What Veterans Are Saying

“She needs to be rewarded in some manner to let her know how much she is appreciated.”

That statement comes from a satisfied patient, about Pauline Grant, Dallas VA (Social Work). “She has been such a blessing to me and my wife. I appreciate her attitude and character.”
– Herbert H. Pratt

Another satisfied patient had this to say about Lynette Lane, LVN, Polk Street Annex (Nursing), “Lynette went above and beyond her call of duty at my last appointment and stayed past her shift until I was finished. I thank her for her professionalism and dedication.”

From the wife of a veteran:
Three employees from Granbury Community Based Outpatient Clinic all received good feedback from a patient’s spouse: Teresa Crosby, NP (Nursing) and medical support assistants Alecia Maxwell, CMA, and Blair Strahan, CMA. “The staff there is outstanding. It is the best clinic I have ever been to. Teresa is very knowledgeable, caring and gives quality care. Alecia is very good and caring at what she does, and Blair is always patient and helpful when I call the clinic.

– Patsy Melton, the wife of a veteran patient

Applauding our 2011 Kudos

• Named in Dallas Business Journal as one of the Top 50 Employers in North Texas

• Veterans Health Administration Communication Award for Special Events (Fort Worth Outpatient Clinic Open House and Dedication Ceremony)

• Department of Psychiatry University of Texas Southwestern Outstanding Teacher of the Year
Losing in order to gain may seem like an oxymoron to some, but for one VA North Texas employee it’s just the opposite. Queenie “Queen” Edwards (Pharmacy Service) started a tough journey a little over a year ago that turned out to be just as incredible as it was intense.

“I really did need to lose weight in order to gain my health. I had a stroke five years ago and was in bad shape,” said Queenie. “And, it wasn’t easy to do because of all the temptations that surrounded me, but I knew I had to.”

Two-hundred eighty five doesn’t sound like much when it’s spelled out or spoken, especially if you don’t have anything to relate it to. For Queenie, it was a lot. It was a number she didn’t want to neither say out loud nor see, on a scale that is.

Today, Queenie weighs 165 pounds.

Queenie entered the Biggest Loser contest held by Employee Wellness at Dallas VA. The contest is designed to help employees lose weight during a 16-week period. Each contestant weighs in every week. Progress is determined based on the percentage of weight lost as opposed to total pounds lost.

Contestants can use many of the different programs offered through Employee Wellness to help them lose weight. The center offers classes and programs each week to help employees achieve their goals. Supplemental information such as nutrition and diet tips is also available and can be found on the center’s sharepoint site.

Before entering the contest, Queenie had already lost 40 pounds on her own, but that was all she could accomplish alone. “I reached a plateau,” she said.

“When I heard about the contest, I entered right away. I knew I needed the extra help and it was motivating for me to see others on the same path.”

Throughout the course of the competition and by using other resources from Employee Wellness, Queenie lost another 70 pounds.
Employees aren’t the only ones who benefit from the competition. Several organizations receive support from donations and pledges made. All proceeds go to the Disabled Veterans Rehabilitation Fund, Toys for Tots and local food banks. Contestants are challenged to have a two point pound advantage over each other based on how much their donations or pledges are. Whoever brings in the most food, in pounds, wins the advantage. The same goes for toys and pledges. The contestant who has the most donated or pledged in their name wins the advantage. Last year, the competition donated more than 2,000 pounds of food, $600 and 120 toys.

Mark Moore, employee wellness coordinator for Dallas VA believes some people just need to be inspired. “With the Biggest Loser competition, we hope to inspire many VA employees to make a change that will last a lifetime,” Moore said. Queenie agreed. “I don’t ever again want to be the weight I was. So yes, I plan on making this last for the rest of my life,” she said.

**COVER STORY - MEET OUR NEW DIRECTOR**

Coming to VA North Texas Health Care System as director is a welcome back for Jeffery Milligan. Before heading south to stand up Valley Coastal Bend Health Care System, Milligan served as the associate director for North Texas and is excited to be back at the helm. Editor of Pulse sat down with Milligan to get his perspective on how things have changed and his vision for our future.

**Pulse: Welcome back to North Texas. Having been away for three years, what are your initial impressions of VA North Texas today?**

**JM:** I am surprised by how much the organization has changed. There has been tremendous improvement in the infrastructure at each facility. Fort Worth Outpatient Clinic is spectacular and veterans are very happy about the new facility. I’ve seen areas renovated in Bonham that are modern and patient centric. I have already been to Tyler several times and will be personally involved in pushing the new Tyler lease forward. The renovations to patient areas in Dallas are warm and provide veterans and their families with an environment conducive to physical, emotional and spiritual healing.
Pulse: What are your first priorities?
JM: I spent my first days back meeting with veterans, veterans service organizations (VSOs) and families to get their perspective on the quality of care they are provided.
I wanted to learn if these individuals we serve believe they are being treated with dignity, courtesy and respect. North Texas has consistently performed well in meeting or exceeding our performance measures relative to quality and access.
In those two arenas, we are one of the best performing VAs in the country. I believe our transformation needs to make health care more human, assist patients in attaining their life goals and ensure patients know we are personally and emotionally committed to them. We must serve as a link to hope and life improvement and will be focusing more on the softer side of medicine.

