My Name is Bob and I CARE.
Dear Secretary McDonald,

I am writing this letter to express my deep appreciation for the care I received at the VA Palo Alto Health Care System (VAPAHCS). Every individual that I encountered treated me with the utmost respect and care. I feel compelled to submit these words of praise during this especially trying time for the Veterans Health Administration so that you understand that you are inheriting an organization that includes many fine professionals who take to heart their mission to care for our nation’s Veterans.

Prior to visiting my family in Los Altos, California, I scheduled various doctors’ appointments with the VAPAHCS. My first appointment was with the Audiology Clinic on Aug. 7, where I informed the team that I was having difficulty hearing, particularly with my right ear. A hearing test revealed that I may need a hearing aid. Upon further examination, it was noted that my ears were clogged with wax. I was advised to utilize a wax softener and have my ears flushed after I returned home to New Jersey.

After visiting the Audiology Clinic, I proceeded to my next appointment with Dr. James Kahn in General Medicine. After introductions, Dr. Kahn asked me, “What can we do for you?” I have never had a physician ask me this question before. I told him that I was having pain in my amputated leg and would like a prescription for pain medicine and muscle relaxers. Dr. Kahn then performed a thorough examination. He discovered that I had a skin infection on the stump of my amputated right leg. I was given specific instructions for treatment. I was told that the skin of my stump should look like all of my skin. My stump has been red, cracked and dry, off and on for some time. While it may seem obvious, I had never been given a comparable level of detailed advice on stump skin care in the nearly five decades since my injury during the Vietnam War.

In addition, since I was now staying another week, Audiology fit me into their schedule to have my ears flushed. Not only did they fit me in; they were more than accommodating when I asked to change the original appointment, due to a conflict with the prosthetic specialist. It took two visits and a lot of patience on the part of the nurse, but the end result is that I can now hear.

On Aug. 11, I went to see Wade Skardoutos, CPO, Prosthetics Solutions, per the RAC team. Prior to taking a mold of my stump, he examined the skin. He reinforced what Dr. Kahn had told me regarding skin care for the infection. He also took time to discuss the importance of a properly fitted prosthetic to decrease the incidence of infection. He explained that if the prosthetic did not fit properly, that fluid could pool at the bottom of the stump and eventually ooze. This moisture helps to create a perfect environment for bacteria to grow.

As a proud Veteran and an active member of the Veterans of Foreign Wars, I would like to express my gratitude for the tremendous care given to me by the staff at the VAPAHCS. While I am sure you will encounter many VAs across the country that offer fantastic service, I would submit that the VAPAHCS should be the “standard” for Veteran care.

As a member of the VFW, I wish you well in your new role, leading this important organization. Please know that you have a tremendous care given to me by the staff at the VAPAHCS. While I am sure you will encounter many VAs across the country that offer fantastic service, I would submit that the VAPAHCS should be the “standard” for Veteran care.

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Sincerely,

Earl Courter Jr.
Quartermaster, Department of New Jersey VFW
Since his confirmation in August, Secretary Bob McDonald has traveled the country to speak with Veterans and VA employees. He’s hit the ground running, and although his schedule is packed with VA facility visits and employee town halls, the eighth Secretary of Veterans Affairs took time for a one-on-one Q&A.

Reynaldo Leal, VA Public Affairs Specialist: Thank you. I guess we will start off with what does being Secretary of Veterans Affairs mean to you?

Secretary of Veterans Affairs Robert (Bob) McDonald: Well, as I said during my confirmation hearing, to me, being Secretary of Veteran’s Affairs, is the ultimate in the high calling to care for the veterans who have served this country, in a sense, the one percent who have worked and defended the 100 percent. To be in a leadership position to be able to make a difference, to accomplish our mission, to serve them is the ultimate in a high calling. It is, in many ways, the culmination of my life.

After 33 years at Procter and Gamble and nine years in the military, four years of West Point, five years as an officer in the Army, it is the opportunity to take everything I have learned in all the countries of the world I have lived in and apply it here to help the U.S. Government, to help America’s veterans. So, it is a great capstone to whatever career or life I have had to date.

Leal: How does your military experience from West Point, Rangers and Airborne training, how does that inform what you do at VA?

Secretary McDonald: I think the fact that four years of West Point, five years in the military, primarily in the 82nd Division, as an Airborne Ranger and Officer, gives me empathy for the customers, the veterans that we are trying to serve. While I never did serve in combat, my service did involve going to the Arctic Circle, going to Jungle Warfare School in Panama, jumping all these different places, injuries from those jumps. And so, I hope it gives me empathy for the people that I am trying to serve and, hopefully, some credibility with that population that I have at least been part of the way there during my time.

Leal: You talk about having that empathy. Do you ever think about the soldiers that you served with and sort of now being charged with perhaps even taking care of them?

Secretary McDonald: Well, I think about the soldiers that I have served with, and some of the things that changed your life. And one of the things you go through these cathartic experiences together, it changes your life. And one of the things I used to teach the leaders of Procter and Gamble, I would say I can teach you all of the behaviors which, when observed from afar, somebody would label them as leadership. The one behavior, the one need I can’t teach you as a leader, necessarily, is the need to love the people you work with.

One of the things you learn in the military like no other place, because of the in extreme situations you are in, is to love the people you are working with.

I think back to Sergeant Schraeder, who was with me in the Arctic and because of the cold weather, one of our 4.2-inch mortar tubes blew up and a piece of the base cap hit him in the abdomen. We had to medivac him out.

I think about PFC Light, who was my driver and radio/telephone operator in the 82nd Airborne Division and the number of jumps we would go on together. The bonds that you form just last a lifetime.

I think about Sergeant Cuff, who was a squad leader. I think about Sergeant Turner who ran the Fire Direction Center for our 4.2-inch mortar platoon.

I remember the day that I jumped into a drop zone in the 82nd Airborne Division at Fort Bragg and my battalion commander, Dave Harris, came and picked me up on the drop zone in a Jeep. He said, “Throw your parachute in the Jeep. We went to a firing range. We got to the firing range. He fired the platoon leader who was running the 4.2 inch mortar platoon. We had just finished last in the division on our readiness test. And he said, Lieutenant McDonald, a year from now I want this platoon to be one of the best in the division. These are life-changing experiences. And I am happy to report that a year later we were the second best in the division.

Unfortunately, we missed first best by a little bit.

Leal: We call you sir, we call you Secretary McDonald and you like being called by your first name. Why is that important?

Secretary McDonald: Well, I joke with folks that I was named Bob when I was born. I am Bob, now as Secretary. And I will be Bob after I am done being Secretary. But while that sounds more of a joke or a little bit trite, there is a really a serious purpose behind it.

I think one of the things that we have got to do as an organization is we have got to get better communications.
Strategic Plan Outlines VA’s top Priorities

VA’s Strategic Plan incorporates VA’s three top priority goals, which are to improve Veteran access to VA benefits and services, eliminate the disability claims backlog and eliminate Veteran homelessness.

The Strategic Plan also outlines longer-term goals and objectives that place a strong emphasis on defining success by Veteran outcomes; enhancing the quality of and access to benefits and services through integration within VA and with our partners; and developing our workforce with the skills, tools, and leadership to meet our clients’ needs and expectations.

The three Strategic Goals are:

- Empower Veterans to Improve Their Well-being
- Enhance and Develop Trusted Partnerships
- Manage and Improve VA Operations to Deliver Seamless and Integrated Support

The Strategic Plan puts an emphasis on putting the Veteran in control of how, when, and where they wish to be served. And it continues to transform VA into a 21st century organization to better serve our clients.

In addition, the Strategic Plan also highlights the VA Core Values and Characteristics. VA’s five core values underscore the obligations inherent in VA’s mission: Integrity, Commitment, Advocacy, Respect, and Excellence. The core values define “who we are,” our culture, and how we care for Veterans and eligible beneficiaries.

Our values are more than just words—they affect outcomes in our daily interactions with Veterans and eligible beneficiaries and with each other.

Taking the first letter of each word—Integrity, Commitment, Advocacy, Respect, Excellence—creates a powerful acronym, “I CARE,” that reminds each VA employee of the importance of their role in this Department.

These core values come together as five promises we make as individuals and as an organization to those we serve. VA’s core characteristics define “what we stand for,” and help guide how we will perform our mission.

VA’s most recent FY2014-2020 Strategic Plan is available online at www.va.gov/performance.

One of the first things Luke Ticknor does when he gets to work is log into ForumForUs to share his team news articles that touch on the work they do. Ticknor, Senior Collaboration Strategist at the Veterans Benefits Administration, is part of a growing group of employees at the U.S. Department of Veterans Affairs (VA) who use the online work platform to share information, work together, and learn from one another.

ForumForUs was recently recognized with a second place award in the Innovations category in the 2014 Veterans Health Administration (VHA) Communications Award contest.

ForumForUs allows powerful collaboration among VA staff, contractors, and external partners, such as the Department of Defense (DoD), as well as academic and industry colleagues. By combining social networking tools similar to those found on LinkedIn, Facebook, and Twitter, ForumForUs provides an easy-to-use, online space where people from all disciplines and geographic areas can meet, work, and share.

