Ride to Remember —page 2

Inside: Nurse Awards, 6 ⭐ Winter Sports Clinic, 8 ⭐ Incarcerated Vets, 10
Far below the bustling streets of downtown Washington, D.C., deep in the basement of VA Central Office, lies a quiet place; the silence is broken only by the low hum of a spindle sander or the intermittent cry of a miter saw.

Follow the sounds to an anonymous gray door and you’ll find the office and workshop of exhibits specialist Merriman “Mac” Barnes, who for 24 years has quietly gone about the work of fabricating furniture, displays and other items for VA offices and facilities. He’s worked on everything from the 42-foot-long conference table in the Omar Bradley Conference Room to a six-inch wood carving of an eagle’s head Secretary Anthony J. Principi took on his recent visit to South Korea to present to President Kim Dae Jung.

“VA is very lucky to have someone like him,” acknowledged longtime colleague William Hester, “and that’s the bottom line.” He said the Department once had a large wood-working team based out of Springfield, Va. Today, there is only Barnes.

So when Terri Williams, director of protocol, suggested a carved eagle’s head as a gift Secretary Principi could offer the South Korean president, the job fell squarely on the shoulders of Barnes. The U.S. Army veteran, who served from 1968-72, carved an intricate image of the American bald eagle—a symbol of strength, courage and freedom. The carving was such a hit that Barnes is now making a second eagle’s head that will be used as a mold for casting bronze replicas the Secretary can present to visiting dignitaries.

It turns out wood carving is more than a job for Barnes—it’s also a hobby. He started carving decorative rifle stocks for friends and family in the early 1980s using wood chisels and small picks. When a friend convinced him to try carving a miniature eagle as a gift for his daughter, Barnes took his first step into the world of bird carving.

Bird carving has been around in North America since early hunters used wooden ducks as decoys. As the art evolved, carvers made their decoys look more lifelike, attempting to replicate nature’s intricate details. They formed clubs to display their work and held competitions to judge who had the most authentic replica.

Enthusiasts from around the world met in Ocean City, Md., the last weekend in April for the premier bird carving event, the 32nd annual Ward World Championship Wildfowl Carving competition. Barnes joined more than 1,000 carvers from the U.S., Canada, Japan and other countries competing for cash prizes and awards. It was his third year competing in the “Intermediate” category, and he took home a blue ribbon for his carving of two light brown screech owls perched on a tree trunk.

By Matt Bristol
I’ve been on board as the Deputy Secretary of Veterans Affairs Affairs for just over a year. As the Department’s chief operating officer, I see VA in action from the inside out, looking at how management decisions are made and the process that leads from a problem or issue to a final decision. So far, I like what I see.

My tenure at VA has been challenging and very exciting. Challenging, because of the tremendous job we all face in VA, and exciting because of the new management processes now in place to support the Secretary in changing the way this Department conducts the business necessary to supporting veterans.

VA has a new governance structure embodied in the VA Strategic Management Council (SMC) and the VA Executive Board (VAEB). The VAEB is a decision-making body. Composed of the Secretary and his principal advisors (myself, the administration under secretaries, and general counsel), the executive board advises the Secretary on key operational and policy decisions he must make in leading the Department toward strategic goals.

The SMC, which I chair, works at the operational level and deals with the major cross-functional processes that span the Department—legislation, budget, human resources, and the like. On the SMC, I work with VA’s principal deputies and assistant secretaries in identifying, analyzing and wrestling with operational issues. That work feeds directly into the VA Executive Board where the key decisions are made.

The SMC has introduced two major innovations into the VA management process. We are now conducting monthly performance reviews. Once a month the administration and staff office heads report to me and outline the general conduct and specific performance of their organizations. They talk about adherence to budget, FTE, major projects, critical performance elements; things like the benefits claims backlog in VBA or VHA’s appointment waiting times. These are really accountability sessions modeled on my business experience where we had a “monthly close.”

Each month we closed the books and looked at our performance to plan. Were we on schedule to meet quarterly goals and to deliver the good year we promised our shareholders at our annual meeting?

We’re Well on the Way to Changing the Face of VA

As the Department’s chief operating officer, I see VA in action from the inside out ...

What we are doing is linking performance directly to our strategic plan on a month-by-month basis. And this month with the beginning of the fiscal year 2004 budget building cycle we introduce performance-based budgeting to VA. We are taking a completely different look at the way we budget. As we determine how to allocate our resources, we will first look at two measures—results and execution. First, does a program produce the intended result of the legislation that created it? Are objective results produced for veterans that were the intent of Congress and the American people?

Second, is the program executed well? We can have good programs with worthy objectives, even producing fairly good results that are executed poorly. We want to make sure we are not only doing things that matter, but also doing them well. Whether things matter and whether they are performed well are going to have an impact on how they are funded by this Department.

In addition to matching results, performance and resources, we are also going to make sound business practice an integral part of our management infrastructure. The VAEB and SMC will soon be joined by the VA Business Oversight Board.

The new board will implement recommendations of the VA Procurement Reform Task Force and provide oversight for other critical business operations like competitive sourcing, debt collection and billing, the national acquisition center and various VA fund activities. This cross-departmental oversight body will concentrate on our core business practices and bring business sense to what we do.

Our new management infrastructure is in place, our new management team at work. We’ve laid out a broad agenda that runs wide and deep and we’ve accomplished much. VA-DoD sharing agreements coming from the top down rather than piecemeal from the bottom up; implementation of work process changes in VBA resulting in significant reductions in the benefits claims backlog; and outstanding and innovative resource management by VHA VISN directors during a very tight budget year.

I’m proud of what VA has achieved. The management structure we’ve developed is only the beginning. It has generated a momentum that will keep us moving forward as we execute plans and initiatives that will change the face of VA. Much has been done, but we’re only beginning.