In the coming months, I look forward to meeting with more employees and hearing more about their perspective to propel our organization forward.

Pulse: Why should employees be proud to claim VA North Texas as their employer of choice?
JM: We have one of the most honorable missions of all federal employees. I believe we provide fantastic care to our nation’s veterans. When I’m walking through clinics and inpatient units, I see employees who are dedicated to the veterans they serve. Our patients are some of the most interesting and entertaining individuals I know. I have always loved history and we interact every day with living history. I have had the opportunity to talk with survivors of the Bataan Death March, men who were at the Chosin Reservoir, former POWs from the Hanoi Hilton and our veterans who served in the Middle East. I think all North Texas employees understand what an honor it is to serve such noble men and women.

Pulse: We have been going through a cultural transformation to improve the way we focus on patient care and customer satisfaction. What message would you like to share with patients who receive their care here?
JM: I want our patients and potential patients to know our three promises: 1) We will provide care second to none 2) We will maintain and expand services 3) Every veteran will be personally satisfied based on the outcome.

Our organization is ready to move to the next level of care. And that is to transcend technical performance and focus on the softer side of medicine. We will provide more personalized care, see each veteran as an individual and provide him/her with an individualized care plan to assist them in meeting their goals.
Pulse: What do you see right now as our biggest advantage?
JM: I would have to say there are several, but these really stand out for me: 1) We have a very talented and dedicated staff 2) Our VSOs are committed to the success of this organization 3) Our network director has a strong personal commitment to continuing to improve veterans’ health care.

Pulse: On the flip side, what is the biggest challenge we face this fiscal year?
JM: The passage of the Affordable Care Act in 2010 will forever alter the delivery of health care services. Beginning in 2014, veterans will have more choices and could potentially fragment their care and adversely impact continuity and coordination. The new law may decrease utilization at some VA facilities and affect volume sensitive services and teaching programs.

Although we have the second highest number of patients enrolled for care within the VA system, we must ensure veterans WANT to come here for their services by providing high quality, compassionate care in a timely fashion. We must expand the use of technology that will allow us to provide care to veterans closer to home. Technologies such as telehealth, e-consults, secure messaging and others are positioning us to meet this challenge.

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MY HEALTHEVET’S SECURE MESSAGING PUTS PATIENTS IN CHARGE

In case you haven’t heard, there’s an alternative way to access veterans’ health benefits. It’s secure messaging, and it’s changing the way we communicate.

Although My HealtheVet has several features, and anyone can use it, the push now is to boost enrollment for veteran patients to benefit from the secure messaging component.

With secure messaging, patients can contact their physician and health care team and communicate with them about any health-related questions or concerns. Patients can also request:

- lab and test results and receive a doctor’s explanation
- renewals of medications
- consultations
- appointments

Gaining from secure messaging is easy. Patients must first enroll in My HealtheVet which includes these 3 steps:

1. Go to www.myhealth.va.gov and click on register.
2. Print and complete the form to get an IPA (In-Person Authentication).
3. Bring the form to any VA medical facility to be verified by a qualified VA staff member.

Thus far, over 5,000 secure messages have been successfully transmitted between patients and health care teams at VA North Texas. Patients who want to get in on the action should enroll today to start enjoying all the benefits of e-health.

For more information, contact the My HealtheVet coordinator. Cathrine.England@va.gov.
Back pain, cancer and blood clots are often diagnosed and confirmed with the science of Radiology. To most, it is known as the field of medicine allowing an inside look at the body.

Today’s radiologists are more than image jockeys. They don’t just manipulate images to get a clearer understanding. They also use advanced imaging technology to intervene, transform the management of chronic diseases and save lives. There has been a gradual change from imaging and procedure-based encounters to integrated case management through better coordination and relationships with referring physicians.

Here at VA North Texas, timely first class imaging services are provided by top-notch radiologists and technologists and assisted by dedicated support teams who are pivotal to modern diagnosis and logical decision-making.

Radiologically guided minimally invasive procedures and therapies are also an integral part. In many instances, these image-directed therapies have replaced traditional invasive techniques, resulting in significant reductions in morbidity and cost of care.

Their most important mission is to provide cutting edge diagnostic services, including an upcoming state-of-the-art veteran-centered women’s imaging facility, advances in cardiac MR (magnetic resonance), CT colonography, CT enterography and advanced non invasive vascular imaging techniques.

