Winter Sports Clinic
Tipper Gore joins participants in Crested Butte — page 8
Jim Coy wasn’t planning to write a book in 1996 when he sent inquiries to more than 30 military leaders seeking their advice on leadership. He had been asked to deliver the commissioning address to ROTC students at the University of Missouri, and thought they might benefit from hearing the wisdom of those who had successfully gone before them.

But the response to the address from students and their parents was so positive that Coy, a radiologist at the Columbia, Mo., VA Medical Center, began to formulate the idea for a book offering practical advice on leadership from American military, political and religious figures.

He sent inquiries to 400 leaders, asking them to respond to two questions: “What is your creed or code of conduct for life?” and “How do you move from success to significance?”

Coy explained that the meaning of the second question is that success cannot be measured merely by the size of one’s bank account. Those who are truly successful, Coy believes, use their monetary, occupational or educational success to positively influence the lives of others. “We are all interested in being successful in what we do, but with time, most people want to affect others in a positive way,” he said.

More than half of the leaders responded, and Coy spent two and a half years compiling their advice into a book called “A Gathering of Eagles.” The title is a tribute to his lifelong affinity for the national symbol. Included are many of the nation’s best-known figures, such as General Colin Powell, former President George Bush, former Senator John McCain and Evangelist Billy Graham.

All of the leaders featured in the book are men, which Coy said is partly a reflection of his 23 years in the Army Reserves, where he attained the rank of colonel, and where most of the leaders he encountered and was inspired by were male. But he said he also believed it was an appropriate time for a book that would make a statement about positive male leadership. Coy said he believes there are many strong and dedicated women in leadership roles in America, and he is considering doing a second book focusing on them.

Although the book features advice from an impressive collection of luminaries, Coy said he was most affected by the sections focusing on Congressional Medal of Honor recipients and former POWs.

“The former POWs, who experienced profound physical and emotional torture, had a lot of time while they were imprisoned to think about what’s really important in life,” Coy said. “I respect all of the advice they and the Medal of Honor recipients, many of whom sustained significant injury in sacrifice to their country, have to give.”

He was particularly inspired by a quote included in the entry from Gary Beikirch, who was awarded the Medal of Honor for his service in Vietnam: “To really live you must almost die. To those who fight for it…life has a meaning…the protected will never know.”

Coy said the book has been well received, especially from veterans who have picked it up in the Columbia VAMC canteen.
VA Replacing High-Speed Data Communications Network

Under the General Services Administration (GSA)’s Federal Technology Services 2001 (FTS2001) contract, the team recently identified Sprint as the vendor of choice to provide data and voice communications services for the Department. The FTS2001 contract offers VA excellent pricing, the opportunity to better manage telecommunications services, and the ability to work with a company with an established reputation in the telecommunications community.

By adopting the Sprint solution for both data and voice communications services, VA has the opportunity to optimize its use of telecommunications resources while ensuring continuity of services across the Department. We are looking forward to our new partnership with Sprint.

Information has become the lifeblood of VA, and the Office of Information and Technology is working to ensure that the Department’s rapidly increasing need for advanced communications will be met in the next century.

At the end of next month, the contract for VA’s primary nationwide data communications system, the Integrated Data Communications Utility (IDCU), will expire. The IDCU network provides high-speed data communications service to 450 VA locations and nearly 600 customer service points throughout the 50 states, the District of Columbia, the Philippines and Puerto Rico.

Currently averaging more than 5 trillion bytes of data per month, the network enables VA customers around the country to access numerous critical applications and systems.

The IDCU also allows customers to establish full communications with other VA network locations, and provides important links to Finance customers since the HR LINKS, Financial Management System (FMS), and IFCAP system are integrated.

The IDCU has served network customers during some of the telecommunications industry’s most exciting and competitive market growth. Initially, the IDCU provided VA with nationwide packet network services which supported all VA applications with what was state-of-the-art network technology at the time.

However, in the mid-1990s, the telecommunications industry radically expanded opportunity for customers with services like frame relay, asynchronous transfer mode (ATM) and SONET technology. Through IDCU, VA was able to take advantage of these high-speed bandwidth offerings, digital services, and industry technology upgrades to complement VA interests in cost containment, operational consolidations, and efficiency in the workplace.

The IDCU helped us keep pace with changes in the telecommunications industry and achieve service delivery improvements for the nation’s veterans. But like all good things, the IDCU contract is coming to an end.

To plan our next step, I established an IDCU Replacement Team last year, consisting of representatives from the major VA organizational elements, to develop a replacement wide area network (WAN) to accommodate Department-wide data communications needs in the next century.

Nineteen-year-old Homer Fisher celebrates in the Yountville, Calif., Veterans Home with relatives and government officials after receiving the Legion of Honor, the French government’s highest award, from a French diplomat. The French government continues to say “merci beaucoup” to World War I veterans who fought on French soil by awarding them this honor. VA is assisting France in locating eligible veterans. Nearly 300 applications for the medal have been approved, and about half of the medals have been presented to the veterans by French officials.
When employees blow the whistle on fraud or mismanagement in VA, are they subject to retaliation? A group of VA employees testified last month in a hearing before the House Oversight and Investigations Subcommittee of the Veterans Affairs Committee that they believe retaliatory actions were taken against them for whistle-blowing.

In a recent all-employee memorandum, Secretary Togo D. West, Jr., reminded VA workers of the laws that protect them against reprisals for whistle-blowing, and outlined ways in which they can seek redress if they believe retaliation has been taken against them.

The Whistle-blowers Protection Act was enacted in 1989 to strengthen protections for federal employees who believe they have been subjected to unjustified personnel actions in reprisal for whistle-blowing. These protections were extended in 1994 to VA’s health-care professionals appointed under Title 38.

Employees are protected if they disclose information about wrongdoing, waste, fraud or abuse to the Special Counsel or the Inspector General. They also are protected if they make such disclosures to any other individual or organization, such as a congressional committee or the media, unless the disclosures are specifically prohibited by law.

But even with those protections, fear of reprisal is frequently cited by employees as the number one reason for not reporting evidence of law violations, gross mismanagement, gross waste of funds, abuse of authority or a significant danger to the public health or safety.

