for office in non-partisan elections. Partisan political activity is defined as activity directed toward the success or failure of a political party or candidate for a partisan political office or partisan political group.

Other basic rules apply to federal employees. VA employees may not use their VA positions in government to influence or interfere with elections. Except for Senate-confirmed Presidential appointees, federal employees may never engage in political activity on the job, in a government vehicle, or while wearing an official uniform.

For example, federal employees may not distribute partisan political literature at work. This also applies to partisan political e-mail messages.

VA employees are encouraged to exercise their right to vote and participate in the

democratic process. But they should know there are rules in place that govern the extent of their involvement in partisan political activities.

For more information, contact an ethics counselor at your local Office of Regional Counsel or VA's Office of General Counsel. Employees may also review information on the VA OCG Ethics Intranet site at *vaww.client. gc.va.gov/law/employment/ethics* and search "Hatch Act" under "Specific Issues" or visit the Office of Special Counsel Web site at *www.osc.gov.*

More Information: www.osc.gov

Two Top Young VA Researchers Honored by the White House

Two VA researchers—Sterling C. Johnson, Ph.D., and Dr. William S. Yancy Jr.—were among 60 scientists from 11 federal agencies honored recently with the Presidential Early Career Awards for Scientists and Engineers.

The annual awards, established in 1996 by the National Science and Technology Council, recognize top young scientists and engineers for their "innovative research at the frontiers of science and technology" and for their scientific leadership and community outreach.

Johnson is a clinical psychologist and neuroscience researcher at the William S. Middleton Memorial Veterans Hospital in Madison, Wis., and an assistant professor at the University of Wisconsin School of Medicine and Public Health.

He uses brain imaging and neuropsychological measurement to study disorders that affect memory and self-awareness. One of his current VA-funded studies involves combat veterans with traumatic brain injury.

Yancy is a physician at the Durham VA Medical Center in North Carolina, an investigator at that site's Center for Health Services Research in Primary Care, and an assistant professor at Duke University Medical Center.

He studies the effects of diet and exercise on obesity and its complications. A study by his group made headlines in 2004 when it showed that people on a low-carbohydrate, high-protein diet lost more weight over six months than people on a low-fat, low-cholesterol, low-calorie diet. The study was the first randomized, controlled trial of an Atkinsstyle approach to eating.

As part of their Presidential Early Career Awards, Johnson and Yancy will each receive \$125,000 over five years from VA's Office of Research and Development in support of their research.





Sterling C. Johnson, Ph.D., top, and Dr. William S. Yancy Jr., received Presidential Early Career Awards for Scientists and Engineers.

Young Actor Mike Vogel is the 2008 National Salute Chairman



Popular young film and television actor Mike Vogel is chairman of VA's 2008 National Salute to Hospitalized Veterans.

He will lead the department's annual patient recognition program that invites the public to visit and honor veterans treated in VA hospitals and clinics during National Salute Week, Feb. 10-16. He will also serve as national spokesman for nearly 90,000 volunteers of all ages serving veterans in VA facili-

ties across the nation.

The youngest celebrity to lead the National Salute, Vogel brings youthful energy to the program at a time when the number of young combat veterans under VA care is growing and VA is looking to younger generations of Americans to replenish an aging volunteer force.

Currently, Vogel has a starring role in the feature film "Cloverfield," released in January.

Vogel became personally

involved in supporting veterans after his cousin's husband was killed last year while on military duty in Iraq. Both of his grandfathers fought in World War II. One was a tank commander and veteran of the Battle of the Bulge, the other a Seabee in the Navy.

Throughout National Salute Week, VA medical facilities invite the public to visit hospitalized veterans, honor their service and consider the volunteer opportunities VA offers citizens of all ages.

Tommy Monk

Tommy Monk is a man who keeps his promises.

Twenty years ago, he promised his older brother Jimmie, a Vietnam veteran, that he would either dance or play taps at his funeral. With his brother's health declining, Monk has spent the past year teaching himself to play taps on a secondhand bugle he bought for \$25 at a thrift store.