**CARDIAC AND WOMEN’S IMAGING: CHANGING TRADITION**

With one of a few chest three-tesla magnets in the VA system, the cardiac imaging team has a high-powered, high resolution application to aid in advance body imaging. Advanced imaging is now available to see anatomic detail and show how the heart is functioning without the traditional x-ray dye that is frequently harmful to the kidneys.
Managing health care is much like leading an orchestra. And for the breast program at VA North Texas, radiologists are conductors of the orchestra. Uterine fibroids and lumps found in breasts are managed with a more concerted and patient-centered design. Multiple clinic visits are decreased and abnormalities are altered faster. Instead of referring patients to a surgeon who would most likely: 1) obtain an MRI; 2) suggest a repeat clinic visit; and 3) follow with a referral to information technology, a process which could take many months, primary care providers can send a consult directly to IR who will arrange for a clinical evaluation, magnetic resonance and pre-procedure work-up, usually all performed on the same day. If the patient is not a candidate for uterine fibroid embolization, the IR docs will then refer the patient to the proper specialist. Although they are not performing a treatment with IR’s involvement, the patient gets to the definitive treatment faster than the traditional route.

**OPENING JANUARY 2012**
The new mammography suite will increase the ability to provide walk-in and add-on services to breast patients. In addition to the state-of-the art and additional equipment, the luxurious suite will offer an environment that is more private, friendly, warm and conducive to caring for the whole person.

**RADIOLOGY ROLE: A SYSTEM REDESIGN**

With advanced 3-D software, radiologists are able to get closer looks at the body as seen in the exquisite details of the heart’s right and left coronary arteries in this image. The examination was obtained after the IV administration of dye injected in an arm vein, without invasive catheters that would have normally been placed in the groin area.

Advances in technology have enabled the Interventional Radiology (IR) team at Dallas VA to offer a wide range of minimally invasive image guided therapies. The ability of MRI, CT scan, ultrasound and x-rays to see inside the body allows IR physicians to precisely guide small needles, catheters and devices to a specific area. In doing so, a team of skilled IR physicians not only diagnose, but also treat tumors, stop internal bleeding and restore blood flow to clogged blood vessels, alleviating pain and bleeding from uterine fibroids and preventing blood clots from going to the heart and lungs.
All this is accomplished with a tiny skin nick, no larger than a grain of rice. Before recent IR advances, patients with liver cancer had very few treatment options and, as a result, had a grim prognosis often leaving them with a year or less to live. Now, two IR therapies being done at Dallas—transarterial chemoembolization (TACE) and tumor ablation—are mainstays in treating liver cancer and have improved patient outcomes.

TACE plugs the blood vessels with tiny beads. A recent advance in materials now allows the beads to be loaded with chemotherapy. IR physicians use x-rays to guide a tiny catheter into the blood vessels supplying the tumor. From there, the tiny chemotherapy loaded beads are delivered. This technique starves the tumor of blood while also directly delivering high doses of chemotherapy to the tumor without the usual side effects of traditional chemo delivery. With tumor ablation, cells are killed by burning or freezing them with small probes inserted through the skin and directly into the tumor.

Both of these treatments can be performed through small skin nicks and much shorter recovery times compared to traditional surgery. The patients can often go home the day of the procedure.

IR therapy continues to leverage recent and ongoing technological advances to deliver minimally invasive care. The advantages of IR therapies are many: primarily less pain, shorter hospital stays, shorter recovery times and significantly decreased hospital costs.

RADIOLOGY FUTURE: A PROMISING OUTLOOK

As part of its mission to train tomorrow’s top docs, Radiology Service is a highly regarded component of radiology residency at University of Texas Southwestern and contributes significantly to the education of medical students at Texas College of Osteopathic Medicine and Technologists at El Centro.

Multidisciplinary research projects including cardiac MR and CT, and multispecialty management of liver disorders has also helped Radiology Service achieve increasing prominence as a national center of excellence.
With research and advanced 3-D software, Radiology Service will take the picture archiving communication system (PACS) to a new level. There are also several exciting therapies that show promising results from the initial clinical research.

The result for veterans equals more precise, targeted focal points, better treatment plans for surgical and non-surgical approaches and a more sophisticated way to treat and advance their medical care.

For more information about Radiology Services at VA North Texas Health Care System, call 214-857-1085.

**TODAY’S TOP DOCS**

It’s time to toot our horns. We like to think we have some of the nation’s best doctors. Their peers, among others, agree.

Five VA North Texas doctors were voted by their peers and named as the “Best Doctors in Dallas 2011” in the November 2011 issue of *D Magazine*. They are **J. Michael DiMaio** and **Michael Jessen** both in the specialties of cardiothoracic surgery, **Kim Yancey** in dermatology, **Salahuddin Kazi** (left) in rheumatology and **James Valentine** in vascular surgery.