In the all-employee memo, Secretary West made his position on this issue clear. “Neither I nor any member of the leadership of this Department will tolerate whistle-blower reprisal in the Department of Veterans Affairs,” he said. “Each of us has an important role to play in promoting an environment in which employees feel free to come forward with their legitimate concerns without fear of reprisal.”

What are the avenues available to VA employees who want to challenge personnel actions they believe to be based on whistle-blowing?

• If the personnel action can be appealed to the Merit Systems Protection Board (MSPB), the employee can raise the whistle-blower concerns in the MSPB appeal. Examples of personnel actions that fall into this category include suspension for more than 14 days, reduction in grade or pay, or termination.

• If the personnel action can be appealed under a VA appeal procedure, such as title 38 disciplinary actions, the employee can raise whistle-blower concerns in the VA appeal.

• If the personnel action is grievable under a negotiated grievance procedure contained in a labor-management agreement, the employee can raise the whistle-blower concerns in the grievance.

• In some cases, the matter might also be appealable under VA’s administrative grievance procedure. An example of this is a non-bargainable unit employee’s dissatisfaction with a reassignment.

• Whether or not the matter can be appealed to the MSPB, the employee can raise the issue with the independent Office of Special Counsel (OSC). Examples of actions that would fall into this category include reassignment, not being selected for a job, or title 38 disciplinary actions. The OSC’s hotline number is 1-800-872-9855.

• Employees also can raise a whistle-blower retaliation claim with VA’s Office of Inspector General (OIG). The OIG’s hotline number is 1-800-488-8244.

In 1993, VA began requiring that all investigative reports on reprisal complaints, including reprisal for whistle-blowing, be reviewed by senior managers. Reports involving VA field facilities are reviewed by the network or area directors, or by associate deputy under secretaries for operations. Reviews for VACO are conducted by administration heads, assistant secretaries and other key officials.

The procedure was implemented to determine whether personal intervention by VA’s senior managers is needed, and to ensure that appropriate action is taken when individuals are found guilty of reprisal.

This requirement does not apply to allegations of reprisal involving equal employment opportunity (EEO) discrimination complaints, however. Instead, those complaints should be brought to the attention of a VA Office of Resolution Management counselor by calling 1-888-737-3361.

In his testimony before the House subcommittee, VA Assistant Secretary for Human Resources and Administration Eugene Brickhouse outlined several initiatives VA is undertaking to ensure that employees are aware of the whistleblower protections they have, as well as the avenues of recourse available to them if they believe they have suffered reprisals.

The first step VA took, Brickhouse said in his testimony, was issuing the memos from Secretary...
West to both managers and employees on whistle-blower rights and avenues of redress. All senior employees will receive annual reminders about the rights of whistle-blowers and the prohibitions against retaliation, he added, and information about these protections will be included in all new employee orientation programs and supervisory training.

Brickhouse said the Office of Human Resources Management also is creating a website on whistle-blowing that will be linked to VA’s Intranet home page. The website is currently accessible at http://www.va.gov/orm and includes information about whistle-blowing protections available to employees and links to helpful resources.

Secretary West also has asked Brickhouse and VA General Counsel Leigh Bradley to examine whistle-blowing and related retaliation issues in the Department and find ways to make additional improvements.

“We are at the beginning of this process,” Brickhouse said in his testimony, “and have more to do. We will be effective only when we have a system which encourages employees to come forward to express their concerns and assures that when and if they do, those concerns will be addressed without reprisal.”

Office of Resolution Management Working to Improve EEO Complaint Handling Process

When someone files an EEO complaint against you, it’s personal. It suggests, ‘You are a racist or a sexist.’ It’s not a happy experience, and it’s a long, arduous process.” Not only for the individuals involved, but for VA, says Ventris Gibson, who heads the Office of Resolution Management (ORM) as Deputy Assistant Secretary.

“Drive ORM out of business,” she challenged personnelists at the Human Resources Management Conference last fall.

Gibson went on to note that a significant number of equal employment opportunity complaints she receives result in a finding of no discrimination. Most often, the complaints involve common workplace disputes that could be resolved through better communication and techniques such as alternative dispute resolution (ADR), which uses a variety of methods to resolve the complaint at the informal level.

Five months after the conference, that situation has not changed, and ORM has put in place procedures and technology for complaint handling designed to make all parties view them as customer-friendly.

Since employees and managers are struggling with change, Gibson advised human resources employees to work toward buy-in and not to string employees along for the long road of an EEO complaint if they know the problem does not relate to the EEO-covered areas of race, sex, national origin, age, disability, religion or reprisal.

The leading causes of EEO complaints are allegations involving human resources and non-sexual harassment issues. These include non-selection for promotion, conditions of employment, performance appraisal, assignment of duty, reassignment, appointments, time and attendance, disciplinary and adverse actions. Those involving non-selection, assignment of duty, reassignments and working conditions appear to focus on facility consolidations or changes in work processes.

ORM has implemented its complete field structure since the office was formed in late 1997. Twelve field offices and 11 satellites opened by last September, two months ahead of schedule. A total of 241 employees have been trained as intake specialists, investigators and counselors.

The process for handling an EEO complaint has been streamlined to try to reduce completion time from 452 to 180 days. A complaint currently takes an average of 322 days from the time an employee files a formal complaint of discrimination.

New services are being added, including mediation and video conferencing, capability to enter cases and work to completion online, a toll-free number to begin a complaint along with an identification number to learn its status later, and satellite broadcasts for employees and managers on the new EEO complaint procedures.

Employees who believe they are the victims of unlawful discrimination may begin an EEO complaint by calling toll-free 1-888-RES-EEO1. They may also contact their union representative or EEO manager who will explore other options besides filing an EEO complaint.

If they wish to pursue an EEO complaint, they must contact an ORM counselor. The counselor offers an employee another opportunity to choose the local ADR program (if one is available) to resolve the problem and, if ADR is selected, they agree to extend the informal counseling period for up to 90 days while working on the issue.

