Durham VAMC Hosts Veteran Welcome Home

A Veteran’s spouse bowls with her family at the Welcome Home event hosted by the Durham VAMC Aug. 19 for returning Operations Iraqi Freedom, Enduring Freedom and New Dawn Veterans. Around 100 Veterans, plus family and friends, gathered at Durham AMF Lanes for the celebration, a once-a-year event to honor those who have served. “I hope the words ‘thank you for your service’ never get old and reach your ears for many years to come,” Durham VAMC Director DeAnne Seekins told the group. Veterans and their families shouldn’t have to face the transition alone when Veterans return home, she added. “We will always be here for you,” she said.

Linnie Skidmore

Richmond VAMC Director To Lead VISN 7

Charles E. Sepich has been selected to become the Network Director for VA’s Southeast Network, VISN 7. VISN 7 consists of nine health care institutions in Georgia, Alabama, and South Carolina, providing health care to more than 350,000 Veterans.

Sepich has served as director of the Richmond VAMC since June 2009.

“It has been a tremendous experience that has allowed me to continue with my personal and professional growth. I am proud of many accomplishments during this time and it is a tribute to the great staff at our medical center to see them come to fruition,” wrote Sepich in an e-mail message to Richmond VAMC staff announcing his departure in August. “The Veterans of our healthcare system realize that we are listening and have worked hard on the improvements they’ve suggested.”

A native of Pennsylvania, Sepich holds a Master of Public Administration degree from Pennsylvania State University and a Bachelor of Science degree from Illinois State University. He is a Fellow in the American College of Healthcare Executives, serves on the ACHE VA Regional Advisory Council and is a certified VHA Mentor. He was the Central Virginia Combined Federal Campaign Chairman for 2011.

Sepich thanked Richmond VAMC staff for “your support during my time in Richmond and wish all of you the very best!” Noting their successful hosting to this year’s National Veterans Wheelchair Games, he said the Richmond staff’s hard work and accomplishments contributed to his consideration for such a high-level position as VISN 7 network director.

In announcing Sepich’s new assignment, VISN 6 Network Director Daniel F. Hoffman offered congratulations on his appointment, asking VISN 6 employees and Veterans to “join me in wishing him well as he embraces this new milestone in his professional career.”

Sepich will transfer to VISN 7’s Atlanta headquarters this month.

David Budinger will serve as Richmond VAMC’s interim director.

Charles E. Sepich

Inside in Brief

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Pg 25 VISN 6 Sites of Care with addresses and phone numbers for each location.
Last week, a diverse group of senior management, providers, nurses, key personnel and union representatives laid the foundation for a strategic plan that should set a course for this network that will see us well into the decade.

Our goal was to identify the top strategic issues facing our network and adopt five to seven strategic priorities and goals we could institute that take into effect our alignment with VHA’s goals, the impact to quality and availability of services, health care outcomes, Veteran satisfaction, workforce recruitment, retention and satisfaction, and a whole host of other important aspects of providing health care.

Over three days, we examined internal and external factors that affect our mission and the environment we operate in. We can assume that a rise in the Veteran population will be met with constrained budgets, which is why it is more important than ever to ensure we are working as smartly as possible. We also know that the delivery of health care is changing industry-wide. Inpatient stays for all but the most critical cases are becoming obsolete. We must build and adapt, as the industry is doing, for more outpatient care that includes face-to-face visits, tele-health, secure messaging and other forums to engage Veterans.

We reviewed projected workloads by gender and specialty. We know that women make up the fastest growing population of Veterans and that we need to do what it takes to meet their needs with an absolute commitment to providing the most comprehensive care possible.

Our groups left no stones unturned. We looked at ways to exceed patient satisfaction; how to recruit and maintain the best employees; how to improve the coordination of care and leverage technology and also what needs to be done to attract Veterans not currently using our facilities.

The group reviewed the tools we have now and those we will add to enable us to remain on the cutting edge of medicine while providing increased efficiencies, and most importantly providing value to Veterans in a Veteran-centric model of care. We took all the ideas, recommendations and suggestions from the first day and kept refining them until we had what all could agree were the top issues to focus on. We broke into small groups with each group reviewing each issue on their own and then presenting their collective thoughts to the group as a whole and again, broke out into different groups and looked at the issues with new dynamics.

The point was to ensure that this meeting, which began as an open forum, would result in a focused outcome worthy of pursuing.

We know Veterans have options where they obtain their health care. We reviewed projected workloads by gender and specialty. We are obligated to not only meet their expectations but to provide recognized unrivaled care and service to those who have served. So, with the foundation poured, the complex work of flushing out the goals and strategies really begins. We have set an aggressive timeline to have these goals and strategies ready to institute by Oct. 1. I look forward to sharing them with you next month.

Sincerely,
Dan Hoffmann

Network Seeks Health Care Providers
The VA Mid-Atlantic Health Care Network is looking for highly qualified health care providers. If you or someone you know is looking for a challenging and rewarding opportunity, please contact Harold “Keith” Liles Jr., Mid-Atlantic Region’s National Healthcare Recruitment Consultant, for additional information. Liles can be reached via email at Harold.Liles@va.gov or by phone at 919-408-4741.

