



VA MID-ATLANTIC HEALTH CARE NETWORK • VISN SIX

Vol. 2, No. 5

“Excellent Care – Earned by Veterans – Delivered Here”

Voices of VISN 6

Official news from around *your* VISN

February 29, 2012

Durham Staff Enhances Military Awareness

By Jeff Melvin
VISN 6 public affairs

Seeking to gain greater understanding of the military, Durham VAMC staff formulated a plan to reach their objective. The journey began with online Military Cultural Awareness training, followed by a continuing series of roundtable discussions with Veterans, and culminated with an exchange of field trips with the Airmen of Seymour Johnson Air Force Base in Goldsboro, N.C.

Durham VAMC Public Affairs Officer Pete Tillman, one of the lead organizers of the initiative, offered his assessment of the undertaking and the desired outcome.

According to Tillman the first step began when about 30

staff members wanting to learn more about military culture took a 90-minute Military Cultural Awareness training course available in VA’s Talent Management System. The idea was simple; Durham VAMC staff would take the course to better understand the military, and in turn would be able to better provide health care to those who served.

“The informative training explained military culture from the ground zero,” Tillman said. “In Jeopardy-style format, staff learned about military branches, ranks, and conflicts. After completion of the course, they were primed for an experience of real life proportions.”

The next step was for the

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Ed Kubacki

A 4th Fighter Wing munitions maintainer shows Durham VAMC staff the various munitions which can be delivered by the F-15E Strike Eagle.

VA Secretary Makes Two Stops In VISN 6

By Hampton & Richmond
VAMC public affairs

Secretary of Veterans Affairs Eric K. Shinseki paid visits to the Mid-Atlantic Health Care Network region on two occasions in February, first on Feb. 3 when he toured Richmond VAMC and on Feb. 9 when he made a stop in the Hampton VAMC area to visit a trade school with a growing population of student Veterans.

During his visit to Richmond, the Secretary received a firsthand look at two of the medical center’s most highly touted programs, the McGuire Polytrauma Rehabilitation Center and the Servicemember Transitional Amputee Rehabilitation (STAR) program.

Secretary Shinseki also toured projects the facility has implemented to become more energy efficient. Virginia Congressman Bobby Scott accompanied the secretary during his



Darlene Edwards

VA Secretary Eric Shinseki discusses Polytrauma with Dr. Shane McNamee, chief, physical medicine and rehabilitation, Richmond VAMC, and U.S. Rep. Bobby Scott.

visit.

McGuire’s Polytrauma Rehabilitation Center is one of five facilities in the country

designed to provide intensive rehabilitative care to Veterans

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VISN 6 Sites of Care with addresses and phone numbers for each location.

From the Director

This month, I'll shift to a more clinical focus and shine a light on some very important work going on behind the scenes that really speaks to the heart of being a Veteran-centered health care organization.

It is well known that servicemembers have experiences that few who have not served can identify with. These can leave emotional scars that may be invisible to the eye, but are just as real as the physical scars we can see. I'd like to take this opportunity to tell you about what VISN 6 is doing to treat the invisible wounds of war.

VA is the undisputed leader in mending the physical traumas of war. Equally as important, VA also leads national and international efforts to heal psychological trauma as well.

Within VA, there are 15 specialized mental health centers of excellence which include 10 Mental Illness Research, Education and Clinical Centers (MIRECCs), four Mental Health Centers of Excellence, and the National Center for PTSD.

The MIRECCs were established by Congress with the goal of researching the causes and treatments of mental disorders and using education to put new knowledge into routine clinical practice in VA. Each center addresses a particular mental illness, problem, or environmental situation.

Post-deployment mental health challenges have been evident for many years and in 2005, VA addressed this issue by awarding the VISN 6 MIRECC a multidisciplinary team of clinicians, educators and researchers charged with the goal of bringing best practices in mental health care into deployment related mental health.

The overarching goal of Mid-Atlantic MIRECC is the clinical assessment and treatment of post-deployment mental illness and readjustment related problems, and the development of new mental health interventions through basic and clinical research.

The MIRECC's organizational structure includes three major components: research, clinical, and education.

Locating a MIRECC in this network makes perfect sense because of the large population of Veterans within our boundaries. Installations like Fort Bragg, Camp Lejeune, Norfolk Naval Base, Langley and Seymour Johnson Air Force Bases, along with the numerous Guard and Reserve bases allows the research registry access to large numbers of Veterans who are willing to help their fellow servicemembers by sharing their own stories.

