

VANGUARD

Winter 2021



75 YEARS

**VETERANS
HEALTH
ADMINISTRATION**

*A Legacy of Service.
The Future of Care.*



VA



U.S. Department
of Veterans Affairs



You can make a difference in Veterans' mental health.

Let Veterans know that VA provides a variety of mental health treatments and services to meet the needs of each Veteran and the family members that are involved in their care.

VA offers mental health care at VA medical centers, Community Based Outpatient Clinics, Vet Centers, and mobile Vet Centers — and online as well.

Learn more at MentalHealth.va.gov.



FEATURES



6

The Best and Brightest

VA Research helps keep alive vision of “medical care second to none.”



10

A Hidden Gem

Nation’s largest health professions trainee program improves care.



14

Veterans Canteen Service: 75 Years of Comfort and Community

VCS cafes and retail stores serve Veterans and employees at VA medical centers across the country.



18

Preserving Our History

Dayton VA Medical Center will house new VA History Center.



22

A History of Innovation

What began as a novel approach to boosting training capacity now provides best in class care for the nation’s Veterans and a compelling case for them to choose VA.



26

Second to None

How the post-World War II era transformed health care for Veterans.

FEATURES



30

Building From Our Past: The Evolution of VA Hospitals

The architecture, look, and footprint of Veterans' hospitals have changed significantly since the first hospitals opened after the Civil War.



34

My VA Perspective

VA took good care of me and I wanted to help VA help other Veterans.



36

When the Going Got Tough

The pandemic has shown us that we can be agile and increasingly innovative when it comes to recruitment and hiring.

DEPARTMENTS

5 > **From the Acting Under Secretary for Health**

13 > **Making a Difference**

39 > **Volunteer Spotlight**

Vanguard | VA's Employee Magazine

Winter 2021 | Volume 62, Issue 1

Published by the Office of Public Affairs (801)
U.S. Department of Veterans Affairs
810 Vermont Ave., N.W. Washington, D.C. 20420

vanguard@va.gov

Available online at <https://vaww.insider.va.gov>

Editor: Lisa Gaegler

Staff Writers: Ann Richardson
Adrian Wilairat
Jennifer Sardam

Art Director: Jeff Pace

On the Cover

The Veterans Health Administration (VHA) has evolved over the past 75 years to meet the unique challenges and care needs of Veterans from every era and at every stage of their lives. Throughout the year, VHA will celebrate this milestone with a variety of commemorative activities.

From the Acting Under Secretary for Health

By Richard Stone, M.D.



A Legacy of Service. The Future of Care. These are more than just words to the people who work with our Veterans every day.

It is our mission to care for those who have borne the battle. It is a mission that began almost at the founding of this country but

was formalized into what we now call the Veterans Health Administration (VHA) 75 years ago.

On Jan. 3, 1946, Public Law 293 formally established the Department of Medicine and Surgery within VA, cementing the proposals that Gen. Paul R. Hawley, M.D., the department's first medical director, introduced. Days later, the first affiliation with medical schools was established between Northwestern University of Illinois and the Hines VA Hospital.

Today's VHA has roots spanning more than 150 years and continues to meet Veterans' changing medical, surgical and quality of life needs.

Between 1946 and 1947, VA Administrator Gen. Omar Bradley and Hawley, armed with a half-billion-dollar budget, continued to change the face of VA health care services, undertaking key initiatives including:

- Converting 55 former military hospitals into Veterans' facilities, increasing the number of hospitals from 97 to 125, and planning for an additional 70 new hospitals, constituting the largest hospital building project in American history, adding nearly 40,000 beds.
- Establishing the Office of Academic Affairs and

creating partnerships with 63 medical schools.

- Recruiting 4,000 full-time VA physicians, nurses, technicians and other medical personnel.
- Incorporating mental health services and facilities into the design and operations of new VA hospitals for the first time, re-envisioning the concept of the modern general hospital.
- Creating a pilot program known as the "Hometown Plan" to allow Veterans to be treated by local physicians, expanding access to care where VA care was not available and providing payments for services for 6 million Veterans.
- Absorbing VA's research and development capacity, committing to spend more than \$1 million each year, beginning with a focus on improving prosthetics for Veterans with limb loss.
- Establishing VA Voluntary Service to augment and complement VA's professional health care staff, gaining 72,000 volunteers by the end of the 1940s.
- Establishing the Veterans Canteen Service in VA facilities to provide low-cost goods to Veterans, their families and caregivers.
- Expanding women's medical care, hiring Dr. Margaret D. Craighill to become VA's first chief medical consultant on women Veterans' medical care and appointing the first 10 women doctors.
- Growing VA staff from 65,000 in 1945 to 200,000 by 1947.
- Creating dedicated research space into plans for new hospitals to study prosthetics, paraplegia, epilepsy, tuberculosis, spinal cord injury, blindness and more.

Today's VHA has roots spanning more than 150 years and continues to meet Veterans' changing medical, surgical and quality of life needs. New programs provide treatment for traumatic brain injuries, post-traumatic stress disorder, suicide prevention, women Veterans and more.

VHA operates one of the largest health care systems in the world and provides training for a majority of America's medical, nursing and allied health professionals. Roughly 60 percent of all medical residents obtain a portion of their training at VA hospitals and our medical research programs benefit society at large.

Though their tenures were brief, with both departing VA in 1947 to return to the Department of Defense, Bradley and Hawley established a founding vision with lasting impact on the organization that would later become VHA. Many of their key initiatives have evolved into the core, foundational care that VHA provides to Veterans today and inspires us to continue this tradition into the future. ♦



The Best

and Brightest

VA Research Helps Keep Alive Vision of
'Medical Care Second to None'

By VA Research Communications

Gen. Paul R. Hawley, M.D., came to VA in 1945 on a mission. As VA's first medical director, he intended to provide Veterans with "medical care second to none." For this, he needed to recruit America's best physicians.

Hawley offered physicians a competitive wage and appealed to their patriotism. He also appealed to their desire to conduct pioneering research.

"The large number of patients to be cared for and the unequaled facilities for continuous follow-up studies possessed by [VA] should make the service particularly attractive to those interested in clinical research," wrote Hawley in the *Journal of the American Medical Association (JAMA)*. "Encouragement will be given to those capable of and interested in independent investigation."

While VA physicians had been doing research since 1925, the doctors Hawley recruited significantly boosted the effort. In 1946, the year his article appeared in *JAMA*, VA and the Department of Defense began a systematic study at nine sites on the effects of the antibiotic streptomycin on tuberculosis.

The researchers found the drug worked. They determined the right dose to minimize side effects and maximize effectiveness. What they learned about large-scale trials formed the basis for VA's Cooperative Studies Program (CSP).

Discovery and Innovation

Today, CSP conducts multisite clinical trials across VA. The results help inform medical care not only in VA, but throughout the United States and the world. One current CSP trial, known by the acronym CONFIRM, is the largest single clinical trial in VA history, involving 50,000 Veterans. It is comparing the effectiveness of the colonoscopy procedure against fecal immunochemical testing for curbing deaths from colon cancer. The study should yield important guidance on cancer screening.

Dr. Oscar Auerbach, who began his VA career in 1947, worked as a pathologist by day and did research before starting work and during nights and weekends. In the 1950s, he became the first physician to link smoking to lung cancer.

VA's innovative research on lung cancer continues today. A major focus is precision oncology. For many Veterans newly diagnosed with non-small cell lung cancer, VA physicians send tumor specimens to qualified laboratories for targeted genomic sequencing. The process determines the DNA sequence of genes considered important in lung cancer. The sequence identifies specific mutations, or changes, that cause the cancer to grow, allowing these Veterans to benefit from drugs already on the market or to join trials of new drugs targeted toward their specific mutations.



Courtesy of VA Research Communications

Dr. Andrew V. Schally (left) first joined VA in 1962 and still conducts research at the Miami VA Healthcare System.



Christopher Padico

Dr. Bruce Montgomery meets with Navy Veteran Allen Petchnick, whose prostate cancer has been treated effectively to date with targeted therapy.