Current Vacancies
Primary Care Physician for Patient Aligned Care Team: Durham, N.C.
Emergency Medicine, Psychiatrist, Hospitalist, Chief of Medicine: Fayetteville, N.C.
Emergency Medicine: Morehead City, N.C.
Hospitalist, Geriatrician: Salisbury, N.C.
Chief of Medicine, Associate Chief of Staff for Geriatrics/Rehab/Extended Care, Community Living Center Physician: Hampton, Va.
Emergency Medicine: Richmond, Va.
Urologist, Nephrologist, Gastroenterologist, Dermatologist: Salem, Va.
Pulmonologist, Psychiatrist, Gastroenterologist: Beckley, W Va.

President Harry S. Truman approved the National Security Act of 1947 and issued Executive Order 9877, which outlined the duties of the three services. The new National Military Establishment came into being on Sept. 17, 1947, with James Forrestal being sworn in as Secretary of the new Office of the Secretary of Defense. The United States Air Force was established on Sept. 18, 1947, with the swearing in of W. Stuart Symington as the first Secretary of the Air Force and the transfer of air activities from the Army.
Dr. Tracy Gaudet, inaugural director of the VHA Office of Patient Centered Care and Cultural Transformation, delivered a talk July 31 at the Fayetteville VAMC about integrative health coaching, a new innovative approach to health care.

The former executive director of Duke Integrative Medicine explained how this new approach can transform the VA health care system to improve a patient’s overall health.

“We have to look at the whole person and design a personalized, proactive and patient driven approach to optimize our health care versus using the traditional find it, fix it method of medical practice that we use today,” said Dr. Gaudet.

“The VA is innovating the way health care is delivered to our Veterans because chronic disease is so complex. By integrating health coaching, we have the opportunity to make real changes to our health care system that truly benefit the Veteran,” she added.

Following her formal presentation, Gaudet met with medical center leadership and 38 health coaching graduates for a discussion about the benefits of this new approach.

Carolyn Diaz, chief of social work and a health coach, said, “Coaching taught us how to get the right information and gave us a place to start to help Veterans with their current and ongoing needs.”

Health coaching, said Joan Budine, Housing and Urban Development, Veterans Affairs Supportive Housing case manager and health coach, is “a testimony to patient centered care that is tempered with respect and empowerment for the Veteran.

This integrative health coach model propels the VA into the future because it is built on a comprehensive vision of healthy and healing partnership. This moves the Veteran toward their optimal health vision.”

Fayetteville VAMC Director Elizabeth Goolsby further described health coaching as the next logical step in patient centered treatment, a method that focuses on the Veteran with a combination of guided self-care and professional services. “The focus is on what the individual considers to be important,” said Goolsby. “By first asking, what is most important to you and to your health, it is often a unique experience for many of our Veterans who have never been asked that before. “Our staff found this approach to be empowering for them as clinicians and in their personal valuing. Our next challenge is the hand off to continue this energy and expand this knowledge to our next group of coaches so we maintain continuity of care, maintain the energy and spread this knowledge base. It is also an opportunity for DOD and VA to partner and take the philosophies of self health learned on active duty as a continuum when they transition to the civilian sector.”

Veterans Health Administration officials believe health coaching, used in conjunction with traditional medicine, can optimize health and healing throughout a Veteran’s lifetime.

Va. Wounded Warrior Program To Host Couples Workshop

The Virginia Wounded Warrior Program in partnership with Virginia Commonwealth University School of Social Work regularly hosts a skills-building workshop for military Veterans and spouses coping with the impact of deployment, military service, post-traumatic stress, operational stress and traumatic brain injury. The next session of the workshop, called “Mission: Healthy Relationships,” is set for Nov. 9-11, at the Crowne Plaza Hotel (West) in Richmond.

Karen Smith Rotabi, an assistant professor of social work at VCU, will serve as the workshop facilitator. While working previously for the Department of Defense, she facilitated life skills and relationship enhancement programs for several hundred military and family members. Her most recent work with the National MS Society has evolved into this opportunity, combining nationally recognized curriculum with issues of military families, especially families experiencing reintegration stress and adjustment after deployment.

Event coordinator Ed McIntosh, regional coordinator for VWWP’s Central Region, said the workshops have been well received. “We have had great success with previous Mission: Healthy Relationships workshops. The November event will mark the 6th, and largest, iteration of MHR in Region IV.”

McIntosh invited Veterans and their spouses to attend the weekend event. Pre-registration is required to reserve accommodations, he said.

For more information please visit VWWP’s website at www.wearevirginiaveterans.org or contact McIntosh at (office) 804-819-4029 or (cell) 804-212-5896.
Walking is good for your health. This statement isn’t really news. Our primary care doctors and practically every healthy living resource we encounter reinforce this message constantly. One of the few places though where this advice hasn’t been regularly applied in the past is for patients dependent on medical ventilators for breathing assistance. Recent research studies show the sooner patients on ventilators can get out of bed and start walking, the better their chances are for decreased mortality, inpatient stays, incidence of pneumonia and blood infections from neck and groin catheters, muscle atrophy, skin injuries and delirium. These studies have spawned new standards of care that get patients up and walking as soon as possible.

Spearheading the new early mobility and walking program for patients in Intensive Care Units at Asheville VA Medical Center are nurses Audrey Roland and Kinsey Morgan. The nurses attended a recent conference where they received information and a turnkey process to apply known as a “pearl.” The Awake, Breathing, Coordination, Delirium, Early mobilization or ABCDE pearl was ready to bring back to the medical center and apply to medically stable patients in the Medical Intensive Care Unit and the Surgical Intensive Care Unit. The staff used the new program for the first time Aug. 1, 2012.