Bob McDonald

The Secretary said ...

“Strategic Plan: Our Strategic Plan says it plainly: ‘VA is a customer-service organization. We serve Veterans.’ And it’s by how well we serve them that Veterans ultimately decide our value as an organization. The truth of the matter is that we’ve failed in a number of ways. We need to do better. Much better.

Right now, it’s up to the Department to reaffirm its worth and regain Veterans’ trust. Over the past months, we’ve been forced to take a hard look at ourselves through their eyes, and through their experiences—good, bad and indifferent.

I think one of the lessons learned is that, if we are to be truly Veteran-focused, we need to continuously measure our performance—not just when things go wrong, but also when things go right. It’s a 24-hour, 7-days-a-week, 365-days-a-year job. And that’s what we intend to do.

From here on out, we want Veterans to know that when they walk through VA doors, employees are “all in” when it comes to meeting our mission: “living” our values…and keeping Veterans first and foremost in all that they do. Without that, there can be no trust.

I CARE: ‘On my first day as Secretary, I asked all VA employees to join me in reaffirming our commitment to these core values. And I’ve directed VA leaders to do the same with the people who work for them.

As we tackle VA’s specific problems, our values help cultivate a climate where everyone understands what the right thing is—and then does it. Said another way, VA’s way of doing business must conform to how we expect employees to treat Veterans…and how we expect employees to treat one another.

Those expectations extend to how people behave on-the-job, as well as how they behave when they think no one is looking.”

MOLLY MANION

within our own workgroups, we may not be aware of similar work taking place elsewhere in VA,” says Manion. “By having a rich diversity of workgroups present on the same site, we can benefit from other perspectives and forge new professional networks that may have otherwise not have been possible, given that VA is such a large, complex organization.”

Molly Manion

Building a platform for collaboration

Molly Manion, the lead for Health Informatics Community Development in the VHA Office of Informatics and Analytics, is always looking for new, creative ways to expand and connect VA’s communities of health informatics professionals. “We often get so focused on the work being accomplished...”

See Forum on Page 25
By Susan Fishbein

It’s a pretty typical Tuesday morning at the VA Greater Los Angeles Healthcare System’s (GLAHCS’s) West Los Angeles campus, right up until a petite, dark-haired woman named Victoria Netanel walks her 150-lb. miniature horse, Pearl, through the sliding glass entrance into the hospital. As Veterans and employees turn to look, it only takes a few seconds to see their curiosity turn to smiles. Pearl appears to be smiling too, while being cool, calm and collected, as if she owns the place.

Victoria and Pearl begin their visit by checking into the volunteer office to register. Today is Pearl’s turn to visit, but Victoria has two other mini horses (Willow and Belle) that volunteer at the hospital as well. She signs in, and then it’s down the hall and into the elevators where the surprised and dumbstruck riders make room for the pair. A voice from the back asks, “Is that Pearl?” Victoria smiles as this scenario is often repeated throughout the day. It seems everyone knows Pearl, from housekeepers and police, to nurses, doctors and patients.

The next stop is an office on the second floor, where the pair meet up with Sether (Sett) Hills, MS, CTRS, RTC, the recreation therapist who accompanies them through the short-term rehabilitation and psychiatric wards. Hills also gathers up Pearl’s toys—a keyboard and a plastic, squeaky chicken—along with a clipboard containing the list of patients to be visited that day. They aren’t even in the ward yet, when the list of patients to be visited that day, can get sensory stimulation in rehabilitation and psychiatric wards. Hills also gathers up Pearl’s toys—a keyboard and a plastic, squeaky chicken—along with a clipboard containing the list of patients to be visited that day. They aren’t even in the ward yet, when the list of patients to be visited that day, can get sensory stimulation in rehabilitation and psychiatric wards.

Pearl gingerly walks behind Victoria, as she peaks into each room introducing them to Pearl, letting them pet the animal’s soft hide and head. Victoria’s hand signals lead Pearl to perform tricks for them. Even for the most immobilized Veterans on the ward, you can see the impact of the visit on their faces. With inexhaustible energy, Victoria, Pearl and Hills make their rounds throughout the entire wing.

Later, they enter a locked psychiatric ward, where the animals help get the patients to connect and interact. Here, they become more relaxed while Victoria talks about Pearl’s training and lets them pet and touch her. They also love watching Pearl rear up on command, play the keyboard, smile and nuzzle her.

While it’s fun to have the horses visit, it’s a serious and well documented fact that animals really contribute to a patient’s recovery and help many others with depression. “They (horse pet therapy visits) have clinical value,” said Trisha Larimer, an RN at the GLAHCS. “It has a calming effect on patients…and is effective in pain management and anxiety. It also brightens the staff’s day, too!”

From a rehabilitative therapist’s point of view, the visits can positively impact patients’ issues with dexterity and numbness. “The opportunity to touch an animal is a ‘normal’ function that allows patients to work on their fine motor skills,” explains Hills. “They can get sensory stimulation in more of an everyday way.” To the naked eye, it might just look like petting a horse. But for someone with numbness in their hands, it can be vital exercise. Hills added, “The emotional and psychological pleasure allows the patients to relax even more than in a formal therapy setting and sustain the activity longer.”

As a former competitive dressage horsewoman, Victoria has been visiting weekly with Pearl, for five years with no complaints. She now brings Willow and Belle, as well.

Over the years, Victoria and her three pet-therapy mini horses have touched a lot of Veterans’ (and employees’) hearts. “Even a couple of years after their stay in the hospital, Veterans come up to me and thank me for bringing Pearl, because it helped recovery.”
"I love it up here. There’s so much to learn. I can see why people keeping coming back.”

— a VA Eastern Blind Rehab Center patient
Army Veteran Larry Opitz spends time with his favorite horse, Kris, at Strongwater Farm in Tewksbury, Mass.

A horse is a horse, of course, of course.

Except, perhaps, when he’s also your therapist

“Interaction with an animal just makes you feel more relaxed,” said Joe Grimard, a recreational therapist at the Edith Nourse Rogers Memorial Veterans Hospital in Bedford, Massachusetts. “You’re connecting with an animal, a living thing, and that’s all you’re focused on. You’re no longer focusing on yourself, or your problems.”

Each week, Grimard drives four to six Veterans to nearby Strongwater Farm, where they get to ride horses for free. Veterans’ families are also welcome.

“These guys are in the 90-day treatment program at our domiciliary,” said Grimard, a Navy Veteran. “It’s their job to get these guys back out into the community, doing healthy things,” he added. “They need to know they have alternatives to the lifestyles that landed them in trouble before.”

Grimard said the whole idea is to provide Veterans with relaxing, positive experiences.

“A lot of these guys have anxiety,” he said. “They have traumatic memories, so we want them creating new, pleasant memories to replace the not-so-pleasant ones. This is a peaceful place. When I bring them out here, I don’t tell them I’m taking them to therapy. I just tell them, ‘I’m bringing you out here so you can enjoy life a little.’

“Once they get around a horse, they start to loosen up,” he continued. “You can see them begin to relax. You can see their self-esteem and their confidence building. Gradually you can see them becoming the person they were before all that stuff happened to them.”

Grimard said he’s seeing an increasing number of younger Veterans of Iraq and Afghanistan interested in visiting the farm.

“They’re very physical, very enthusiastic,” he said. “They just jump right on the horse without a second thought. It doesn’t matter whether you’re dealing with post-traumatic stress, addiction or family problems; coming out here is just a fun, cool thing to do. Some of the guys, they’ll come out with a bag of apples,” Grimard said. “They want to feed the horses; so a staff member teaches them how to feed an apple to a horse without losing any fingers. And if they don’t want to ride, they can sit in the sun, or talk to the staff out here. The staff is really friendly. They’ll teach you how to approach your horse, how to brush your horse down, where to stand and where not to stand when you’re near the horse.”

“Riding was the best part for me,” she observed. “I find it relaxing, because I’m focused on my horse. You’re doing nothing but being with that animal.”

“Sometimes I won’t even ride,” said Army Veteran Larry Opitz, another recent graduate of Bedford VA’s residential treatment program.

“Sometimes I just like walking … through the pastures. You can do a little soul searching.”

Opitz still goes to Strongwater Farm every Wednesday to help out, and wants other Veterans at Bedford to find the same sense of peace he feels when he’s grooming his favorite horse (a big Belgian-Quarter Horse cross named Kris), walking through a quiet pasture, or in the sun, watching other Veterans ride.

“It’s about getting these guys back out into life,” he said. “A lot of these guys haven’t been on a horse … ever. But now, they tell me they can’t wait to go back.”

In an effort to pay it forward, Opitz said he hopes to somehow raise the $500,000 that Strongwater Farm needs to build a much needed indoor riding arena.