The clinical component seeks to define, model, champion and refine the continuum of care for OEF/OIF/OND mental health. Key to their approach is that there should be "no wrong door" for Veterans seeking care or for their families in helping them find and work with that care. To achieve this, they have created an innovative collaboration with state governments in North Carolina and Virginia.

Finally, the education component works to bridge the gap between research and clinical care. The education component translates best practices and research concepts into educational materials and ensures that the knowledge is shared with all health care



Retirement Specialty Center Can Help

The VISN 6 Retirement Specialty Center (RSC) is here to assist you with your CSRS/FERS optional, disability, military and civilian service deposit, and annuity estimate retirement needs.

For retirement assistance, please contact us at our toll free number 1-877-645-6015 or at VISN6RSC@va.gov. Our hours of operation are Monday – Friday, 8 a.m. to 4:30 p.m.

Face-to-face consultations are available by appointment only.

personnel, patients and families through a variety of accessible means which include live presentations, print materials, recordings, and even the web.

So, why am I focusing on this work at this time?

Unlike past conflicts where mental help for Veterans came too little, too late, VA has made the commitment to address our Veterans needs as soon as humanly possible and to assist our Veterans with their transition back to their civilian environment.

It's important to note that an unprecedented number, 53 percent of the 2.2 million returning Veterans, have already sought care within VA. However, this means that 47 percent have not. Those who have not will likely seek care from community providers, who may not have access to the resources necessary to fully address traumatic brain injury or PTSD or related depression.

This is where MIRECC comes in. MIRECC is in constant collaboration with North Carolina's Area Health Education Center and Citizen Soldier Support Program. The MIRECC team has created training for community providers, such as primary care doctors, caseworkers, and mental health providers to help them better understand the culture of Veterans and their families. The team also works to teach community providers how to best identify, assess, and treat mental health problems that may occur as a result of war experiences. These workshops are available to all at www.aheconnect.com/citizensoldier. Of note, these presentations are the basis for the first national AHEC project ever approved! To date, more than 12,000 community providers have received training about deployment mental health issues and about how to work in partnership with VA to ensure the best possible care for Veterans through this collaboration.

While participation is voluntary, all returning OIF/OEF/OND Veterans are invited to participate in ongoing research about the effects of recent deployments on the physical and mental health of servicemembers, especially as they transition from deployment back to civilian life. Our goals are to learn more about the readjustment process, to recognize problems earlier, and to improve care. We are interested in learning about Veterans who have problems as well as those who have no problems at all.

In this network, we are working to ensure that there is no wrong door from which a Veteran or his/her family can seek help. Again, I encourage all Veterans and families to learn more about what is being done and what is being offered to those who need assistance. For more information, please go to www.mirecc.va.gov/visn6/index.asp.

Sincerely,
Dan Hoffmann

Voices of VISN 6 is published monthly by VA Mid-Atlantic Health Care Network.



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Richmond Podiatrist Earns Recognition

By Darlene Edwards
Richmond VAMC public affairs

Dr. Jonathan Brantley, chief of podiatry, Richmond VAMC recently received the Excellence in Education for the Profession of Podiatry Award from the Veterans Health Administration for his dedication and commitment to the education of future podiatrists.

Among the many accomplishments the doctor of podiatric medicine is credited with is his establishment of the podiatric medical and surgical residency program at the medical center. The active residency program encompasses a two-year training program. Dr. Brantley also frequently lectures to leading colleagues in the field most recently at a national conference, the Desert

Foot Conference, in Phoenix attended by more than 500 participants.

Visitors to the podiatry clinic will often find Brantley providing a detailed overview of healthy foot care to his patients and explaining needed procedures. He will even include diagrams, photos and models to support his educational efforts to ensure the patient understands the information related to their health.

The Richmond VAMC's busy podiatry clinic offers comprehensive foot and ankle care to Veterans, ranging from routine preventative care for some to surgery for others with complex foot deformities.

Dr. Brantley grew up in Edgewater Park, N.J., and attended New York College of Podiatric Medicine.



Darlene Edwards

Richmond VAMC podiatrist Dr. Joseph Brantley has earned Veterans Health Administration's Excellence in Education for the Profession of Podiatry Award.

New Arrivals, Roles Enhance VISN 6 Field Support

There are some new faces in unfamiliar spaces and old faces in new spaces around the VISN 6. The following are some of the new hires and position changes since last August.

SaMonia Ford joined VA and the VISN in August as transportation assistant. Before joining VA, Ford served in the U.S. Army for eight years and most recently worked for the NC National Guard. In her role for the VISN, Ms. Ford is responsible for providing assistance preparing transportation needs.