“Lying in a bed on a ventilator is an unnatural position to be in all the time. Walking allows the lungs to work more effectively, taking oxygen in deeper which in turn loosens secretions and helps discharge material in the lungs,” Morgan said describing the medical benefits of walking while on the ventilator.

“The first patient to try the new program was excited about it and waving his hands after getting out of bed and walking again for the first time,” Roland said. “It allows a sense of control for patients and allows them to participate in their own plan of care.”

“We use a Golvo lift and lift pants that essentially lift a patient enough to give support and safely take some of the weight off of the patient depending on their comfort level,” said safe patient handling coordinator Jill Earwood. “If you had told me years ago that we would be walking patients on ventilators, I wouldn’t have believed it but after seeing it work, I think it’s great.”

The evidence-based program has gained momentum and is being used increasingly nationwide. Asheville VAMC staff using the program note that patients are anxious to gain mobility as soon as possible after being bed-ridden for extended timeframes. They anticipate additional positive outcomes as well including minimizing complications from bed rest, reducing overall hospital costs, reducing bed days of care, improving patients’ functional status, improving the patients’ overall satisfaction and the patients’ quality of life!

One Small Step For Man, One Giant Leap For VA Care

By Scott Pittillo
Asheville VAMC public affairs

DURHAM, N.C. – Veterans in need will be able to access help with housing, haircuts, showers, employment and resume counseling, mental health assessments, mammograms, and substance abuse services at the annual Bull City Stand Down, Sept. 14, from 8 a.m. to 3 p.m at the Durham County Stadium, located at 750 Stadium Drive.

A group of local businesses, together with non-profit and government agencies, including VA, are finalizing plans for the annual event focused on helping Veterans who are homeless or lack stable housing.

“The entire event is dedicated to providing services and helping Veterans and their families’ access available benefits,” said Bull City Stand Down Chairperson Daryl Hicklen. He adds “I would like to emphasize that we are reaching out to all Veterans, both female and male.”

Free booth space is still available to employers and other Veteran service agencies interested in providing on-site support to Veterans. In addition to free breakfast, lunch, clothing, medical screenings, legal services and entertainment, the Durham Area Transit Authority will provide free bus and Access services to and from the event throughout all regular routes.

The North Carolina Vietnam Memorial Wall will also be on display.

For more information, please call the Durham County Veterans Services Officer at 919-560-8387.
POW/MIA Day Sept. 21 – Remember Our Missing

More than 83,000 Americans remain missing from World War II, the Korean War, the Cold War, the Vietnam War and the 1991 Gulf War. Observances of National POW/MIA Recognition Day are held across the country on military installations, ships at sea, state capitols, schools and veterans' facilities. The President issues a proclamation commemorating the observances and reminding the nation of those Americans who have sacrificed so much for their country. It is traditionally observed on the third Friday in September each year. This year’s observance falls on Sept. 21.

“Keeping the Promise,” “Fulfill their Trust” and “No one left behind” are several of the mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation.

National POW/MIA Recognition Day is one of six days throughout the year that Congress has mandated the flying of the National League of Families’ POW/MIA flag. The others are Armed Forces Day, Memorial Day, Flag Day, Independence Day and Veterans Day.

The flag is to be flown at major military installations, national cemeteries, all post offices, VA medical facilities, the World War II Memorial, Korean War Veterans Memorial, the Vietnam Veterans Memorial, the official offices of the secretaries of state, defense and Veterans affairs, the director of the selective service system and the White House.

Family members seeking more information about missing loved ones may call their respective Service Casualty Office:

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<tr>
<th>Department</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>U.S. Army</td>
<td>(800) 892-2490</td>
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<tr>
<td>U.S. Marine Corps</td>
<td>(800) 847-1597</td>
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<tr>
<td>U.S. Navy</td>
<td>(800) 443-9298</td>
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<tr>
<td>U.S. Air Force</td>
<td>(800) 531-5501</td>
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<tr>
<td>U.S. Department of State</td>
<td>(202) 647-5470</td>
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Unaccounted For From Past Conflicts

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<th>Cold War</th>
<th>Vietnam War</th>
<th>Iraq &amp; Other Conflicts</th>
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<tr>
<td>Total MIA</td>
<td>73,681</td>
<td>7,948</td>
<td>126</td>
<td>1,660</td>
<td>6</td>
<td>83,421</td>
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Fraud Prevention, Reduction Saves Scarce Health Care $$$

By Jasmine C. Davis
VISN 6 Health Systems Specialist intern

American taxpayers lose $60 billion annually to health-care fraud, according to the National Health Care Anti-Fraud Association. Veterans can help stop fraud by being more mindful of fraudulent healthcare activities and avoiding or preventing them.

One of the easiest ways to defend against healthcare fraud is for Veterans to stay informed about their current VA health benefits. Veterans should refer to their Compensation Statement from Veterans Benefits Administration to determine their entitled services.

Always check medical bills for accuracy. Make sure the bill reflects all services actually received. It is important to ensure there is no double billing.

Individuals who receive VA care in conjunction with another form of health insurance should make sure both insurance companies do not pay for the same care, and that they pay for the correct service.

Being mindful of who receives health insurance information is another simple but effective safeguard. Be cautious of any deals that specifically target Veterans and require health insurance information. Do not give insurance card numbers or copies of the actual card to salespersons or companies selling or offering free medical equipment, drugs, or other services or extremely discounted prices.