“That way the Veterans can come here year-round, even when it’s raining,” he said.
56th U.S. Colored Troops Group Burial Marker Dedicated

By Kristen Parker

Jefferson Barracks National Cemetery in St. Louis was the site of a dedication ceremony for the 56th U.S. Colored Troops group burial marker, Aug. 15. The marker lists the names of the soldiers who died of cholera in 1866, and were either reinterred at JBNC in 1939, in a group section (118 soldiers), or were presumed to be buried along the banks of the Mississippi River and were unrecoverable (55 soldiers).

It is a result of a collaborative effort between the National Cemetery Administration (NCA) and the St. Louis African American History and Genealogy Society, to ensure these Veterans are honored with a lasting tribute that commemorates their service.

The 56th U.S. Colored Troops had 179 soldiers die of cholera in Missouri in 1866. A group of these soldiers are buried in Section 57 of JBNC (118). They were previously interred at Koch Hospital until 1939, when a citizens’ commission approached the U.S. Army Office of the Quartermaster General to move them to JBNC.

There are 55 soldiers who are presumed to be buried along the banks of the Mississippi River. The newest burial marker is for these 173 soldiers. The remaining soldiers are buried in individually marked graves, five in Section 22 at JBNC and one officer in Bellefontaine Cemetery in St. Louis.

The St. Louis African American History and Genealogy Society and the Jefferson Barracks Chapel Association began efforts in 2012 to establish a better way of remembering these soldiers. NCA has maintained an obelisk honoring the history of those 56th U.S. Colored Troops who were moved from Koch hospital since 1939. Now the group burial marker will be maintained as a tribute to their service.

The 56th U.S. Colored Troops were originally established in St. Louis. Its members contracted cholera during an 1866 journey from Helena, Arkansas to Missouri. Between August and September 1866, 179 soldiers from the 56th U.S. Colored Troops died from the disease.

OIT Committed to Improving Customer Service

There is a new office dedicated to ensuring that OIT works with its customers (all VA employees and associates) more effectively to provide them with the best IT services possible. Meet the Office of Customer Advocacy (OCA), led by Deputy Chief Information Officer Jackie Patillo. The OCA is still crystallizing its vision and mission, but it brings together a few existing teams with years of experience in customer advocacy, collecting and analyzing customer satisfaction metrics, and responding to IT support requests.

“The team and I have been discussing what each group’s focus was previously, and how that all comes together to define our future as one cohesive organization,” Patillo said.

OCA consists of the Customer Advocates for Benefits, Corporate, and Health; the Service Coordination (SC) Office; and ITRM’s IT Customer Relationship Management (CRM) Office. These groups each specialize in different areas of customer service, and their combined expertise will enable the OCA to see a holistic view of the customer experience.

The Customer Advocates will continue in their roles of liaising with VA’s different business lines to ensure that OIT provides the services they need. “OCA wants to help OIT broker with the business side to see how business challenges can be resolved in order to meet desired outcomes in an effective, efficient manner. “We’re not just helping OIT provide a service, but we also introduce thought provoking questions designed to assist both IT and the business to drive innovation.” The advocates act as advisors providing insight into the business line and OIT, as well as presenting external factors that may come into play.

The SC office has historically been an intermediary between the VA business community and OIT, serving as technical IT operations advocates in such areas as IT activations resource planning, enterprise project rollout coordination, service agreement formulation, and translating technical bulletins into digestible customer communications.

If you’ve ever taken the IT Customer Satisfaction Survey or used the IT Performance Dashboard, you may be familiar with the CRM office. This team has been responsible for measuring OIT’s success in serving its internal VA customers with industry-proven tools such as the American Customer Satisfaction Index (ACS). CRM was responsible for assessing ACS scores, NSD data, and Key Performance Indicators from across the business lines to assess consistency in OIT customer experience.

OCA is currently reviewing the activities of the three individual entities to determine the way forward for the new organization which is now under one umbrella.

For starters, OCA is exploring the possibility of crowdsourcing IT issue resolutions utilizing VA employees. For example, you might be experiencing a remote access problem that others have already solved. OCA wants to offer you direct access to your colleagues’ best practices as an alternative to the traditional routes. OCA is exploring tactics like IT issue wikis, intranet sites that would help VA business lines evaluate IT products, and Yammer discussions.

OCA is committed to ensuring OIT provides top-notch customer service and works strategically with the business lines to improve and develop VA IT solutions. Stay tuned for the FY15 organizational roll-out.
**SUMMER SPORTS CLINIC**

By Reynaldo Leal

Veteran Rodney Blanton stands on his board on his first try!

Rodney Blanton was fresh home from a deployment to Afghanistan with the Air National Guard in 2011, when his life was changed by a reckless truck driver. The domino effect of twisted vehicles ended with Rodney and his motorcycle strewn across five lanes of Texas highway.

He said he died twice on the operating table, but somehow was able to pull through. After 12 days in a coma, Rodney woke up to the realization that his left leg had been amputated. However, it wasn’t the fact that something was missing that drove him during the seven months it took to learn to walk again – it was the fact that he was still alive.

“I wasn’t about to give up,” the Houston native said, “so I kept walking to try to get back in shape. After awhile I even started running -- even though my prosthetic leg wasn’t made for it. It would always take me a long time, but I had to keep trying.”

Despite his persistence, there was something missing in Rodney’s life. The former tech sergeant had always been involved in sports, especially baseball and basketball, and he felt like his disability was holding him back.

That was until he walked into the Michael E. DeBakey VA Medical Center in Houston and met recreational therapist Jessica Dawson.

“Rodney had already come a long way when he came to VA for the first time,” Jessica said, but he wasn’t aware of all the opportunities we provide through adaptive sports. He was surprised to find out how much he could do with recreational therapy through VA.

Jessica, who said she saw first-hand how difficult adjusting to life after military service could be through her husband’s own experiences, was a perfect catalyst for Rodney. Her open-door policy and constant reassuring made it possible for him to make the extra effort needed to participate in her program.

“It was important for me to show him that I cared,” she said, “that I wanted him to excel and reach his goals, and that I didn’t want there to be any limits for him. All my Veterans can reach out to me at anytime and let me know how they’re feeling, and it’s that personal touch that sometimes helps them after being disconnected for so long.”

She introduced him to the Paralympic Sports Club in Houston, and Rodney never looked back. Every week he was trying a new sporting activity, and before Jessica knew it, Rodney became one of the program’s biggest advocates and recruiter of Veteran participants.

“What some people might not understand is that recreational therapy plays a big role at VA when it comes to rehabilitation,” Jessica said. “Not only do the Veterans see physical improvements, it also helps them with mental and social issues too. When you see somebody like Rodney benefit from your work – it just makes you love your job that much more.”

Now, as Rodney attends his first National Veterans Summer Sports Clinic in San Diego, Jessica can’t help but be proud of his accomplishments. She will get encouragement from La Jolla Beach as Rodney tries surfing for the first time. He waves and beams back a smile. Rodney has found a new sport to be excited about.

“After hours of surfing, Rodney finally returned to shore with what seemed like a permanent smile. He talked about doing the impossible and how important Jessica’s personalized care was for his rehabilitation.

“We really are ‘her Veterans’,” he said. “She makes sure to find the right activity for us, and she keeps us busy. When you work with Jessica, you’re going to get a call, ‘hey, we’re going rock climbing,’ not, ‘do you want to go?’ and I like that.”

Interestingly, Rodney never expected Jessica’s brand of personalized care at VA. He said he was sure he would just be another number with a series of boxes to check, but as he realized how committed she was to his rehabilitation he couldn’t help but get motivated and change his mind about VA care.

“She pushed me to try new things, and now I’m here,” Rodney said in between sets of waves Monday. “If you told me I would be surfing a few years ago, I’d have said you were crazy. I can’t wait to go back and tell my fellow Veterans all about this clinic. It’s the real thing. I think I’ll get myself a surfboard, too.”

To learn more about VA’s Adaptive Sports Program, and the opportunities it provides Veterans with disabilities, visit va.gov/adaptiveports.

**Editor’s Note:** This article first appeared on VA’s blog, VAntage Point, (http://www.blogs.va.gov/Vantage/) on Day 2 of the 2014 National Veterans Sports Clinic, Sept. 7-12.
By Mike Molina

Gabriel Diaz de Leon was on a routine convoy while deployed to Honduras when the jeep he was riding in was struck by hostile gunfire. The bullet shattered his right leg, and the jeep tumbled, hurling him more than 30 feet through the air. When he landed, he crushed three cervical vertebrae in his neck, leaving him paralyzed. It was 1984. He was 20 years old.

“It’s so easy to go in a negative direction. You think, being a quad, ‘my life is over;’” he said. “But I realized, whether you decide to keep going, the world keeps revolving with or without you.”

Today, Diaz de Leon is one of the most successful Veterans in Paralympic history. The former Army military policeman has been on five U.S. Paralympic teams where he’s won six medals, including a gold medal in javelin at the 1992 Summer Paralympics in Barcelona. He’s been a member of five U.S. World Championship teams and won two collegiate national championships with the University of Texas at Arlington's wheelchair basketball team.

“They don’t get as sick, they more likely to lead sedentary lives, ” he said. “But the research says to other Veterans is huge for improving. And becoming a mentor to other Veterans is huge for them.”