(Editor’s Note: The Outlook column takes a break in this issue so we can introduce a new management column by VA’s chief operating officer. Outlook will return in the next issue.)
Los Angeles National Cemetery Chapel Dedicated to Bob Hope

About 200 people gathered at the Los Angeles National Cemetery on May 29 to mark “GI Bob’s” 99th birthday with the dedication of the cemetery’s chapel to the legendary entertainer.

Though born in England, he’s this nation’s only “honorary veteran,” credited with bringing laughter and a little piece of home to generations of American service members. During 60 years of goodwill tours to U.S. forces around the world, often sponsored by the USO, Bob Hope entertained some 10 million troops.

Now, in honor of his contribu-
Education Programs on Veterans’ Health Issues Available

Ten education modules aimed at helping VA health care providers improve the care they give veterans with health problems related to military service are now available online. They cover problems commonly, and in some cases uniquely, found in the veteran community.

“Many of these are conditions you wouldn’t find in the average community hospital and are not taught in medical schools,” explained Dr. Susan Mather, VA’s Public Health and Environmental Hazards Chief Officer.

Mather said the modules are designed to help fill a gap a lot of VA health care providers have in their training or experience. Many didn’t serve in the military or receive specialized training in the diagnosis and treatment of health problems common among veterans. With a better understanding of how certain health problems are linked to military service and what the recommended evaluation and treatment approaches are, she said, VA health care providers can improve the care they give veterans.

The modules are offered through the Veterans Health Initiative, a national effort launched nearly three years ago to recognize the connection between certain health problems and military service, improve care, and establish a database for further study. The following education modules are now available on the Veterans Health Initiative Web site at www.va.gov/VHI:

- Agent Orange
- Cold Injury
- Gulf War
- Hearing Impairment
- Post Traumatic Stress Disorder
- Prisoner of War
- Radiation
- Spinal Cord Injury
- Traumatic Amputation and Prosthetics
- Visual Impairment

Continuing Medical Education credit for completing the modules is available. Print versions also are available in the library of every VA hospital. These modules are part of the Veterans Health Initiative’s educational component. There will also be a military history component and a database.

A comprehensive military history will be coded in a registry and be available for education, outcomes analysis, and research. Eventually, a database will be established to allow any veteran to register his or her military history and automatically get relevant health information.
VA Health Care’s ‘Foot Soldiers’ Honored

I almost passed out," gasped Pon Ninlawong, describing her reaction at being selected for the 2002 Secretary’s Award for Excellence in Nursing. But there she stood, before a crowded conference room in VA Central Office (VACO) on May 7 as Secretary Anthony J. Principi presented her with the Department’s highest honor for nurses.

Though her initial reaction may have been disbelief, colleagues at the Dayton, Ohio, VA Medical Center, where she serves as a licensed practical nurse, say she deserves the award. “She is nursing at VA,” explained Anna Jones, chief nurse executive at the hospital. “Her dedication and devotion to veterans, to helping them recover from surgery or injury, is really what’s impressive. People respond to her.”

Ninlawong attended a school for nursing in her native Thailand and has been a U.S. citizen for 26 years. She said she’s proud to be a VA nurse. “I came to this country because I love freedom and these veterans fought for our freedom ... it makes me feel good to help them.”

Before presenting the awards, Secretary Principi reflected on his love affair with nursing, “and notice I said nursing, not nurses,” he said, smiling. “It started when I married a Navy nurse in 1970 during the height of the Vietnam War and has continued as I’ve grown to admire and respect the work of nurses.” He referred to nurses as the “foot soldiers” in VA’s mission to diagnose, treat and comfort veterans. “And like foot soldiers on the battlefield, VA nurses, in my view, are all too often the unsung heroes in what happens day in and day out throughout the VA.”

Sandra Griffiths, R.N., is one of those unsung heroes. The 23-year VA nurse works in the Dialysis Unit of the VA Pittsburgh Healthcare System and was selected for the Secretary’s Award for Excellence in the registered nurse category. She works as a charge nurse, assessing patients and developing individual treatment plans, and has also taken on the roles of hemodialysis preceptor, renal transplant coordinator, and preceptor for the dialysis water treatment system.

Her efforts have a direct impact on the quality of care provided to dialysis patients at the Pittsburgh hospital and have contributed to the unit’s success—the Dialysis Unit has received the VA National Clinical Program of Excellence designation for three consecutive terms. “We’re really on the cutting edge of research and technology,” said Griffiths, while touring the office of Under Secretary for Health Dr. Robert Roswell during her visit to VACO. “Our medical director (Dr. Paul M. Palevsky) is always looking for ways to improve the quality of care for patients and we’re always working toward that goal.”

Martha Adams-Watts, R.N., a psychiatric clinical nurse specialist who works in the Health Care for Homeless Veterans Program at the St. Louis VA Medical Center. One of her primary goals is to reach at-risk veterans, a role in which she excels. “It’s been a childhood dream of mine, to be a nurse,” she said. “I’ve always had this caring, nurturing nature ... an urge to share what I have with others.”

In 1995, she and her husband, a Vietnam veteran, had the vision to create a nonprofit transitional residence for homeless veterans. They planned to call their shelter “The Eagle's Nest.” Though her husband passed away, she continued to pursue their dream. She recently received a 17,000-square-foot facility from the Department of Health and Human Services and was awarded grants totaling more than $350,000 to renovate and operate the facility. She expects the transitional shelter to open its doors in spring 2003. “This
is just my God-given role,” she said.