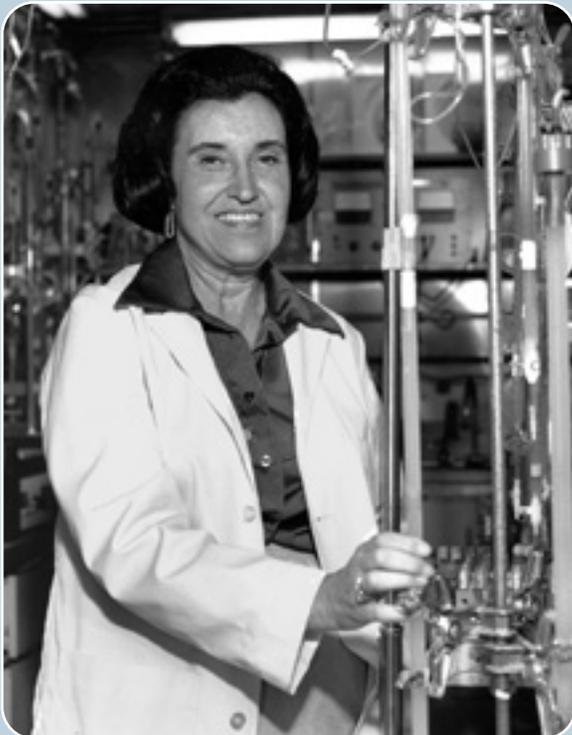
Michéle Minkin

Dr. Tamaro Hudson studies cancer therapies at the Washington, D.C., VA Medical Center.



Courtesy of VA Research Communications

Dr. Andrew V. Schally received the Nobel Prize in Physiology or Medicine in 1977 for identifying the structure of hormonal peptides in the brain.



Courtesy of VA Research Communications

VA researcher Dr. Rosalyn Yalow received the Nobel Prize in Physiology or Medicine in 1977 for her pioneering work on radioimmunoassay; the technique allows substances in the blood to be measured accurately.

Two Nobel Prize Recipients

Rosalyn Yalow, Ph.D., was another researcher whose VA career started in the late 1940s. She set up a lab at the Bronx VA Hospital to study radiation-caused illness in Veterans. In 1977, Yalow received the Nobel Prize in Physiology or Medicine for her pioneering work on radioimmunoassay, which allows substances in the blood to be measured with great accuracy. Yalow shared the award with Dr. Andrew V. Schally, who became a full-time VA researcher in 1962.

Schally received his Nobel Prize for identifying the structure of hormonal peptides in the brain. Today, still vital and active at age 94 and based at the Miami VA Healthcare System, he continues to study hormones, mainly in connection with cancer. He recently showed that a synthetic compound based on growth-hormone releasing hormone, a natural substance made in the brain, can squash tumors and regenerate tissue in several organs.

The first computerized tomography (CT) scanner, the first successful liver transplants, the discovery that early treatment of high blood pressure could save lives and the first clinically successful implantable cardiac pacemaker are among many other accomplishments of VA researchers during the past 75 years. Cutting-edge research in these and other areas affecting Veterans' health is still going strong at VA labs and clinics in 2021.

And much like Hawley in his day, VA still strives to attract, train and retain the nation's top investigators. These bright and talented individuals drive excellence in VA care. As a result, Hawley's vision of "medical care second to none" for Veterans is very much alive 75 years later. ♦

Much like Dr. Paul R. Hawley in his day, VA still strives to attract, train and retain the nation's top investigators.



Dr. Andrew V. Schally at work in 2018 at the Miami VA Healthcare System.

Photo courtesy of Miami VA Healthcare System

Dr. Prasad Padala studies brain stimulation as a potential therapy for dementia at the Central Arkansas VA Healthcare System.

Photo by Jeff Bowen



VA researchers Drs. Rosalyn Yalow (fourth from left) and Andrew V. Schally (third from right) join other Nobel recipients at the award ceremony in Stockholm, Sweden, in 1977.

Photo courtesy of VA Research Communications

A Hidden Gem

Nation's Largest Health Professions Trainee Program Improves Care

By OAA Communications Staff



In 1946, VA Administrator Gen. Omar Bradley and Medical Director Gen. Paul R. Hawley, M.D., faced an enormous challenge: 100,000 new patients returning from World War II and only 1,000 VA physicians to care for them. They planned an unprecedented strategy—partner VA hospitals with medical schools in the United States to recruit doctors, train the next generation of health professionals and care for the nation’s Veterans.

What began as a groundbreaking idea has now led the Veterans Health Administration (VHA) to become the premier health professions training program in the country. With more than 120,000 trainees each year in more than 40 health professions such as pharmacists, nurse practitioners and physician assistants, it’s a mission that is improving quality of care for Veterans, while developing the best and brightest, many of whom choose to spend their entire careers at VA.

Just as Dr. Karen Sanders, deputy chief academic affiliations officer for VHA, did. When Sanders began her internship in 1977, her first rotation was at the Providence VA Medical Center in Rhode Island. “They literally handed me a stack of 25 cards and said, ‘these are your patients, doctor,’” Sanders recalled.

led the development of palliative care and traumatic brain injury specialties and added 1,500 new physician resident positions.

Today, OAA continues to grow affiliate partnerships to provide better access for Veterans while ensuring VA remains a driving force in health care innovation and training for decades to come.



VA Photo

Nearly 70 percent of all physicians in the United States complete at least part of their training at VA.

Courtesy of Karen Sanders



Karen Sanders, M.D., deputy chief academic affiliations officer for the Veterans Health Administration.

A Driving Force in Training

Some residents may have been daunted by the task. But not Sanders, who said she was “immediately hooked” on Veterans and VA. Forty years later, she’s gone from trainee to helping lead the Office of Academic Affiliations (OAA), overseeing the mammoth clinical training enterprise.

It’s an enterprise conducted in collaboration with 144 of 152 medical schools accredited by the Liaison Committee on Medical Education, 34 out of 34 accredited Doctor of Osteopathic Medicine degree-granting schools, and more than 1,800 unique colleges and universities educating health professions trainees.

Today, nearly 70 percent of U.S. physicians complete at least part of their training at VA, as do more than 60 percent of U.S. psychologists, a clinical discipline VA was instrumental in the development and accreditation of in the 1950s.

VA went on to help establish recognition of the physician assistant profession in the 1960s and played an integral role in the development of geriatric medicine as a specialty in the 1970s. In the 2000s, VA

Improving Quality of Care

While Sanders was beginning her VA career, VA was furthering its strategy by co-locating more than 70 VA medical centers with their academic affiliates. What began as a plan to improve the quality of care at VA now equally benefits its affiliates, with more than 70 percent of physicians in VA teaching facilities also holding faculty appointments at a medical school partner.

“The quality of VA is directly related to the quality of its people,” said Sanders, “and that is directly related to the academic affiliations.”

The ability to teach, provide clinical care and conduct research is also a significant recruitment and retention strategy for VA in building its health care workforce.

“You can do all these things and never leave VA,” Sanders said.

“The quality of VA is directly related to the quality of its people and that is directly related to the academic affiliations.” – Dr. Karen Sanders

Out of the Silos

One key strategy for the future of health professions training is interdisciplinary training, according to Sanders. In 2011, OAA led the charge to transform primary care education out of silos by training post-graduate trainees—medical residents, physician assistants, social workers, pharmacists and others—side by side. Trainees benefit from enhanced knowledge and respect for other professions' contributions while developing skills needed to lead and work in multi-disciplinary care teams.

Sanders said it's an important adjustment that helps trainees understand all viewpoints and know what their colleagues do in keeping Veterans healthy.

With 92 percent of trainees stating they are "satisfied" or "very satisfied" with their VA training experience and 72 percent expressing willingness to work for VA in the 2019 VA Trainee Satisfaction Survey, the future of VA and its academic mission is extremely important to Veterans and the department.

"I am so proud of the role that OAA plays in enhancing our affiliation relationships and bringing trainees into VA," said Sanders. "I know that we improve the quality and timeliness of care for Veterans. Without affiliations, VA just wouldn't have the excellent staff that we do. It's a hidden gem." ♦



Deputy Chief Academic Affiliations Officer Dr. Karen Sanders (left), discusses nurse training programs with Office of Academic Affiliations Clinic Nursing Director Jemma Ayyazian.



Help Veterans Quit Tobacco

As a VA employee, you play a key role in supporting the health of your patients. Let Veterans know that quitting tobacco is possible and that VA has proven strategies and tools to help.

Visit MentalHealth.va.gov/quit-tobacco/.