Adaptive sports have become so popular with Veterans at the Milwaukee VA, they’ve organized themselves and formed the Badgerland Veterans Adaptive Sports Club.

“If they want to take my handcycling as far as I can take it. Now, it’s all about what I put into it,” she said. Diaz de Leon and Young-Terrell were among the more than 500 Veterans who participated at this year’s games, and they join the thousands of Veterans who are active in VA’s national rehabilitation events each year. And while each Veteran’s path from injury to recovery is different, there is a universal message amongst participants of adaptive sports and activities – physical activity improves quality of life and overall health.

For 17 years, Dr. Kenneth Lee has been a VA doctor caring for patients with spinal cord injuries. The retired colonel also served as the Wisconsin Army National Guard’s state surgeon and has more than 27 years of military service. In 2006, Dr. Lee was named chief of the Spinal Cord Injury Center at the Clement J. Zablocki VA Medical Center in Milwaukee.

Throughout his medical career, Dr. Lee has treated thousands of Veterans who are active in VA’s national rehabilitation programs. The club also held its third annual adaptive sports clinic in July, where more than 100 Veterans, their families and friends participated in a variety of events.

“As humans we are born to do sports. It’s innate,” he said. “When someone has a drastic injury, it’s important to use that innate experience to jump-start them into it.”

Army Veteran Rory Cooper understands the importance of providing Veterans with the tools needed to transition through injury to recovery. Thirty years ago, Sgt. Cooper was cycling in Germany when he was struck by a vehicle and suffered a spinal cord injury that left him paralyzed.

Today, Dr. Cooper is a VA senior research career scientist and director of Human Engineering Research Laboratories (HERL) where he dedicates his time researching ways to improve the lives of Veterans with disabilities.

“If people with disabilities are more likely to lead sedentary lives,” he said. “But the research says increased activity and physical fit-
Around VA

National Community Partnership Challenge

By Cheryl D. Brunson

The Jesse Brown and Hunter Holmes McGuire VA Medical Centers took top honors for their entries in VHA’s inaugural Community Partnership Challenge. The Under Secretary for Health launched the contest to highlight excellent models of VHA facilities collaborating with the community to benefit Veterans, family members, caregivers, or survivors.

The “Jesse Brown Food Pantry” features an all-volunteer collaborative effort between the facility and its partners: the Greater Chicago Food Depository, AmeriCorps, the Chicago chapter of the American Red Cross, and Veterans Strike Force. Managed by the Voluntary Service Department, the pantry provides hunger relief for Veterans and their families, many of whom are facing financial hardships and even homelessness. It also creates a volunteer workforce promoting civic pride and engagement among the Veteran population.

A unique feature of the pantry is that it offers Veterans “client choice,” enabling them to select their own food, much like a grocery store. Most pantries provide clients with fixed boxes or bags of food with no opportunity for individualized selection. The client choice pantry model allows Veterans the ability to choose from a wide variety of foods, better enabling them to meet their personal dietary needs.

By all accounts, the “Jesse Brown Food Pantry” was already a big winner for the Veterans and families it serves, long before it was chosen for this award. As one female Veteran and single mother reported, “The pantry is awesome; not only did they give me food, they also gave me information on other pantries and food resources that have made a big difference for me and my family.” In the span of three months, the pantry has provided nutritious food offerings to over 1,400 unique Veterans.

While the Jesse Brown VAMC was recognized for feeding the body, the Richmond Hunter Holmes McGuire VAMC was recognized for nurturing the soul. Air travel can be stressful for anyone at one point or another. For a Veteran with a disability, the experience can prove especially daunting and could make air travel seem impossible. This insight is what prompted the Recreation Therapy Department at the McGuire VAMC to explore partnering with Delta Airlines to create the “Possibilities in the Sky” program.

Home to one of the largest of the 24 spinal cord injury centers in VHA, the McGuire VAMC designed this comprehensive program to help spinal cord injured Veterans and their family members become more confident about air travel through education and training. Working locally with Delta Airlines, the recreation therapists coordinate training sessions and accompany Veterans and their family members to the airport.

The airline representative conducts a one-hour training session and on-site demonstrations about all aspects of travel, from booking tickets, checking luggage, and passing through security, to boarding the plane and wheelchair storage.

To date, roughly 80 participants have completed the training. The facility’s recreational therapy staff hope this education will help even more spinal cord injured Veterans become self-confident and willing to continue to travel and enjoy other meaningful life experiences. “I would like to sincerely thank Delta for taking the time to spend with me in completing this amazing training,” said one Veteran who has benefited from the program.

“Given that I have ALS, I know my days of travel may be limited, but I am so appreciative of the knowledge I have gained. I now feel confident and eager to hit the skies and travel the world for as long as I am feasibly able. Watch out, Scotland, this power chair is coming your way.”

— a McGuire VAMC patient

The “VA Retail Immunization Care Coordination Program,” jointly submitted by the Office of Informatics & Analytics, the VA Center for Innovation, and the Veterans Integrated Service Network (VISN) 8, received an honorable mention. This successful program offers an innovative solution to improve Veterans access to flu immunizations to promote healthy lifestyles. Veterans in the Florida area had the opportunity to get their flu shots at over 800 Walgreens locations. By participating in the program, Veterans were not required to fill out VA immunization forms when they received their flu shots at the participating retail pharmacies/providers, and their VA immunization records were seamlessly electronically updated.

One of VA’s priority goals is the development and enhancement of trusted partnerships to build capacity and to serve as a platform for sharing resources to better serve Veterans and their beneficiaries.

The VHA Office of Community Engagement administered the Community Partnership Challenge. The OCE mission is to engage private health care providers and organizations in promoting the health and wellness of Veterans and in understanding and supporting the care VA provides its Veterans, family members, survivors, and caregivers.

Partnerships like many of the entries submitted to the contest show how collaboration with community partners can expand VA’s impact and ability to care for Veterans in new and creative ways that enrich their lives. “All of the impressive entries to this contest simply underscore the great work that is taking place in medical centers and local communities across the United States” said Dr. Robert Jesse, Acting Under Secretary for Health.
Alan K. Mattson Award winner

Carolyn Pryer is the recipient of this year’s Alan K. Mattson Award for her commitment to innovation and customer service. Pryer, an Information Security Officer (ISO) with the Veterans Benefits Administration (VBA) Regional Office in Jackson, Mississippi, receives the award in honor of her leadership and innovative spirit displayed in developing a report audit tool to assist her fellow ISOs in responding to many of their regular duties and data calls.

“With the new system, you only need to look at a few lines on an excel graph to determine if an information security violation has taken place,” Carolyn said. Carolyn was the catalyst for the project, forming and leading a work group of fellow ISOs that created and rolled out this new tool. The award is the Field Security Service’s highest individual honor and is named after Security Service’s highest individual honor and is named after a student trainee. She lives just outside of Jackson in the town of Clinton. Married for 11 years, she is a self-described “gym rat” with a passion for aerobics and Pilates.

Center for Minority Veterans Celebrates 20 Years of Service

In 1994, many minority Veterans perceived that they lacked a voice or source to seek assistance in obtaining VA services or understanding how to access their earned benefits. Key Congressional representatives from areas with black and Native American Veteran constituents diligently lobbied and advocated to create an office to assist.

Their efforts culminated in Public Law 103-446 — establishing the Center for Minority Veterans, under Section 509 of the law. Among other things, the Center for Minority Veterans advises the Secretary on the adoption and implementation of policies and programs affecting minority Veterans. The Advisory Committee on Minority Veterans serves as an independent body comprised of members who were Veterans and representative of the minority Veteran populations.

The CMV also conducts targeted outreach activities nationwide to promote awareness and use of VA benefits and services, evaluate the effectiveness of the provisions of VA benefits and services, and serve in an advisory role to the Secretary and other internal stakeholders on all matters relating to minority Veterans.

For more information, visit http://www.va.gov/CENTERFOR-MINORITYVETERANS/.

Identity Theft Prevention Resources for Veterans

With technology becoming more ingrained in our lives each year, our information is more accessible than ever. If it’s not properly protected, criminals can access it and wreak havoc on our financial and personal well-being.

Veterans are not immune to these threats, but there are ways to make it harder for cyber criminals to steal your identity. Research has shown that education is one of the key deterrents of identity theft — meaning that those who are aware of the common causes of identity theft and the best ways to stop them are much less likely to end up as victims.

VA is making a push to give Veterans the knowledge they need to keep identity thieves at bay. In August, VA announced the launch of the second phase of an identity theft prevention campaign titled More Than a Number, which aims to educate Veterans and their beneficiaries on identity theft prevention. (The first phase, launched in 2011, was aimed at educating VA employees on the importance of safeguarding Veteran information.) The campaign, spearheaded by the Identity Safety Service within the Office of Information Security (OIS), has debuted two new resources that are now available—an information website (www.va.gov/identitytheft) and a toll-free help line (1-855-578-5492). The help line will be open Monday through Friday, from 8 a.m. to 8 p.m. ET, with voicemail for after-hours calls.