Other notable awards our docs received this year include one to **Dr. Carol S. North**, director of the trauma and disaster program, who received the prestigious Texas Society of Psychiatric Physicians Special Service Award. And another for **Dr. Henry Krueger** in Ambulatory Care who was selected by the Consumers’ Research Council of America for inclusion in the 2011 Guide to America’s Top Physicians.

**Alina Suris, Ph.D., ABPP**, (left) chief of psychology, received the George Kinokur Award from the American Academy of Clinical Psychiatrists. Dr. Suris, a board certified clinical psychologist, was recognized for her research on combat-related post-traumatic stress disorder symptoms and will be honored at the national conference in March 2012.

Mental Health happens to be one of the top-notch services offered at VA North Texas thanks in part to its leading docs. From 2009-2011, Mental Health has swept the Department of Psychiatry UT Southwestern Outstanding Teacher of the Year award. Additionally, VA North Texas received the UT Southwestern Excellence in Education award from 2009-2010.
Patients and colleagues alike at VA North Texas benefit from the knowledge and skill of these accomplished physicians. Rosalind Scott, RN, has worked with numerous doctors during her 22 years as a nurse. As for working alongside Dr. Kazi, she said, “I have witnessed his affect on his patients past and present. It is his caring bedside manner that is lacking in today’s medical practice which makes him so unique. He is an excellent teacher not only to staff, but to the residents and patients. When a patient leaves Dr. Kazi, they feel a lasting relationship has been built.”

It is comments like that, about doctors and others, which portray the kind of care and consideration veteran patients deserve. This is the type of treatment which keeps them coming back.

TRAINING TOMORROW’S TOP DOCS

VA North Texas is a renowned state-of-the-art health care system known not just for developing innovative practices that enhance the delivery of health care services, but also for training and employing some of the best doctors in the field.

One of the key elements that allow for the in-depth and practical training of future doctors is a longstanding commitment to medical education and the affiliation with major medical teaching institutions.

Veterans Policy Memorandum Number 2, dated January 30, 1946, outlines this commitment to medical education and is the reason VA’s relationship to major medical teaching institutions exist today. This memo highlights the goals and expected impact of academic affiliations on the care we provide to veterans. Its “three-fold purpose” is: to give veterans the highest quality of medical care; the opportunity for post-graduate study; and lastly, to generally raise the standard of medical practice in the United States.

This academic relationship is still thriving 65 years later. The relationship has clearly resulted in excellence in patient care, increased access to care and research focused on specific veteran issues. Much of the recent research on post-traumatic stress disorder, traumatic brain injury and Iraq/Afghanistan war lung injury can be attributed to the work of VA researchers who also practice at partnering academic institutions.

From a national perspective, 36,747 medical residents, 20,516 medical students, 239 advanced fellows and 1,267 dental residents and dental students received some or all of their clinical training at VA. This was in 2010 alone. Many trainees already have their health profession degrees when they come for advanced clinical training, thereby contributing substantially to VA’s ability to deliver cost-effective and high-quality patient care.
Locally VA North Texas has a longstanding affiliation with University of Texas Southwestern Medical Center and Baylor College of Dentistry. Up to 180 physicians and dentists from these two institutions to help care for veterans on any given day.

The care given in all intensive care units, in a vast majority of surgery and nearly all specialty care is accomplished with the help of medical students and residents. Fifty percent of all inpatients are cared for using academic teaching. Without the contribution of these physicians and dentists, VA North Texas would not be able to provide the current level of care or access for veterans.

In addition to its main affiliates, VA North Texas is associated with at least 40 other universities and schools. In 2010, 500 trainees from these institutions, many working as volunteers, served veterans.

The newest affiliates that are certain to play an integral role in the care of outpatients in the future are University of North Texas (UNT) Medical Center and Texas College of Osteopathic Medicine in Fort Worth. The enrollment of veterans is growing rapidly at Fort Worth Outpatient Clinic, and physicians and physician assistants from UNT are rotating in the clinics supporting patient care. It’s a win-win for patients as many of the trainees are on military scholarships or are veterans themselves.

VA’s commitment to remain diligent and progressive in the academic nurturing and continuing education of medical professionals is important to the transformation of veteran health care in the 21st century.

Thanks to these strong relationships with academic affiliates and a robust program to train and shape the future of medicine, the best is yet to come.
Post military service, the VA journey began for Julie Landrith in 1983 when she started at Dallas VA Medical Center as a staff nurse in Pulmonary Medicine. Prior to that, she was a captain in the Army, having served for nine years as a nurse stationed at Fort Carson in Colorado Springs, Tripler Army Medical Center in Honolulu and Fort Stewart in Hinesville, Georgia.