The ORM field office determines if a formal complaint meets the EEO processing requirements. If it does not, ORM prepares a Final Agency Decision dismissing all or portions of the complaint, which can be appealed to the Equal Employment Opportunity Commission (EEOC). If the complaint is accepted, the ORM field manager assigns an investigator; the investigation will be completed within 180 days of filing and the report given to the complainant along with a statement advising the employee of appeal rights.

By Jo Schuda
VA to Expand Pilot Program Arming Police

Secretary Togo D. West, Jr., has approved a plan to expand the current pilot program of arming police officers at VA medical centers to the remaining VAMCs across the nation.

VA armed police at five test sites in 1996 (Chicago Westside, North Chicago, West Los Angeles, Bronx and Richmond) and added another seven in 1997 and 1998.

The pilot program was successful, according to Deputy Assistant Secretary for Security and Law Enforcement John Baffa, in part because officers acted appropriately during incidents in which they drew their weapons, and no officer at any of the test sites fired a gun, either intentionally or accidentally.

Baffa, who drafted the expansion plan at the request of Secretary West, said this step is being taken to help ensure the safety of VA's patients, employees and police officers.

The plan calls for VA police to be armed gradually, with appropriate training and monitoring. The Office of Security and Law Enforcement (OS&LE) is working with VHA’s Chief Network Officer to identify potential sites to add to the firearms program, with 16 sites expected to be added during the first year of expansion.

The order in which sites are added will be based on several factors, including the results of an inspection of a candidate facility by the OS&LE, appropriate supervision of a facility’s police unit, and an evaluation of crime statistics at the facility and surrounding areas. Once selected to participate in the firearms program, facilities will work with the OS&LE to develop implementation plans.

The standard firearm will be a 9mm semi-automatic pistol equipped with several safety features, including a disconnecting device that renders the weapon totally inoperable when the magazine is removed. VA officers are required to remove the magazine in certain areas of a hospital, such as a psychiatric ward. This safety feature, along with a special holster, reduces the likelihood of the weapon being taken and used by an unauthorized person.

Before being armed, each police officer will be required to complete a minimum of 40 hours of classroom and firing range training, and must have passed physical and psychological exams within a year prior to beginning the training.

VA police officers and unions representing them had long sought the authority for officers to carry firearms. Noting that four officers have been shot and killed in the line of duty, the unions argued officers had no way to defend themselves in encounters with armed individuals on facility property.

But because concerns about safety and the appropriateness of guns in hospitals had been raised over the years, Baffa and his staff proceeded slowly in developing the expansion plan to allow time to take those concerns into consideration. For example, he and his staff surveyed police officers, employees and patients at the five original test sites to gather feedback on how well the pilot tests were working.

The selection of a double-action-only handgun with special modifications also resulted from concerns about safety, as did the plan’s emphasis on training and monitoring.

“The first thing we’re going to write on the blackboard at our training sessions is ‘nothing’s changed,’” Baffa said. “We will still keep our focus on defusing or de-escalating situations before they become violent, and protecting patients and employees. The firearm will be used as a tool of last resort.”

VA police officers will continue to be equipped with non-lethal weapons that they will be expected to use when the situation does not require the use of a firearm, he added.

The firearms expansion plan urges management at facilities selected to participate to openly discuss the program with employees, patients and other stakeholders. And Baffa said he and his staff will be available to conduct on-site demonstrations or offer other assistance to alleviate local concerns about arming VA’s police force.

“We have found that in cases where people are willing to take the time to see the demonstration and learn about the training and be open-minded, we’ve had no problems.”

New Business Stream for VA

When VA’s Federal Franchising Service first processed payroll in January for the Federal Energy Regulatory Commission (FERC) using an automated human resources and payroll services model from outside that agency, it introduced a new business stream and area of revenue for VA.

Funds generated through this endeavor can help reduce the operational costs associated with the VA Austin Automation Center, Financial Services Center and Shared Services Center.

The Franchising Service took advantage of this new technology by handling FERC’s payroll processes on a PeopleSoft payroll and human resources application created for their agency.

VA had already purchased its own version of the PeopleSoft software that will be used at prototype VA facilities and Central Office. HR LINK$ software solutions will eventually allow VA employees and managers to use personal computers or phones to conduct many of the routine human resources tasks.

VA has been approached by about 10 federal agencies interested in exploring franchising opportunities.

This is good for VA because the reductions in operational costs at the three centers can be passed on to internal organizations, said Jennifer Duncan, VA’s director of the Franchising Service. It is good for VA’s external customers, as well, because they too will reduce costs through larger volume processing.

VA has hired Andersen Consulting as the contractor to help implement the new systems for federal customers.

Later, VA may handle FERC’s other HR functions and FERC will use other HR LINK$ applications, such as employee and manager self-service.
Pioneering Work of VA Researchers Continues

Arlan Richardson, Ph.D., San Antonio VA Medical Center, at work in his laboratory. Dr. Richardson and his associates are studying aging and age-related diseases.

The Department observed VA Research Week March 28-April 3 with a variety of activities highlighting the work of VA’s more than 7,000 investigators who are working on more than 15,000 active research projects.

Research has been an important element of the VA health-care system since the post-World War II era, when doctors seeking better treatments for tuberculosis conducted the first large-scale clinical trials. In the ensuing decades, major medical advances such as the CAT scan, the cardiac pacemaker, computer-designed prosthetics and liver and kidney transplants have resulted from pioneering work by VA investigators.

Although the VA research program is committed to projects that improve the health care and quality of life of veterans, many of its achievements benefit the general public as well.

Here are a few of the achievements of VA investigators over the last decade.

Prostate Cancer Trial
Collaborating with the National Cancer Institute and the Agency for Health Care Policy and Research, VA is conducting a 15-year study comparing the two most widely used treatments for prostate cancer. The study, which involves 2,000 men, will compare radical prostatectomy (surgical removal of the prostate) to watchful waiting in which only the disease symptoms are treated. The study, known as the Prostate Cancer Intervention Versus Observation Trial (PIVOT), is expected to provide more definitive answers on the best treatment for early-stage prostate cancer.

Cholesterol Screening Guidelines
VA researchers wrote clinical practice guidelines on cholesterol screening for the American College of Physicians. The guidelines consist of seven specific recommendations and supporting evidence for screening.