Once a person’s health insurance information is in the wrong hands, without the cardholder’s knowledge, an individual can bill his or her insurance company (or companies) for services that the cardholder never received.

Veterans should also be mindful of the location of their Veteran Identification Cards and should not let salespersons scan the bar code on the card. Some cell phones can scan the bar code on a VIC card and the person that scans it can retrieve the Veteran’s Social Security number and name.

Even a small amount of health care fraud can raise the cost of health care benefits for everyone. Help the VA save money by preventing healthcare fraud so these funds can be used to improve the health-care services current and future Veterans receive. If you suspect fraudulent activities, feel free to contact the Compliance and Business Integrity Officer at your local VA medical facility.
By James Coty
Hampton VAMC public affairs

The Palliative Care Unit at the Hampton VAMC provides end-of-life care for Veterans. Each year, the families and friends of Veterans gather at the facility located on the banks of the Chesapeake Bay to remember, visit with staff and celebrate the lives of Veterans who have died on the unit.

Camaraderie and fellowship marked the celebration at the Palliative Care Unit’s 28th annual family reunion Aug. 18. The gathering of family and friends included the reading of the Roll of Honor. This year’s Roll of Honor included the names of 40 Veterans who died during 2012.

“I have been here every year since 2006,” said Gabrielle Waugh. “My husband was admitted in May 2006 and died a month later. Everyone here is family to me.”

Waugh recounted that when her husband was admitted to Chesapeake General Hospital, social workers there told her he wouldn’t be accepted into VA’s program. Waugh made one phone call to the Hampton VA and he was admitted.

“They said that I must have known someone pretty high-up to get him in so fast,” said Waugh. “I didn’t know anyone, but there was an angel watching over us.”

Dr. G. Arul, chief of staff at the Hampton VAMC, explained that Palliative Care treatment team stresses quality of life versus quantity of life for the Veteran. The team provides much needed support for the Veteran and family.

“We provide Veterans with care that is patient-centered and family-oriented,” said Arul. “This is an emotional time for everyone. We console families and provide comfort-care to Veterans. It is care without a cure.”

Palliative Care consultation teams include physicians, nurses, social workers, pharmacists and chaplains. Rehabilitation therapists, recreation therapists, mental health professionals and other specialists provide additional support if needed.

Hospice and Palliative Care are part of the Veterans Health Administration Medical Benefits Package. All enrolled Veterans are eligible if they meet the clinical need for the service. Palliative Care is for Veterans who have a terminal condition with six months or less to live.

The need for hospice care is expected to continue because of the large number of World War II- and Korean War-era Veterans, and a tripling of the number of Veterans over the age of 85 from 2000 to 2010. The proportion of Vietnam-era Veterans over the age of 65 will continue to increase through 2014, when Vietnam Veterans will account for nearly 60 percent of all Veterans in that age group.

The VA provides palliative care consultation teams at all of its hospitals nationwide, although such services are provided at only about one-fourth of all American hospitals. Nearly half of all Veterans who died in VA facilities received care from a palliative care team prior to their deaths.

Salisbury VAMC To Host Veteran Job Fair Sept. 13

Military Veterans searching for work are invited to a job fair Sept. 13 at the Salisbury VAMC. The fair will be held from 9:30 a.m. to noon, in the learning center of the medical center, located at 1601 Brenner Ave. in Salisbury.

The fair is designed “to provide Veterans with easy access to a variety of employers who are Veteran-friendly.” Interviews will be conducted on site.

Businesses wanting to participate in the job fair are asked to contact Tara Manis-Healey at 800-469-8262, ext. 4780.

Twenty-eight employees from around the Mid-Atlantic Health Care Network, VISN 6, received recognition for nine months of extended study during a graduation ceremony for the 2012 VISN 6 Leadership Development Institute Training Program Aug. 16.

Started in 2003, the VISN 6 LDI program was created to stimulate the leadership development of high potential employees. The curriculum includes on-line tutorials, audio conferencing classrooms, mini-projects, and face-to-face meetings and consists of studies in leadership theory, problem solving, intra and interpersonal skills, personal development planning, and project management. Additionally, each LDI class works collaboratively on an Action Learning Project chartered by the V6 Executive Leadership Council. This project provides an opportunity for participants to work in their facility and VISN virtual teams to apply the concepts and methods learned in their studies to a significant real-world issue. This year the LDI participants worked with the Richmond VAMC team to organize and streamline planning for the 32nd National Veterans Wheelchair Games.

“The 2012 LDI participants were instrumental in the successes of the registration, signage, after action report, and VIP committees,” said Richmond VAMC’s Alison Faulk, local organizing committee chair for the 32nd NVWG. “Starting with their assignments to these committees at their first face-to-face meeting in March 2012, the LDI class proved to be valuable assets and team players for their committees by providing a fresh look and new perspectives to issues we faced during this large event.”

The LDI teams brought enthusiasm to the project at a key juncture which helped to invigorate not only their respective groups, but also the Veterans attending the games.

The LDI participant’s hands-on approach during the games helped to make them an unqualified success. A number of initiatives they instituted were recognized as best practices and incorporated into the final report given to the Tampa VAMC, host for the 33rd National Veterans Wheelchair Games.

Dr. Mark E. Shelhorse, VISN 6 chief medical officer, gave the graduation remarks to the class, recognizing the efforts and sacrifices of the participants in completing the LDI program and notably their role in tackling one of the most visible events in the VISN’s history – The National Veterans Wheelchair Games. He specifically challenged the class to take to heart the lessons they learned and to apply them everywhere they go.