Cathy Hendrix joined VISN 6 in November as a management and program assistant. Cathy is a newcomer to VA and comes to us from the North Carolina Department of Revenue where she worked as the administrative assistant for the



special corporate compliance initiatives division for four years. Prior to working for the State of North Carolina, she worked in logistics and administration in the private sector from 1991 to 2003. Cathy was an active duty Soldier with the U.S. Army where she worked in maintenance as a welder and logistics as a medical supply specialist. In her key role for the VISN, Cathy is responsible for providing administrative support to the program officials and network executives.

Patrick March is the telehealth data management coordinator for the VISN. He joined the VISN staff in January and comes to us from the Department of the Army where he served as a DoD civilian information technology data management specialist. Additionally, Patrick is a Navy Veteran with 26 years of dedicated service. In his new role for the VISN, Patrick is responsible for providing telehealth program analysis.



Katherine McMullin joined the organization last fall as a health systems specialist for tertiary care. She transferred from the Durham VAMC where she started as a coordinator in process and systems improvement working on process action teams, patient satisfaction improvement activities, and data gathering and analysis. She also worked as a program analyst in ambulatory care, where her duties included data analysis and managing space and equipment. Kathi is a native of Rockville, MD, and moved to North Carolina in 2002 to attend graduate school at UNC. She is responsible for providing administrative leadership for tertiary care.



Allen Moyer is the new VISN 6, Health Administration Service Lead. Born and raised in Beckley, W. Va., Moyer was a



mechanic and airborne-qualified Sergeant in the U.S. Army, serving for six and a half years. He joined the VA in 1995 and has served in various administrative roles at the Beckley VAMC where he is currently, chief, HAS. In his key role as VISN HAS Lead, Moyer is responsible for serving as the point of contact for matters relating to Health Administration Service.

James R. Payne III has served as a VISN 6, Area Emergency Manager since August. He is a North Carolina native and holds a bachelor's and master's degrees from Western Carolina University. A military retiree, James brings 20 years of leadership in various military and forward deployed roles including two combat tours to his new position. His certifications include certified emergency manager, hospital emergency coordinator (Level III), and anti-terrorism special-



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New Arrivals
Continued from Pg 3

ist. He is also a basic and advanced disaster life support instructor and homeland security exercise evaluation program instructor.

Barbara A. Rountree joined the VISN 6 staff in December as telehealth program assistant. She transferred from the Durham VAMC, where she served as a program support assistant in the home telehealth program, while participating in other programs. She graduated from the Mid-Atlantic Development Program in 2009 and Leadership Development Institute Program in 2010. She is a certified mentor. In her new role, Barbara is responsible for providing administration and program assistance to the VISN Telehealth Manager.



Sheila K. Zeto became VISN rural coordinator in August. She has served as rural health Integrator at the Beckley VAMC since January 2010 and as acting VRC since April 2011. She brings an extensive background in project management and data analysis to her new position, stemming from her experience as a research biologist and administrative officer with the U.S. Department of Agriculture and as a VA safety manager and emergency preparedness coordinator prior to her work in rural health. Zeto is responsible for providing project management, technical expertise and team leadership in order to coordinate VISN 6 rural health programs. She will also serve as liaison between VISN 6 and the Office of Rural Health at VA Central Office.



Steve Wilkins

N.C. American Legion Winter Conference
D. Mack Wood, a retired American Legion district manager, greets VISN 6 Deputy Network Director Gus Davila following Davila's presentation to the North Carolina American Legion Winter Conference in Raleigh. Davila highlighted VISN concerns including beneficiary travel and partnerships with community organizations to enhance health care opportunities for Veterans during his talk.



Courtesy Photo

Duke and Durham VAMC Medical Residents Leon Cannizzaro and Edward Coverstone sit in the cockpit of an Air Force KC-135 Stratotanker while learning more about Air Force operations.

Durham continued from Pg 1

group to participate in several roundtable discussions to put the online lessons into action.

Tillman, who served as facilitator for the discussions, said compelling stories poured out of Veteran panelists from various branches, genders, and periods of service, responding to questions like, "Tell me about the day you enlisted; why did you choose that

branch of service; and how did your family react when you told them."

"The stories were real and the atmosphere was priceless," said Tillman. "By stepping back from looking at Veterans as patients, and learning to look at them as brothers, sisters, fathers, and friends, the staff gained valuable insight about the sacrifices of all of the brave

people who served. The internal connection with VA's mission took form in ways both emotional and authentic."