What made her join VA? Julie thought working for veterans would be a good way to stay connected with what she called her military family.

Julie comes from a long line of military service in her family. Her father served in the Army Air Corps during WWII. Against her mother’s wishes, she entered the Army and her father signed her into one of the student nurse programs. Although she became a nurse, Julie’s first ambition was to be a geologist.

In her early years of providing hands on care, Julie most enjoyed helping veterans manage their health. Sometimes that meant teaching patients about medication, condition or wound care. Other times it meant support for family members. Julie recalls unit 7B as being the first to receive a veteran with AIDS. The veteran contracted the disease after a blood transfusion during surgery at another hospital. Julie remembers how other employees were afraid of catching this disease and they were nervous to be around the patient. Although little was known back then about AIDS, that experience caused her to help others realize how their personal biases affect the care they provide. Julie learned how one person can be instrumental in making positive changes for an entire culture.

These days, Julie serves as staff assistant to the chief of staff and promotes all clinical performance measures VA North Texas is required to meet. Since the beginning of the performance measure era in 2000, she has seen incredible improvements in the care VA North Texas provides. “Working here turned out to be a positive experience that allows me to serve veterans who have served in so many battles,” explains Landrith. “Some of those conflicts extend past the traditional battlefields, into our own minds and hearts.”
Julie said it has been an honor to be a VA nurse, and as a veteran, she strives to inspire others to provide the care they want to receive – the best care, every time.

LET’S TALK ABOUT IT

Three ways I influence my personal satisfaction on the job to better care for veterans:

1. I remember that what I do today could affect my father or several other family members who are veterans.
2. I am free and they gave freedom to me, so it’s my turn to pay them back for their sacrifice.
3. My work is who I am and that is how people view you. Veterans deserve our best.

Thomas W. Morton
Dallas, Sterile Processing Service

1. I focus on God’s calling and given tasks instead of focusing on other things.
2. I remind myself continuously of my privilege and honor to be able to care for those who sacrificed their lives on behalf of our (me and my family’s) freedom.
3. I try to get rid of the “entitlement” mentality and treat my position as an opportunity to serve both veterans and fellow employees.

Maxi Chousand, MD
Dallas, Emergency Department
1. I stress positive encouragement to veterans.
2. I listen to various experiences from them, which makes me more appreciative of their heroic endeavors.
3. I exemplify a positive and spiritual manner in my everyday actions.

Bessie Davis, RN, MSN/EDU  
Tyler Clinic, Nursing

1. Every morning I ask the Lord to give me the desire and courage to do my job in a manner that is pleasing to Him. That way, if I’m pleasing Him, I’m pleasing veterans and visitors.
2. I make sure I take the training that VA provides, such as Compliance and Business Integrity Awareness Training, Diversity in the Workplace, and Scheduling Training - Soft Skills, so I can stay on top of the rules and regulations.
3. I say to myself that I’m a person. I’m a man. I’m a veteran. I need to treat people that I come in contact with the way I want to be treated. I also remember that I don’t know what veterans in front of me went through and who they spoke to before coming to my window. I’m here to take care of them and always conduct myself in a professional manner.

Phillip Livas  
Polk Street Annex, Medical Administration Service

1. I acknowledge and speak to as many veterans as possible. That helps make their visit more comfortable and friendly.
2. As a local resident, I try to be aware of any services that could be helpful for veterans, either VA or in the area.
3. I use my VA training to try to recognize veterans who may be in need of help, either physically or emotionally.

Greg Towe, RPH  
Bonham, Pharmacy

1. I am dependable on my job so I can do my part to provide the right nutrition and help quality, and quantity, of life.
2. I give respect and go above and beyond my duties to make veterans happy.
3. I am always professional. I greet veterans with a smile and make them feel at home.

Anita G. Johnson  
Bonham, Nutrition & Food Service
1. Every veteran has a unique story. I take a couple of minutes to enjoy their non-medical history that encompasses them as a complete individual and not just a person with a medical condition.
2. You can never really understand the experience without having gone through it. I read military history and enjoy documentaries on television. It helps me understand the mindset of some of our combat veterans.
3. Having served in uniform, I find it easy to share the experiences of veterans.

Robert J. Stuart, MD
Fort Worth, Ambulatory Care

1. I treat every veteran that I come in contact with, with the kindness and respect they deserve.
2. I give the patient time to talk and explain their issues. Most times, they just want someone to listen.
3. They want their providers to explain their health care to them. If I can’t I will get someone in that field who can.

Loretta Tryon-Dread
Dallas, Executive Office

CAREGIVERS PROVIDE A LABOR OF LOVE

You know VA provides benefits and services for veterans, but did you know VA also has a number of services designed specifically to support caregivers?