“Every day you walk into a VA site of care, I want you to be thinking about what you’ve learned,” Dr. Shelhorse said. “I want you to work to adopt and adapt as necessary the knowledge you’ve gained to the task at hand.”

He also encouraged them to continue their collaboration and teamwork. “Never forget the network you’ve established amongst yourselves. Always remember that many heads are smarter than one. Use your team think. Don’t hesitate to use each other as sounding boards for ideas. That’s how good ideas, and more importantly, best practices are shared.”

People interested in learning more about the Leadership Development Institute Training Program should contact me at 919-956-5541 or by email at Jantene.Johnson@va.gov.

**VISN 6 VA Leadership Develop Institute Training Program Graduates**

Elizabeth N. Lima, Asheville VAMC
Sharon A. Pierce, Mid-Atlantic CPAC (Asheville)
Wesley A. Brown, Beckley VAMC
Shawn M. Mills, Beckley VAMC
Carla D. Raynes, Beckley VAMC
Rashonna Avery, Durham VAMC
Connie L. Faison, Durham VAMC
Latishia Sherard-Fowler, Durham VAMC
Elaine E. Nestell, Fayetteville VAMC
Lucille H. Williams, Fayetteville VAMC
Jemecia C. Braxton, Hampton VAMC
Barbara A. Cross, Hampton VAMC
Eleanor A. Gray, Hampton VAMC
Marian E. Green, Hampton VAMC
Pejcharat J. Harvey, Hampton VAMC
Janet L. Henderson, Hampton VAMC
Pran R. Iruvanti, Hampton VAMC
Shubhada Iruvanti, Hampton VAMC
James A. Lipton, Hampton VAMC
Eureka T. King-Steward, Hampton VAMC
Brenda S. French, Richmond VAMC
Jonathan D. Shepherd, Richmond VAMC
Tanya N. Jones, Salem VAMC
Nancy S. Short, Salem VAMC
Tara L. Manis-Healey, Salisbury VAMC
Surahi Patel, Salisbury VAMC
Marsha R. Poston, Salisbury VAMC
Tori C. Sweeting, Salisbury VAMC
Salisbury PTSD Unit Commissions Companion-Therapy Dog

By Carol Waters, Salisbury VAMC public affairs

It was Kimberly’s special day, and the timing was perfect, with August 5 – 11 designated as International Assistance Dog Week.

Companion-therapy dog Kimberly was officially commissioned into service to Veterans Aug. 9, at the Salisbury VA. Kimberly is now the companion-therapy dog for the Specialized Inpatient Post-traumatic Stress Treatment Program. Acting coordinator SIPU Christopher Watson, Ph.D., administered the oath of service to Kimberly and her owner and handler, registered nurse Pam Spears.

Spears and Kimberly took the oath of service to Veterans during the graduation ceremony of the SIPU Class 123. Kimberly and Ms. Spears pledged to offer comfort and support to all Veterans and/or active duty service members, serve with compassion and integrity and to do their very best to serve with energy and zeal.

Kimberly is named in honor of U.S. Army Capt. Kimberly Hampton, who was killed near Fallujah, Iraq, Jan. 2, 2004, when her OH-58 Kiowa Warrior observation helicopter was attacked. Captain Hampton is the first female combat pilot killed by enemy fire in U.S. history.

Capt. Hampton’s mother, Ann Hampton, attended the commissioning and commended the staff of the SIPU for their forward thinking in placing Kimberly in service to Veterans.

“I thank you from all my heart for your service to our country,” she told the Veterans graduating from the SIPU program. She then donated to the SIPU a copy of a book she co-authored about her daughter’s life and military service, “Kimberly’s Flight.”

Kimberly is not quite a year old, enjoys swimming in the neighborhood pond, and is already bringing comfort and touching the hearts of Veterans and staff in the unit.

Families and friends of the graduating Class 123 attended the ceremony. Also among those attending the ceremony was David Cantara, founder of Carolina Patriot Rovers, Inc., a non-profit organization that rescues, trains, and deploys companion-therapy and psychiatric service dogs to Veterans free of charge. Social worker Debra Todd praised Cantara for the service his organization provides to our Veterans.

Cantara, an Army veteran with more than 20 years of experience rescuing and training dogs, said he got the idea for the program while volunteering with the Patriot Guard Riders of North Carolina. He noticed that a growing number of the soldiers had killed themselves after returning home from war. He realized many were suffering psychological and emotional scars — and how his expertise in dog training could help them.

He started Patriot Rovers in late 2009. So far the organization has placed about 40 dogs with Veterans dealing with post-traumatic stress disorder or wounded in Iraq or Afghanistan. To learn more, visit www.patriotrovers.org.

By Robin DeMark
Fayetteville VAMC public affairs

Veterans in the Fayetteville VAMC catchment area can expect improved access to local transportation thanks to two recent grants from the Department of Transportation.

The Cities of Fayetteville and Jacksonville were awarded $46,680 and $57,136, respectively, when U.S. Transportation Secretary Ray LaHood announced $29 million in grants to provide improved access to local transportation for Veterans and their families, wounded warriors and other military personnel, helping them find affordable rides to work, school, shopping, medical care and other destinations in their communities in July. The grants will support 64 projects in 33 states.

Leaders from Fayetteville VAMC and the City of Fayetteville gathered in the downtown area to accept their grant award July 26 from Peter Rogoff, Department of Transportation, Federal Transit Administration administrator.