Family Matters: Creating a Legacy of Service

By Jessica Nguyen

The average person will spend 90,000 hours at work over their lifetime, which adds up to roughly one-third of a person's life. For many employees at the Malcom Randall VA Medical Center (VAMC) in Gainesville, Fla., spending so much time with each other results in co-workers being treated like family. For some, that rings true in more ways than one.

The Sutton family, a trio of father and daughters, have had the chance not only to see each other across the dinner table on holidays, they've also had the privilege to pass each other in the medical center halls each day.

Thomas Sutton, former associate director of North Florida/South Georgia Veterans Health System, retired in 2012, but not before enjoying four years of getting to see his two daughters, Elizabeth and Caroline, at work regularly.

“My dad was able to hear stories from us about how things were going in our departments or concerns we or our co-workers had about the hospital.” – Caroline Sutton

Sutton served as associate director of the Malcom Randall VAMC for 28 years. Before that, he held many leadership positions at other VA medical centers for another decade.

Twenty-one years after Sutton first stepped into his role at the Gainesville facility, his oldest daughter Elizabeth joined him as an operating room nurse and has since moved on to Sergeant Ernest I. “Boots” Thomas VA Clinic in Tallahassee, Fla., as a primary care nurse. Shortly after, Elizabeth's sister, Caroline, joined the Malcom Randall VAMC family as an outpatient pharmacy technician and later



Elizabeth, Thomas and Caroline Sutton (left to right) outside the Malcom Randall VA Medical Center.

became an outpatient pharmacist.

Fatherly Encouragement to Serve

Both Elizabeth and Caroline said their decision to join the VA family was based largely on the encouragement of their father to serve the nation's heroes. The fun of “Take Your Child to Work Day” became a daily reality for Sutton, as an administrator of a large health care system who now had his daughters popping in for lunch or just to say “hi.”

The Sutton family is close, and for Thomas, Elizabeth and Caroline, that made working in the same health system a natural fit. “For my dad, being an administrator gave him an insider's view on how things were functioning in the hospital,” said Caroline. “He was able to hear stories from us about how things were going in our departments or concerns we or our co-workers had about the hospital.”

When asked what family means to them, Elizabeth replied, “Having somebody there for you when you need them.” Throughout her time working at VA, Elizabeth has met countless staff members who have

demonstrated just that. She has found mentors and role models, made friends and allies who are there for her when she needs them.

Treating Employees Like Family

While not everyone working at Malcom Randall VAMC has a father or daughter greeting them in the halls every day, they do all seem like “different levels of one big family,” according to Sutton. That's a standard set years ago by Malcom Randall himself.

From the beginning, the first director of the Gainesville medical center and its namesake treated all employees like members of his own family and always emphasized that every employee plays an important part in ensuring quality patient care.

For the last 75 years, the Veterans Health Administration (VHA) has worked tirelessly to make Veterans feel at home when they enter our doors. Setting foot into any VA medical center or clinic should make everyone feel like part of the family. ♦
Nguyen works in Medical Administration Service at the Malcom Randall VA Medical Center.

Veterans Canteen Service: 75 Years of Comfort and Community

By Stacy Papachrisanthou



Established in 1946, Veterans Canteen Service (VCS) was created to provide articles of merchandise and services at reasonable prices to Veterans in the VA health care system, along with caregivers and visitors. Since its conception, VCS' mission continues, incorporating a strategic Veteran-centric approach emphasizing the importance of service to Veterans and supporting VA's overall mission.

VCS employees provide retail, food and vending services across the country. Its operating vision is simple: become an integral part of the VA community and deliver merchandise and services of exceptional quality and value in an environment consistent with high levels of satisfaction and comfort. These guiding principles are the "strategic drivers" of the programs and services offered today.

The VCS PatriotStore offers a large variety of items that can be found at any major retailer, including electronics, men's and women's fragrances, military apparel, giftware, snacks and much more.

VCS is proud to "Give Back" to the VA community by supporting VA's national rehabilitation events, Fisher Houses, disaster relief efforts, homeless Veterans programs, women Veterans and suicide prevention programs, the Warrior to Soulmate program, and other activities. ♦

Papachrisanthou is director of marketing and communications for the Veterans Canteen Service.



Then and Now

Top: In this café scene from the 1950s, lunch specials are displayed at the former Allen Park VA Medical Center in Dearborn, Mich.

Bottom: VCS employees work at the Orlando VA Medical Center's café in 2015.

Photos courtesy of Veterans Canteen Service



VCS employees support the National Veterans Wheelchair Games in Orlando in 2018.



Then and Now

▲ **Top:** Retail store at the Edith Nourse Rogers Veterans Hospital in Bedford, Mass., in 1966.

▶ **Top Right:** Snacks for sale at the Bronx VA Medical Center's retail store in 1960.

▶ **Bottom Right:** Retail store merchandise for sale at the Orlando VA Medical Center in 2015.

▼ **Bottom:** Retail store snacks and cold drinks for sale at the VA medical center in Richmond, Va., in 2016.





Then and Now

▲ **Top Left:** Café scene from 1953 at the former Livermore VA Medical Center in California, now part of the VA Palo Alto Health Care System.

▲ **Top Right:** VCS employees work in the café at Ohio's former Brecksville VA Hospital in the 1960s.

◀ **Left:** Café at the Washington, D.C., VA Medical Center in 2019.



Now and Then

▲ **Top:** VCS employees support the National Disabled Veterans TEE Tournament in Iowa City, Iowa, in 2018.

▶ **Right:** VCS employees with the South Texas Veterans Health Care System in 1975.



VCS Mission: To provide America's Veterans enrolled in VA's health care system, their families, caregivers, VA employees, volunteers and visitors, reasonably priced merchandise and services essential to their comfort and well-being.

Please visit our website: <http://www.vacanteen.va.gov>

Shop online: www.shopvcs.va.gov

Like us on Facebook: www.facebook.com/VAcanteenservice

Follow us on Instagram and Twitter: [@VACanteen](https://www.instagram.com/VACanteen)



Preserving Our History

Dayton VA Medical Center Will
House New VA History Center

By James W. Huckfeldt Jr.



Courtesy of American Veterans Heritage Center

Building 129 was originally built in 1881 and will house a portion of the future National VA History Center on the historic Dayton VA campus.

History was in the making in 2020 as the nation experienced a pandemic, creating a “new normal” of practicing social distancing and donning face masks. It also marked former VA Secretary Robert Wilkie’s declaration in April of an official VA History Office and with it, a National VA History Center.

VA had been one of the few large federal agencies without a history program. A few months earlier, Wilkie and his team had welcomed aboard retired Marine Col. Michael Visconage as VA’s first-ever history director and chief historian. Once Visconage took the helm of the VA History Office, his top priority was overseeing the development of a National VA History Center on the campus of the Dayton VA Medical Center (VAMC) in Ohio.

Thousands of Veterans lived, worked and received medical care at the National Home for Disabled Volunteer Soldiers after the Civil War.

The History Center consists of two historic buildings from the National Home for Disabled Volunteer Soldiers, Central Branch, established in 1867. A 10,800-square-foot headquarters building, constructed in 1871, will house public exhibitions, educational areas, and administrative space for staff.

The second structure, a clubhouse built in 1881, is slated to provide VA’s History Program with 18,300 square feet of space to be used for artifact storage and archival purposes. Each building is currently undergoing significant renovations that will bring these historic structures up to date with building codes and other requirements.

Safeguarding Artifacts and Documents

“These two historic structures, built not long after the Civil War, will be a home for some of VA’s most significant artifacts and documents,” Visconage said. “The National VA History Center will bring together all three administrations within VA to tell the entire history of the unique relationship

between America and our Veterans.”

After construction is complete, VA historians, researchers, writers and the public will be able to access historical VA artifacts and documents. These precious items will be preserved in environments that control light, temperature and humidity in keeping with the best professional practices. In the age of digital media, the History Center will also digitize historic documents and images, making them available virtually to researchers and scholars.

Historians from each of the three administrations will work closely with Visconage and the core project team to develop the “VA story” that will be told in the exhibit spaces. After an initial concept is developed, they will begin the process of working with contractors to design and renovate the buildings for the specific purpose of safeguarding VA’s historical record. Construction is in the first of three phases and the project’s completion is estimated to take approximately four years.