"I'm very, very proud of my brother," Monk said. "Although I dread the call when it comes, I don't know a greater honor that I can render to him as a brother and as a veteran than playing taps at his funeral."

Monk, 55, is director of the Fayetteville National Cemetery in Arkansas. He oversees the entire operation of the cemetery, including burials, grounds upkeep, budget administration, supervision of personnel, and public awareness and outreach.

"Live buglers are hard to find," Monk said. "We are very fortunate to have veterans service organization honor squads present honors here at the cemetery. About one in ten has a live bugler."

If the honor squad does not have a live bugler to play taps at a military funeral, the quality recorded version of it. The resonating tones inside the bugle create a realistic horn quality.

Monk has performed these honors himself at about 50 inurnments at Fayetteville National Cemetery. He explained that many cremated remains are mailed or delivered to the cemetery and oftentimes, family members are unable to attend the inurnments because they can no longer travel or they live too far away.

"I'm not going to bury any veteran without some kind of honors," Monk said.

He gathers his small staff and they stop in place, remove their hats and place their hands over their hearts as he renders taps on the ceremonial bugle.

Monk has absolutely no musical background or training. He did not play an instrument in the marching band when he attended high school in White Hall, Ark. He has been trying to teach himself to play taps by listening to recordings of the song and then attempting to mimic the notes on his secondhand bugle.

"I learned really quick that this was going to be very hard," he said.

"I'm not going to bury any veteran without some kind of honors."

squad uses a ceremonial bugle. The ceremonial bugle was introduced so that a veteran's family can still have that solemn visual image of a bugler playing taps at the end of their loved one's funeral ceremony. An electronic insert in the bugle enables any individual to "symbolically" play taps through the use of a high-

Monk generally uses his backyard as his open-air rehearsal hall.

"When the neighbor dogs begin to howl, it is time to stop," he joked. "That's when I know it's time to quit."

In 2006, Monk played live taps at Fayetteville National Cemetery with three other buglers when he partici-



pated in Bugles Across
America. The organization
was founded in 2000 to recruit volunteer buglers
throughout the United States
and overseas to play taps at
veterans' funerals. Monk met
trumpet player David Rader,
whom he describes as "one of
the most technical taps players
that I have heard," through
the organization. Rader has
agreed to give him some lessons so he can perfect what he
has taught himself so far.

As a cemetery director, Monk realizes just how important it is to families to have taps be a part of funeral services for veterans.

"It is very important that honors are presented," he said. "I think from an emotional standpoint, family members comment on taps more than any other activity related to the service."

Although he has not played live taps for any funeral services at Fayetteville National Cemetery, Monk was called upon to play it at the private funeral of one of his VSO honor guards by the family.

"I sure wouldn't advertise myself as a bugler," he said. "I'm not quitting my day job."

Monk said he is looking forward to his lessons with Rader.

"I keep trying to perfect those 24 notes because I made a commitment to my brother not only as a brother but as a veteran," he said. "That is what we do at the National Cemetery Administration. It is all about honoring a commitment to those that serve."

By Renee McElveen

Blood Pressure Harder to Control in Winter

Researchers say high blood pressure can be more difficult to control in the winter. At a Nov. 5 meeting of the American Heart Association, researchers told attendees that veterans treated in the winter were less likely to see their blood pressure come down to a healthy level than those treated in the summer.

The five-year study focused on blood pressure readings for 443,632 veterans with hypertension in 15 cities, including Anchorage, Alaska, and San Juan, Puerto Rico. Regardless of race or sex, fewer of these veterans returned to normal levels of blood pressure while treated in winter months compared to summer months.

"We are seeing seasonal variation in all of the cities," said Dr. Ross Fletcher, researcher and chief of staff at the VA medical center in Washington, D.C. Eight percent fewer patients returned to a normal blood pressure reading during treatment in the winter than in the summer, according to Fletcher, who led the study.

About 60 percent of the patients had a marked change in blood pressure control in the winter. Fletcher said the researchers have not figured out just what is causing this, but it did not seem to be changes in temperature or daylight that occur in the winter or the latitude of the city. Instead, the trend may be attributed to the veterans' weight gain, different eating habits and getting less exercise during the winter. Fletcher said the data showed the veterans gained weight during the winter.