The City of Fayetteville was awarded the grant to support the Veterans Transportation and Community Living Initiative. The city, Fort Bragg, Fayetteville VAMC and surrounding counties plan to create and host a joint agency website and call-center with information about transportation options and resources available to more than 150,000 Veterans, active duty military and families.

“We are very excited about the Fayetteville grant and look forward to working with our community partners to provide Veterans with more transportation options and a coordinated transportation network,” said James Galkowski, Fayetteville VAMC associate director.

Fayetteville VAMC also operates a Community Based Outpatient Clinic in Jacksonville, N.C. to serve Veterans in the area. Under the auspices of VTCLI, the North Carolina Department of Transportation awarded the City of Jacksonville a grant to support transportation projects in Onslow County.

The Onslow United Transit System plans to purchase software to upgrade its One-Call Center and dispatch vehicles with automated vehicle location technology to improve coordination of transit service among multiple providers in the area.

Jacksonville is home to more than 147,000 Veterans and active duty military personnel who live and work around Marine Corps Base Camp Lejeune and Marine Corps Air Station New River.

In a related matter, Veterans can also benefit from other upcoming transportation improvements throughout the state.

Multiple rural transit providers in southwest North Carolina received a grant of $459,873 to create a One-Call/One-Click Travel Management Coordination Center. This will provide more than 20,000 Veterans and their families in the area with transportation options to improve access to jobs, education, health care and other services.

To learn more about transportation initiatives, visit www.fta.dot.gov/veterans.
Montford Point Veteran Honored At Richmond VAMC Presentation

By Pete Tillman
Durham VAMC public affairs

Durham VAMC patient Mack Haynes is one impressive man. His military discharge papers, DD214 and DD215, read more like a military history book than a document used to establish eligibility for VA care.

At age 17, he joined the Marines, a day at Camp Lejeune he will never forget. He recalls taking a bus, then a train, before arriving at the famed Marine base in Jacksonville, N. C. From the moment he stepped foot on base, things would never be the same.

It was not long before the physically fit drill instructors began their tests of intimidation. Haynes recalls during his first hours on base, one daunting sergeant ripping off his t-shirt and asking him, “So you want to be a Marine, do you?”

Haynes was not just another young man joining the Corps to better his life, pursue opportunity, or fight for his country; he was an African American man in 1943 joining the first segregated Marine division, the now famous Montford Point Marines. About 20,000 Marines passed through Montford Point from 1942 to 1949, when it closed and recruit training was integrated.

Haynes joined, he said, “because all of my friends were being drafted and I didn’t want to be left all alone.”

A deployment to the Pacific in support of World War II awaited all but a few who completed boot camp at Montford Point Boot camp. Haynes fate was no different. By the end of his service in theatre, Haynes had ‘island hopped’ five islands and seen more combat than he cares to remember. During this time, he said he learned that war was colorblind. Marines didn’t care about each other’s color, he said. “All they really cared about was if you could fire a rifle,” Haynes said matter of factly.

In many ways, the military was ahead of the public when it came to the Civil Rights movement.

“Going over on the ship, we were one big happy family, but it was hard to believe coming home,” he said referring to the sobering state of racial divide. Haynes and others helped decrease the racial divide and help foster greater tolerance and understanding.

Upon returning stateside, Haynes was stationed on the west coast. He later went to Korea in 1950 and spent two years in and around the Korean Demilitarized Zone. Later, Haynes was stationed in Da Nang, Vietnam, the first of two deployments in a country as foreign to him as any he had seen before. It is there that he believes he was exposed to Agent Orange, giving him a condition that would later require surgery and today leaves him with soft speech.

“You could feel it burning you,” Haynes offered, referring to Agent Orange and grasping his clothes as if he were cold. (VA has determined that there is a connection among certain diseases, the herbicidal defoliant Agent Orange and military experience. Learn more at www.publichealth.va.gov/exposures/agentorange/diseases.asp.)

Several decades passed before the heavily decorated Veteran, along with several hundred of the remaining Montford Point Marines, received the Congressional Gold Medal, the nation’s highest civilian award, for their trailblazing paths as the country’s first African American Marines.

Haynes made the trek to Washington D.C. on June 26 to receive a bronze replica medal. Percy Mike Floyd, an Air Force Veteran, accompanied Haynes.

“I had to try to keep my composure as the four star general hung the medal on him,” Floyd remarked. Montford Point representative William McDowell accepted the award on behalf of all of Marines at Montford Point. “Witnessing this recognition of our history is one of the greatest things to happen to me,” Floyd added.

All of the Veterans that walk through the doors of VA medical centers are special. Mack Haynes is as special as they come. It took him more than 30 years after his military discharge to come to the VA for care. We are glad he did and we are pleased to call him a Veteran of the Durham VAMC. Congratulations and thank you Mr. Haynes. You deserve it.

Montford Point Marine Mack Haynes One Impressive Man

By Pete Tillman
Durham VAMC public affairs

Montford Point Marine Mack Haynes was stationed in Da Nang, Vietnam, the first of two deployments in a country as foreign to him as any he had seen before. It is there that he believes he was exposed to Agent Orange, giving him a condition that would later require surgery and today leaves him with soft speech.

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Filing Fully Developed Claims Reduces Processing To 110 Days

WASHINGTON – The Department of Veterans Affairs hosted an event July 31 for 10 Veteran Service Organizations (VSO) to collaborate in VA’s effort to eliminate the claims backlog.