Day in and day out, more than 65 million family caregivers in this country fulfill a vital role to provide care to someone who cannot care for themselves. They have chosen to meet daily health care needs of a dependent child, elderly parent or other family member who has suffered a severe injury or is chronically ill in their home versus committing them to a nursing home or managed care facility.

VA North Texas is currently partnering with 55 caregivers who have committed to provide compassionate care for veterans in their home environment. The caregiver support team receives up to 10 applications each week from potential caregivers and more than 50 phone calls daily from veterans and their families.
Programs and services like adult day health care, home-based primary care, skilled home care, homemaker and home health aide program, home telehealth, respite and home hospice provide caregivers the support they need. It’s a team effort and a win-win for veterans.

Veterans enrolled for VA health services are eligible for the caregiver support program if they:

- sustained a serious injury – including traumatic brain injury, psychological trauma or other mental disorder incurred or aggravated in the line of duty on or after September 11, 2001.
- are unable to perform one or more activities of daily living or personal care services and/or need supervision or protection based on symptoms or residuals of neurological impairment or injury.

Under the Caregivers and Veterans Omnibus Health Services Act of 2010, additional VA services are now available to seriously injured post-9/11 veterans and their caregivers, including:

- a monthly stipend
- travel expenses (including lodging and per diem while accompanying veterans undergoing care)
- access to health care insurance (if the caregiver is not already entitled to care or services under a health care plan)
- mental health services and counseling
- comprehensive VA caregiver training provided by Easter Seals
- respite care (not less than 30 days per year)

VA recognizes the valuable contribution caregivers provide and encourages them to maintain balance in their lives, be more productive, feel more in control and ensure they are taking care of themselves. Balance also means gaining new skills, developing new friendships, finding the joy in taking care of the veteran they love and discovering more ways to enjoy life.

For more information, contact the caregiver support coordinator Michele.Lee@va.gov.

“I just want to say thank you so much for everything. I had no idea how valuable and relevant this program would be for us. We are hopeful and really appreciate all of your assistance. Really... I can’t thank you enough!”

– Melinda Wright-Fricke
caregiver of a veteran patient
ONE VETERAN’S SUCCESS

Laura Wright is a U.S. Army veteran who was honorably discharged after 14 years of active duty service. Upon returning to civilian life, she found herself struggling to keep her life in order.

When Wright first came to Dallas VA, she was homeless, unemployed and needed both medical and psychological treatment.

“I was beaten, tired and had burned every bridge along the way,” Wright said about her addiction and other circumstances.

After successfully completing several VA programs geared toward ending homelessness, Wright is now gainfully employed with a home of her own.

Whether you know a veteran who is homeless or at risk of becoming homeless or maybe you just want to find out how you can help, VA wants to partner with you. The national call center available 24/7 provides trained professionals, many veterans themselves, who are there to help.

Make the Call at 1-877-424-3838 if you need immediate assistance, know a homeless veteran or someone who is at risk of becoming homeless. We need you to help in the fight. For more info, visit www.va.gov/homeless.

A FOCUSED TARGET: ENDING VETERAN HOMELESSNESS

No veteran who answered the call should be faced without a place to call home. Yet an estimated 12 percent of the adult homeless population who served in the Armed Forces find themselves without a key to unlock the door to their own personal safe haven.

Current population estimates suggest about 3,028 veterans (male and female) are homeless on any given night throughout urban cities of the Dallas-Fort Worth metroplex. Many other veterans are considered near homeless or at risk because of poverty, lack of support from family and friends and dismal living conditions in cheap hotels or in overcrowded or substandard housing.
VA unveiled its plan to end homelessness among the veteran population by 2015 and is coordinating efforts and resources of government, business and the private sector to make it happen.

The strategy: offer a range of services and benefits specifically designed to help homeless veterans live as self-sufficient and independent as possible. And at VA North Texas, these services are conducted through the Comprehensive Homeless Center which offers compensated work therapy, residential rehabilitation treatment programs and education opportunities just to name a few. First in the VA system, the center also helps veterans with the justice system and job training. These programs and services are all designed to help end life on the streets and provide tools and training to transition from homelessness to independent and community living.

“VA North Texas has strong partnerships with local and non-government entities, faith-based organizations and private businesses that help meet the needs of the homeless,” said Teresa House-Hatfield, program director. House-Hatfield goes on to report recent stand down events in Dallas, Bonham area and Fort Worth allowed VA North Texas and its partners to offer a day of respite and care while “providing a hand up, not a hand out” to 896 homeless veterans. The events served as opportunities to obtain food, clothing, resources, job assistance, housing information and counseling.

Realizing the serious task to tackle and end homelessness, VA North Texas held two summits. A recent national spotlight on homelessness joined VA with community partners and local and state government to discuss solutions at all levels. Through these extensive coalitions, more veterans will seek VA care and more resources will be directed toward ending homelessness.