Veterans should be aware of the possibility their blood pressure may be more difficult to control in the winter and should be more vigilant during this time, Fletcher noted.

State of the Art Dental Technology at Buffalo VA

Dentists at the VA Western New York Healthcare System at Buffalo are using computeraided design/computer-aided manufacturing technology (CAD/CAM) to take care of their dental patients' needs. The CAD/CAM software and milling units allow VA dentists to prepare, fit and permanently cement a dental crown for a patient in a single sitting.

The technology uses scanning videography and la-

the new technology "has greatly impacted the way we perform dentistry." He noted that in addition to reducing the number of office visits required for the patients seeking treatment, the technology saves time and expense "given the fact that all of the fabrication of the restorations can be done on site in the dental clinic."

\$3 Million Awarded for Designing Electrodes for Standing, Balance and Stepping

The National Institutes of Health (NIH) awarded a \$3 million grant to Dr. Ronald J.

EVANGELINE CONLEY

Water shoots on the porcelain of a dental crown being carved with a milling device for a patient at the Buffalo VA.

sers to take pictures of the teeth and digitizes the images using a three-dimensional software program. The software, under the direction of the dentist, constructs the restoration on the digitized model and sends the information to a milling device that carves out the final crown for insertion. This process can be completed during a two-hour office visit, saving up to two to six weeks of wait time and delays using the conventional dentistry techniques.

Dr. Guy DiTursi, director of post-graduate studies in general practice dentistry, said

Triolo and his colleagues at the Louis Stokes Cleveland VA Medical Center and Case Western Reserve University to optimize the design of stimulating electrodes to selectively activate the nerves that control the muscles for standing, balance and stepping.

The activity is part of a continuing effort to enhance the mobility and independence of individuals paralyzed by spinal cord injuries (SCI) through the application of surgically implanted stimulated systems, or neuroprostheses. Some 200,000 Americans with SCI struggle

with daily living activities.

Although the wheelchair offers a means of efficient transportation over unobstructed level surfaces, individuals with SCI and other paralyzing conditions need other options for negotiating architectural barriers, completing daily bed, shower or toilet transfers, and gaining access to high cabinets that are difficult or impossible to reach from a seated position. Braces, standing wheelchairs and even advanced transportation systems address some of these issues but have minimal impact on the individual's physical and psychological deterioration due to prolonged immobility.

If the nerves below the level of the SCI remain intact, they can be excited by small amounts of electrical current delivered by an implanted pulse generator via electrodes on or near the nerve, much like a cardiac pacemaker. This causes the paralyzed muscle innervated by the nerve to contract. By coordinating the actions of a number of muscles, functional movements can be produced by the otherwise paralyzed limbs. Lower extremity neuroprostheses that employ electrical stimulation in this way can help individuals with SCI to stand and step under the power of their own stimulated muscles, which can improve their overall health and independence.

The NIH grant is designed to optimize the location of contacts within an electrode that encircle the target nerve, called a nerve cuff electrode. This is being done through a combination of quantitative studies of the anatomy of human peripheral nerves, computer modeling and simulation, and clinical testing in a handful of volunteers.

Saving snow-stranded veterans



Joanne
Compagna came
to the rescue of
some veterans
stranded in a New
England snowstorm.

Joanne Compagna, a vocational rehabilitation specialist in the Compensated Work Therapy (CWT) program at the VA medical center in Bedford, Mass., was anxiously anticipating her own journey home during one of this season's intense New England snowstorms when she heard that the center's CWT van driver was stranded miles from the pick-up site of four veterans. She immediately jumped behind the wheel of a VA minivan to retrieve them. It took her more than an hour to crawl out of Bedford, only to hit gridlock on the highway. Knowing the veterans at the worksite would be distressed, she persuaded a state snowplow crew to escort her through the breakdown lane past a snarling accident. Nearing the rendezvous point, abandoned vehicles blocked further passage. Compagna parked and trudged a quarter-mile through snow piled six inches deep to the waiting veterans. She led them back to the van and made the return trip. Her day ended only when she was sure the veterans had a bed for the night.