Esterbina “Ester” Irizarry cares for chronically mentally ill veterans on Ward 9 in the Northampton, Mass., VA Medical Center. In presenting her with the Secretary’s Award for Excellence in the nursing assistant category, Secretary Principi said, “You face some of the most challenging and heart-wrenching conditions in the VA system, but you succeed daily in bringing light into darkened lives, in calming the mental storms that frustrate reason, and in soothing the agitated spirits of your patients. How wonderful a gift you’ve been given, and more wonderful that you give it back so selflessly.” Irizarry joined the Northampton VA hospital in 2000 and previously cared for veterans at the Brooklyn VA Medical Center since 1988.

Nurse researcher Denise M. Hynes, Ph.D., director of the VA Information Resource Center and assistant professor at Loyola University, received an Achievement Award from Secretary Principi for applying the results of a VA Cooperative Study on erythropoietin, a protein-based drug used in the treatment of anemia resulting from severe disease. The drug is expensive and is generally administered in large doses intravenously. The study found small doses administered subcutaneously, or under the skin, can have the same effect. Hynes applied these findings to the Medicare database, effectively providing a blueprint for how Medicare can save up to $142 million per year.

This year, one of the award recipients was missing from the ceremony. Michael Walton, who was selected for the Secretary’s Award for the Advancement of Nursing Programs, passed away April 2 while serving as director of the Chillicothe, Ohio, VA Medical Center. He had pancreatic cancer.

Representing him at the ceremony were his wife, Vi, and stepson, William Hobbs. Also attending were staff from the Chillicothe VA hospital, including Chief Nurse Ruth Yerardi, R.N., who nominated Walton for the award. In her nomination, she wrote that Walton planned to retire in the next year. “His leadership and support of nursing will be missed,” she wrote. Tragically, that time came sooner than anyone could have imagined—Walton died just two months after his diagnosis.

Walton became director of the Chillicothe VA hospital in 1994. He previously served as acting director and associate director at the Indianapolis VA Medical Center from 1987 to 1994. He held associate director positions at the VA medical centers in Charleston, S.C., and Sheridan, Wyo., and served in various administrative capacities in other VA medical centers, as well as VA headquarters, during his 30 years of government service. He valued nurses’ contributions to patient care and advocated programs to foster their professional growth and development.

By Matt Bristol

Ode to the VA Nurse

Linda Ware, R.N., has been a VA nurse for nearly 30 years. She cared for hospitalized veterans at the St. Cloud, Minn., and New Orleans VA Medical Centers before joining the staff of the Chillicothe, Ohio, VA Medical Center, where she now serves as nurse educator.

She wrote a poem to celebrate National Nurses Week, May 6-12, and to express her thoughts on being a VA nurse. Chief VA nurse Cathy Rick, R.N., read the poem during the 2002 Secretary’s Award for Excellence in Nursing ceremony, held May 7 in VA Central Office. Several attendees were visibly moved by the poem and commented that they felt the same pride in being a VA nurse. Here is Linda Ware’s ode to being a VA nurse.

Caring for America.
Can there be a finer role?
Lending care and comfort to the sick and weary soul.
Combating fear and loneliness, grief, isolation, too.
Partners with those who need us, it’s the daily work we do.
Celebrating lives restored, mourning when they’re lost.
Caring for one who has ‘borne the battle...’
Who has paid freedom’s cost.

By Matt Bristol
Skiing alongside the more than 350 disabled veterans challenging the great Rocky Mountains at this year’s National Disabled Veterans Winter Sports Clinic in Aspen, Colo., April 7-12 was a young active-duty soldier currently stationed at Ft. Campbell, Ky. Injured only last December while serving with the U.S. Army Special Forces in Afghanistan, Sgt. 1st Class Michael McElhiney, 31, was the most recent combat-injured participant there.

Serving on a training mission in the Middle East last Sept. 11, McElhiney was called to Operation Enduring Freedom shortly after the terrorist attacks in New York City and Washington, D.C. “We were happy to go,” he said. “One of the thoughts that was foremost in our minds was that we didn’t want to let the American people down, or the veterans who served before us. That helps you focus on your mission, and the fear seems to go away so you can do what needs to be done. We trained all our [military] lives for this. We got in there, we did our part and we did it well.”

McElhiney joined the Special Forces, he said, because he wanted to do “something that mattered, something that had consequences. When that time came, sure enough there were consequences, but I was happy to do it.”

On Dec. 5, north of Kandahar, McElhiney’s unit was building up their forces when they were hit by an errant bomb that landed on top of them. Three Americans died that day, along with five or six Afghans, with an estimated 40 total casualties. McElhiney lost his right arm below the elbow. He also suffered a collapsed lung, a fractured humerus, shrapnel wounds and other injuries.

Conscious when he was first injured, he later lost consciousness and awoke four days later in a hospital in Germany, where his wife Judy had flown in to join him. “The doctors said her presence made my healing process go a lot faster,” he said. “Without her, I don’t know if my attitude would have been the same.”

Despite his injuries, McElhiney said he’d “do it all again if I had to.” His only regret is “not being able to serve again with people of that caliber in a combat situation.”

Describing himself as “very functional,” he plans to stay in the Army after completing his rehabilitation.

McElhiney found out about the Winter Sports Clinic from Rudi Gresham, senior advisor to VA Secretary Anthony J. Principi and former Special Forces advisor in Vietnam, who came to see him during his hospitalization at Walter Reed Army Medical Center in Washington, D.C. Singer Wayne Newton sponsored his trip to Aspen.

“I jumped at the opportunity,” said McElhiney. “There are lots of veterans here who show you that life goes on. A disability is still hard, but with all the advanced technology and adaptive equipment available, you can still have fun and do a lot of things.”

A favorite aspect of the Clinic for McElhiney, besides the opportunity to go skiing, was meeting the veterans participating in the event. “They’ve got a lot of great stories,” he said. “They served before us and they didn’t let us down—and we’re not going to let them down. I’m very proud to talk with them.”