WATCH US GROW:
YOU REQUESTED, WE ANSWERED

VA North Texas has changed tremendously over the past years to support the increase of the veteran population it serves. With that increase, comes a demand for growth and expansion. VA North Texas is committed to meeting those needs.

Veterans at Dallas VA have shown a great deal of concern for the seemingly simple, yet tough task of finding a parking spot.
It’s no wonder with over 111,000 veterans in the system, the Dallas campus sees thousands of patients on any given day. This January, the long anticipated, 673-space, five-story, parking garage will open. A first of more to come, this parking garage will help ease parking woes for veterans and others visiting the campus.

Located on the northeast corner of the campus, the garage will be open 24 hours/day. It is covered and partially enclosed to protect users and their vehicles from inclement weather. What’s more, it’s free and a shuttle bus will take those needing it to their locations.

While some will be on one end of the campus enjoying the new garage, medical and surgical patients will enjoy more privacy and amenities on the new 7C wing. This project is almost complete and will be activated soon. After the 7C patient privacy project is complete, one for 7A will begin.

As veterans depend on VA staff to consider their needs, staff and employees depend on veterans to let their needs be known. From either perspective, the road ahead is continuing to expand. And we look forward to serving.

**DOWN THE ROAD**

**January 2012**
The new mammography suite will open for women veterans.

**February 2012**
The new Polytrauma Center, which will allow for improved space for patients with complex injuries, will be completed.

**March 2012**
The new 3T MRI addition will be complete. This will provide patients with the most technologically advanced imaging services.

**December 2012**
The relocation of Geropsychiatry is estimated to be complete. This project will provide 30 beds for Mental Health in a more beautiful and peaceful environment.
In the future...
Designs have been approved for both the clinical expansion of Mental Health and new construction on the Long Term SCI unit. These projects are expected to be funded in fiscal year 2013.

IN SPITE OF, HE SERVED PROUDLY

John Day was 26 and living in Fort Worth when he entered the service in 1949. He wanted to be in the Navy but was drafted by the Army before he could enlist. After weeks of basic training, he was on a ship headed to war.

Day was wounded early the next year, and then captured as a POW (prisoner of war) on November 27, 1950, while serving as an Army sergeant with the 2nd Division near Somin-Dong, North Korea. When he was captured, the Chinese found a Bible he kept with him since leaving home. They tried to tear out the American flag inside (a common practice). Day told them, “I won’t let you do it. It is my country, my flag and my religion. I’m keeping them all.” He threatened to tell the newspapers when he got home so the Chinese let him keep his Bible.

Day obtained a wound on his left knee when he was captured. From that day until January 26, 1951, the prisoners marched almost continually for 200 miles, mostly in circles, until they reached a prison camp in North Korea. Hundreds of men died and Day was forced to help carry the sick and wounded. He escaped three different prison camps four times. Each time he was thrown into a dungeon referred to by POWs as ‘the hole,’ which was full of lice, bed bugs and rats.

On one of his escape attempts, he was within 20 miles of the west coast and had reached the main supply route. Day figures he must have contracted malaria and was too weak to climb the North Korean hills, so he had to give himself up. Back in a prison camp, he didn’t receive medical care and was sentenced to six months in the hole where he spent 49.5 days until a Chinese doctor convinced his captors to get him out or he would die.

Day spent more than two years behind barbed wires in hard labor camps and recalls confinement in cold cellars and sickening food. He remembers during one forced march he refused to become a communist progressive, which cost him eight hours
of being suspended by his thumbs. He was among a special company of 200 that the communists listed as “leading reactionaries” because he would not break or bend – a designation that he is proud of to this day.

His life took a turn for the better when he was repatriated August 19, 1953, along with 71 other POWs as a result of Operation Big Switch, a POW exchange in Korea. Day was the first POW to return home to Tarrant County.

After his military service, Day accomplished his dream of buying some land and starting a farm where he still resides today. He loves playing dominoes and spending time with his four children and especially his eight grandchildren. When asked about his military service, Day said, “I love my fellow man and all my buddies that did not come home.”

He still has that Bible.

SHE SERVED TOO

Women are now the fastest growing population of veterans, and the numbers are expected to increase dramatically over the next 10 years. VA anticipates health care will be in high demand among women who served in Iraq and Afghanistan and is preparing to meet their needs.