The main focus of the workshop was VA’s emphasis on the shared goal of better serving Veterans and positive impact of filing Fully Developed Claims (FDC). Participation in the FDC Program is completely optional, and allows for faster claims processing, while preserving a Veteran’s right to appeal a decision.

An FDC is a claim where a Veteran submits evidence, like private treatment records and notice of Federal treatment records to VA at the time he or she first files a formal claim and certifies they have no more evidence to submit. VA gathers all federal records the Veteran identifies, like those from VA Medical Centers and the Social Security Administration. VA will also send the Veteran to a VA examination if it determines the need for additional information.

As a result, the Veteran and his or her representative do much of the development that typically takes VA 175 days to gather. FDC claims take an average of 110 days to decide compared to 254 days through the traditional claims method.

Part of the workshop featured a discussion led by Chicago Regional Office Director Duane Honeycutt on how VA’s regional offices and VSO field staff can work together to increase the numbers of FDCs Veterans file. The Chicago Regional Office is one example of recent successes in reducing the time it takes to process a claim by working with Veteran representatives to increase FDC claims. Currently, FDC make up 10 percent of the RO’s claims, compared to just 3 percent nationwide.

“VA, Veterans representatives and Veterans all have a stake in the claims process,” Honeycutt said. “We continue to operate under the mantra, ‘Grant if you can, deny if you must,’ but more often than not, the challenge is to obtain certain evidence that allows us to grant the claim. That is why partnering with the VSO’s to increase the number of fully developed claims that are submitted is so important.”

Honeycutt said FDC involves Veterans in the process and allows them more control over their claims. Their reward is a claim that is finished in substantially less time.

“DAV has National Service Officers located in every regional office,” said Jim Marszalak, Assistant Service Director with Disabled American Veterans. “Our NSOs in the Chicago Regional Office started using the FDC program and have seen a dramatic amount of time shaved off waiting times. It has also minimized the amount of appeals we file on our Veterans’ behalf.”

Honeycutt agreed there is a direct correlation between filing an FDC and less of a need to file an appeal versus a traditionally filed claim. Honeycutt believes that since Veterans and their representative submit more evidence necessary to support the claim there are more favorable decisions – and in the case where VA must deny, the Veteran and the representative work to obtain the needed evidence and ask for reconsideration as an FDC.

Using VA Form 21-526EZ, Veterans can file FDC for disability compensation. VA Form 21-527EZ allows Veterans to file for a non-service-connected pension. The FDC forms, found at http://www.va.gov/pubs/forms/VBA-21-526EZ-ARE.pdf and http://www.va.gov/pubs/forms/VBA-21-527EZ-ARE.pdf include information on what evidence is VA’s responsibility and what evidence is the Veteran’s responsibility.

For more information on the Fully Developed Claims program, visit http://benefits.va.gov/transformation/fast-claims/.

IHS Convenient Prescription Refills

WASHINGTON – Nearly 250,000 patients served by the Indian Health Service have used a prescription service available through an interagency agreement between IHS and VA.

The agreement allows IHS pharmacies to use the VA Consolidated Mail Outpatient Pharmacy to process and mail prescription refills for IHS patients. By accessing the service, IHS patients can now have their prescriptions mailed to them, in many cases eliminating the need to pick them up at an IHS pharmacy.

The service provides an alternative method for patients to obtain medication refills when transportation or work schedules make visiting a pharmacy difficult. Due to the agreement, pharmacists have been able to spend more time in clinics interacting with patients and answering questions.

“As a result of our partnership with VA and our use of CMOP, we’ve seen advances in our patient care and satisfaction,” said Randy Grinnell, HIS pharmacy.

The agreement allows IHS patients to use the VA any time the VA pharmacy is open.

There’s An App For That

Army Veteran and writer Stewart Brand says, “Once technology rolls over you, if you’re not part of the steamroller, you’re part of the road.” VA is working hard to avoid being steamrolled by becoming a leader of the pack.

VA has developed two mobile applications—VA Mobile App and Post-Traumatic Stress Disorder Coach—that help Veterans stay connected and healthy.

The VA Mobile App, which can be downloaded for free on the iPhone, Droid and Blackberry, provides services and information for Veterans and dependents, including VA facility locations, information for returning service members, suicide prevention, benefits information and much more.

The app menu includes “Hot Topics,” “VA News Releases,” “Facility Locations,” “Returning Service Members,” “Suicide Prevention Awareness,” “Benefits for Veterans and Dependents,” “Grave Site Locator,” “VAnGuard Magazine,” and “Contact Us” options. Touching any of the options opens new windows offering useful information and links to specific places on the VA’s main website, pertinent telephone numbers and news-you-can-use information. The “Facility Locator” page allows users to search for specific VA medical centers or outpatient clinics.

Developed in partnership with the DoD’s National Center for Telehealth & Technology and VA’s National Center for PTSD, the PTSD Coach app, available free on the iPhone and Droid, provides users with information about professional care, self-assessment tools, relaxation skills, positive self-talk to manage anger and other self-help strategies.

By customizing the tools based on individual preferences and integrating their own contacts, music and photos, users can easily connect to their individual supports literally at the touch of a button.
Joining Forces Initiative Brings Jobs To More Than 125,000 Vets

By Lisa Daniel
American Forces Press Service

WASHINGTON (AFPS) – The White House initiative to hire Veterans and military spouses has surpassed its goals, having led to the hiring or training of more than 125,000 Veterans and spouses in the past year, First Lady Michelle Obama announced today.