“We recognize that for Veterans, as for all Americans, in this new digital age, identity theft is a growing concern,” said Stephen Warren, VA’s Chief Information Officer. “Our goal is to help educate and protect those who have protected this great country.”

The More Than a Number website houses identity theft prevention tips, next steps for identity theft victims, interactive media, and links to the best resources.

Free Tango Classes to Improve Balance and Posture

Dr. Madeleine E. Hackney, Research Health Scientist of the Atlanta VA Center of Excellence for Visual & Neurocognitive Rehabilitation, has been sponsored by the Georgia Chapter of the American Parkinson Disease Association to offer free adapted tango classes to improve balance and mobility in older adults with movement problems, such as Parkinson’s disease.

“Adapted Tango” is a series of Argentine Tango dance lessons designed by Dr. Hackney to improve mobility in older adults with balance and mobility problems. All ability levels and ages are welcome. Individuals with balance and mobility challenges are encouraged to bring a caregiver or supportive friend.

Dance students will enjoy head-to-toe warm-up, partner enhancement exercises, activities to promote rhythm and musicality, several classic Argentine tango moves and ample time to practice under the guidance of an attentive instructor, Dr. Ronda Patino.

This program has been tested in VA-funded research studies and has been demonstrated to improve mobility, balance, walking ability and quality of life in older adults with mobility issues.

“Adapted tango is meant to be fun and inclusive,” Hackney said. “Through this dance program, generations have come together and shared in a delightful musical art form while improving overall mobility and perhaps, health.”
You can Share Your I CARE Story to help inspire others?
How can you share the special, creative or memorable moments that happen in your workplace?
Share your story, in words and through pictures, to help inspire others to live our values in service to Veterans.

To submit your local story, please visit the I CARE website, select the “Share Your I CARE Story” link, and complete the information fields. Let the rest of VA celebrate your accomplishments demonstrating the I CARE core values!

Remember, if at any time you have an I CARE-related question, please send an e-mail to ICARE@va.gov.

Do you know an I CARE Hero? Want to be one?

Around VA

VBA EMPLOYEE SHINES AT COMMAND & GENERAL STAFF STAFF COLLEGE

Shireen Lackey, of VBA’s Office of Executive Review, received the General Colin L. Powell Interagency Award for Excellence, while attending the U.S. Army’s Command and General Staff College (CGSSC) at Fort Leavenworth, Kansas, earlier this year.

The prestigious award recognizes the distinguished interagency student in each class for excellence in scholarship and overall contributions to interagency education in the college. CGSSC prepares students to develop comprehensive solutions for the security and defense of the nation. This requires understanding and working with interagency, joint and multinational partners. Interagency faculty and students bring unique perspectives to the classroom, enhancing the educational experience for all, by educating military colleagues on how their organizations help win the peace.

The interagency contribution is a critical component of achieving the educational goals of the CGSSC.

You can recognize your own local I CARE hero?
I CARE recognition certificates are a direct and meaningful way to acknowledge those individuals we work with every day who demonstrate the I CARE Core Values in the work they do to serve Veterans and their families.

To recognize your local I CARE hero, visit http://www.va.gov/ICARE/icare_certificates.asp. At the site, select the certificate that best describes the value that your hero demonstrates, fill it out, print it, and present it. It’s that easy!

Look for opportunities in the near future to share your local hero story with the entire VA family.

Forum from on Page 7

DoD staff often work side by side, they didn’t have an efficient way to connect and manage projects online with each other. “We were looking for a way to collaborate with folks outside of the VA,” says Montano.

“We couldn’t do that with our internal SharePoint or Army Knowledge Online. We needed something with robust tools to manage projects with outside partners. ForumForUs allows that: It’s a single collaborative environment that houses multiple workgroups of VA and DoD staff, as well as stakeholders and executive committee members.”

Manion and Montano both see ForumForUs as a model that could be used throughout VA, where an increasing number of partnerships with DoD and external colleagues are helping VA accomplish its mission to provide quality care and services to our nation’s Veterans.

ForumForUs is flexible
The VistA Evolution team — the group responsible for building the next generation of VA’s electronic health record — uses ForumForUs to manage workflow and communicate with contributors across areas of practice. Brenna Long, Lead Program Analyst for VistA Evolution, started using ForumForUs as a project management tool to track her own tasks, but soon started using social features like crowdsourcing, video sharing, and document collaboration. She likes that each user can tailor ForumForUs to his or her own needs.

“It’s flexible,” Long says. “You can make your community as open or as closed as you want. You can crowdsource by requesting input from the field, or you can make it project-management focused.”

Long notes that ForumForUs helps make everyone’s efforts and work within VA more visible, by allowing open communication and community involvement. Long also points out that ForumForUs makes it easy to post important content that her teams need to make decisions and accomplish work throughout the day more efficiently.

Forming networks
For Manion, the real power of ForumForUs is that it helps people make the human and professional connections that ultimately lead to more effective teamwork: “One of the realities in VA is that it’s difficult to travel for face-to-face meetings,” she says. “We are a vast organization.

“People form productive working relationships with each other when they can identify others who are engaged in work they are interested in, and make that human and social connection.”

“ForumForUs has tools to help people form these networks. Once a trusted professional connection is made, users can develop a productive working partnership.”

As VA collaborates with an increasing number of outside partners, and innovative ideas are generated, VA needs an effective way to capture and disseminate best practices.

By using ForumForUs to crowdsource solutions, VA can break down geographic barriers, and connect experts in a single online network that will ultimately lead to better care for Veterans.

For Manion, and others who use ForumForUs, the platform is already doing just that.

For more information, contact Molly Manion at molly.manion@va.gov.
Unit Cohesion may be key to PTSD Resiliency

From VA Research Currents

A VA study of nearly 800 National Guard and Reserve troops found that soldiers reporting higher levels of unit cohesion tended to be more resilient to mental health problems, including post-traumatic stress disorder. The results, presented at the American Psychological Association annual meeting in August, could help explain why some soldiers seem more resilient than others to PTSD.

“We defined resiliency as having better mental health function. Veterans should have the ability to fulfill their responsibilities and conduct normal activities on a regular basis,” said Dr. Lisa McAndrew, a researcher with the VA New Jersey Healthcare System and VA’s War Related Illness and Injury Study Center.

“What is interesting is that when soldiers come back from combat, most of them are very resilient. They’re able to go about their daily lives, but we don’t know why that is,” McAndrew said.

According to VA’s National Center for PTSD, between 11 and 20 percent of Iraq and Afghanistan Veterans develop PTSD. Symptoms can include flashbacks, avoidance, negative changes in behavior, and hypervigilance. Treatment often involves long-term therapy aimed at developing coping mechanisms, something McAndrew believes may be more likely to take place informally in soldiers with high unit cohesion.

“Basically it’s almost a natural intervention where soldiers have the support of their fellow military personnel. They can talk to them about their problems almost immediately instead of dealing with them on their own, and that may help them learn strategies to cope during the deployment and afterward,” says McAndrew, who is also an assistant professor in the division of counseling psychology at the University of New York.

As part of their research, McAndrew and her team assessed the mental health and coping methods of 767 soldiers before deployment, immediately upon their return, and then three months and one year later. In addition, the participants were asked to rate three statements about unit cohesion immediately after their return:

- The members of my unit are cooperative with each other.
- The members of my unit know that they can depend on each other.
- The members of my unit stand up for each other.

Scores ranged from 3 to 15, with higher scores indicating higher perceived unit cohesion. The average score was 9.3.

“We hypothesized that participants with higher scores would also have better mental health functions post-deployment,” says McAndrew, “and that’s what we found.” There was also a direct correlation between unit cohesion and more effective coping techniques.

McAndrew believes much of it may have to do with a decrease in avoidance coping—that is, the tendency to avoid or ruminate over a problem rather than address it head-on. The alternative, approach coping, tends to require a healthy social network. “Seeking support and advice are part of approach coping,” says McAndrew, “and it is generally thought to be more effective in dealing with problems.”

“It’s not always possible to do 12-week individual interventions, or in the case of National Guard troops or reservists, to ensure they have the same level of support when they come home that active-duty soldiers may have,” says McAndrew. “If we can do things to encourage unit cohesion and build relationships within the units, it might be feasible to build resiliency to PTSD and other mental illnesses associated with combat trauma.”

The next step for McAndrew is to explore whether soldiers who feel understood when they get home are more resilient than those who do not.

“It’s all about answering these questions,” says McAndrew. “If we understand these factors, then we can help everyone to become resilient.”

To learn more on how VA Research is helping Veterans, visit VA Research Currents online at: http://www.research.va.gov/currents.

Heart Rate Variability and PTSD

From VA Research Currents

A car’s ability to stop and start—to accelerate on demand and then idle at a stoplight without trouble—are measures of its health. A car that stalls or jerks is a sure sign of trouble. So it goes for the human heart and, according to a study of 2,430 Marines, heart rate variability can tell a lot—not just about physical health, but about depression, post-traumatic stress, and the effects of deployment on the body and mind.