Energized by the online training and the roundtable discussions, the group was eager to learn more.

North Carolina is home to eight military bases. Why not arrange a trip to one of these installations to see firsthand how the military operates? Most of the participants were not Veterans and had little idea what life on a military base was like.

A mutually beneficial collaboration was born. Thirty staff, and several VA contractors, embarked on a special tour of the Seymour Johnson AFB.

"Seeing impressive aircraft like the F-15E Strike Eagle and the Boeing KC-135 Stratotanker, energized the group," Tillman said. "While the aircraft were intriguing, talking with the Airmen was truly remarkable and gave us a new appreciation for Veterans."

The trip spawned a reciprocal visit to further cement the partnership. About 30 Airmen from the Seymour Johnson AFB visited the Durham VAMC for firsthand military cultural exchange. The Air-

men learned about enrollment, observed clinicians, and were briefed on various VA programs.

Most recently, the Airmen returned once again and took part in the National Salute to Hospitalized Veterans. The Airmen delivered Valentine's cards and spent time enjoying the company of inpatient Veterans, including those in the Community Living Center.

"The concept was simple but the experience was complex as well as profoundly meaningful," Tillman concluded. "Our exploration opened the eyes of staff even further to the life experiences of those that choose to wear our nation's uniform. We took the military cultural awareness training to a whole new level and have become a more understanding workforce because of it."

He said medical center leaders were flooded with positive comments from training participants about how the initiative has given new perspective to the work they do every day. Next up, Durham VAMC is planning to do training and visit Fort Bragg near Fayetteville, one of the Army's largest installations.

Durham Receives “Gold Heart” From NC Prevention Partners

By Durham VAMC public affairs

NC Prevention Partners (NCP), a non-profit leader in reducing preventable illness and early death, recently awarded the Gold Heart standard to the Durham VAMC for its comprehensive treatment of tobacco dependence in Veterans.

“This distinction is a tribute to all of the Durham VAMC staff members who are working here and at our affiliated community-based outpatient clinics to help Veterans get healthier by quitting tobacco,” says Dr. Clint McSherry, Durham VAMC’s HBC. “And it’s also a testament to the value and effectiveness of VA’s

national tobacco cessation standards, guidelines, and programs.”

The Durham VAMC is one of the first of North Carolina’s acute care hospitals to achieve Gold Heart status. It merited the award by meeting NCP’s key requirements for a successful quit-tobacco system for patients. The criteria include

screening patients for tobacco use as a “vital sign,” providing team-based cessation counseling, promoting evidence-based

treatment, and evaluating the system on a continuous basis.

NCP has partnered with

several organizations to help hospitals across the state successfully implement effective, empirically based quit-tobacco

systems similar to the one in place at each of the Durham VAMC facilities. As part of its mission of “prevention first for a healthier North Carolina,” NCP plans to continue to collaborate with the Durham VAMC on additional wellness initiatives.

“We are especially proud of this achievement because Durham VAMC is one of only four hospitals in the state to have earned the Gold Heart award from NCP,” says McSherry, a health psychologist with 20 years of experience in tobacco cessation. “We’re going to continue to help VA lead the way in its commitment to promoting health and preventing disease in our nation’s Veterans.”



Jennifer Askey VA Secretary Eric Shinseki meets with Veterans attending Tidewater Tech Feb. 9 to discuss Post-9/11 GI Bill changes that allow student Veterans to enter the labor force with skills gained from vocational training programs.

Shinseki continued from Pg 1

and servicemembers who experienced severe injuries (including brain injuries) to more than one organ system. During his visit, the Secretary underscored themes from the State of the Union address, in which President Obama outlined his strong commitment to Veterans.

He also met with patients and staff at the polytrauma center and the center’s in-patient unit.

Following the visit to the polytrauma center, Secretary Shinseki and Congressman Scott participated in a demonstration of the simulator now available for patients in the STAR program and to discuss the simulator’s role in the program.

The STAR program provides comprehensive vocational and physical rehabilitation to facilitate the transition of servicemembers with amputations into unrestricted military duty or competitive civilian employment.

The simulator, provided by Caterpillar and Simformotion,

provides patients an opportunity to gain an understanding of heavy equipment machine controls and to learn proper operating procedures well before their training on actual machines.

The simulated environment provides the patient a safe place to learn about the machinery, while enhancing their performance skills.

Hydraulic Excavator training is set in a construction environment and progressively takes the operator from basic controls orientation through more complex training exercises.