Fulfilling Lincoln's Promise

Dayton VAMC was the ideal location for the VA History Center. Thousands of Veterans lived, worked and received medical care at the National Home for Disabled Volunteer Soldiers after the Civil War.

Abraham Lincoln's promise and VA's mission, "To care for him who shall have borne the battle and for his widow, and his orphan," is the cornerstone of fulfilling federal obligations to Veterans beginning with the Civil War. Officially, VA has

provided health care to Veterans since 1930, but the entire story of caring for the nation's heroes dates to colonial America.

The year 2020 will be remembered for many things, from novel coronavirus to a "new normal," but it will also go down in history as the 90th anniversary of the modern VA, birth of the National VA History Center and creation of the long overdue and much anticipated VA History Office. ♦

Huckfeldt is acting communications specialist with the VA History Office.

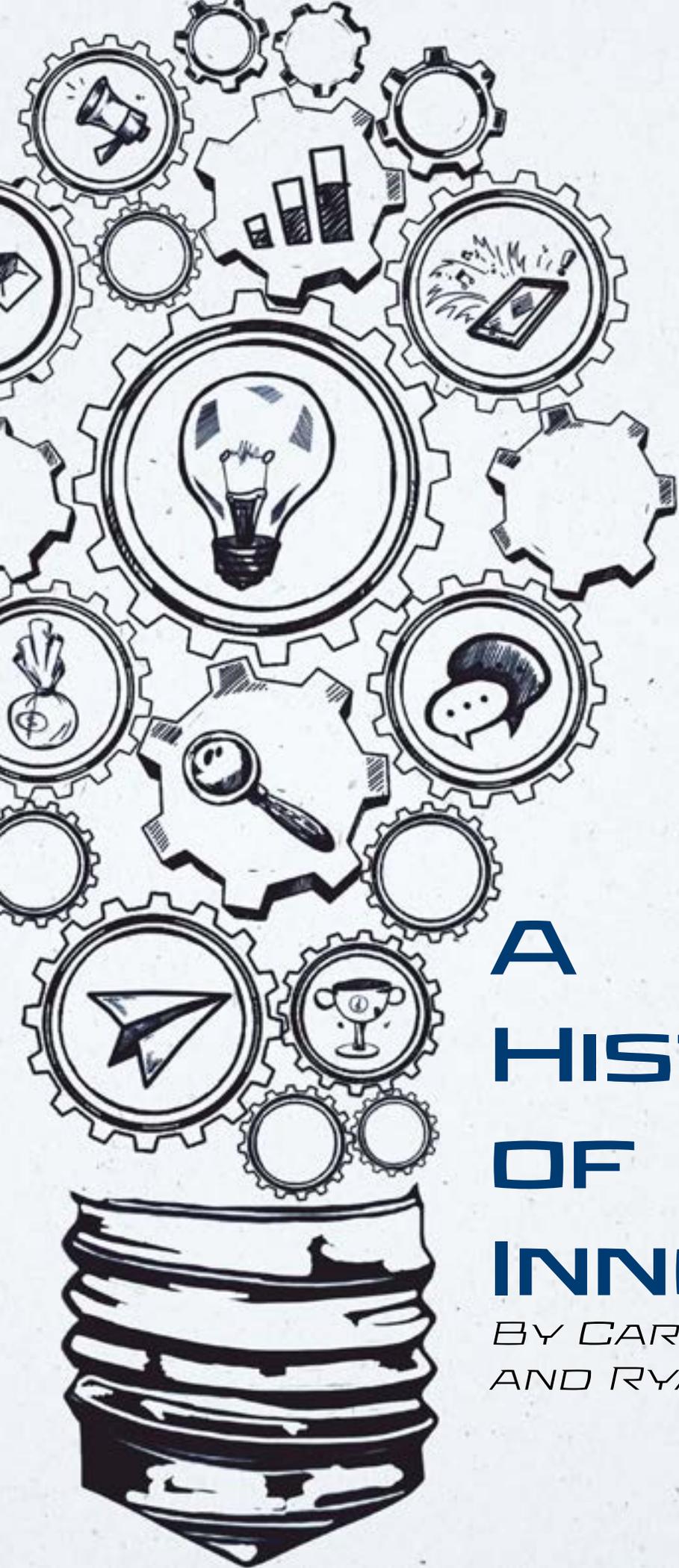
► **Right:** The National Home for Disabled Volunteer Soldiers Clubhouse is one of two buildings being renovated to house the National VA History Center.

Photo courtesy of Dayton VAMC

▼ **Bottom:** The headquarters building from the post-Civil War National Home for Disabled Volunteer Soldiers will hold historic artifacts and documents at the National VA History Center.

Photo courtesy of Dayton VAMC





A HISTORY OF INNOVATION

*BY CAROLYN CLANCY, M.D.,
AND RYAN VEGA, M.D.*

What began as a novel approach to boosting training capacity now provides best in class care for the nation's Veterans and a compelling case for them to choose VA.

Gen. Omar Bradley's idea of pairing VA hospitals with medical schools to meet the challenge of caring for 100,000 new patients was unique for 1946 and "without precedent in the history of Federal hospitalization."

You might say Bradley was VA's first innovator. What began as a novel approach to boosting training capacity now provides best in class care for the nation's Veterans and a compelling case for them to choose VA.

Today, VA conducts the largest education and training effort for health professionals in the United States. Each year, more than 120,000 trainees receive some or all of their clinical training in VA.

Additionally, 65 percent of all U.S. physicians will have trained at VA at some point in their career. VA also manages a 95-year-old research enterprise that has pioneered groundbreaking achievements on behalf of Veterans and all Americans.



Accelerating Employee Innovation

More recently, VA has launched its Innovation Ecosystem—a group of programs that help cultivate, fast track and rapidly disseminate employee innovations to improve Veterans’ care.

In responding to COVID-19, VA has leveraged these programs in education, research and discovery to accelerate work or trends already in progress. One example is remote patient monitoring. At VA, we are using this innovation to better monitor patient outcomes as well as detect trends in care. For instance, remote patient monitoring can be used to observe impacts of insomnia on mental health and resilience or help detect lasting effects of viral infection following a patient’s recovery.

On a broader scale, it can help identify early signs of public health-impacting or highly contagious viruses and diseases and promote greater understanding of individual and community impacts of viral infection or disease transmission.

Another transformative example is 3D printing, which uses computer-aided design to produce three-dimensional products. When applied to health care, it can help doctors visualize organs pre-surgery or be used to customize orthoses and assistive technology, among other capabilities. Today, thanks to the work of innovative staff at the VA Puget Sound Health Care System, 3D printing is being used to accelerate production of face shields, masks, and even ventilator parts.

Collaborating on COVID-19 Response

Additionally, VA is collaborating with the Food and Drug Administration and National Institutes of Health 3D Print Exchange to share data and coordinate on open-source medical products for the COVID-19 response. VA is also working with America Makes to provide resources connecting health care providers and 3D printing organizations.

How do we teach new generations of doctors to leverage innovations such as remote patient monitoring? How do we instill “non-traditional” skillsets, such as helping trainees think beyond standard supply chain products to anticipate and therefore prevent potential disruption? Looking more broadly, how do we prepare young doctors for health care in the post-COVID world?

Now, as in 1946, graduate medical education (GME) can serve as a springboard for transformative thinking and change. As we celebrate this unique milestone in VA’s history with its academic affiliates, it is also important to train new doctors in the skills needed to support these, as well as other care innovations, in the post-COVID world.

Exploring the Possibilities

GME electives are critical to ensuring that rising health care providers are directly involved in the design, development and implementation of health care innovation. Such involvement shapes the lens through which they see the value of exploring the possibilities of health care transformation versus accepting status quo.

GME electives also serve the urgency of ensuring fresh ears, eyes and minds are actively involved in providing cutting-edge, transformational care. And they help keep residents focused on the future.

Like any innovation in care, gaining acceptability and becoming formally established within GME curricula can be challenging. As remote care monitoring, supply chain management and emerging technologies increasingly become the health care norm, VA can again play a critical role in accelerating GME.

As we celebrate the 75th anniversary of our organization, and honor its first innovator, we look forward to working with our academic partners to again raise “generally the standard of medical practice in the United States by the expression of facilities for graduate education.” ♦

Clancy is Assistant Under Secretary for Health, Discovery, Education and Affiliate Networks and Vega is executive director of the VHA Innovation Ecosystem.