Improving Arm Movement After Stroke
A rehabilitation technique developed by VA is helping stroke victims regain movement in their arms. This “constrained-induced movement” therapy restricts use of a stroke victim’s unaffected arm, encouraging greater use of the limb affected by the stroke. A number of patients have regained significant movement in their arms without medication or surgery.

Visual Rehabilitation System Using Laser Technology
About 93,000 veterans are legally blind, including a number who suffer from macular degeneration. Rehabilitation for these patients is complicated by the need for clinically reliable assessment techniques. To meet that need, VA researchers are developing a scanning laser ophthalmoscope that is expected to facilitate cost-effective visual rehabilitation for patients with vision-loss problems.

VA also has taken the lead on research into the causes and treatment of health problems reported by Gulf War veterans. The VA National Health Survey, the government’s largest study of the health of Gulf War veterans, has entered its final phase. Physical examinations and clinical testing of veterans and their family members will be conducted at 16 VA medical centers and are expected to be completed by the spring of 2000.
The Winter Sports Clinic has changed my life!” That was the sentiment echoed by many of the more than three hundred disabled veterans gathered in Crested Butte, Colo., March 21-26, for the 13th National Disabled Veterans Winter Sports Clinic. Clearly demonstrating the Clinic’s commitment to “Miracles on a Mountainside,” it’s easy to see why.

A newcomer to this unique ski program might notice an unusual sight if they were to venture out to the resort’s downhill ski staging area. Left at the bottom of the hill is a sea of wheelchairs, artificial limbs, prosthetic devices, walking sticks and guide dogs — only their owners are missing. Most likely they could be found on top of the mountain, conquering fears, regaining confidence and self-esteem, and realizing that their disabilities are actually an opportunity to experience life from a different perspective.

Sponsored by VA and the Disabled American Veterans, the Clinic is open to any U.S. military veteran with just about any type of physical disability or visual impairment. Nearly one-third of this year’s participants had never skied before. Besides cross-country and downhill skiing, participants are introduced to a wide variety of other activities such as kayaking, fly fishing, scuba diving and rock climbing.

Thirteen years after its creation, the Clinic continues as one of the nation’s best rehabilitation opportunities for disabled veterans, enabling them to push their limits beyond what they ever thought was possible. The event is especially meaningful to the first-timers, who arrive in Crested Butte “feeling like a scared jack rabbit,” but leave “soaring like an eagle,” as Navy veteran Charlotte Noddin from Coos Bay, Ore., so aptly put it.

The Clinic allows the novice disabled skiers to realize there is life — and plenty of it — after injury or disease. It is more than just learning to ski — it is about regaining confidence and that competitive spirit. It is about finding out what they still can do as they conquer the mountains. And it is about sharing with each other, and finding out how other veterans have overcome the challenges they’ve faced.

The youngest athlete this year was 19-year-old Tim Lindgren of Tinley Park, Ill. Lindgren, a quadriplegic who was in boot camp just one year ago, was injured in a car accident less than ten months before the event. “Since my accident, the VA Medical Center has been very supportive in getting me back to having an active life,” he said. “As part of my recovery, my therapist suggested coming to the Clinic. I’m glad I came — this is the best experience I’ve had since my accident! It is nice to see that it’s not over... it has just begun!”

Making the Clinic even more memorable for Lindgren and the other veterans was a visit from Tipper Gore, wife of the vice president. On “Race Day,” the final day of the Clinic, Mrs. Gore slid right into the spirit by meeting with — and skiing with — the participants.

Joined by Secretary of Veterans Affairs Togo D. West, Jr., and DAV National Commander Andrew A. Kistler, she handed out medals to the veteran skiers and ate lunch with a group out on the deck. After delivering the keynote speech at the closing ceremony, Mrs. Gore completed her day by making an unscheduled visit to the closing celebration — dancing and taking pictures with the veterans well into the evening.

Like most visitors to the Clinic, Mrs. Gore was deeply moved by the participants’ unfailing display of courage and determination — and the veterans, in turn, enjoyed her charisma, warmth and enthusiasm. “I didn’t know what to expect,” said Clifford McDowell, an Army veteran from Falls Church, Va. “Upon meeting her, I immediately felt her warmth. Her presence was the best salute anyone could give us. We enjoyed having her here — meeting...
When he was first asked to consider accepting an appointment as chairman of the Board of Veterans' Appeals (BVA) last year, Eligah D. Clark admits he didn’t really know much about VA, let alone the board. Besides, he liked the job he already had.

But as a United States Marine Corps officer and prior enlisted Marine, Colonel Clark understood what it meant to be given an unfamiliar and challenging mission. He had spent his entire adult life carrying out just such missions.

This one, however, was different. This was a presidential appointment to an assistant secretary position in charge of an organization he knew little about. It is the closest to heaven a person can be and still be alive! You feel like you can practically touch the sky we’re up so high. More important, the people here generate such an euphoric energy that it makes you feel like you’re in heaven!”

By Ivonne Chaustre

New BVA Chairman Focusing on Improving Timeliness

It is difficult to imagine a better record of talent and experience than Clark brings to his new position. At the time of his appointment in October 1998, Clark was a senior judge of the Navy-Marine Corps Court of Criminal Appeals in Washington, D.C. Before that he had served as a military defense counsel, legal assistance officer, prosecutor, appellate counsel, trial judge, and appellate judge.

He had been Chief Judge of the Western Pacific Judicial Area in Okinawa, Japan, and Chief Military Judge of the Atlantic Judicial Circuit in Washington, D.C., of the Keystone Judicial Circuit in Okinawa, and of the Sierra Judicial Circuit in California.

About his new assignment, Clark says, “I have made it my business to learn as much as possible about not only the board as an institution, but about the people who make it work. I have been very favorably impressed with the dedication and determination that board members, staff attorneys, and support personnel bring to their efforts to fulfill the board’s mission of serving the veterans and their families.”

Those efforts resulted in nearly 39,000 BVA decisions in fiscal year 1998 along with a significant reduction in response time. “More important than the number of decisions produced is the timeliness with which appeals are decided,” says Clark. “We think that by providing quicker, high-quality decisions, in the long run we better serve all the veterans whose claims come before the board.”