“Heart rate variability is quite simply the variation in the inter-beat intervals of our heart,” says Dr. Arpi Minassian, an associate clinical professor of psychiatry at the University of California, San Diego. “It is a very sensitive index of the health of our body’s stress response systems. It’s one way to measure the health and fitness of the fight or flight systems.”

Minassian and her colleagues Drs. Mark Geyer, Dewleen Baker, Caroline Nievergelt, Daniel O’Connor, and Victoria Rishbourgh—all of whom are affiliated with the San Diego VA Health Care System and its Center of Excellence for Stress and Mental Health—recently tested four infantry battalions of active-duty Marines before a combat deployment.

The work was part of the larger Marine Resiliency Study. The Marines, more than half of whom had already deployed to Iraq or Afghanistan in the past, were assessed for both depression and PTSD disorder prior to having their heart rate variability monitored.

The researchers then placed a device onto each participant’s finger for five minutes while he relaxed. The sensor recorded the interval between each heartbeat.

“In five minutes, you can tell a lot about a person’s heart rate,” says Minassian. “Every time we inhale, for example, our pulse quickens. When we exhale, it slows down. That is heart rate variability. We do it every time we take a breath.”

She adds: “Say you’re a runner in good shape. When you’re on the treadmill, your heartbeat will go up. When you stop running, if you’re in good physical condition, your heartbeat should drop back down pretty quickly.

“Your heart is able to respond quickly to get you out of a stressful situation, but after that situation is over and you need to get back to normal functions, your body should respond flexibly. For those people with lower heart rate variability, it suggests an inflexible response.”

The study, published in the May 2014 issue of Psychosomatic Medicine, found that not only did Marines with prior deployment experience have lower heart rate variability, but that even when researchers controlled for depression and other variables, participants who screened positive for PTSD still had lower variability in their heart rate.

Previous studies have already tied heart rate variability to mental illnesses such as schizophrenia, depression, bipolar disorder, panic disorder, and PTSD, but Minassian’s goal was to single out PTSD and see whether or not the relationship was caused by some other condition or experience.

“When we controlled for other issues, we still saw a relationship between heart rate variability and PTSD,” she says.

Minassian cautions that the relationship between PTSD and heart rate variability does not imply that one necessarily causes the other.

“We’re just reporting a relationship at one time. We’re getting a better understanding of the disease of PTSD and its relationship to physiological responses, and that could help us in the future learn how to prevent PTSD, or even understand who might be more vulnerable to the effects of combat trauma.”

The four battalions of Marines have since returned from their deployments and again were screened for PTSD and their heart rates tested. Minassian hopes that by comparing pre- and post-deployment data, her team may shed light on the role heart rate variability plays in how troops respond to combat trauma. The study results should be published later in the year. More at: http://www.research.va.gov/currents.

Medical Advances
“Chill Like Bill”

By Tom Cramer

Nobody would say that Bill Crain has a simple life. Diagnosed with “Lou Gehrig’s Disease” (ALS) in 2011, everyday routines like getting himself dressed, or taking a shower, can represent a monumental chore. But Bill doesn’t let life’s challenges set him back. Instead, he forged ahead, inspiring others with his strength, quiet courage, and self-deprecating humor.

**Why me?**

“When I was first diagnosed with ALS, I said to myself, ‘Why me?’” remembers Bill, sharing with others the phrase, ‘Chill like Bill.’

It can get rough with lots of emotional experiences, to issues at home or work, some pretty emotional things,” said Dr. Martin, third organizer of this group in the 14 years Bill has been coming. “We come together to discuss the phrase. ‘Chill like Bill.’”

**Vets helping Vets**

The group’s staff leader is psychologist Kris Martin. He is the third organizer of this group in 2011, everyday routines like getting himself dressed, or taking a shower, can represent a monumental chore. But Bill doesn’t let life’s challenges set him back. Instead, he forged ahead, inspiring others with his strength, quiet courage, and self-deprecating humor.

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No Vet Dies Alone

By Tom Cramer

“Things I'm most worried about,' actress Anne Hathaway once said, 'is just being alone without anybody to care for or anyone who will care for me.’

Well, Anne, the nice folks at the Cheyenne VA Medical Center in Wyoming sort of feel the same way you do. Which is why they launched a program called 'No Veteran Dies Alone,' where volunteers from the VA — as well as the local community — spend time with Veterans who are in their final days or hours.

Chief Chaplain Carol Carr, who started the program at the Cheyenne VA in 2012, said she and her team now train about 20 to 25 volunteers each year.

“Fortunately, we never have too many Veterans in hospice at any one time,' she explained, 'so most of our work is done at our Old Glory Community Living Center. Our volunteers also visit patients in the Intensive Care Unit, or wherever else they're needed.'

It's not always easy work.

‘The one Veteran I think about the most is someone who didn't even want my help,' said Mary Jo Alley, a volunteer who works for Disabled American Veterans. ‘He and his wife were very private people, and mainly wanted to be left alone. They really didn't want us to be around. She wanted to be the one taking care of him, and he didn't want anyone taking care of him but her. So we just backed off, but we let them know we'd be there for them if they needed us.'

Eventually, the couple accepted the offer.

‘Taking care of a dying spouse can be exhausting,' Alley observed. ‘Sometimes you need a break; you need someone to fill in for you so you can rest. I think the wife finally got to that point. I remember I went into their room one day; I told her I could sit with her husband while she went and got something to eat. She actually took me up on my offer....’

‘So she left. And that's when the husband got really upset. He got angry and told me to leave him alone. So I did. I got up and left. But as I was walking out the door he called me back, and he actually apologized for being so cantankerous. I think he finally realized that I was there for him, as well as for his wife. So I sat with him for a while. I didn't want him to be alone.'

Mary Homiak, a program support specialist at Cheyenne VA, said her heart was touched by one Veteran who never had any visitors.

‘He was very lonely,' she said. ‘He had no family here. ....’

‘I remember playing cribbage with him. He loved to play cribbage. It's a card game. The first time we played cribbage, he didn't like the way I was counting my cards. So we played his way. And that made him happy.'

And then there's Mary. ‘I kind of adopted this one lady, Mary, who's in her 90s,' Homiak explained. ‘Or maybe she's adopted me. Every Wednesday, I visit her at the community living center, and we usually go shopping. Mary's a shopper. I'll take her out to the mall. She loves to look at jewelry, and she likes to wear jewelry. We also take her to the beauty salon because her appearance is very important to her.

‘Mary likes to have a beer too. When we go out to dinner after a day of shopping, she has to have her beer. So we sit there and have a beer together. She can't tell it's non-alcoholic. It's that St. Pauli's beer.'

Homiak said her desire to help was rooted in a sad experience.

‘My father was a World War II Vet, ‘ she said. ‘At the end of his life, he had lung cancer. I lived in New York, so most of our time was spent in the hospital, but I couldn't be there as much as I wanted to...' 

‘It broke my heart,' she said.

Navy Veteran Michael McGe- ghy recently lost his 83-year-old father, a Marine Corps Veteran, who died peacefully in VA hospice in Cheyenne.

‘It was good to have someone there watching over him,' McGe- ghy said of the volunteers who visited his dad. ‘It took a big load off us, because we couldn't be there all the time.'

‘Towards the end, they weren't just there for him; they were there for us as well,' he observed. ‘They were comforting us. They explained that he wasn't in pain. Even though he couldn't speak anymore, they told us he could still hear, that we could still talk to him.'

McGe- ghy said his father died in the company of his family, as well as VA staff and volunteers who respected him and genuinely cared about him.

‘Dad lived at the VA community living center for 10 years before entering hospice, so everybody knew him,' the Navy Veteran explained. ‘They all thought the world of dad. They liked him. They appreciated him while he was alive, and they were there for him when he died.'

Anne Picot, 73, is another vol- unteer with a special place in her heart for Veterans nearing the end of life. She herself has been con- fined to a wheelchair for 30 years, having been struck with polio as a very young woman living in her native England.

‘I remember this one Veteran,' she said in her soft English accent. ‘As soon as I saw him, I knew he was very, very sick, and didn't have long to live. But he was also very angry. He was quite suspicious of everyone and everything when he arrived here, and he wouldn't make eye contact. He never had visitors; no one came to see him. He was alone. And he was afraid, because he knew he was dying. He was 59 years old.

‘Loneliness, I think, is the worst thing that can happen to you,’ she said.

Despite the lack of conversa- tion and eye contact, Picot would sit quietly with the Veteran for hours at a time. Eventually her comforting presence — along with her endless patience — began to have an effect. The angry, dying Veteran began to loosen up.

‘He began to trust me,' she said. ‘He started making eye contact with me, and talking to me. I remember he had these big, brown eyes. He would talk to me about his life, about all kinds of things. Little by little, I watched his anger and his fear leave him.'

‘One night, after I'd been sit- ting with him for several hours, I told him it was time for me to go home. Before I could leave, he grabbed my hand and told me he loved me very much. I told him I loved him, too, and that it was a privilege to be his friend. Then I told him that he and I would one day see each other again.'