▲ **Top:** A 3D printed mask component, fresh out of the printer, developed as part of VHA’s joint open-source medical products effort with the Food and Drug Administration and National Institutes of Health 3D Print Exchange.

Photo courtesy of VHA Innovation Ecosystem

► **Right:** 3D printed mask prototypes, developed as part of VHA’s joint open-source medical products effort with the Food and Drug Administration and National Institutes of Health 3D Print Exchange.

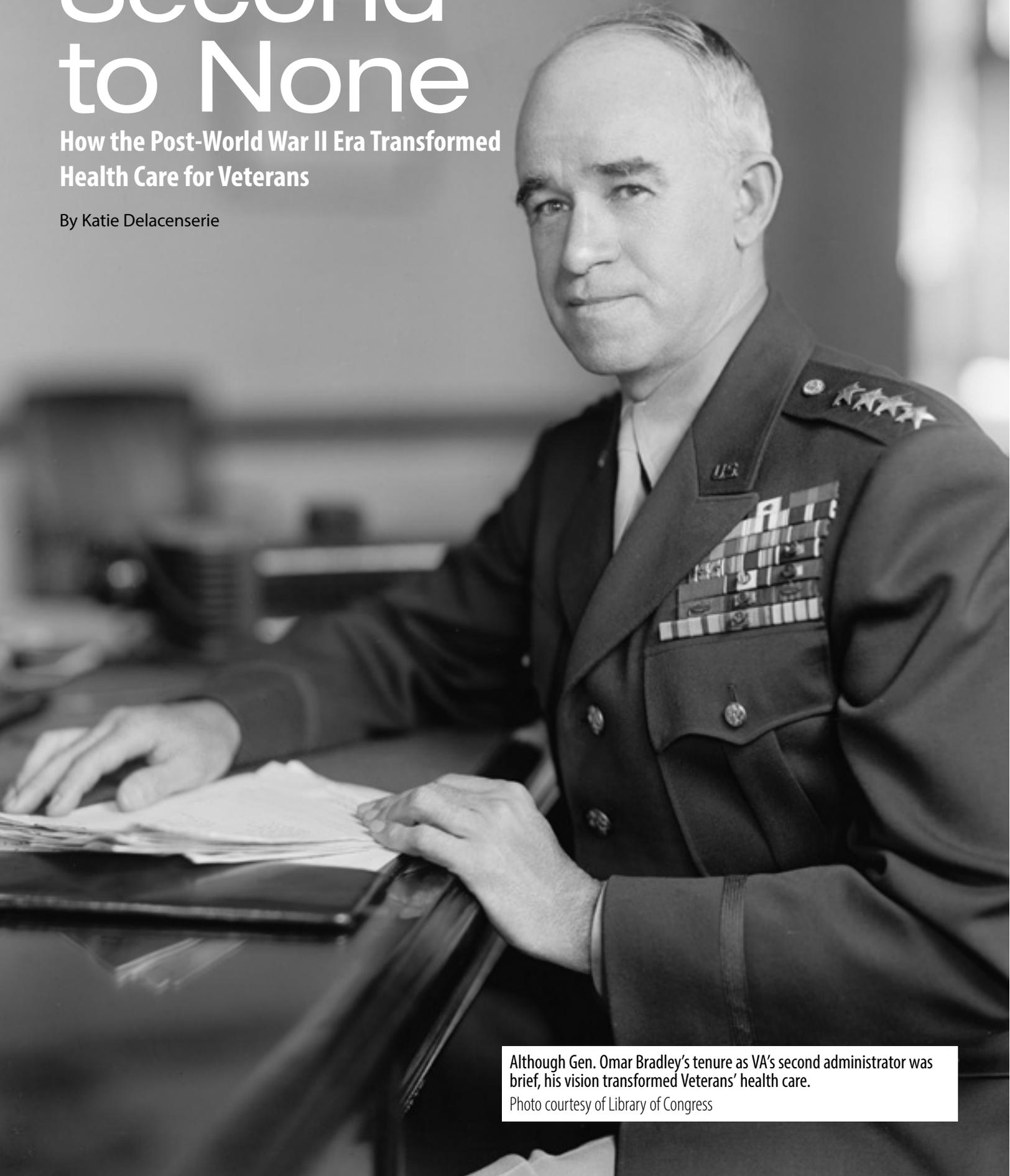
Photo courtesy of VHA Innovation Ecosystem



Second to None

How the Post-World War II Era Transformed
Health Care for Veterans

By Katie Delacenserie



Although Gen. Omar Bradley's tenure as VA's second administrator was brief, his vision transformed Veterans' health care.

Photo courtesy of Library of Congress



Armistice Day parades took on new meaning in 1945, when the nation's Veteran population increased by 16 million.

Photo courtesy of Austin History Center, Austin Public Library

On Aug.15,1945, just one day after VJ day, while the nation was still celebrating the end of four long years of war, Gen. Omar Bradley was sworn in as the second administrator of the Veterans Administration.

Speaking to a group of reporters afterwards, Bradley, acknowledging his hesitations about accepting the position, said, "I don't think there's any job in the country I'd sooner not have nor any job in the world I'd like to do better, for even though it is burdened with problems, it gives me a chance to do something for the men who did so much for us."

While the federal government had provided medical care in some form to Veterans since the first Soldiers' Homes opened after the Civil War, the post-World War II era saw the need to dramatically re-envision the role of VA in caring for nearly 16 million new Veterans.

One of Bradley's first decisions was to enlist Gen. Paul R. Hawley, M.D., the former chief military medical officer of the European theater, as his head medical advisor. Bradley and Hawley took on the challenge of modernizing VA health care while also recognizing that the mistakes of the past that led to the Bonus March of 1932 and other controversies should not happen again.

Most pressingly, Bradley and Hawley needed to recruit thousands of doctors to meet the immediate demand. The war and an outdated hiring process limited to the confines of the Civil Service System had left the ranks of VA doctors depleted and a remaining eligible workforce for hire that was on average over 60 years old.

Hawley knew that the best doctors were coming out of medical schools and he led the charge to create new academic partnerships and hiring structures. Partnering with the nation's best medical schools would allow VA to benefit from the research and teaching talents of these institutions, provide training for Veterans pursuing medical education after the war, and gain a younger and more innovative workforce that could be directly hired outside the Civil Service System.



Gen. Paul R. Hawley, M.D., VA's first medical director.

**“I don't think there's
any job in the country
I'd sooner not have nor
any job in the world
I'd like to do better.”**
– Gen. Omar Bradley

'Third Generation' Hospitals

If Hawley wanted to affiliate with the best medical schools, then the location and structure of VA hospitals themselves would need to change. The sprawling campuses of Soldiers' Homes and hospitals that followed the Civil War and World War I were often located in rural areas and built as congressional pet projects.

Bradley and Hawley decided that to serve the greatest number of Veterans, new hospitals would need to be built near larger cities close to the major medical schools with which they now sought to affiliate. A greater emphasis was placed on innovation in these "Third Generation" hospitals and large amounts of space were dedicated solely to research in what was slated to be the largest hospital construction project at the time.

The push to reform VA medicine was not without challenges, though, as both Bradley and Hawley threatened to resign in late 1945 over hiring reforms. In the end, with overwhelming support, Bradley's and Hawley's ambitious plan prevailed and on Jan. 3, 1946, President Truman signed into law PL 97-293 creating the Department of Medicine and Surgery within VA.

New Era in Care

While Bradley's and Hawley's tenures were brief, their vision ushered in a new era in Veterans' health care. As one publication at the time noted, "In two years, General Bradley has transformed the medical service of the Veterans Administration from a national scandal to a model establishment."

Hawley's comments at the time of the founding of the Veterans Health Administration retain their sense of inspiration and challenge. "With the signature of the Medical Department Act, our objective is clear, a medical service for the Veteran that is second to none in the world. Around the splendid nucleus of excellent men and women in the VA medical service, we shall build an outstanding service."

Seventy-five years later, countless doctors, nurses, volunteers, students and public servants make their own miracles every day to ensure Veterans' health care remains second to none in this nation. ♦

Delacenserie is an historian with the Veterans Health Administration.