Six months after accepting the challenge of serving as chairman of the board, how does Clark view BVA and its mission? “The Board is a servant of both the veteran and of the government. We serve the veteran first,” he says. “Our mission continues to be to provide the highest quality decisions on claims in a timely and efficient manner. By the law, that is our mission. By the needs of our veterans, that is our goal. By our conscience, that is our duty.”

By Willie Alexander

Mrs. Gore’s Message to Clinic Participants

“Thank you for inviting me to your National Disabled Veterans Winter Sports Clinic, where I learned about determination...about the challenge of taking on the mountain...about the miracles that can happen on a mountainside. After what I saw in Colorado, I have no doubt that you can conquer anything!

“In a world of constant change, we know with certainty that today America is free, secure, and prosperous because of your service. I will always be committed to honor and support you, our veterans, who have given so much to preserve our liberty and to advance American interests around the world.

“I feel so very enriched for having participated in your Winter Sports Clinic. You have inspired me with what you have accomplished.”

By Willie Alexander

Renewed hope for a happy and fulfilled life is what the Clinic is all about. Perhaps best said by Dana Liesegang, a Navy veteran from Eugene, Ore., “This Clinic has changed my life forever. It is the closest to heaven a person can be and still be alive! You feel like you can practically touch the sky we’re up so high. More important, the people here generate such an euphoric energy that it makes you feel like you’re in heaven!”

By Ivonne Chaustre
Former POWs

Pittsburgh Program Offers Specialized Care

Jerry Alexis was captured by the Germans in November 1944 while serving as an Army infantryman. The next few months of his life in captivity included walking more than 500 miles on foot and traveling more than 1,000 miles by rail. His nightmare ended on April 29, 1945, when he was released from a POW camp in Moosburg, Germany, just prior to the end of World War II.

More than 40 years later, he was one of the first veterans to enter the Former Prisoners of War (POW) Program at the VA Pittsburgh Healthcare System when the program began in 1987, and he has been an active member ever since.

Today, Alexis is a 74-year-old retired minister who credits the program with improving both the mental and physical conditions of former POWs who are enrolled. The program “builds trust, camaraderie and creates an opportunity for former POWs to be able to open up with each other,” Alexis said. “The only reason I have been able to do so well over the years is because of my care at the VA Pittsburgh Healthcare System. God willing, I will stay involved with the ex-POW group for the rest of my life.”

He also credits the program with saving his life, since it was the physician for the program who diagnosed his blocked coronary arteries. He underwent triple bypass surgery and now enjoys an active life. His busy schedule includes a minimum of eight visits a month to the VA Pittsburgh Healthcare System, where he is involved in group meetings, exercise classes and simply sharing experiences with other former POWs.

Alexis is one of more than 650 veterans who have been evaluated and treated by the former POW program in Pittsburgh. In the last fiscal year alone, the program had contact with more than 420 former POWs. The program functions with a full complement of staff, including a social worker, nurse practitioner, physician, psychiatrist, psychologist and clerical support.

“We consider our clients to be very unique veterans,” said Program Coordinator Rick Canavan. “Not only did they experience combat trauma, but also the additional trauma of becoming a prisoner of war. That catastrophic role change resulted in significant physical and psychological injuries for the surviving former POW. All too often we have heard [them say], ‘no one would believe me…”’

The average age of the veterans who participate in the program is 76, and 95 percent of them were POWs during World War II. Twenty-three members of the group were Korean War POWs. According to Canavan, of the approximately 700 POWs who returned from Vietnam, only one lived in the Pittsburgh area, and he has since relocated to Texas.

The Pittsburgh program offers comprehensive psychiatric and medical care to former POWs in a tri-state area. Supportive group therapy, often with a patient education theme, and individual therapy are available. According to staff members, the group meetings help reduce the sense of social isolation many ex-POWs feel, especially after retirement when they have more time to think about what they have been through.

“Frequently, the former POW would become alienated from other veterans, and would try to cope with their symptoms alone,” said Canavan. “We have found the group format, with its emphasis on mutual support combined with preventive health care topics, to be helpful for many former POWs. The individual counseling is available for POWs who feel more comfortable with this type of therapy.”

Large and small meetings are held with homogenous groups such as Army Air Corps, Army Infantry, Korean Conflict, 106th Division from the Battle of the Bulge and the Bataan Corregidor Survivors.

The program also offers special groups such as the Wives Group, Widowers Support Group and Cancer Support Group. A sleep study lab is used to diagnose and treat chronic sleep disturbances, and veterans who participate in the program receive an annual physical exam and frequent check-ups with a physician or nurse practitioner. A social worker contacts and visits the ex-POWs in their homes if they are unable to make it to the facility for appointments.

Program staff also coordinate activities such as an annual POW Recognition Day ceremony, a holiday party in December and a summer picnic for program participants.

In addition to top management support and a small but dedicated staff, Canavan believes the Pittsburgh program’s success can be attributed to the strong support it receives from local former POW organizations such as the American Defenders of Bataan and Corregidor, the American Ex-POWs and the Korean War Ex-POWs. Those three elements combined, he said, “have created a rather successful mix and enabled the program to thrive.”

By David E. Cowgill
VA Pittsburgh Healthcare System
VA Motto’s Origin Traced to Former Administrator Sumner G. Whittier

Most VA employees know that Abraham Lincoln’s second inaugural address is the source of the quote long used by the Department to illustrate the philosophy behind VA’s mission. But do you know who is responsible for matching VA with Lincoln’s immortal words?

When on March 4, 1865, Abraham Lincoln took the oath of office for the second time, the nation was in the last throes of the Civil War.

In the conclusion of his second inaugural address, Lincoln said:

“With malice toward none; with charity for all; with firmness in the right, as God gives us to see the right, let us strive on to finish the work we are in; to bind up the Nation’s wounds; to care for him who shall have borne the battle and for his widow, and his orphan.”

That paragraph sums up the philosophy that has guided Veterans Affairs, as well as its functional and organizational forerunners in dealing with veterans, especially those disabled.