Palo Alto, Calif., VA Medical Center seamless transition coordinator Romeo Horvath knew the veteran and his wife he was escorting to the San Jose airport weren't going to make their plane when he saw the long lines at the ticket counter and security checkpoint. But he wasn't going to let them miss their Christmas visit home. The former Transportation Security Administration (TSA) employee told the couple to "hang on" while he called a former co-worker, the TSA

morning shift screening manager, and told him a fellow veteran needed help. And help came almost immediately. The couple were front-loaded and escorted from the security checkpoint to their departing gate. They made their flight, and a Merry Christmas was had by all.

On the morning of Oct. 2, a vanpool carrying employees of the Atlanta VA Medical Center and Regional Office came upon the scene of a four-car collision leaving numerous victims with serious injuries. Shakira Bethea, a program support assistant at the VARO, asked veterans service representative Mary Rose Wynn to pull over to help. Karen Tillman, a secretary at the medical center, and Bethea ran over to one man lying on the ground. Bethea assessed the victim, minimizing movement to avoid further injury,

while Tillman checked the condition of others in the vehicle, staying alert to the possibility of leaking gas or other flammable liquids. Janice Miles, R.N., and clinical social worker Alice Jones checked and treated other victims until police arrived. After briefing the paramedics, the employees went to work.



(Left to right): VA police officers Francis Shannon, Mark McGarry, Samuel Robinson, Marlon Harmon and Jacquelyn Rencher.

A veteran's life saved with AED

On Nov. 27, Samuel Robinson, a police officer at the Michael E. DeBakey VA Medical Center in Houston, contacted the VA police dispatcher and requested ER personnel respond to an unresponsive veteran on the medical center's main drive. Sqt. Mark McGarry and officers Francis Shannon, Marlon Harmon and Jacquelyn Rencher responded to the scene. Harmon and Rencher provided traffic and crowd control while McGarry assessed the veteran in the back seat of his daughter's vehicle. The veteran had no detectable vital signs when McGarry and Shannon removed him from the vehicle and initiated CPR. Robinson quickly retrieved an automated external defribillator (AED) and McGarry attached the device to the patient. CPR and AED monitoring continued while the veteran was transported to the ER. The veteran regained a pulse and began breathing independently after advanced medical intervention. This was the first time police at the Houston medical center had used an AED.

have you heard **VA**nguard



Leon Luzzi, coordinator of the Lebanon VAMC's Veterans Activity Center, looks at one of the more than 600 cards and letters to OIF/OEF veterans that have poured in from the community.

Cards and letters pouring in

The VA medical center in Lebanon, Pa., got more than it bargained for when it came up with an idea to honor veterans of the wars in Iraq and Afghanistan. While planning the facility's first OEF/OIF Welcome Home Event held on Nov. 3, the committee requested that letters of gratitude be sent to the medical center to be displayed for the returning veterans. The request, publicized through letters to community groups, local newspapers, radio stations and television stations, resulted in an outpouring of cards and letters from schools, churches and other community groups. The center decided to tape the cards and letters to giant pieces of paper that extended 35 feet down the hallway. After the event, the paper was rolled up to be reused for the next OEF/OIF celebration. To date, more than 600 cards and letters have poured into the center since the original request.

40th anniversary celebration in Florida

More than 200 current, former and retired employees celebrated the 40th anniversary of the Malcom Randall VA Medical Center in Gainesville, Fla., on Nov. 14. The first director of the facility, Randall, was on hand as the honorary guest. Randall, whose federal career spans 59 years, has received two of the highest awards given by VA—the Meritorious Service Award and the Exceptional Service Award. Besides holding the rank of captain in the Naval Reserve, his military career includes serving on PT boats and battleships in the South Pacific during World War II, being wounded in action, and serving as Air Staff Commander of the Naval Air Reserve Unit at Jacksonville, Fla.

Although in operation since Oct. 22, 1967, as the Gainesville VAMC, the facility was officially renamed the Malcom Randall VAMC in February 1999. Currently, it is the only VAMC named after an employee.