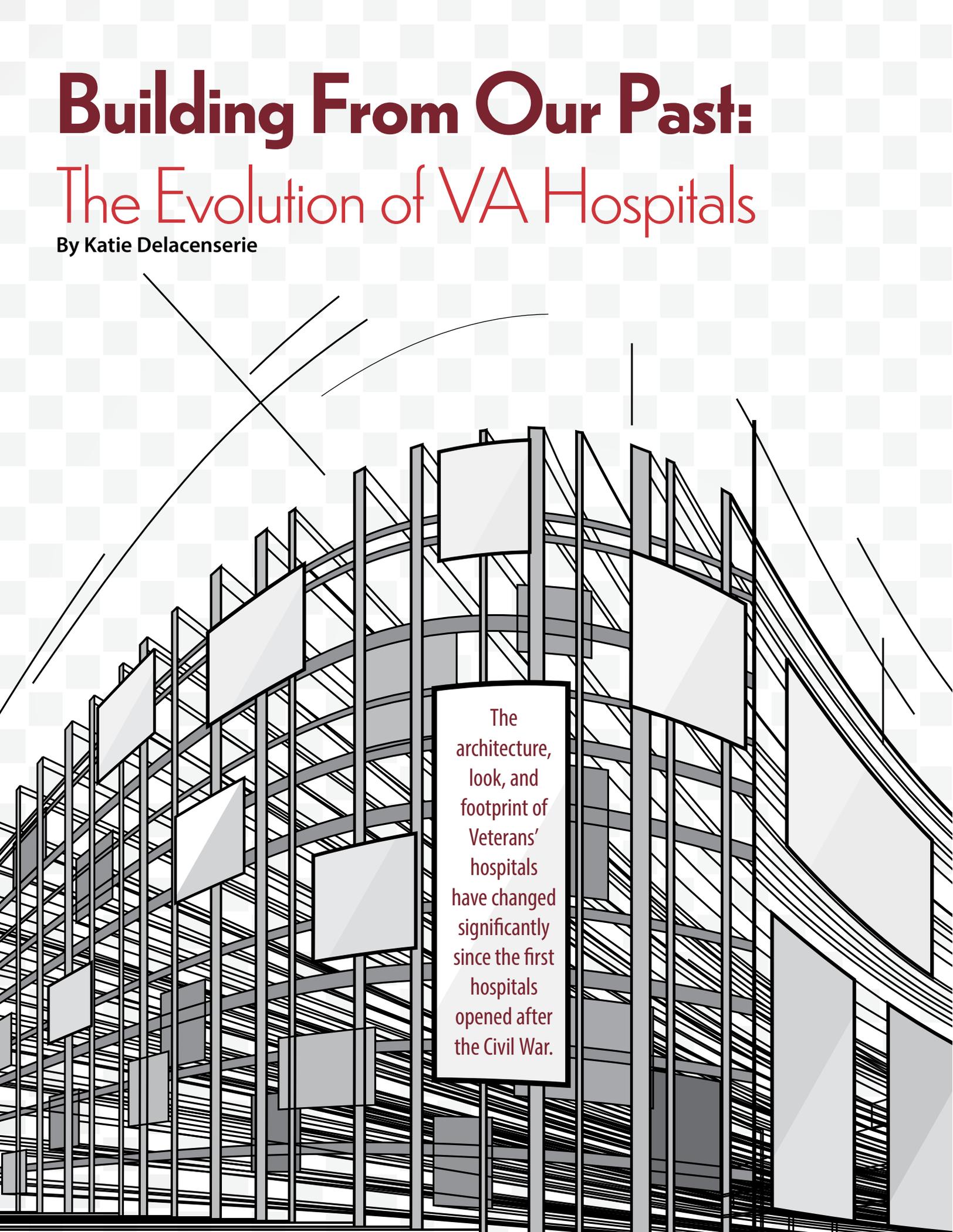
Dr. Paul Magnuson, Gen. Omar Bradley and Gen. Paul R. Hawley, M.D., (left to right) architects of the Department of Medicine and Surgery, in 1946.

Medical Care of Veterans

Building From Our Past:

The Evolution of VA Hospitals

By Katie Delacenserie



The architecture, look, and footprint of Veterans' hospitals have changed significantly since the first hospitals opened after the Civil War.

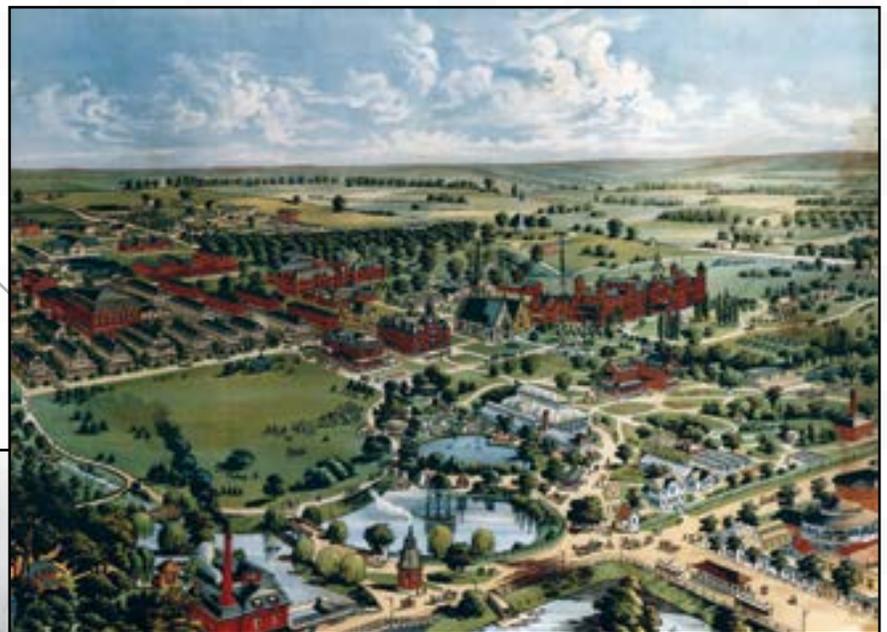
Today's VA medical centers and the wide range of services they provide for Veterans are ingrained into the fabric of modern American society and culture. The architecture, look, and footprint of Veterans' hospitals have changed significantly since the first hospitals opened after the Civil War and are still evolving to meet the latest in medical innovation and contemporary research needs.

First Generation

First Generation hospitals were constructed by the National Home for Disabled Volunteer Soldiers for the care of Union Civil War Veterans between 1866 and 1930. Home Branches were built in Togus, Maine, Dayton, Ohio, and Milwaukee, Wis., among others—a total of 11 in all.

Hospital Features

- Miniature cities with multiple buildings
- Residential communities
- Located on large tracts of land in rural areas
- Provided lifelong medical, surgical and holistic care as well as burial grounds
- Picturesque landscapes
- First racially integrated federal civilian institutions



▲ **Top:** Artist's rendering of the National Home for Disabled Volunteer Soldiers campus in Dayton, Ohio.

Photo courtesy of Dayton VAMC



◀ **Left:** The Eastern Branch of the National Home for Disabled Volunteer Soldiers in Togus, Maine, was the first to open.

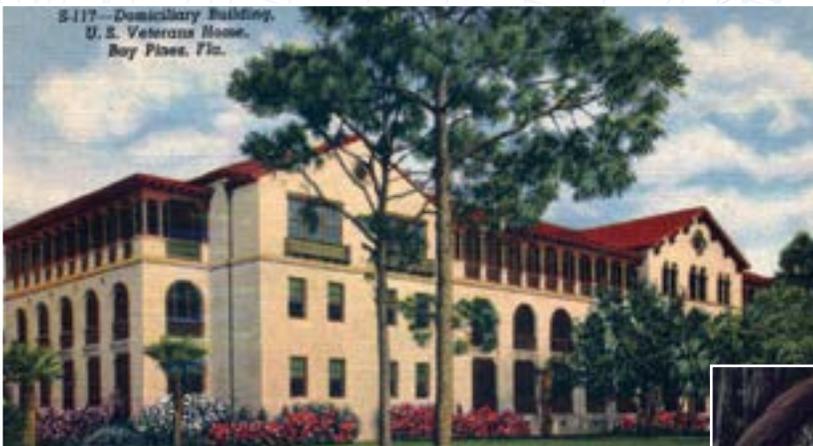
Photo courtesy of Togus VAMC

Second Generation

The next set of Veterans' hospitals was constructed between 1919 and 1940 for World War I Veterans and are known as Second Generation hospitals. Locations of more than 50 Second Generation hospitals include Hines, Ill., Bay Pines Fla., and Tuskegee, Ala.