VA North Texas has a devoted staff that works with women veterans. The Well Women’s Clinic offers women of all ages a full range of preventive care and treatment services including primary care, mammography, gynecological care/surgery, mental health and maternity referrals. The clinic works with mental health specialists to handle stress disorders and military sexual trauma. Special programs provide services for homeless women veterans, victims of domestic violence and those interested in education and training, employment assistance and vocational rehabilitation. Health care for women veterans is available at all VA North Texas facilities and community-based outpatient clinic locations.
Some additional services include, but are not limited to:
- Menopause treatment, including hormonal therapy if appropriate
- Family planning and contraceptive care
- Assessment for heart disease, high blood pressure and cholesterol
- Tobacco use cessation counseling
- Flu and other vaccines
- Screenings for: diabetes, osteoporosis, sexually transmitted diseases, nutrition and dietary needs

At Dallas VA, a new mammography suite is near completion with an estimated opening of January 2012. The suite will improve access to care while considering special issues and privacy needs of women in a pleasant and calm atmosphere. Across town in Fort Worth, women veterans have been enjoying their private clinic since its opening last fall.

If you are a woman veteran and would like more information, contact Mary Sweeney, Women Veterans Program Manager, at 214-857-1938.

“I believe VA North Texas Women Veterans Program is doing a great job. Over the years, I have given birth to three beautiful children while being covered under the program. I really appreciate how the program gives women the freedom to choose their own OB-GYN and the hospital they wish to use for delivery. This brought comfort to me, as a mother, during my pregnancy.”

-Jennifer A. Scott, female veteran

**CONGRATULATIONS - 25 AND ABOVE CLUB**

*Congratulations to the following employees for over 25 years of Federal service: Fiscal Year 2011 - 3rd and 4th quarters*

**25 YEARS**

Varnzell Bridges, Environmental Management Service (EMS)
Dennis Davison, Surgical
Donna Nault, Central Dental Lab
Diana Gampper, Medical Administration Service (MAS)
Remedios Sanchez-Silva, Nursing
Belinda Chiscolm, Physical Medicine & Rehabilitation (PM&R)
Francisco Cantu, Police
Stonell Greene, Readjustment Counseling
Glendon Reliford, Logistics
Bettye Harrison, Ambulatory Care
James Jones, Anesthesiology
Araceli Andrews, Audiology
Stephen Holt, Executive Office
Connie Scott, Executive Office
Horace Campbell, Human Resources
William Chinn, MAS
Phylease Sams, MAS
Melba White, MAS
John Hester, Nuclear Medicine
Hideyo Hayworth, Nursing
Ivelisse Soto, Nursing
Edwina Tellis, Nursing
Gary Davis, Pathology & Laboratory Medicine Service (P&LMS)
Dion Williams, P&LMS
Cynthia Shelton, PM&R
Rebecca Williams, Radiology
Matt Menger, Readjustment Counseling
Kim Canova-Romans, Recreation Therapy

30 YEARS
Josephine Briggs, Business Office
Richard Dasheiff, Medical
Phillip Eichhorn, Medical
Richard Finn, Dental
Deborah Glenn, Medical
William Halverson, Engineering
David Hamilton, Logistics
Breneda Johnson, Fiscal
Patricia Johnson, Pharmacy
Michael Kilpatrick, Human Resources
Minerva Mason, Office of Information & Technology (OI&T)
Dennis Mitchell Jr., Engineering
Rita Nemons, Medical
Sara Piantini, Nursing
Victor Rivera, Medical
Barbara Sells, Executive Office
Sally Simpson, Nursing
Stuart Spechler, Medical
Gary Stone, Mental Health
Nathaniel Swinton, Nursing
Ammini Thomas, Nursing
Tommy Washington, EMS
35 YEARS
Mary Callis, Nursing
Delores Graves, Sterile Processing Services
Michael Hardaway , EMS
Carolyn Johnson, Fiscal
Wanda Lee, Executive Office
Patricia McNeal, Medical
Joe S. Osborne, Engineering
Sirjames Smith, Central Dental Lab
Donnie Stevenson, Mental Health
Paul Strange, Mental Health
Tommy Washington, EMS

40 YEARS
William Currie, Dental
Bertha Kirkendoll, Nursing
Jimmy Post, Audiology & Speech Pathology

55 YEARS
Roger Unger, Research

SALUTE TO EXCELLENCE

Stephen Holt, MD, MPH, MSNRS, deputy chief of staff, received the 2011 Department of Veterans Affairs Employee of the Year award from the Air Force Association. Holt was a flight surgeon in the Air Force where he served for 25 years and retired as a colonel in 2005. His accomplishments, including creation of Patient Administrative Service to improve patient flow, increase availability of intensive care beds and avoid admissions to community hospitals, paired with his work to partner with county court systems to establish Veterans Justice Outreach programs to offer treatment and rehabilitation alternatives to incarcerated veterans helped land him the prestigious honor.

Pictured below (l to r) Air Force Association Chairman of the Board, Sandy Schlitt, Dr. Stephen Holt, Secretary of the Air Force, the Honorable Michael Donley, and Air Force Chief of Staff, General Norton Schwartz.