‘Towards the very end, I told him I wished he would wake up so I could see those brown eyes one more time. But of course, he didn't open his eyes.'

To learn more about VA's No Veteran Dies Alone program, visit www.cherperv.arch.va.gov/prom- ise/newsbriefs/noveternsiedialnos- volunteereeresourse.asp
Surf’s up

Bolsa Chica State Beach in Orange County, Calif.

Navy Veteran Goldie Nwachuku basks in the glow of a successful ride on the waves at the Los Angeles Healthcare System, a veterans’ hospital and a VA Greater Los Angeles Health Care System outpatient clinic.

“Surfing is a great stress reliever,” said Nwachuku, who served in Iraq and is married to a Navy veteran. “You're on a sunny beach. It's hard to be depressed when you're surrounded by water, you have to be in the moment.”

Army Veteran who served in Iraq.

Erik Gutierrez, an Army veteran who served in Iraq, said being with supportive people can be a life-changing event for a veteran suffering from PTSD, anxiety, or serious physical injuries.

“We're not just teaching these Veterans how to surf,” he explained. “We're teaching them how to reconnect with other human beings. We're getting them engaged in team building and social interaction.”

“Hanging ten” is not just a cool form of therapy for the younger generation.

“If a course, a lot of the younger Veterans are drawn to the surfing program,” Gutierrez said. “But we also have Vietnam Vets out there on surfboards. And their reaction to the experience is the same. They come out of the water beaming.”

VA supplies all the surfboards, wetsuits, and any other equipment.

“For our amputees and other disabled Vets, we have beach wheelchairs—they have these large inflatable wheels that let you roll easily over the sand.”

You’re Out of the Woods, Step into the Light.

Louisa Mendelsohn, a recreational therapist at the West Los Angeles VA, described the surfing camp as an imaginative way to break the self-isolation that some Veterans become trapped in.

“It’s my job to get these Veterans back out into the community, reintegrating, reconnecting with old friends, family, and other Veterans,” she said. “You can’t do that when you’re sitting all alone in your room. That’s a dark place to be.”

Mendelsohn admitted that it can be a daunting task to coax some Veterans out of the darkness and into the sunlight.

“It can be very hard to get them out of the house to do something,” she said. “When I ask them if they want to try surfing, they’ll tell me they won’t be able to do it. When I hear that, I say, ‘Why not? What’s stopping you? Of course you can do it!’”

We’ll Pick You Back Up.

Mendelsohn said there’s something about being on a surfboard that makes it practically impossible to feel down and out.

“When you’re on that board, you get this big adrenaline rush,” she said. “It’s uplifting, and it’s fun. You need to have fun.

“We had a woman who’s lived in California her whole life, but had never been to the ocean,” Mendelsohn recalled. “She was in chronic pain and severely depressed. But when she got on that surfboard, you could see her whole body language change, the way she held herself, the way she moved. She was laughing and talking to everyone.”

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Navy Veteran Reynaldo Ahmed Torres admitted he had a slight case of nerves when he first stepped onto the beach. But his nerves were no match for his four dogs for us, and plenty of water to drink,” he said. “In California, you need lots of water.”

The Navy Veteran said he plans on attending the next surfing camp, and hopes other Veterans get an opportunity to experience what he did.

“This makes me feel like I can do other things now,” he added. “I want to get involved in more sports. I feel like I’m back on track.”

High-Fives All Around.

Dr. Lamees Khorshid, a psychologist at the West Los Angeles VA who also serves as a Waves of Valor volunteer, described surfing as the perfect confidence builder.

“One of the women Veterans at our surf camp had a bad leg due to a war injury,” she said. “She was in her 50s. It was such a great experience to see her standing on that surfboard, with so many people around her, helping her, cheering her on. They were all high-fiving. She left all her problems behind and was in the moment.”

“This experience creates self-esteem. It gives you a sense of self-mastery. And you can see all that happening to these Veterans, within minutes, almost as soon as they step on the beach.”

“A lot of these Veterans were very physical at one point in their lives,” she observed. “We need to reintroduce that kind of physicality into their lives. Exercise is an anti-depressant. It’s an anti-anxiety pill.”

You’re Not Alone Anymore.

Navy Veteran Goldie Nwachuku said she was initially apprehensive about the whole surfing thing.

“I didn’t know what to expect,” she said. But the volunteers who gathered around her in the water soon made her jitters disappear.

“Everyone was so friendly and helpful,” she said. “At first I was just lying flat on the surfboard. From there, I was able to get up on my knees. All my anxiety went away. “Then I tried to stand on the surfboard—continued Nwachuku, “but I kept falling off into the water. But all those people were there for me. They gave me support and encouragement, and that’s what it takes to heal.”

“You feel like you’re not alone anymore,” she said. “It makes you feel like anything is possible.”

For more on post-traumatic stress and how VA can help, visit the National Center for PTSD at www ptsd.va.gov.

Also, read more about what Team Red, White and Blue is doing to help America’s Veterans at www.teamrwb.org.

Riding a wave toward recovery

By Tom Cramer

The VA in West Los Angeles teamed up with a non-profit called Team Red, White and Blue to teach 23 Veterans how to surf.

“Step into the Light,” said Erik Gutierrez, an Army veteran who served in Iraq. “It’s hard to be depressed when you’re on a sunny beach.”

Gutierrez, now an administrative officer with the VA Greater Los Angeles Healthcare System, runs the Waves of Valor Surf Camp along with his counterparts from Red, White and Blue.

“This is our second year doing this,” he said, “and we don’t plan on stopping.”

Recently, more than 100 volunteers from VA, the local community, and Team Red, White and Blue gathered at Bolsa Chica State Beach to teach 23 Veterans how to surf.

“When you’re out there on the water, you have to be in the moment,” Gutierrez said. “You don’t have time to think about your emotional or physical problems.”

A Game Changer.

Gutierrez said being with supportive people can be a life-changing event for a Veteran suffering from PTSD, anxiety, or serious physical injuries.

“We’re not just teaching these Veterans how to surf,” he explained. “We’re teaching them how to reconnect with other human beings. We’re getting them engaged in team building and social interaction.”

“Hanging ten” is not just a cool form of therapy for the younger generation.

“If course, a lot of the younger Veterans are drawn to the surfing program,” Gutierrez said. “But we also have Vietnam Vets out there on surfboards. And their reaction to the experience is the same. They come out of the water beaming.”

VA supplies all the surfboards, wetsuits, and any other equipment.

“For our amputees and other disabled Vets, we have beach wheelchairs—they have these large inflatable wheels that let you roll easily over the sand.”

You’re Out of the Woods, Step into the Light.

Louisa Mendelsohn, a recreational therapist at the West Los Angeles VA, described the surfing camp as an imaginative way to break the self-isolation that some Veterans become trapped in.

“It’s my job to get these Veterans back out into the community, reintegrating, reconnecting with old friends, family, and other Veterans,” she said. “You can’t do that when you’re sitting all alone in your room. That’s a dark place to be.”

Mendelsohn admitted that it can be a daunting task to coax some Veterans out of the darkness and into the sunlight.

“It can be very hard to get them out of the house to do something,” she said. “When I ask them if they want to try surfing, they’ll tell me they won’t be able to do it. When I hear that, I say, ‘Why not? What’s stopping you? Of course you can do it!’”

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Veteran Discovers VA Care When he Needs it

By Reynaldo Leal

Dr. Thomas Russell smiles every time the subject of his naval service comes up. He sits up a bit straighter in his chair as he recalls his time on the USS Ticonderoga in the Vietnam War, and how he felt about the men he cared for as the aircraft carrier’s flight surgeon.

“I was assigned various squadrons of pilots, and my job was really to make sure that [they] were safe,” he says. “It used to cut people open for a living. Now, cutting bread is hard.”

While he admits that it would be easier to stay in bed and watch TV all day, he continues to fight and move forward with his life. Later in the day, his wife will drive him to San Francisco VA Medical Center for more physical therapy.

“I used to go to VA for chemotherapy and for infusions,” he says, “but today it’s mostly about rehabilitating myself … trying to get more function in my left hand and left arm and trying to become more coordinated in my activities.”

Four years ago, Russell, the former head of the American College of Surgeons, suffered from pain in his lower pelvis. When the pain became unbearable, he sought medical attention. When he found out it was multiple myeloma, he let out a small chuckle. “I probably wouldn’t have the nerve to do it today, but I did a lot of flying on and off that carrier,” he says. “I loved the Navy.”

Almost 50 years later, Russell sits at the dinner table in his sister’s apartment in San Francisco. He’s trying to cut bread with a set of oversized silverware, but his left hand won’t cooperate.

“For dinner with friends, he really hand won’t cooperate. If there was a problem, they would feel free to come to [me],” he says. “I used to go to VA for chemotherapy and for infusions,” he says, “but today it’s mostly about rehabilitating myself … trying to get more function in my left hand and left arm and trying to become more coordinated in my activities.”

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Veteran Russell (also pictured on opposite page) performs a surgery onboard the USS Ticonderoga.

War under the doctor draft. While Russell went on to private practice after his service, Owen stayed at VA, where he is now the environmental health physician at San Francisco VAMC.