A skier before his injury, McElhiney acknowledged skiing with a disability took some adjustment, but he was pleased to find out he could still do it. Like all the other Clinic participants learned, “This helps show you that you can do everything that someone who is fully intact can do—just in a different way.”

Sponsored by VA and the Disabled American Veterans, the Clinic is hosted by the Grand Junction, Colo., VA Medical Center and the Rocky Mountain Network at Snowmass Village in Aspen. It’s open to all veterans with spinal-cord injury or disease, certain neurological conditions, orthopedic amputations, visual impairments or other disabilities.

At the event, participants learn adaptive Alpine and Nordic skiing with the assistance of Challenge Aspen, an adaptive ski program. They’re also introduced to a variety of adaptive activities and sports, including rock climbing, scuba diving, snowshoeing and sled hockey, plus a self-defense class taught by the U.S. Secret Service.

More information about this annual event is available at www.va.gov/vetski.
Waco VARO Helps Give Worn-Out Flags a Dignified Disposal

Since Sept. 11, Americans have expressed their spirit of unity through prominent displays of the American flag. But months later, exposure to the elements has left many of those flags faded, tattered, or torn.

The Waco, Texas, VA Regional Office recently teamed with community groups in central Texas to plan and conduct a proper disposal of more than 300 American flags. “The American flag symbolizes the sacrifices made by our service members and their families in defending peace and liberty,” explained Director Carl Lowe. “But how many of us know the appropriate way to dispose of our nation’s flag when it is worn out?”

According to federal law, “The flag, when it is in such condition that it is no longer a fitting emblem for display, should be destroyed in a dignified way, preferably by burning.” The Waco VARO, along with the Daughters of the American Revolution, the Marine Corps League, and other organizations, held a patriotic ceremony in front of a large audience from the surrounding communities at the Carleen Bright Arboretum in Waco on April 14.

In advance of the event, community members were invited to drop off their worn-out flags at the Waco VARO and other locations. The Central Texas Veterans Health Care System contributed more than 80 flags that had become worn after flying for extended periods along the Avenues of Flags at its facilities.

The ceremony featured a 21-gun salute, color guard, buglers, patriotic readings and other tributes to the flag. Local Boy Scouts, Girl Scouts and Young Marines participated.

Boy Scouts and other volunteers prepared the flags for burning by cutting out the blue fields and the red and white stripes separately. Lowe, scoutmaster of one of the troops, supervised the scouts as they participated in the ceremonial burning of the flags.

“Our men and women look upon this flag as a symbol of national unity—the heritage of the free,” said Duane Fish, U.S. Marine Corps warrant officer, during the ceremony. “But we must love liberty more than life itself, and treasure the privileges bought with the blood of our forefathers.

“As we keep the principles of truth, justice and charity for all rooted in our hearts,” Fish added, “our flag will continue to be the enduring banner of the United States of America.”

VA and the National Aeronautics and Space Administration (NASA) have rolled out the new Patient Safety Reporting System (PSRS) at VA hospitals nationwide. Developed through a partnership with NASA, PSRS is an independent, external reporting system that complements VA’s internal systems.

Display holders filled with reporting forms and brochures are being posted throughout health care work areas. The guiding principles of the system are voluntary participation, confidentiality of information submitted, and non-punitive reporting, according to Dr. James Bagian, director of the VA National Center for Patient Safety.

“When individuals feel uncomfortable reporting to the internal systems, they have a safety valve they can use—PSRS,” he said.

All an employee needs to do is fill out the pre-addressed and postage-paid reporting form and drop it in any mailbox. Reports submitted are confidential and privileged quality assurance documents protected under the provisions of 38 U.S.C. 5705.

Currently, labor unions at 100 VA facilities have endorsed the system. Non-union employees can participate in the program at those facilities whose labor unions have not yet endorsed it.

The new program is designed to identify system vulnerabilities, but not to provide detailed solutions for local facility adverse events and close calls.

For more information, contact your facility patient safety manager or PSRS directly at NASA/PSRS, P.O. Box 4, Moffet Field, Calif., 94035-9958, or visit the PSRS Web site at www.psrs.arc.nasa.gov.
For more than 21 years, Raul Espinosa has been a “wanted man,” wandering the halls of the Los Angeles County Jail in search of incarcerated veterans needing assistance. A Vietnam-era veteran of the U.S. Navy, Espinosa was a deck sailor and drug counselor during his three-year tour of duty.

After his discharge, Espinosa went to work for VA and for decades has been helping incarcerated and formerly incarcerated male and female veterans suffering from mental illness and homelessness.

Recently, Espinosa saw the culmination of his years of outreach to the jail and his ongoing relationship with the Los Angeles County Sheriff’s Department. In March, Los Angeles County Sheriff Leroy D. Baca, a Marine Corps veteran, officially dedicated the U.S. Military Veteran’s Module located at the Century Regional Detention Facility in central Los Angeles. This veterans’ dormitory in the L.A. County Jail exclusively houses honorably discharged veterans either awaiting sentencing or imprisoned for up to a year.

During processing, the inmate is asked whether he has ever served in the armed forces. If he has, he is identified on a form called a hospital inquiry. On a daily basis, more than 30 names are submitted by the jail to the VA homeless eligibility section that verifies the veteran’s eligibility.

Within 24 hours, a representative from VA is sent to L.A. County Jail to interview and enroll the veteran. Those who meet eligibility criteria are accepted into VA’s Community Re-Entry Program and are immediately transferred to L.A. County’s U.S. Military Veteran’s Module.

The Module looks more like a college dormitory than a jail ward. Through the services offered in the Veteran’s Module, 96 veterans can now make use of their time in confinement to prepare for their eventual re-entry into society. Each inmate is encouraged to participate in many classes and programs offered, such as anger management, parenting skills, drug and alcohol awareness and computer training.