The simulator provides hands-on learning in a safe and economical way to enhance traditional operator training programs. The equipment is an excellent addition to the STAR program, providing another tool that can be used toward achieving the goal of returning servicemembers to full time employment in their communities.

Less than a week later, the Secretary returned to the Mid-Atlantic Health Care Network region when he made a short stop in Hampton Roads/Norfolk, Va., area to bring attention to another VA priority, helping Veterans find jobs.

He visited Tidewater Tech, a trade school that recently began accepting military Veterans using the Post-9/11 GI Bill. The school offers training in auto repair, welding, building maintenance, and heating, ventilation and air conditioning. A new provision that went into effect in October extended the GI Bill’s benefits to include apprenticeships, on-the-job training, vocational schools and non-degree programs.

According to school officials, the number of Veterans enrolling in its programs has increased significantly since the change took effect. Approximately 15 percent of Tidewater’s 200 students are Veterans using the GI Bill. In addition, about half the school’s instructors are Veterans

Shinseki began his visit by meeting privately with a handful of student Veterans, followed by a quick tour of the school. Speaking to reporters after the visit the VA Secretary said that, although unemployment among Iraq and Afghanistan Veterans is slowly falling, it is still far too high.

He said the original GI Bill helped remake America after World War II, and that with the benefits that include trade schools, he thinks this GI Bill will do the same.

“I’m very confident,” Shinseki said, “that this generation is equally capable of rebuilding our nation.”

National Salute Tells Veterans We Care

By VISN 6 public affairs

Veterans receive high quality care in VA facilities every day. The message that they are truly appreciated for their service and sacrifices in defending our country should never go unspoken even when the demands of everyday life loom large.

Because VA and its employees appreciate the lives and sacrifices of each and every Veteran, VA health facilities around the nation participate in a weeklong National Salute to Veterans to celebrate Veteran patients, and remind them VA doesn't take Veterans for granted. The salute usually takes place throughout a week in February spanning Valentine's Day.

Executed by VA medical center voluntary services staff, the annual VA National Salute to Veteran Patients program began in 1978. Veterans in and around VA facilities are treated to special meals and activities, visits from distinguished guests and special entertainment events meant to honor the service and lives of America's heroes.

More than a million cards and letters are sent to VA patients each year during the National Salute. VISN 6 activities included the various festivities held at each facility along with a "Valentines' For Veterans" concert featuring country music star Aaron Tippin Feb. 9 in Salem, Va. Although Veterans have the respect and devotion of VA employees every day, the National Salute to Veteran Patients pronounces in an obvious way that we care.



Debbie Voloski

Air Force Retired Veteran Larry Snuffer entertains Miss West Virginia USA Andrea Rogers with a story during her visit to Beckley VAMC in honor of VA's National Salute to Veteran Patients. Snuffer told staff that visits such as this "make him feel lifted, elated, and help to make his last days worthwhile."



Debbie Voloski

Country music star Aaron Tippin sings a tune for Veteran Mark Sharp during Tippin's visit to Salem VAMC Feb. 9. Later that evening, Tippin gave a "Valentine For Veterans" Concert at the Salem Civic Center.



Pete Tillman

Sydney Perry, Miss North Carolina USA, brought a smile to the face of inpatient Hudson Huff as she delivered a Valentine's Day card and carnation at the Durham VAMC.



Jennifer Askey

(Right) Air Force Gen. Gilmary M. "Mike" Hostage, commander, Air Combat Command, delivers a card to Veteran Eugene Hodge in the Hampton VAMC Spinal Cord Injury Unit during the National Salute to Veterans Week.



Brad Garner

Fayetteville VAMC Police Officer Sgt. Allen Tolentino strikes 'suspect,' lead mobile training team instructor Special Agent Anthony Everett, with the expandable straight baton.

Officers Transition To New Baton

By Robin DeMark
Fayetteville VAMC

Eleven police instructors from five states along the East Coast joined the Fayetteville VAMC Police Service to complete a new law enforcement baton training and certification course conducted by the mobile training team from the VA Law Enforcement Training Center in North Little Rock, Ark., Feb. 3. The training comes as VA Police Services nationwide transition from carrying side handle batons to new expandable straight batons.

"The new baton is designed to stun our primary targets, the large muscle groups of the body, and is less likely to break bones or cause permanent paralysis," said Sgt. Peter McDannell, Fayetteville VAMC Police Services. "We are here to serve the Veterans and seek voluntary compliance first."