A part of that address adorns metal plaques on either side of the Vermont Avenue doors to VA Central Office in Washington, D.C. “To care for him who shall have borne the battle, and for his widow, and his orphan,” became the motto of VA in May 1959, when the plaques were first put up.

How was VA matched with Lincoln’s immortal words? By the direction of an Administrator of the Veterans Administration, Sumner G. Whittier.

The following was recorded in the 1967 edition of a VA medical history printed for the use of the Committee on Veterans’ Affairs, which was entitled, “To care for him who shall have borne the battle”:

“He worked no employee longer or harder than himself to make his personal credo the mission of the agency. What was that credo? Simply the words of Abraham Lincoln, ‘to care for him who shall have borne the battle, and for his widow, and his orphan.’ To indicate the mission of his agency’s employees, Mr. Whittier had plaques installed on either side of the main entrance.”

Mr. Whittier, who served as Administrator from December 1957 to January 1961, was a veteran of World War II. He served in the Navy for three years and was discharged as a lieutenant. He had held a number of public service positions from the age of 27, finally serving as lieutenant governor of Massachusetts from 1953 to 1956. He joined the Veterans Administration as Director of Insurance in January 1957, and in December of that year was appointed Administrator.

By Bonner Day

Take Stock in America With U.S. Savings Bonds

This year’s Federal Savings Bonds Campaign runs May 1-31. Secretary Togo D. West, Jr., is chair of VA’s campaign, with Board of Veterans’ Appeals Chairman Eligah D. Clark serving as vice chair.

A volunteer canvasser will contact you soon about purchasing Bonds through the payroll savings plan.

Bonds offer a safe vehicle for investment, tax advantages and market-based interest rates from the date of purchase.

Want to Know What Your Bonds Are Worth?

Check out the Savings Bond Wizard at www.savingsbond.gov. This Windows program will calculate the value of your savings bonds and record and inventory them. You may also want to download the “Earnings Report” from the website at the above address for your bond values.

For a recorded message of current rate information, call 1-800-4US-BOND

By Bonner Day
VA Central Office employees, veterans service organization representatives and other friends of the Department crowded into Room 230 on March 17 to mark the 10th anniversary of VA’s elevation to cabinet status. Former Congressman G.V. “Sonny” Montgomery, who was instrumental in getting the cabinet legislation passed, joined Secretary Togo D. West, Jr., at the podium for remarks (above left and right). Below left, Montgomery and Secretary West prepare to cut the cake; below right, celebrants test their knowledge of the Department by participating in a VA trivia contest.

Photos by Michael Moore and Emerson Sanders
VA Researcher to Lead Studies on Positive Effects of Exercise on Arthritis

A five-year, $4 million grant from the Department of Education will allow VA Investigator Dr. Jerry Parker to lead new studies on the role of exercise in treating arthritis, on managing psychological effects of the disease and on providing information to the public through the media. Dr. Parker is director of Mental Health Services at the Columbia, Mo., VA Medical Center and chief researcher at the Missouri Arthritis Rehabilitation Research and Training Center of the University of Missouri.

Although arthritis patients were previously advised to rest and avoid most movements, Dr. Parker has found that exercising and maintaining aerobic fitness is very helpful to arthritis sufferers. The grant will be used to conduct studies, train doctors and provide information to patients. Many of the patients who are served by the center are veterans who are treated at the VAMC’s clinics.

Minneapolis VAMC Researchers Identify New Area of Brain Involved in Thinking

Researchers at the Minneapolis VA Medical Center reported in a recent issue of Science that they have identified a new area of the brain that takes part in the thinking process — the motor cortex, an area scientists previously believed was limited to controlling voluntary movements. They believe the finding is an important step in the quest to understand how the brain’s higher functions work, and perhaps ultimately identify new approaches to brain disorders such as cognitive problems.

“We were surprised to find that the motor cortex isn’t just a slave to carrying out movements, but is involved in planning those movements as well,” said study leader Apostolos P. Georgopoulos, M.D., Ph.D., director of the Minneapolis VA Medical Center’s Brain Sciences Center.

Georgopoulos and colleagues taught monkeys a “serial order” task and rewarded the animals with snacks for making the right decisions. As the animals performed these tasks, the researchers monitored activity of their brain cells and were surprised to find a very strong signal from motor cortex cells.

“The motor cortex clearly was involved in this process and not just the movement,” said Georgopoulos, who holds an American Legion Brain Sciences Chair and is professor of neuroscience at the University of Minnesota.

The researchers focused their study on the motor cortex because they have long believed that certain parts of the brain may be involved in far more complex functions than currently known, and they previously found some evidence of complex operations in the motor cortex.

New Hope for Patients with Spinal Cord Injuries

Patients with spinal cord injuries are re-training their spinal cord reflexes to gain function in a pilot training program called Supported Treadmill Ambulation Training (STAT) at the Center of Excellence on Healthy Aging with Disabilities at the Houston VA Medical Center.

The new program offers hope to veterans who have some motor function below the level of the spinal cord injury. Researchers have known that damaged spinal cords retain some residual function.

Training involves using a treadmill, with parallel bars supporting some of the patient’s weight and providing balance, allowing the patient to concentrate on the walking function. Over the course of the therapy, the parallel bars are adjusted to support less weight.

Three veterans are participating in the pilot project. After 11 years in a wheelchair, one of them is now wearing braces and practicing with a walker and crutches. Another has improved so much that he has returned to work, and the third is exercising at home because he no longer needs a therapist to assist him. A new group will start training in the near future.

Albuquerque VAMC Researchers Find Incidence of Liver Cancer on Rise in U.S.

Researchers from the Albuquerque, N.M., VA Medical Center found that liver cancer is on the rise in the United States, having increased by 71 percent from the mid-1970s to the mid-1990s.

Since a large percentage of liver tumors can be attributed to hepatitis B and C, the number of liver cancer cases is expected to increase until those infections are brought under control. Nearly 4 million Americans are believed to be infected with hepatitis C, but because symptoms usually do not appear for many years, the exact number of cases is unknown.