Once inmates are released, they are instructed to report to the Veterans Community Re-Entry Program located at the downtown VA Los Angeles Ambulatory Care Center. At the Re-Entry Program, Espinosa and his staff help many recently released veterans begin their transition back to normal life and not return to homelessness.

The VA Greater Los Angeles Healthcare System provides medical and psychiatric care. Veterans also have access to a range of transitional housing services provided under the VA Homeless Providers Grant and Per Diem Program. These include substance abuse and mental health treatment as well as job training and placement.

The recent establishment of the veterans’ dormitory represents great progress in addressing the needs of incarcerated veterans. Years ago, the incarcerated veterans program in Los Angeles was only "a small part of a larger whole. Today, Espinosa and his staff have created a "whole of a small part."
Angeles consisted only of Espinosa. He understood that recently released veteran inmates often end up homeless or back in jail.

With the help and support of Steve Berman, director of Community Care for the VA Greater Los Angeles Healthcare System, and William L. Daniels, director of the Homeless Center for the VA Greater Los Angeles Healthcare System, Espinosa developed the Community Re-Entry Program. Today there are nine Re-Entry staff members who assess veterans in jail and refer them to services upon their release.

The Community Re-Entry Program is one of several outreach projects offered by the VA Greater Los Angeles Comprehensive Homeless Center (CHC). The mission of the CHC is to help homeless veterans abandon life on the streets and rejoin society as productive citizens.

The success of the Community Re-Entry Program has led to discussions about starting similar programs at other VA medical centers in VISN 22 (Long Beach, Calif.). Last year, an Incarcerated Veterans Workgroup was formed that included representatives from VA medical centers in the Greater Los Angeles area, Long Beach, Loma Linda, San Diego, and Las Vegas. The current Community Re-entry Program’s success is due in large part to having an enthusiastic and effective community partner: the Los Angeles County Sheriff’s Department. Many of the Sheriff’s Department staff members involved with the program are veterans themselves and uniquely understand the special needs of the veteran.

How do the veteran inmates themselves feel about the new Module? Inmate Syrus C., a Marine Corps veteran and general contractor by profession who has been arrested numerous times for driving under the influence, said he felt the many classes offered by the facility would help him turn his life around.

Wayne D. served in the Army from 1974 to 1983 and has been in and out of the criminal justice system for assault and domestic violence. He took advantage of classes on anger management, drug and alcohol education and computer classes, which he said would help him once he is released.

Like most other incarcerated veterans, Steven W., a Navy veteran and telecommunications construction worker, took full advantage of the many classes offered. He described his experience with the program as “outstanding. I was treated with respect and compassion.”

There are those who claim that a veteran who has been incarcerated does not merit VA’s consideration. But by virtue of his or her honorable service, the veteran has earned all the help and support VA can provide.

Perhaps Rep. Lane Evans, Ranking Member of the House Veterans Affairs Committee, said it best: “Veterans are veterans no matter what else transpired in their lives. These men and women served our nation. Providing them with their rightful benefits can only remind them of their commitment to society, promote their sense of self, and further their rehabilitation.”

For more information about this program, or to find out how to donate books, writing material, stamps or magazine subscriptions to the Los Angeles County U.S. Military Veteran’s Module, contact Raul Espinosa at (213) 253-2677 x4787. Vouchers are also being accepted from clothing stores (J.C. Penney, Sears) to aid newly released veterans.

By D. Mark Katz
VISN 22 (Long Beach, Calif.)

Secretary Makes Historic Visits to Philippines, Korea

VA Secretary Anthony J. Principi paid historic visits to the Philippines and Korea in April. He met with Philippine and Korean dignitaries, participated in commemorative ceremonies, and visited VA employees working in the two countries.

His two-day stop in the Philippines marked the first visit to the island nation by a Cabinet official in the administration of President George W. Bush, and the first-ever official visit by a VA Secretary there. His trip included a visit to Corregidor, where he noted that the 60th anniversary of the infamous Bataan Death March was recently observed in both countries.

During a meeting with President Gloria Macapagal-Arroyo, he thanked her for the Philippine government’s support in the global war against terrorism. Principi laid a wreath at the Manila American Cemetery and Memorial, and visited employees of the Manila VA Regional Office and Outpatient Clinic, the Department’s only overseas office.

In Korea, the Secretary was the keynote speaker for the 50th anniversary of the Korean War Veterans Appreciation Day Commemoration event on the Army base in Yongsan near Seoul, and he participated in a wreath-laying ceremony at National Cemetery. Principi also stopped by VA’s Korea Benefits Delivery at Discharge office on the base. Opened in May 2001, it’s the first international VBA site in a sovereign nation.
D.C.’s Movers and Shakers Square Off in Annual Road Race

Hundreds of runners laced up their jogging shoes in the early morning hours of May 1 on a lone stretch of asphalt in Anacostia Park in Washington, D.C., to compete in the 2002 SGMA Capital Challenge three-mile road race. Among those competing for the title of Washington’s fastest feet were teams led by members of Congress, Cabinet appointees, military leaders, federal judges and major newspaper and television journalists and editors.

Representing VA in the race was a group of employees led by Chairman of the Board of Veterans’ Appeals Elijah D. Clark and Inspector General Richard Griffin. Competing with Clark on BVA’s “Fast Track” team were Karen Ollivierre, a law clerk; Eric Leboff, counsel; Laura Eskenazi, associate counsel; and Dennis Chiappetta, associate counsel, who led the team with a time of 21 minutes and 55 seconds.

Griffin’s team, “Hot (Line) Feet,” included a couple of marathon runners and speedsters who made a strong showing. Vickie Lang, a program analyst, was among the fastest woman runners—clocking in at 18:34. Hot on her heels was Richard Thrasher, chief counsel for policy at the Board, who finished the course in 18:59. Rounding out the team was Hideko “Heidi” Pirie, a program specialist, with a time of 21:10.