Support for Parkinson's disease caregivers

Studies show that VA families prefer to care for their loved ones with Parkinson's disease in their homes. With that in mind, the San Francisco VA Medical Center's Parkinson's Disease Research, Education and Clinical Center (PADRECC) recently sponsored a unique and innovative event conducted totally via video teleconference.

Designed to support those who are interested in learning how to better care for their family members or friends with this challenging diagnosis, the event was attended by more than 350 individuals including representatives from all VISN 21 medical centers (including multiple Hawaiian Islands), and it reached across the country to include Minneapolis, Ann Arbor, Mich., and Baltimore. Support for family and caregivers of veterans with Parkinson's was explored through presentations on Identifying and Managing Psychological Changes in Parkinson's disease, Identifying and Managing Depression, and Identifying Sleep Disorders.

Teaming up to help Alaska's returning veterans On Sept. 11, the Alaska VA Healthcare System and Regional

MOH headstone for Murphy

On Nov. 27, a Medal of Honor headstone ceremony was held for Navy SEAL Lt. Michael P. Murphy of Patchogue, N.Y. Murphy, 29, is the first recipient of the MOH interred at Calverton National Cemetery in New York and is the

first Navy SEAL since the Vietnam War to receive the Medal of Honor, awarded posthumously during a White House ceremony last October. Killed during a firefight with Taliban insurgents in Afghanistan on June 28, 2005, he is also one of just three servicemen awarded the MOH since the September 2001 terror attacks. The 42-inch-tall grave marker bears a likeness of the nation's highest military



The Medal of Honor headstone for Lt. Michael P. Murphy is installed at his Calverton National Cemetery gravesite.

honor—a gold, inverted, five-pointed star that graces the markers of all MOH recipients. Cemetery director Michael Picerno said Murphy's original headstone—which like all others at the cemetery has crisp, ebony lettering—will be buried there as a sign of respect.

'Sacking' homelessness in Ohio



Cleveland VA Regional Office employees with the nearly 200 back-packs stuffed with goodies that they donated to homeless veterans during the city's first Stand Down.

Employees of the Cleveland VA Regional Office helped "sack" homelessness during the city's first Veterans Stand Down by donating nearly 200 backpacks to homeless veterans. In an event coordinated with the city, VA representatives provided benefits counseling and distributed the backpacks filled with socks, clothing, food, bus passes and personal hygiene products.

The drive, known as "Pack a Sack," was the first organized effort of the VARO's new Outreach Committee. Comprised of Veterans Service Center employees, the group aims to meet the needs of local veterans. "Two vans were so filled with these backpacks that when opened, they literally began falling out," said Assistant Veterans Service Center Manager Todd Weber. "Representatives of other agencies came up to compliment our efforts. And the veterans carried our backpacks with a sense of deep appreciation and even joy." More than 400 homeless veterans attended, receiving food, haircuts and blankets.

Office and the State of Alaska Department of Military and Veterans Affairs signed a Memorandum of Understanding as a commitment to join together to provide outreach to Alaska National Guard and Reserve troops. Specific goals of the MOU are to: ensure seamless delivery of health care services to rural veterans; enhance home station reunion and reintegration workshops for returning Global War on Terrorism veterans to include post-deployment health reassessments; create multidisciplinary mobile outreach teams; and commit to meet regularly to address issues.

Due to the growing number of veterans returning to rural Alaska from mobilizations in support of the GWOT, VA staff will join National Guard staff in specific outreach to the National Guard armories as well as facilitate a monthly community network meeting to ensure a coordinated effort.

Building a support network for deployed chaplains

The National Chaplain Center and Bay Pines VA Healthcare System hosted a national VA Chaplain Retreat and Workshop last fall in Indian Rocks, Fla. Called "Caring for the Combat Chaplain," the retreat was the first of its kind, providing an opportunity for VA chaplains who have served as military reserve or National Guard chaplains in Operation Enduring Freedom or Operation Iraqi Freedom to come together and share experiences

This group of VA chaplains has all served at least one deployment to the Middle East as chaplains providing ministry to servicemembers on the front lines, while back home at VA, they continue to minister to all veterans. Chaplain Michael L. McCoy, associate director of the National Chaplain Center, led the group throughout the retreat. In the future, the center hopes to provide a support network for deployed VA chaplains to continue communication while they are serving.