According to McDannell, the primary mission for all VA police officers is to provide professional law enforcement service to ensure the safety of Veterans, patients and employees. Encounters require different defensive techniques and control measures that require police officers to elevate or de-escalate the level of force needed.

Special Agent Anthony Everett, who is the physical branch lead at the LE Training

Center, served as lead instructor for the mobile training team. He said police officers are often placed in situations where they must use force to control an individual while at the same time employing a force option that is necessary and justified.

"Batons are tools that allow a different force option between empty hand controls and deadly force," Everett said. "The goal is to achieve control without causing unnecessary injury or to use the least amount of force to achieve that control. This is how we educate our trainers to teach our police officers."

He added the LETC instructors were as good as any at other law enforcement agencies across the country. "Law enforcement trainers must have the maturity and passion to teach, and believe in their mission always; to get their students to the highest standard without fail," Everett said.

VA law enforcement is responsible for the protection of patients, visitors, employees, property, and maintaining law and order on property as directed by the Veterans Health Administration.

For more information about the VA Law Enforcement Center or VISN 6 Police Services, visit www.osp.va.gov/Law_Enforcement_Training_Center_LETC or <http://vaww.visn6.va.gov/police.aspx>, respectively.

Sun To Set On Treasury Checks

By Bruce Sprecher
VISN 6 public affairs

Like many items of the past, U.S. Treasury checks are being replaced by safer, more efficient electronic means. People and organizations previously paid by check will soon receive payment via electronic funds transfer to their bank accounts.

During Fiscal Year 2010, the U.S. government spent more than \$540 million to process U.S. Treasury checks. In December 2010, the Treasury decided to eliminate, with few exceptions, checks by May 2013.

In line with the Treasury directive, VA will stop issuing checks by Dec. 31, 2012.

The shift to EFT should be welcome news to Veterans as there will be no chance of lost checks and people will spend less time waiting in line at the cashier's window, according to VA officials. Efforts are underway nationwide to prepare all recipients to receive their funds electronically.

Gus Davila, VA Mid-Atlantic Health Care Network deputy director, said the network spent more than \$47 million on beneficiary travel during Fiscal Year 2011. "Accomplishing these payments required tens of thousands of transactions that cost money that will be better spent on patient care when the EFT process is up and running," Davila said.

Davila went on to say that while the medical centers are each progressing toward the EFT process, all efforts are being made to ensure the transition does not cause a hardship for anyone. Because the transition to the EFT process requires the inputting of data for millions of Veterans nationwide, the implementation is being staggered throughout the country and throughout the network.

VHA is working with the

finance service center in Austin, Texas, to automate the process and has also undertaken an initiative to reduce cash payments through use of a debit card program through Treasury and Comerica Bank. The pilot debit card will debut later this year in some locations around the country. Until then, manually filling out the EFT Form will be the way to go.

Although some Veterans are seen at multiple VA sites, only one EFT Form is required. When turning in vouchers, Veterans should inform the clerks if they have previously turned in the form. Filling out multiple EFT forms may actually cause delays in getting paid. The only time a new EFT form should be accomplished, officials said, is when there is a change to a Veteran's banking information, such as changing banks or having the money go to a different account.

While the goal is to reduce cash on hand and eliminate check payments, cash reimbursement will remain an option for those without resources to return home that day or who are unable to maintain a depository account.

To ensure no one is caught off guard or experiences a hardship, medical centers are notifying patients through the mail and with signage located throughout each facility detailing the dates of the conversion.

"Durham and Hampton medical centers have begun the changeover and both facilities have sent letters to all patients who received travel payments in the past year explaining the need to fill out and turn in an electronic funds transfer form SF -3881," Davila said.

The forms can be picked up at the medical centers, or downloaded off the web from www.fms.treas.gov/pdf/3881.pdf. Veterans should fill out the middle and bottom sections. The medical center will fill out the top portion.

EXCELLENT SERVICE
Earned by Veterans. Delivered Here.
VA Mid-Atlantic Health Care Network VISN 6





Courtesy Photo

Spenser Wempe, Miss West Virginia, toured Beckley's new Mobile Vet Center, a customized vehicle designed to provide Veterans with vital, on-the-spot counseling and reintegration services Feb. 17.

Homecoming For Vietnam Veterans

More than 216,000 North Carolina residents served in Vietnam, and some 1,600 made the ultimate sacrifice in that war. The USO of North Carolina and Charlotte Motor Speedway, with support from the North Carolina Association of Broadcasters, will honor their service with a Vietnam Veterans Homecoming Celebration.