“Every VA medical center has an environmental health physician who’s in charge of dealing with the registry programs,” Owen said. “When [Thomas] had a diagnosis in late 2010, of multiple myeloma, which has been associated with Agent Orange exposure, he spoke to me and I told him that, by virtue of that, he had an entitlement to come to VA as a Vietnam Veteran.”

He took the Agent Orange examination and was added to the registry. The cancer of his plasma cells was now linked to his service on the Ticonderoga, and Russell could get all of his care at VA.

“The VA no longer tries to discern specifically how and where one was exposed,” Owen said. “If anyone served at any time in one of the Agent Orange areas, then it’s presumptive that they were exposed. Any of those conditions that have been associated with Agent Orange exposure can be treated without co-payment.”

But why would a career physician who has worked at premier U.S. medical facilities want to get his care at a VA hospital? For Russell, the answer is simple: he’s a Veteran and the care is on par with the best hospitals the country has to offer; he sees VA as leading health care in many respects. “[VA] care fits with my philosophy of medicine,” Russell says with a smile. “It’s state-of-the-art care.”

“C’mon,” he whispers, “you can do this.”

A tumor, which led to physicians taking out a part of Russell’s brain, left him ‘hazy’ and unable to perform daily tasks. A few weeks ago, while he was out for dinner with friends, he realized cutting food had become too problematic. Somebody else had to cut his steak that night; it didn’t sit well with the former surgeon.

“You take things like this for granted when you’re young and healthy;” the 74-year-old says. “I used to cut people open for a living. Now, cutting bread is hard.”

While he admits that it would be easier to stay in bed and watch TV all day, he continues to fight and move forward with his life. Later in the day, his wife will drive him to San Francisco VA Medical Center for more physical therapy.

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Thirty years ago, Army Sgt. Rory Cooper was paralyzed. Today Dr. Cooper is a VA senior research career scientist and director of Human Engineering Research Laboratories (HERL), where he dedicates his time researching ways to improve the lives of Veterans with disabilities.

I CARE From Page 5
from the top to the bottom of the organization. We have got to engage everyone in the organization, whether they are union member employees, GS employees, SEC employees, Title 38 employees. Everybody is on the same team. Everybody’s got the same dream. And we have got to work together like a family. We have got to be able to tell each other when things are going wrong and when things are going right. We have to be able to admit ourselves when things are going wrong and not have a fear of reprisal or not some other thing. I want everybody to be a whistleblower. I don’t think you need to fit the legal definition of a whistle blower but I want everybody every day to feel responsibility for improving the way we serve veterans. We should look at everything we do from the lens of the veteran. And if something is not going right, we should change it.

I often tell employees of Veterans Affairs that my organization model is different than others. Typically, an organization model is thought to be hierarchical. It is thought to be a pyramid. And typically, the CEO or the Secretary, in this case, would be on top and the lower ranking employees would be the ones that interface with the veteran. Well, in a service organization like ours where we are serving veterans every single day, that is our only reason for being, we really should invert that pyramid. And the pyramid should be inverted where the broad part is at the top and the apex is at the bottom. And the person at the bottom is me, the Secretary, trying to help those people who are facing the veteran.

So, it is the people facing the veteran every single day providing services to those veterans that are the most critically important people in the organization. And that is why I think being on a first name basis makes us more like family, gives us empathy for that veteran and would allow us to work together with one dream as one team and one family.

Leal: As former CEO of Procter and Gamble, you have extensive experience in the private sector when it comes to workforce management and customer service. How does that translate to veterans?

Secretary McDonald: Well at the Procter and Gamble Company, we are about an 84 billion dollar company. We operate in about 200 countries around the world. And every day, somewhere in the world, about five billion people use at least one Procter and Gamble product. Now, obviously, we would like it to be more. But there is an immense, immense laser-like focus on the customer, every single customer. If you go around the Procter and Gamble headquarters around the world, you will see nothing on the walls but pictures of consumers using our products. We revere those consumers. We focus on what they need and we work hard to meet their needs. Tremendous empathy.

The purpose of the company is to improve the lives of the world’s consumers. And we like to say that the consumer is boss. That is who we serve. Well, the analogy is very clear here at Veterans Affairs. Our boss is the veteran. Our customer is the veteran. We should look at everything we do through the lens of that veteran and make sure we are doing everything we can to help that veteran and do nothing more. In other words, strip out all the unnecessary work that we are doing that doesn’t focus on helping the veteran.

It is a tremendous calling to be able to make a difference in the life of another person. And to be able to do that with a veteran I think is even a higher calling because of what that have done for all of us. So that laser-like focus on customer satisfaction on providing the veteran the care they need is really what is critically important, from my experience.

Leal: Media reports have highlighted several instances where VA employees weren’t serving the veteran well in the past. Why do you think that happens and how do we get everyone on the same page when it comes to seeing things through, like you say, “the lens of the veteran”?

Secretary McDonald: I think the reason some employees fail to live up to our high standards of care is that oftentimes in large organizations the measures within the organization, the inertia within the organization... Continued on next page
tion tends to blind people from the ultimate goal of the organization. Here, at Veterans Affairs, our ultimate goal is to serve the veteran. That is the reason we exist. But there are times where a metric may be set like 14 days and that metric becomes an outcome, rather than a means to an outcome. The outcome has got to be quality care for veterans in a timely way. That has got to be the outcome. Fourteen days was supposed to be a means to that outcomes but it ended up becoming an outcome.

That is not unusual in large organizations. Sometimes leaders take on a life of their own and they forget about their customer. It happened with the Procter and Gamble Company around 1999. We recommitted ourselves to the consumer is boss. It has happened here. That is why I have asked everyone to recommit themselves to our mission of caring for the veteran and to our values of I CARE. It is time to renew that and we should renew that every year so that we do serve a high calling, that we know that the majority of employees have not violated our I CARE values or our mission, and to, hopefully, inspire them that I appreciate what they are doing and so do the myriad of veterans who may not be public in the newspaper and the press, but tell them, on a daily basis.

I have met with so many veterans in so many different facilities and I have to tell you the vast majority of them are thrilled with the care they get. They love the caregivers at the VA. And they are thankful for what we do. So, going out and meeting with people, trying to thank them for what they are doing and inspiring them is part of regaining the employee trust.

Look, we are going to win. Everybody wants to be on a winning team. Every employee I have talked to wants to be on a winning team. This is a winning team. We had a little bit of a setback but think of that as an inning or a quarter of the game and we are going to win the game. And my job is to help employees realize that, to give them the leadership, to give them the strategies, to give them the systems and the culture, the high performance organization to do that. And I think we are well on our way.

Leal: Recently you went to North Carolina to recruit the get the best and the brightest. How important is it, though, to reassure good current employees and also those potential employees that VA is a great place to work at and they should be proud to serve at VA?

Secretary McDonald: Well, the need to regain the trust of employees is as important as regaining the trust of the public. So, one of the reasons I have been going out to Phoenix, Las Vegas, Reno, Memphis, Philadelphia tomorrow, North Carolina, Durham, North Carolina, Charlotte, North Carolina, the reason I have been going out to meet with employees is to listen to their concerns but also to reinforce in their mind that we do serve a high calling, that we know the majority of employees have not violated our I CARE values or our mission, and to, hopefully, inspire them that I appreciate what they are doing and do so the myriad of veterans which may not be public in the newspaper and the press, but tell them, on a daily basis.

I have made it very clear to everyone that we are going to go back, that we are going to get those that we have lost back in order to do that. And I think that is a very sound strategic plan.

And what befuddled me was how did we have those things, yet something went wrong? So, when I saw those and I was testifying in front of the Senate, I actually held up the strategic plan, I CARE and so forth and I said this is very sound.

We just need to implement it. The issue was it was developed in the right way. Employees all over the country were involved in developing I CARE and the strategic plan. But once we developed it, we didn’t deploy it.

What do I mean by that? What I mean is cascading levels of the organization do not have strategies or action plans that tie back to that strategic plan. Every employee doesn’t have an action plan in their personnel review that ties back to that strategic plan.

So, what we are going to do is renewing that strategic plan and then going in and making sure we deploy it throughout the organization by level, by layer, until we get to the lowest level employee, the one on top of the pyramid, who has an action plan that ties back to that strategic plan.

It is great to have an inspiring mission but what people have to have line of sight from their behavior every single day back to that mission.

What happened in our organization is we have a lot of behavior every single day where the employee says I don’t understand why I am doing this because it has nothing to do with serving veterans. We have got to get rid of that stuff and focus only on serving the veterans.
IT is at the heart of everything VA does to serve our Veterans. IT Customer Service is committed to making it all work, every day in supporting you and over 350,000 other VA employees and associates who work in 151 hospitals, 820 community based outpatient clinics, 56 benefits processing offices, 131 cemeteries and 33 soldier’s lots and monument sites who serve over 10 million Veterans and their families each year. Supporting You. Serving Veterans.

IT Customer Satisfaction Survey Starts this Fall

http://vaww.oit.va.gov