Hospital Features

- Focused on rehabilitative services instead of lifelong care
- Classified into three types: General Medical and Surgical; Tuberculosis; or Neuropsychiatric
- Located on large tracts of land in rural areas
- Typically had "H" or "I" footprints, with standardized building plans
- Featured Classical Revival or Colonial Revival architectural elements
- Segregated by race, with the hospital in Tuskegee becoming the first segregated federal Veterans hospital



▲ **Top:** A vintage postcard showing a building on the Veterans Home campus in Bay Pines, Fla., a Second Generation hospital.

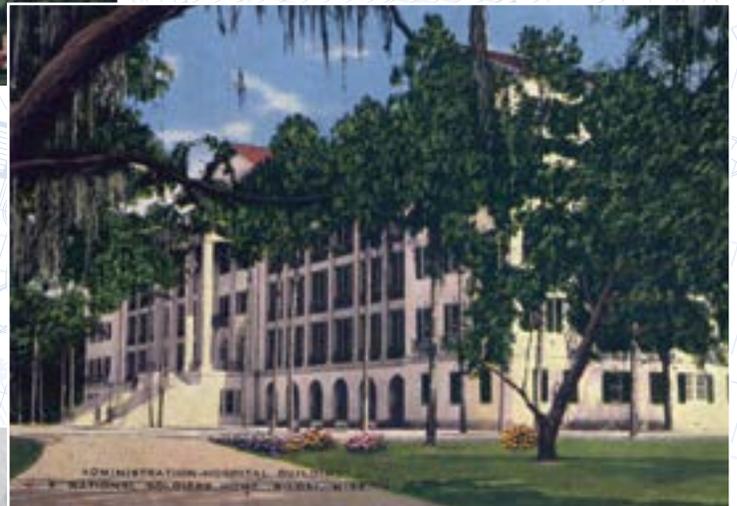
Photo courtesy of VA History Office

▶ **Right:** This vintage postcard shows the National Soldiers Home in Biloxi, Miss.

Photo courtesy of VA History Office

▼ **Bottom:** The Edward Hines, Jr. VA Hospital near Chicago is an example of a Second Generation hospital.

Photo courtesy of National Library of Medicine



Third Generation

Third Generation hospitals were authorized for World War II Veterans beginning in January 1946. Under VA Administrator Gen. Omar Bradley, VA hospitals began to modernize and partner with medical schools and conduct scientific medical research as never before. Fifty-two new hospitals were built in total from 1946 to 1958, including those in Michigan, Colorado and Missouri, while several others were acquired from the Army and Navy, such as Carl Vinson VA Medical Center in Georgia.

Hospital Features

- Located in populated areas and near major medical schools
- Slated to be the largest federal Veterans' hospital construction program in history
- Focused on rehabilitation and returning Veterans to civilian life
- Classified into three types: General Medical and Surgical; Tuberculosis; or Neuropsychiatric
- "Skyscraper" era of Veterans' hospitals
- Entire floors and wings devoted to medical research and innovation
- Racial segregation officially ends in 1954



▲ **Top:** Aerial view of the Salt Lake City VA Medical Center, built as a Third Generation hospital.

Photo courtesy of Salt Lake City VAMC

◀ **Left:** The former Lakeside VA Hospital in Chicago was built as a Third Generation hospital.

Photo courtesy of National Library of Medicine

Looking Forward

The recently opened Ambulatory Care Center on the Nebraska-Western Iowa Health Care System's Omaha VA Medical Center campus is a first of its kind. Built with a combination of public and private funds made possible by the CHIP-IN for Veterans Act of 2016, it is a model for the future direction of Veterans' health care.

Ambulatory Care Center Features

- Fully dedicated Women's Health Clinic specializing in gynecological services and providing women Veterans with access to mental health, social work, whole health and maternity care
- Combines three primary medical clinics with additional specialty clinics, radiology facilities and five new dedicated ambulatory surgical suites
- Veteran-themed features such as a Healing Garden ♦

Delacenserie is an historian with the Veterans Health Administration.



▲ The new Ambulatory Care Center on the Omaha VA Medical Center campus is a model for the future.

Photo courtesy of VA Nebraska-Western Iowa HCS

My VA Perspective

By Fred Downs

VA took good care of me and I wanted to help VA help other Veterans.



▲ **Top:** Army Veteran Fred Downs lost his left arm above the elbow when he stepped on a land mine in Vietnam.

◀ **Left:** Fred Downs demonstrates the LUKE prosthetic arm at the Smithsonian's Military Invention Day in 2017.

Photos courtesy of Fred Downs



I lost my left arm above the elbow and suffered grievous damage to my right arm and lower body from a “Bouncing Betty” land mine in 1968. Like many Vietnam Veterans, I was angry about the way America treated Vietnam Veterans when I was discharged.

But VA sent a vocational counselor to Fitzsimons Army Hospital in Aurora, Colo., to meet with me and other wounded soldiers. He began the process of enrolling me in VA care. I received a 100 percent disability rating, a monthly disability check, a prosthetic arm, a car grant and automobile adaptive equipment so I could drive the car.

VA paid for my tuition, an educational stipend, fees and books at the University of Denver, where I received my undergraduate and master’s degrees. I had no idea the government would take care of me after I was discharged from the Army. I had naively assumed I would be on my own.

The experience left me feeling VA took good care of me and I wanted to help VA help other Veterans. In 1974, I started working for VA in Denver at the regional office as a management analyst. I transferred to VA Central Office in 1976. Four years later, I became the assistant director of the regional office in Albuquerque, N.M.

I was named national director of Prosthetic and Sensory Aids Service in 1980. I held that position for 30 years. I was also named chief procurement and logistics officer for the Veterans Health Administration the last seven of those years.

Support for Making Changes

I worked for VA 38 years and contributed to positive changes in my position as national director of Prosthetic and Sensory Aids Service. My staff was composed mostly of disabled Vietnam Veterans who believed, as I did, that we had the support of the Chief Medical Director and the Administrator and later the Secretary to make changes.

The Chief Medical Director told me that Prosthetic and Sensory Aids Service was the worst service in the Department of Medicine and Surgery, and I was there to fix it.

The Prosthetic Service at each medical facility was on their own, with no guidance from Central Office. The prosthetic chiefs and their staffs were poorly trained or not trained at all. There was no standardization of policy or procedures, and in many cases personality differences between prosthetic chiefs and disabled Veterans resulted in unequal care or denial of prosthetic devices to help Veterans overcome their disabilities.

My staff and I established standard policies and directives, standardized training programs, weekly

conference calls and set up communication protocols. We were available to the field for questions and made site visits with written reports and recommendations to improve service.

World Leader in Prosthetics

We developed the philosophy that any prosthetic device available in the marketplace would be available to prescribe for Veterans. We worked with the Veterans service organizations to establish centralized funding to protect money used by facilities to purchase prosthetics.

Protection was needed because facilities treated prosthetics like any product purchased for maintenance of the facility. Prosthetics was not perceived to be an important clinical necessity. Therefore, a prosthetic order was not given priority. Instead, a prosthetic order was put in the stack of other orders to be purchased for the hospital.

Disabled Veterans had to wait weeks or months to receive their prosthetic device from VA. My staff and I wanted the prosthetic orders to receive immediate attention and be purchased as soon as possible. Many prosthetic devices are expensive. Technology to assist the disabled has increased rapidly in type and volume.

When I became the director in 1980, the prosthetic budget was \$170,000. When I retired in 2011, the budget was more than \$2 billion.

Prosthetics in VA is defined as any inorganic device or service that replaces or supports a bodily function. This is unique to VA and it’s what makes VA the world leader in prosthetics. We approved the first computer leg, the energy storing foot, the robotic arm and many other state-of-the-art prosthetics to be prescribed in VA. Medicare took its lead on prosthetics from VA’s provision of devices and services.