The Vietnam Veterans Homecoming Celebration 2012 is set to be an unforgettable experience featuring live entertainment, displays and

demonstrations, and military salutes.

Representatives from VA medical centers from North and South Carolina will be on hand to provide information and enroll eligible Veterans. Additionally, counselors from area Vet Centers, along with a team from the Winston-Salem VBA regional office and a representative from National Cemetery Administration will be on hand. Veterans interested in enrolling should bring a copy of their DD-214.

WELCOME HOME

WHAT
A Welcome Home to Vietnam Veterans that many never received

WHEN
9:00AM - 4:30PM Saturday, March 31, 2012

WHERE
Charlotte Motor Speedway





www.CharlotteMotorSpeedway.com/WelcomeHome

Veteran Service Organizations will be on-site to assist veterans. Please bring your DD Form 214 so they can help, if needed.



George C. Duggins, North Carolina Vietnam Veterans of America Region 3 Conference

Date: March 28 to April 1, 2012

Location: Doubletree Biltmore Hotel, 115 Hendersonville Road, Asheville, NC, 828-771-2277

Contact person: Joe Kristek, Pres. NC VVV State Council, 910-673-4562

Room Reservations: Call 828-274-1800. Make sure you tell them you are attending the Region 3 conference to receive the group rate.

Conference and Hotel Registration Information available on NC VVA State Council website: www.vva-nc.org



Celebrate the USO-NC and Honor America's Armed Forces
March 31, 2012

Marriage Vow Renewal Ceremony
11 a.m. to 1 p.m.
USS North Carolina

For couples married while on Active Duty, Reserve, National Guard status. No fee, but pre-registration required. \$10 per ticket for others.

☆☆☆☆☆

Gala Reception and Dance
7 p.m. to 10 p.m.
**Hannah Block Historic USO Building
Community Arts Center**
(120 South 2nd Street)

Reminisce with Big Band music, fine food, champagne toast. Cash bar. Silent Auction. Art Show. Quilt Raffle. \$35 per person.

Information, tickets, donations:
uso-nc.org ☆ ilmcelebrates@uso-nc.org ☆ 910.616.3487



Proceeds benefit USO-North Carolina

Tele-Audiology Reduces Trips

By Tim Devine
Durham VAMC

Last year the Durham VAMC Audiology Clinic was selected as one of only 10 VA Centers nationally to participate in a pilot program that allows an audiologist in Durham to program hearing aids on a patient at a local CBOC.

With the help of an audiology health technician who travels to the patient site, the doctor at Durham uses a teleconferencing camera and specialized computer software to control the audiology instruments located at the CBOC to verify hearing aid performance and make needed adjustments.

An obvious benefit of this new service is that patients will no longer have to travel to Durham for follow-up hearing healthcare. An equally important benefit, said Dr. Nancy Jones, chief of audiology and speech pathology at Durham, may be that Veterans will get better use of their amplification because, by providing this service at a more convenient location, patients will be more likely to attend follow-up appointments.

“We hope that instead of giving up on their hearing aids, Veterans will now come back and talk with us about the situations that still give them problems,” Jones said. “Often all that’s required is a minor adjustment in the program.”

So far, patient feedback has been overwhelmingly positive. One Veteran volunteered that the care was “just like being at Durham, but without the long trip.”

Currently, Veterans must still travel to Durham for their hearing tests, but phase II of this pilot program will allow for many of these exams to be performed at CBOCs too. This phase is due to begin in September 2012.



Pete Tillman

Durham audiology staff demonstrate how the tele-audiology program is used to help Veterans reduce travel and get high quality care.

Hampton's Rural Health Team Reaches Out

As part of the rural health initiative, Hampton's Rural Health Team reaches out in every direction in their effort to enroll Veterans for VA health care. Hampton VAMC's Rural Health Initiative team members traveled to the Outer Banks area of North Carolina, Feb 22, to conduct a Veteran's benefit outreach event in Kill Devil Hills. The team (from left) Deborah Frondelli, nurse educator, Elizabeth Halvorsen, program support assistant, Eddie Hughes, medical support assistant, Carvin Harmon, social worker, take a brief pause in front of the monument to the Wright Brothers at Kill Devil Hills.



James Coty

Officials: Women Can Suffer Same Deployment Ills As Men

By Terri Moon Cronk
American Forces Press Service

WASHINGTON – It once was thought that servicewomen neither were exposed to the same combat situations as men nor developed the same psychological injuries. Officials now recognize otherwise.