Although alcoholism is another major cause of liver cancer, the incidence of alcoholism is declining, the researchers reported in a recent New England Journal of Medicine. An estimated 14,500 Americans are expected to develop hepatocellular carcinoma, the most common form of liver cancer, this year. Only 5 percent are expected to survive for five years.
Major League Baseball Umpire Jerry Layne recently visited patients at the Charleston, S.C., VA Medical Center. As a member of the Disabled American Veterans’ volunteer team, Layne visits VA medical centers in National League cities in his free time during baseball season and volunteers in the off-season. “I want to bring smiles and brighter days to veterans who have given so much to our country,” Layne said. “I want them to know that they are appreciated. Brightening their lives with a friendly visit is a very small token in return for what they have given us.”

The Chicago VA Regional Office has been reaching out to former POWs in Illinois for the past seven months through informational benefits forums tailored to them. So far, more than 195 former POWs, along with their family members, have taken advantage of the opportunity to obtain information on such topics as state benefits for former POWs, VA medical care eligibility and special POW programs at medical centers in the area. In addition, 45 claims have been taken and 85 hospital cards have been issued as a result of this initiative.

The 10-year-old Court of Veterans Appeals, responsible for hearing appeals of VA benefit denials, has been renamed. Effective March 1, the United States Court of Veterans Appeals is now known as the United States Court of Appeals for Veterans Claims. The duties and responsibilities of the court remain unchanged. Chief Judge Frank Nebeker had sought the name change to reduce confusion resulting from the similarity between the court’s original name and that of VA’s Board of Veterans’ Appeals, whose decisions the court reviews. The renaming is intended to better indicate that the court is wholly independent of the Department.

A simple bet has changed the lives of Nashville VAMC employees Troy and Cathie Johnson. Troy, acting chief of Supply Processing and Distribution, and Cathie, a programming support assistant in Prosthetic and Sensory Aids Service, used to smoke up to three packs of cigarettes a day each. Troy made a bet with friends that he could quit, and Cathie decided to join him. In a bid to get even healthier, the couple took up running for exercise and soon began participating in marathons. They have now set a goal of running 50 marathons in 50 states and are well on their way — to date, they have completed 16 marathons in 15 months.

Ron Ridgeway, field examiner and homeless veterans coordinator at the Houston VA Regional Office, will be featured in a program on prisoners of war (POWs) from the Vietnam era to be broadcast on the Learning Channel on May 31. Ridgeway was an 18-year-old Marine when he was captured by the North Vietnamese, and was held for more than five years. He was the sole survivor of an attack on his unit, and lay wounded and bleeding for a day before he was discovered. He was listed as “killed in action,” and funeral services were held for him and eight other members of the patrol about a year after his reported death. The program features interviews with Ridgeway and other former POWs about their experiences while in captivity and their lives today.

Little Rock, Ark., VA Regional Office Director Fred H. King was honored by the State of Arkansas House of Representatives recently when a resolution was passed recognizing his military service and notable accomplishments during his 25-year VA career. Passage of the resolution, which was proposed by State Representative Sandra Rodgers, was followed by a standing ovation in King’s honor.

The Veterans Benefits Administration’s high-tech satellite video training network reaches beyond VA employees. VA Loan Guaranty Service has scheduled four interactive televised training broadcasts for home mortgage lenders across the country. Participants will have the opportunity to ask questions during the broadcasts, which can be viewed at any VA Regional Office. Each video seminar focuses on a specific group of commercial lender employees involved in the VA home loan process.

Working with small businesses, the National Cemetery Administration is saving money and speeding service in making second inscriptions on headstones. Second inscriptions are needed when a second interment is made in the same grave. Prior to the change, all headstones had to be replaced when a second interment was made. Under the new program of working with small businesses, second inscriptions are added on the site. The program has generated revenue of more than $1 million for small businesses and saved VA nearly $1.5 million in replacement costs.
Rudolf H. Moos, Ph.D., of the Palo Alto, Calif., Health Care System, is the first recipient of the Under Secretary’s Award for Outstanding Achievement in Health Services Research. As director of the Health Services Research & Development (HSR&D) Center for Health Care Evaluation, Moos has focused on improving the lives of people affected by substance abuse and psychiatric disorders. The Under Secretary’s Award was established to honor the highest level of achievement and to recognize the importance of health services research in the health care of veterans and the general population.

Deputy Secretary Hershel Gober is this year’s recipient of the AMVETS Silver Helmet Civil Servant of the Year Award. The AMVETS Silver Helmet Awards have been presented for more than 40 years to both public figures and private citizens to recognize outstanding accomplishments in various fields.

The Washington, D.C., VAMC has been named one of the most wired hospitals and health systems in the country by Hospitals & Health Networks magazine. The medical center provides online information for patients on a variety of diseases including cancer, arthritis, asthma, hypertension and depression. Medical personnel have online access to clinical information functions such as accessing patient records, and ordering and reviewing the results of lab work. They also can review and make entries in medical records online.

Dr. Alan E. Mast, staff physician at the Memphis, Tenn., VAMC, and Dr. Richard N. Pierson, III, staff surgeon at the Nashville VAMC, were recent recipients of Presidential Early Career Awards for Scientists and Engineers. Mast is studying the basic biomechanisms of proteins that regulate blood clotting, while Pierson’s research is aimed at developing improved strategies to prevent rejection of transplanted organs.

The Bronx, N.Y., VAMC’s Primary Care Rapid Response Team was honored by Under Secretary for Health Dr. Kenneth Kizer for a patient safety initiative. A pharmaceutical company issued a warning that a medication used to treat diabetes mellitus had a potentially serious side effect in patients who also had congestive heart failure. The team developed a process for identifying and assessing affected patients, and then developed an appropriate course of action with their respective physicians.

Diane M. Breaux, an advanced practice nurse in the Primary Care Clinic at the Central Arkansas Veterans Healthcare System in Little Rock, was named Advanced Practice Nurse of the Year by the Arkansas Nurses Association. Breaux is considered a pioneer in the field of advanced practice nursing in Arkansas. She was one of the first to pass the national certification exam for advanced practice nurses and to receive authorization to write prescriptions for patients.