According to Pirie, Secretary Anthony J. Principi achieved the fastest time for a VA executive—a record that still stands—when he took part in the Capital Challenge while serving as Deputy Secretary and Acting Secretary. In 1991, he ran the three-mile course in 22:58, and trimmed his time to 22:03 in 1992. The annual race benefits the District of Columbia Special Olympics.

NASCAR Legend Petty Partners with VA Canteen Service

Auto racing legend Richard Petty visited the Hunter Holmes McGuire VA Medical Center in Richmond last month to launch his new partnership with the Veterans Canteen Service (VCS). Petty, winner of 200 NASCAR Winston Cup races and the sport’s first million-dollar driver, will promote VCS sales and services throughout the summer.

He’ll visit VA medical facilities and canteens whenever his racing schedule permits. Petty has given VA permission to use his name and likeness in VCS advertisements and promotions.

He gives veterans the credit for preserving the freedom that allowed him to pursue excellence in the sport of auto racing, and views his partnership with VCS as a way of thanking them. “I was never a veteran,” explained Petty. “I was doing my thing, but the veterans are the ones that allowed me to do my thing. So this [partnership] I think is a deal for me.”

Petty received the Medal of Freedom, the highest award given by the federal government to civilians, in 1992 for his contributions on and off the track. He’s been associated with patriotic and veterans’ causes throughout his career.

In Richmond, Petty toured the canteen, one of the largest in VA. He also visited patients in the facility’s Spinal Cord Injury Center, signed autographs, and posed for photos with patients, their families, and VA employees.

Richard Petty signs an autograph for Richmond VAMC Canteen Service's Ingrid Laneville during his visit there last month.

NASCAR Legend Petty Partners with VA Canteen Service

Richard Petty signs an autograph for Richmond VAMC Canteen Service's Ingrid Laneville during his visit there last month.
VA Looks at Long-Term Effects of Terrorism

The indirect consequences of a terrorist attack may be more severe than the direct, long-term harm caused by a weapon of mass destruction, researchers from VA and a British medical school have determined. “We feel more vulnerable to these weapons because they can harm large numbers of ordinary citizens in places generally considered safe, such as where we work and live,” said one of the study’s co-authors, Dr. Kenneth C. Hyams, VA’s chief consultant for occupational and environmental health.

Published in April in the Journal of Health Politics, Policy and Law, the report examines the multiple challenges of a terrorist attack using chemical, biological, nuclear or radiological materials. Besides casualties caused directly by an attack, “the normal reaction to an unfamiliar and life-threatening event—fear, confusion and flight—could cause greater damage than the attack itself,” the report noted. Researchers concluded that unexposed citizens could overwhelm hospitals because symptoms that often occur in an emergency situation—like headaches, shortness of breath and difficulty concentrating—are similar to the early effects of chemical and biological warfare agents. In addition, stress, fear, worry and grief could aggravate existing medical and psychological problems.

The report reviews longer-term consequences after the initial attack, such as prolonged medical and psychological effects. It also provides a prescription for reducing some negative effects of terrorist attacks, such as the importance of long-term health care, effective communication by the government, timely health risk assessment, research and economic support. Co-authors of the report are Dr. Frances M. Murphy, VA’s Deputy Under Secretary for Health, and Dr. Simon Wessely of Guy’s, King’s and St. Thomas’s School of Medicine and Institute of Psychiatry in London.

VA Puget Sound Researchers Study Appetite-Stimulating Hormone

Thousands of obese Americans know firsthand that gastric bypass surgery, or sewing shut a large portion of the stomach, can achieve long-term weight loss when dieting, exercise and medications have failed. A new study shows the reason for the weight loss may not lie solely in eating less, but in suppressing an appetite-stimulating hormone, according to an article in the May 23 New England Journal of Medicine.

A study led by a team from the VA Puget Sound Health Care System and the University of Washington compared blood samples from dieters and gastric-bypass patients and found dramatic differences in the levels of “ghrelin,” a hormone secreted by the stomach. The hormone was first identified by Japanese researchers in 1999, and was shown by British scientists last year to trigger appetite in humans—the first known hormone to do this.

The new findings may explain why keeping off excess weight through dieting, exercise or even medication is often a constant uphill battle, whereas obese patients who lose up to 200 pounds or more through gastric bypass surgery tend to keep off the pounds permanently. The study shows that dieting raises ghrelin, while gastric bypass surgery sharply reduces it, almost to undetectable levels. The research is the first to document the effects of low-calorie dieting versus gastric bypass surgery on ghrelin levels.

According to lead author David E. Cummings, M.D., the findings not only shed light on what may be an underlying reason for the success of gastric bypass surgery, but raise the possibility of a new generation of safer, more effective weight-loss drugs. “If the absence of ghrelin contributes to the effectiveness of gastric bypass surgery, then we may be able to achieve at least some of that weight loss by antagonizing (blocking) ghrelin medically. If this approach works, then it might be something we could use even for people who are only modestly overweight,” said Cummings, an endocrinologist with VA and the university.

Gastric bypass surgery, according to conventional medical wisdom, works because it dramatically reduces the portion of the stomach that is available to accept food. In the operation, 95 percent of the stomach is sewn shut so it can’t receive food. As a result, the patient feels full much sooner and eats less at each meal. But the new study suggests another mechanism may be at work. The research team believes the cells in the stomach that produce ghrelin become inactive when they are no longer exposed to food in the gut. “We think ghrelin cells ‘go to sleep’ when they’re deprived of contact with ingested nutrients,” Cummings said.