Our goal was to make sure the clinical staff did not have to worry about the cost of a device. They could, instead, concentrate on what prescription would best assist the disabled Veteran in overcoming their disability. And when I retired in 2011, the VA prosthetics program had accomplished that goal. ♦

Downs is the former national director of Prosthetic and Sensory Aids Service and former chief procurement and logistics officer with the Veterans Health Administration.

When the Going Got Tough

Celebrating VHA's Dedicated Employees

By Jessica Bonjorni

For 75 years, the Veterans Health Administration (VHA) has been a national leader in health care by providing high quality care to America's Veterans. The past year is a microcosm of our celebrated history, as we have shown the world that an agency with more than 350,000 employees can pivot on a dime to make systemic and lasting change to our business practices and processes.

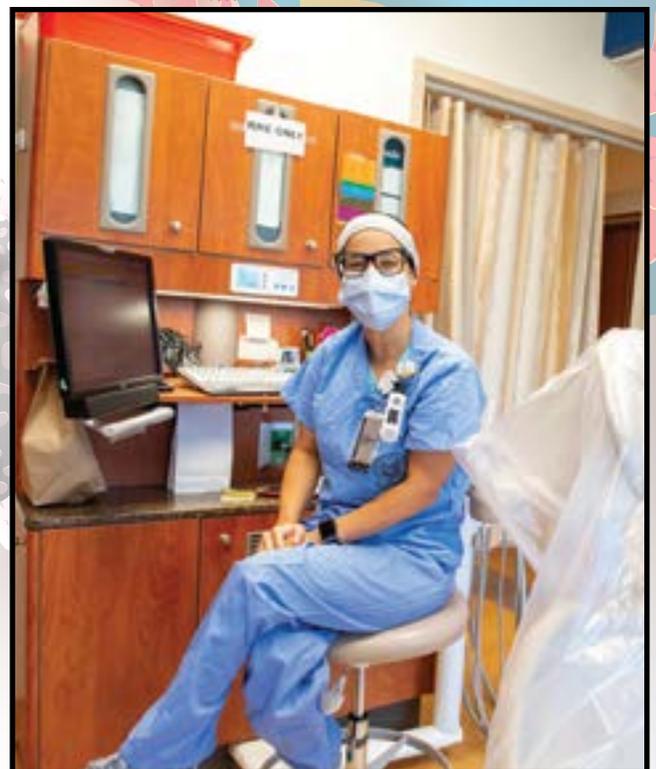
The pandemic has shown us that we can be agile and increasingly innovative when it comes to recruitment and hiring.

The pandemic has shown us that we can be agile and increasingly innovative when it comes to recruitment and hiring. The reason we've seen such success in this area is because of you—VHA employees—who bring solutions to the table and diligently put them into practice.

When many non-VA health care systems were furloughing clinical staff because of the COVID-19 pandemic, VA moved mountains to welcome them into the VHA family. VA hired more than 65,000 new staff members during the ongoing pandemic, including more than 11,000 registered nurses.

VA employees have a long history of stepping up when our Veterans and nation need us most.

VA Photos





Removing Hiring Barriers

VHA took an aggressive approach while partnering with the Office of Personnel Management to remove hiring barriers. We thoroughly examined the policies and procedures that got in the way of bringing on high-caliber talent in an efficient, expedient manner. This enabled us to lower the amount of time it took to bring someone onboard from 100 days to as little as three days.

In addition to increasing hiring efficiencies, VA tapped into existing networks by launching a campaign to bring back retired VA clinicians. More than 125 retired VA providers came back and are currently serving alongside their former colleagues in various roles across the country.

VA also used the Disaster Emergency Medical Personnel System (DEMPS) to support COVID hot spots across the country. In fact, there have been more than 3,500 deployments on 98 missions to 49 states and territories to support COVID operations.

DEMPS volunteers not only deployed to VA medical centers but also to non-VA health care systems, state Veterans homes and to support our federal partners such as the Indian Health Service. Our response reflects VA's fourth mission, which is to improve the nation's preparedness for response to war, terrorism, national emergencies and natural disasters. At one point, VHA put out a call for 45 employees to deploy to Arizona with nearly double that amount stepping up to volunteer within a matter of hours.





Making it Possible

Looking to the future, VA hopes to continue many of the hiring flexibilities necessitated by COVID. Some examples include expedited credentialing, expanding the number of direct hire authorities, recruitment, relocation and retention incentives, and much more.

Our hiring success during the pandemic would not have been possible without the input, feedback and resolute commitment of VA's employees to seeing it through. Thank you! ♦

Bonjorni is chief of Human Capital Management with the Veterans Health Administration.

From Youth Volunteer to 40-Year Employee

By Sabrina Clark

In June 1977, bellbottomed American teenagers everywhere were impatient for the final school bell, hot weather and the coming dog days of summer. In Little Rock, Ark., a shy 15-year-old named Michelle Raney planned to see all the hit movies of that summer: *Star Wars Episode IV: A New Hope*; *A Bridge Too Far*; and *The Spy Who Loved Me*.

But her mother had other plans for Raney. The late Shirley Trevino was a trailblazing VA employee who decided it was high time her daughter started her own VA journey by volunteering through VA Voluntary Service (VAVS), which had just celebrated the 30th anniversary of its founding.

Trevino, a single mother, was convinced that volunteering would help the young Raney come out of her shell, learn practical business skills, and foster the same sense of confidence that Trevino had in spades.

Begrudgingly, Raney joined her mother every day as an unpaid volunteer at Central Arkansas Veterans Healthcare System. "I wasn't exactly thrilled about that," Raney explained, "because I was going to be doing work, not getting paid for it and be supervised by adults while my friends were out having fun."

"I understood the language of VA. My mom worked for VA, my father worked for VA, my sister worked for VA. I loved being a VA brat."

— Michelle Raney

Long VA Journey Begins

While typical 15-year-olds frolicked outside in the summer heat, Raney's summer was spent in professional attire in an office building. Feeling like a fish out of water, she faced an unfamiliar world of filing, bookkeeping, key punch



Michelle Raney wearing the pin she received recently for 40 years of VA service.

programming, business machines, phone systems and interactions with adults more than twice her age.

Gradually, Raney rose to the daily challenge and began to master clerical duties, which accelerated her confidence and squashed her self-doubt.

Following a successful summer of volunteerism, Raney started school feeling like a young Luke Skywalker who had just learned the ways of the Force. In her Business Machines class, Raney excelled and at times outpaced her instructors.

Raney realized she had found her calling and was about to embark on a VA journey spanning more than four decades, seven states and Central Office.

Four Decades and Counting

Raney was raised in a family of military servicemembers and VA employees who knew the importance of honoring those who have borne the battle. "I understood VA," she said of her upbringing. "I understood the language of VA. My mom worked for VA, my father worked for VA, my sister worked for VA. I loved being a VA brat."

Throughout the 1980s, Raney enjoyed her career as a full-time VA employee. Whether providing clerical support for a psychiatric

ward in Ohio or a spinal cord injury unit in California, Raney connected a sense of profound fulfillment with serving Veterans.

As Raney worked her way up in inventory management, purchasing and procurement, a common ingredient in her recipe for success was volunteerism and the character she first developed as a 15-year-old: to do more than required; learn new skills; and continually challenge and stretch herself.

Raney thinks fondly of her late mother, remembering Trevino as her best friend. From her early years, begrudgingly becoming a volunteer at age 15, to learning web design in the late 1990s, Raney took heed of her mother's advice and is all the better for it.

In anticipation of the 75th anniversary of the founding of VAVS, Raney recommends VA volunteerism to every parent she meets. After all, she started volunteering shortly after VAVS' 30th Anniversary and has remained with VA for four decades and counting.

Raney still carries the spirit and confidence that volunteering at VA first unleashed "a long time ago in a VA far, far away." ♦

Clark is director of Voluntary Service with the Veterans Health Administration.

Courtesy of Michelle Raney

MakeTheConnection.net can support your work with Veterans.



At **MakeTheConnection.net**, Veterans can:

Watch fellow Veterans share their inspiring stories of strength and recovery.

Explore signs and symptoms of mental health conditions.

Find mental health resources and support available in their community.

*“The **Make the Connection** website can... be helpful for providers who have been serving Veterans for a long period of time, but also for new providers to gain some understanding and to really hear it from the voice of the Veteran.”*

— Amy, VA Psychologist