Jerry L. Satterwhite, of the Birmingham, Ala., VAMC, was selected VA Social Worker of the Year for 1998. The award, which recognizes exemplary skill in the delivery of administrative expertise and clinical care to patients and their families, was presented to Satterwhite at the Uniformed Services Social Work Conference in San Diego.

The Washington University School of Medicine named Dr. Scot G. Hickman, St. Louis VAMC physician, Professor of the Year 2000. The award recognizes his work with medical students, his dedication to medical excellence and his commitment to developing and delivering outstanding health care.

Gerald F. DiBona, M.D., chief of Medical Service at the Iowa City VA Medical Center and a world-renowned expert in renal and cardiovascular medicine, is president-elect of the American Physiological Society. He will take office this month at the society’s annual meeting, serve as president-elect until 2000, serve one year as president, and then one year as past-president.

Lawrence S. Dolecki, Ph.D., chief of Psychology Service at the Martinsburg, W.V., VA Medical Center, was recently appointed by West Virginia Governor Cecil Underwood to a three-year term as a member of the state Rehabilitation Council. The council’s responsibilities include helping the state’s Division of Rehabilitation Services develop goals and priorities, and evaluating the effectiveness of the state’s rehabilitation program. Dr. Dolecki also was appointed treasurer of the West Virginia Traumatic Brain and Spinal Cord Injury Rehabilitation Fund Board, which identifies needs and coordinates services for state residents with these disabilities.

Mike Walsh, chief of Medical Administration Service at the Nashville, Tenn., VAMC, received the Federal Excellence in Managed Care Award from the American College of Healthcare Executives. Walsh was honored for his work with the Service Transition Examination Program (STEP), at Fort Campbell, Ky., which assesses active duty men and women for compensation eligibility prior to discharge.
While performing his regular duties as the community service officer for Police and Safety at the North Chicago VAMC, Austin Staunton saw a family having a dispute. After calming the family members, Staunton escorted them to a building on the campus. When they arrived in the parking lot, the veteran began having a seizure. Staunton quickly placed the veteran’s head back, preventing him from choking, and called for a medical team. When the team arrived, they took over the veteran’s care, and the VA police transported the patient for further treatment.

By all accounts, Adam Nekoranik was very proud of his service to his country, and he was particularly proud to have been awarded a POW medal. He had been captured by the Germans at Ardennes during World War II. Nekoranik wore his medal everywhere he went, and when he became seriously ill, his dying request to his family was that his medal be buried with him.

Nekoranik passed away recently, and while making arrangements for his funeral, his wife discovered that the POW medal was missing. She called the Philadelphia VA Regional Office and Insurance Center (VARO&IC) to find out if anything could be done to help. The burial was scheduled to take place the following day.

A team of VARO&IC employees began working on what seemed an impossible task. Benefits Counselor Chris Hutchins drove to Nekoranik’s brother’s house to obtain the needed paperwork for the Department of Defense (DoD) to issue the medal (the veteran had never filed for VA benefits).

When Hutchins brought the paperwork back to the VARO&IC, Congressional Liaison Diane Rivera convinced DoD to accept faxed paperwork and to have the medal engraved at the Defense Logistics office in Philadelphia within one day. Benefits Counselor Dewitt Mathis then drove to the Defense Logistics office to pick up the medal, and Hutchins delivered it to the family that evening. Family members expressed their gratitude to the Philadelphia VARO&IC employees who went beyond the call of duty to help them honor the veteran’s dying wish.

Martha Smith, a nurse at the San Francisco VAMC, spends her vacation time working with a team of medical professionals in Nuevo Progreso, a remote village in Guatemala, stocking and running operating rooms at the Hospital de la Familia Medical Center. Although the operating conditions are primitive by modern standards, Smith and her team perform a wide variety of surgical procedures during intense 12-hour days. Smith has assisted primarily on cataract surgery, giving both young and old Guatemalans the opportunity to see again and lead more independent lives.

Karina V. Courtmanche, a nurse in the Outpatient Psychiatric Clinic at the West Haven, Conn., VAMC, recently saved the life of a fellow nurse who began choking while eating lunch in her office. Fearing she would pass out and no one would notice her absence until after lunch, the choking victim walked out into the hall in search of assistance. Courtmanche noticed her co-worker gasping and asked if she was choking. When the nurse nodded, Courtmanche performed the Heimlich maneuver, clearing the blocked airway.

Dan Knight, a temporary electrician working at the Dublin, Ga., VAMC, was tracing pipe in the attic of one of the facility’s buildings when he found a wallet stuck between two rafters. The wallet looked like it had been there for quite some time. There was no money in it, but there were several personal photos, notes, old stamps, a Navy identification card, and even an unused ticket for an April 22, 1945 baseball game at Boston’s Fenway Park.

Knight immediately began searching for the owner, and eventually tracked down his son in Ohio. The son excitedly recited his father’s military service number, which matched the number on the Navy I.D. found in the wallet. The son told Knight that his father died fifteen years ago, which made the discovery of the wallet even more meaningful. Since the Dublin VAMC was a Navy hospital in 1945, it is believed that the wallet owner was either a patient there or was assigned to the Medical Corps.

Janice Falk, recreation therapist at the Lebanon, Pa., VA Medical Center, was participating with co-workers in a Bike-a-thon sponsored by the local chapter of the American Heart Association when another member of the VAMC team informed her that a rider in the event appeared to be having a heart attack. She immediately began chest compressions and continued until the ambulance crew arrived. She remained on the scene assisting the EMTs until the man was transported to the hospital. He later underwent a successful bypass operation.

Lillette Turner’s quick thinking averted a potential tragedy in VACO’s Office of Resolution Management. A co-worker was eating her lunch when she began choking. Turner, an EEO specialist, quickly performed the Heimlich maneuver.

While driving a group of day treatment patients home, Columbus, Ohio, VA Outpatient Clinic employees Dale Hamilton and Dave Grabosky passed a house with smoke billowing out. The family in the house had dropped an infant while trying to escape, and the father had gone back inside to rescue it. Hamilton, from Medical Administration Service, and Grabosky, from Mental Health and Behavioral Sciences Service, called the fire department and helped the father rescue the child.