Minneapolis VA Researchers Say Smaller Aneurysms Best Left Alone

Researchers studying abdominal aortic aneurysms at the Minneapolis VA Medical Center found it is best not to correct the problem with surgery unless the aneurysm is larger than 5.5 centimeters in diameter, according to findings published in the May 9 issue of the New England Journal of Medicine. “Repair of a smaller aneurysm does not benefit the patient and may present greater risks than the aneurysm itself,” said lead author Dr. Frank Lederle of the Minneapolis VAMC.

The abdominal aorta is part of the aorta, a major artery that delivers blood from the heart to internal organs in the lower part of the body. Aneurysms are blood-filled dilations that occur when the walls of the aorta weaken and bulge. They are fairly common, particularly among older men who have smoked, but most of them never rupture. This led researchers to question whether patients should risk potentially deadly complications such as heart failure or infection during surgery to repair something that may not pose a significant threat.

Lederle and his colleagues believe that guidelines based on their findings could result in at least 20 percent fewer repairs. This could mean fewer deaths and better treatment options for patients. Researchers suspect the guidelines could be cost effective as well. The study also demonstrated an extraordinarily high surgery-survival rate at the 16 participating VA hospitals—nearly 98 percent. “The survival rate was one of the highest ever reported,” said Lederle. “We can attribute this to selecting good surgical candidates, and the skill of the VA surgical and post-surgical teams.” The VA Cooperative Studies Program funded the study.
The Portland-based nonprofit now provides free medical care for up to 2,400 homeless people each year. Reuler is quick to point out, however, that the organization does more than help the homeless. “Our goals include providing physicians an avenue of community service and improving the public’s view of doctors,” he said. More than 225 doctors, nurses, medical students and interpreters now volunteer at The Wallace Medical Concern.

The National Institute of Mental Health awarded a grant for research on mental health needs of emergency services personnel resulting from the Sept. 11 terrorist attacks to Charles Marmar, M.D., associate chief of staff for Mental Health at the San Francisco VA Medical Center and professor and vice chair of the Department of Psychiatry at the University of California, San Francisco. Marmar is an international expert on post-traumatic stress disorder and has consulted on a number of natural disasters including the 1994 Northridge earthquake and the 1995 earthquake in Kobe, Japan. His new study will compare the effects of brief cognitive behavioral therapy to usual treatment for New York City disaster relief workers with PTSD related to the World Trade Center terrorist attacks.

The VA Virtual Learning Center (www.va.gov/vlc) was chosen from among 234 government programs to receive the prestigious E-Gov 2002 Pioneer Award. This is the highest award given by E-Gov, a coalition of public- and private-sector groups promoting innovative electronic approaches to government. The Virtual Learning Center is a management tool for sharing information about new ideas and best practices across VA. Additionally, the program offers virtual mentoring opportunities by VA leaders sharing their experiences and creates a forum for people to share professional interests and to exchange information.

Guenther Griebau, a volunteer at the Riverside, Calif., National Cemetery, received the 2002 Outstanding Volunteer Award for Riverside County. Griebau volunteers an average of four days a week, raising money for the cemetery and helping local veterans by making them aware of VA burial benefits. He chairs a fund raising committee that has raised more than $480,000 to enhance the cemetery during the past year alone. The Riverside National Cemetery has a volunteer force of nearly 700.

Film crews from the Employee Education System’s St. Louis Resource Center took first place honors in the international 2002 Videographer Awards program. They won Awards of Excellence for writing, producing, editing, and filming “VCS: Proud to Serve Genuine American Heroes” and “The 2001 National Veterans Golden Age Games.” They joined crews from ABC’s “20/20” and CBS’ “48 Hours” in the first place award circle.

Korean War veteran and VA volunteer Robert E. Miller was named Citizen of the Year 2002 for his nearly 30 years of dedicated service to veterans treated at the Asheville, N.C., VA Medical Center. Miller, a van driver for the Disabled American Veterans’ Transportation Network, drives veterans from their homes in the Morganton area to appointments at the Asheville VAMC, a distance of about 60 miles, and back again. He often makes the trip twice a day.

The American Society of Training & Development selected Blanco (Skip) High, a management analyst in the Office of Human Resources Management in VA Central Office, as chair of the Program Advisory Committee for the 2003 International Conference and Exposition. The conference is one of the nation’s largest workplace performance and learning events. As chair, he will oversee the body that screens and recommends the final slate of conference presenters and sessions. He had served as a member of the committee for two years prior to being selected as chair for the 2003 conference.
**Salem VAMC’s ER for the Modern Age**

Dr. Doreen Kelley, a physician from the **Buffalo VA Medical Center**, started making weekly house calls to the **Buffalo VA Regional Office** on March 5 as a way to improve the Compensation and Pension examination process. **Sue Kloc**, who was recently promoted to assistant service center manager at the regional office, explained how the agreement works. “The medical center agreed to let her work here for four hours a week,” she said. “Now, Dr. Kelley is part of our collaborative team. Our ratings specialists can actually go over and talk to her when they have questions … files for these cases no longer have to be transferred to the Buffalo VAMC.” She said as of April 17, Kelley had reviewed more than 100 cases, and of those, 87 were ready to rate following her review.

Weeks of heavy rain caused the worst flooding in decades at the **Camp Butler National Cemetery** in Springfield, Ill. The downpour caused the Sangamon River to overflow its banks, sending floodwater gushing through the cemetery. About 50 gravesites were submerged in what was the area’s worst flood since 1943. As soon as the water receded, cemetery staff went to work cleaning headstones, picking up debris and getting the cemetery back in order. Cemetery Director **Dane Freeman** squelched rumors that gravesites had been damaged in the flood by explaining to local reporters that the situation was under control and cleanup was underway. Through the staff’s quick response, the cemetery was able to provide uninterrupted service to veterans and was open for visitors on Memorial Day.