Recognition for a furry companion

Skeeter, a six-year-old Pomeranian pet therapy dog at the VA medical center in Lexington, Ky., recently received top honors when he won the Kentucky Veterinary Medical Association (KVMA) Animal Hall of Fame Hero's Award. Skeeter came to the facility in November 2006 after his

owner could no longer live alone and properly care for him. He works in the nursing home and hospice units and was recognized for his incredible talents and commitment to quality patient care. Skeeter gives patients his total, unconditional love. In addition, says Paula Bayer, R.N., nurse manager on the nursing home care unit, "His ability to provide comfort to an endstage patient is remarkable. As



Skeeter the pet therapy dog "is a legitimate ambassador of goodwill," says Ed Roberts, Army veteran and nursing home resident.

death becomes imminent, he is always there." Each year, the KVMA honors animals that exemplify the strength and value of the bond between animals and people and the contributions they make to enrich human lives.

honors **VA**nguard

Geriatrics excellence awards



Dr. Byron Bair meets with veteran Marlin C. Galbraith at the VA Salt Lake City Health Care System.

The 2007 Marsha Goodwin-Beck Interdisciplinary Awards for Excellence in Geriatrics were presented at the VHA National Leadership Board meeting on Oct. 16. Byron Bair, M.D., associate director for clinical programs with the Geriatric Research, Education and Clinical Center (GRECC) at the VA Salt Lake City Health Care System, received the Excellence in Geriatric Clinical Care Delivery Award. Bair has developed creative and innovative model care delivery systems to improve the delivery of health care to aging veterans. He is the medical director of the home-based primary care program at VA Salt Lake, which provides all-inclusive care for high-risk homebound patients.

Theodore J. Hahn, M.D., co-director of the GRECC at the West Los Angeles VA Medical Center, received the Excellence in Geriatric Leadership Award. Due to his leadership, there has been major growth in the availability of quality geriatric care to older veterans VISN-wide through the opening of needed geriatric and extended care programs. His effective leadership skills were also evidenced by his successful campaign to win state and federal approval for a unique new state veterans home to be constructed on the West LA campus.

Honors for Financial Services Center staff

VA's Financial Services Center (FSC) in Austin, Texas, received special recognition for its work to centralize all VHA payments for common services such as utilities and contractual services—also known as "certified payments." This four-year initiative was successfully completed in fiscal year 2007, and now 98 percent of VHA's certified payments are processed by the FSC. At the conclusion of this project, the FSC was able to accurately and efficiently process more than 900,000 invoices valued at more than \$6.5 billion in a timely manner; this is four times the vol-

ume processed in fiscal year 2003.

This initiative furthers VA's goal to improve financial performance, and because of their success, Ed Murray, deputy assistant secretary for finance in VA Central Office, presented an award to FSC staff. FSC Director Ron Woods and FSC Assistant Director Teri Riffel were present for the awards ceremony.

Helping returning servicemembers reintegrate

Maj. Gen. Tod Bunting, the Kansas Adjutant General, presented an award of appreciation to staff at the VA Eastern Kansas Health Care System for their work helping Kansas National Guard servicemembers reintegrate into their communities after returning from overseas deployments. The award was presented on Oct. 23. On hand to receive the award were Rick Selig, OIF/OEF program manager; Kathy Zima, OIF/OEF case manager; Dr. Peter Almenoff, director of VISN 15 (Kansas City); Marie Weldon, director of VA Eastern Kansas; and Warren Hill, associate director of VA Eastern Kansas.

In an effort to reach out to these returning servicemembers, a memorandum of understanding (MOU) was signed with the Kansas National Guard and VISN 15. VA Eastern Kansas expanded the MOU to provide pre-deployment counseling to the soldiers and their family members, meet the returning soldiers



John Ware, right, with his Special Olympics gold medal.