Speaking to Sailors and their families at Naval Station Mayport in Jacksonville, Fla., the first lady said 2,000 companies have hired 125,000 employees through their pledges to the “Joining Forces” campaign, and, of those, 140 employers have hired 28,000 military spouses.

“That’s 125,000 people who are providing for their families, contributing to our economy and serving the country they love,” Obama said.

The first lady said she has a clear message to troops, spouses and Veterans: “When you finish your service to your nation, you’ve got 2,000 great companies waiting to bring you on board. These companies are not just making these commitments because it’s the right thing to do, which it is, but because it’s the right thing for their bottom line.”

Obama said she’s heard “a thousand times over” from heads of companies who say Veterans and military spouses are their best employees.

Unemployment still is too high for Veterans and military spouses, but Joining Forces has helped to push the national veteran unemployment rate down nearly 20 percent from a year ago, Obama said.

The Veteran unemployment rate in July was 6.9 percent, compared to 8.6 percent in July 2011, Joining Forces officials said during a call with reporters yesterday.

Though the initiative has exceeded its goals, Obama said, the participating companies have pledged to hire another 250,000 Veterans and spouses, with at least 50,000 of that total being spouses. “It would be understandable if these companies just stopped now and patted themselves on the back and called it a day, the first lady said. “But these companies are doing just the opposite.”

The first lady and Dr. Jill Biden, wife of Vice President Joe Biden, started Joining Forces in April 2011 to rally Americans to actively support service members and their families in areas of employment, education and wellness.

A year ago, President Barack Obama asked Joining Forces to challenge the private sector to hire or train 100,000 Veterans and military spouses by the end of 2013.

“I thought this challenge was pretty ambitious,” the first lady said, noting that the effort was launched with just two partner companies. “Before long, companies all over this country had started stepping up.”

By April, they had hired 60,000 Veterans and spouses, and by May, the number was 80,000. The federal government has made the same commitment, and Veterans and spouses made up 28 percent of all federal hiring last year, a White House official told reporters.

Also at the event, Vice Adm. Scott Van Buskirk, chief of naval personnel, said he supports Joining Forces because it has had “a huge impact” on Sailors, their spouses and Veterans. “They’ve shined a spotlight on the unique needs and strengths of military families and Veterans,” he said.

The Joining Forces initiative to make professional licenses portable from state to state for military spouses is “near and dear to my heart,” Van Buskirk said. His wife is a speech pathologist who has had to recertify multiple times, he explained.

“When constant transfers, our spouses face challenges that can be daunting,” he added.

Election Hatch Act Reminder

With the Presidential election rapidly approaching, the U.S. Office of Special Counsel would like to remind Federal employees about the restrictions on partisan political activity imposed by the Hatch Act. Violations of the Hatch Act may result in disciplinary action, up to and including removal.

Here is a list of some Do’s and Don’ts under the Hatch Act. You may:

• Register and vote as you choose;
• Serve as an election clerk, judge or similar officer at polling places;
• Contribute money to a political party, candidate for partisan political office, or partisan political organization;
• Be a member, or serve as an officer, of a political party or political group;
• Be a candidate in a nonpartisan election;
• Listen to radio programs or watch TV programs discussing partisan politics or candidates for partisan political office, or read a book about politics or political candidates while in the federal workplace, if permitted;
• Actively participate in partisan political campaigns and activities, as long as you are not:

on duty, in a federal workplace, using government resources, or a career member of the Senior Executive Service.

You may not:

• Take any action for or against any political party or candidate for partisan political office, such as scheduling activities as a partisan political volunteer while at work, or in a Government building, or using Government resources (including VA e-mail);
• Solicit, accept, or receive political contributions at any time* (a narrow exception applies to members of a federal labor or employee organization);
• Use your official title, or trade on your VA position, while participating in any political activity;
• Ask a subordinate employee to volunteer on behalf of a political party or partisan candidate;
• Solicit or discourage the political activity of any individual who has business before VA;
• Be a candidate for partisan political office.

VA employees should direct any questions about the Hatch Act to their compliance officers or visit the U.S. Office of Special Counsel website at www.osc.gov.

New Military Families Speaker Series

On Sept. 11, the National Center for Child Traumatic Stress will continue the new speaker series with a presentation entitled, Child Abuse and Neglect in Military Families: Community and Military Partnerships.

Series Includes:

Child Abuse and Neglect in Military Families: Community and Military Partnerships – Sept. 11, 2012

Strong Families Strong Forces: A Program to Support Military Families with Young Children – Sept. 25, 2012


For more information, please see the NCTSN Military Families Learning Community Course at http://learn.nctsn.org/login/index.php.
## VISN 6 Sites of Care

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<th>Albemarle POC</th>
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<th>Jacksonville CBOC</th>
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<td>241 Freedom Way Midway Park, NC 28544</td>
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<td>200 Veterans Avenue</td>
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<td>1600 Lakeside Drive Lynchburg, VA 24501</td>
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<td>Supply, NC 28462</td>
<td>336-333-5366</td>
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<td>540-886-5777</td>
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<td>Charlotte Vet Center</td>
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<td>2114 Ben Craig Dr., Charlotte, NC 28262</td>
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<td>919-286-0411, 888-878-8690 <a href="http://www.durham.va.gov/">www.durham.va.gov</a></td>
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