**VA** received the second highest score among 24 federal agencies in an independent study of performance reports. Only the Department of Transportation received a higher score. The rating was done by the Mercatus Center at George Mason University in Virginia. The center measured the reports from federal agencies using 12 criteria under three broad categories: Does the agency report its accomplishments clearly? Does the report focus on tangible benefits? Does the report show evidence of leadership that used performance information to devise strategies for improvement? VA was noted not just for a well-organized report that is easily accessible, but also for providing trend data to put performance measures in context and addressing management challenges clearly. For more information on the performance report, visit [www.va.gov](http://www.va.gov).

In one of the health care industry’s top measurements of quality, **VA hospitals** scored slightly higher than their non-VA counterparts. The scores were based on surveys of VA health care facilities conducted by the Joint Commission on Accreditation of Healthcare Organizations. In the survey, VA’s mean score was 93, nearly two points higher than the average for non-VA hospitals nationwide. VA hospitals have been surveyed by JCAHO since the independent reviews began in 1952. “These scores confirm what many veterans already know—VA provides some of the best health care in the nation,” noted Secretary Principi.

**Bea O’Brien**, a volunteer who runs the creative writing program for domiciliary veterans at the **Bath, N.Y., VA Medical Center**, has an article in “Chicken Soup for the Teacher’s Soul” which was released in May. Her story “Awakenings” relates an experience of hers while conducting creative writing workshops for veterans at the Bath VA hospital. She is the author of several books and currently serves as deputy representative for the Hospitalized Veterans Writing Program on the VA Voluntary Service Committee. “We are proud and honored to have Bea as a member of Bath’s VAVS team,” said Volunteer Manager **Susan DeSalvo**.
Becky Sanchez, a nurse in the El Paso VA Health Care System, was in line to pay for her food at the canteen when a man in front of her said a baby was choking. She saw a baby boy in a stroller; his lips were blue and his mouth was wide open as if he was trying to get air. She immediately lifted the boy from the stroller and gave him four quick blows to the back, dislodging a clump of rice and beans that was blocking his airway. After the child started breathing again, Sanchez conducted a little on-the-spot education with her mother by explaining what types of food were appropriate for his age.

Michael Stauffacher, an elevator mechanic at the Albany VA Medical Center for the past 15 years, was a hero in his hometown after he pulled five people from Saratoga Lake. The incident unfolded April 12 on a windy evening when two sailors capsized in five-foot swells. Three rescue workers pulled the sailors from the water, but they also capsized in the choppy water as they made their way back to shore. When he heard about the failed rescue attempt, Stauffacher jumped in his 26-foot skiff and sped out onto the lake. Traveling at speeds of up to 40 miles per hour, he reached the five in about 10 minutes. “I just told them all to get in the boat, and they were happy to see me,” Stauffacher told a reporter from The Saratogian newspaper. Once on board, he took them home and warmed them up with hot coffee by the fireplace as they waited for an ambulance. One person was hospitalized for minor hypothermia and two others were treated and released.

Gwen Scully, a licensed practical nurse at the Denver VA Medical Center, was on her way to work when she saw an automobile accident. As the first responder on the scene, she checked the first driver for injuries. When another passerby stopped to help, she left the first vehicle to check on the driver of the second vehicle, which had gone into a ditch. The victim kept going in and out of consciousness, so she stabilized his neck to prevent further injuries. Though the driver of the first vehicle died at the scene, the second victim was taken to the hospital by paramedics.

On April 10, Moreno Valley (Calif.) police were called to a nearby shopping center where a 20-month-old infant was limp, pale and not breathing. When police arrived, they found Robert Nettles, a nursing assistant at the Loma Linda VA Medical Center, already on the scene and administering CPR. After three to four minutes, the baby let out a cry and resumed breathing. The baby was immediately taken to a local hospital for medical attention. For his lifesaving actions, Nettles received the Mayor’s Award for Valor, the city’s highest level of recognition for heroic actions and exemplary performance.

I was very pleased to see the article in the May VAnguard relating to VA’s HR regulations going online. However, I do want to add some information that might not have been gained from it by the readers of your magazine. The creation of an online set of regulations was only one part of the final product. Over 200 documents, including chapters in the old MP-5, Parts I and II, circulars, interim issues, and directives, contained HR information when we began our initiative. To complicate matters, names of offices and legal citations were incorrect and required updating. Once all of the documents were consolidated into the proper chapters, these 92 chapters were assigned to one of 14 directives and handbooks—a monumental task.

Finally, your article rightfully acknowledged the tremendous support of individuals in the three administrations and especially in the Office of Human Resources Management. Without their support and that of the Office of General Counsel, our group would have floundered.

But equally important were the many HR professionals in the field who literally did the “grunt” work. Some re-typed documents to make them electronic, while others proofed the consolidations. Others offered ideas to make the regulations user-friendly. And then there were the “volunteers” who spent many hours putting the various parts together at week-long sessions.

In the final analysis, the field HR professionals, along with the VACO staff, worked long and hard to provide a set of regulations that will truly be One VA. Individual offices and administrations won’t be writing similar regulations specifically for their employees. It will all be there in the same document.

Terence P. Kahn
Chief, Human Resources
Indianapolis VA Medical Center
(Editor’s Note: The writer served as group leader of this initiative.)

Correction

A number of eagle-eyed baseball fans who read our May article about baseball’s war heroes correctly pointed out that the 15-year-old pitcher who made his major league debut with the Cincinnati Reds on June 10, 1944 was Joe Nuxhall, not Maxwell. Interestingly, however, Nuxhall was not the youngest player ever to appear in a major-league ball game, according to The Baseball Encyclopedia and Major League Baseball. That distinction belongs to Frederick J. Chapman, who at the age of 14 years, eight months pitched five innings with the Philadelphia Athletics on July 22, 1887. But while his career in the majors ended there, Nuxhall went on to play 16 years.