Martinsburg's gold medal athlete

A VA employee brought home a gold medal from the 2007 Special Olympics World Summer Games. John Ware, a machine operator at the VA medical center in Martinsburg, W.V., traveled to the People's Republic of China to compete in the games. He brought home the gold in the long jump. The 34-year-old also finished fourth in the 100-meter dash and fifth on the 100-meter relay team. Ware, who won gold at the National Games in Iowa and has been named Berkeley County Special Olympics Athlete of the Year, has participated in track and field, basketball and volleyball during his 13 years as a member of Special Olympics.

VAnguard honors

at the demobilization sites, which, in some cases, were in Mississippi, Texas or Wisconsin, and conduct post-deployment outreach and counseling at the reintegration training sites around the state.

Professional honors for Palo Alto investigator Myers Jonathan Myers, Ph.D., received the Michael L. Pollock Established Investigator Award on Oct. 19 during the 2007 annual meeting of the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR). His selection was in recognition of his many outstanding contributions to cardiovascular and pulmonary rehabilitation as a career investigator with the VA Palo Alto Health Care System.

Each year, this award is presented to an individual whose ideas, committee work and leadership have benefited the AACVPR organization in a significant way and who has earned national prominence in his or her field with contributions spanning many years. Myers delivered a lecture to attendees at the annual meeting during the general session as part of the award recognition program.

'Caring for America's Heroes'

Andrew Thurston, a fourth-year medical student at Baylor College of Medicine, won the 5th Annual Major C.W. Offutt "Caring for America's Heroes" Essay Contest, spon-

sored by the Oklahoma City VA Medical Center. Open to all third- and fourth-year medical students, the award is designed to promote caring, humanism and understanding of veterans receiving medical care at VA health care facilities. It is presented on the basis of papers written about what medical students derived from caring for America's heroes. With career plans



to enter the internal medicine field, and ultimately geriatrics, Thurston wrote about his experience getting to know a veteran being treated for cancer at the Michael E. DeBakey VA Medical Center in Houston. He wrote about how much "Mr. C" liked to talk: "About the weather, about the war—about anything and everything as if his thoughts were packaged on a conveyer from his mind, and he had to hand off each parcel to someone—anyone—or else they'd fall from his mouth and shatter. So I did what any second-year medical student new to the wards would do: I sat in silence, and listened."

Native American outreach



Dave Mojica, right, OIF/OEF coordinator for the Waco VA Regional Office, participates in a Native American flag blessing ceremony in El Paso with Simon Sims, left, and Jesse Padilla, tribal councilman.

After attending a Native American conference in Albuquerque, N.M., a Waco VA Regional Office employee returned to Texas with the impression that there was a lack of information and access to veterans benefits for many Native Americans. He wondered what could be done to address this situation. Through conversations with fellow employees and management staff, a plan was developed to approach a local Native American tribe to determine the proper protocols to gain access to Native American veterans on their reservations.

After meeting with leaders of the Ysleta del Sur Pueblo (Tigua) Tribe, approval was obtained to conduct outreach on the Tigua Reservation near El Paso. It was discovered that there were 91 veterans who were members of the Tigua Tribe and only two were receiving VA benefits at that time. Today, there are more than 60 Tigua veterans receiving VA benefits. In recognition of the initiative taken, the National Congress of American Indians presented the Waco VARO with a Native American Warrior Certificate of Recognition on Nov. 21 in El Paso.

IT management scholarship for deputy CIO

Mona Baggett, deputy chief information officer (CIO) for the VA Health Administration Center in Denver, received the prestigious College of Healthcare Information Management Executives' John Glaser Scholarship Sept. 12. She competed with applicants from 600 other health care-related facilities worldwide, both governmental and corporate. The two annual winners of the award are selected on the basis of CIO potential and dedication to professional development within the health care CIO field. Baggett plans to use the scholarship to pursue a graduate degree in information technology management. "It is a huge honor to receive this award and it will enable me to fulfill a longtime desire to continue my graduate education," she said.