“With the type of combat we’re in now, it’s probably the only place where men and women really are equal,” therapist Jeanine Aversa says in “The Long Road Home,” February’s installment of the Pentagon Channel series “Recon.”

Officials estimate that the percentage of women in the military has doubled in the past 30 years. But that increase, the “Recon” segment noted, has come with a rise in problems such as homelessness, drug addiction and post-traumatic stress disorder among female Veterans.

The Defense and Veterans Affairs departments work together to address service members’ physical, mental and emotional injuries, including those of women, so officials say it’s now easier for female Veterans to ask for help.

Kate McGraw, acting deputy director for the psychological health, clinical standards of care at the Defense Centers for Excellence for Psychological Health and Traumatic Brain Injury at the Walter Reed National Military Medical Center in Bethesda, Md., said a “huge influx” of congressional funding and Defense Department support on the issues facing female Veterans have helped address psychological health and traumatic brain injury.

Focus groups, growing numbers of support groups and a mental health anti-stigma campaign are part of the DOD and VA support for female Veterans, she said.

Battling the stigma of seeking mental health counseling also has remained a concern among military leaders, McGraw noted. Some servicemembers don’t seek help, she explained, because they believe doing so could hurt their careers. So “The Long Road Home” is an attempt to try to de-stigmatize those fears.

Peculiar to women is an apparent higher rate of “co-occurrence” of PTSD and depression when compared with men after returning from deployment, McGraw said. Other behaviors also can play a part in women’s lives, she said.

“Women tend to have a higher incidence of binge drinking ... and a higher incidence of eating disorder behavior ... as compared to males,” McGraw said, citing recent literature on studies conducted during the past five years.

More doors are open to women in the military now than be-

fore. That progress has come with a price.

Veteran Jen Crane knows about that price. She began to have panic attacks while searching for work after she left the military. She couldn’t continue her military job as a paralegal in the civilian sector, so she took a bartending job. There, she was introduced to cocaine. She said it brought her anxiety down and made her social. Eventually, her penchant for drugs nearly cost her everything.

Crane turned to prostitution to support her drug habit, and became homeless and broke. As her situation spiraled downward, she decided to take her life. But before she could act on her plan,

police arrested her for drug possession.

Crane went to court, and began receiving counseling from Aversa. With support from her therapist, the courts and her family, today she is married, has a child and is the national spokeswoman for a nonprofit organization, traveling around the country to tell her story.

Experiences like Crane’s are helping to change the care female Veterans receive. “We’re undergoing a culture change within the Department of Veterans Affairs,” Patricia Hayes, the VA’s chief consultant on women’s health, told “Recon.”

VA estimates that 6,500 female Veterans are homeless and live on the nation’s streets – double the number from 10 years ago. VA also reported that one in five women Veterans reported military sexual trauma during their military service, and the number of women with PTSD is increasing.

McGraw outlined signs that someone is struggling with readjustment issues. She cited symptoms such as the inability to get good sleep, nightmares, or the feeling of reliving events from a deployment when awake, disturbing dreams about deployment

events, changes in mood, irritability feeling increasingly on edge or keyed up, or getting startled easily.

Veteran Genevieve Chase, who suffered a traumatic head injury after the vehicle she was riding in exploded, told “Recon” that in spite of the struggles women try to overcome, their patriotism remains intact.

“Even the women who are trying to get on their feet or have been struggling through military sexual trauma, substance abuse, suicide or any major issue, when they come home, every single one of them is still proud of their service,” Chase said.

The Pentagon Channel’s “Recon” series is a monthly, 30-minute broadcast that provides an in-depth look at operations, missions, military events, history and other subjects highlighting the accomplishments of U.S. military men and women. All “Recon” programs are posted on the Pentagon Channel’s website at www.pentagonchannel.mil/recon/.

March is Women's History Month

Mother, daughter, sister, wife, partner ... veteran.

VA cares for the whole woman.

- Primary care
- Reproductive care
- Mental health care
- Sensitive to women veterans' needs and experiences

VA's national network ensures that your medical history goes where you go.

Department of Veterans Affairs

★ You served, you deserve the best care anywhere. ★

Facts About Women Veterans

Women Veterans comprise one of the fastest growing populations of Veterans. Today, there are more than 1.8 million living women Veterans of the nearly 22.7 million Veterans. Mid-Atlantic Health Care Network (VISN 6) totals are as follows: North Carolina - 70,729, Virginia - 93,637, West Virginia - 12,015. The population of women Veterans has increased from 1.1 million in 1980 to nearly 2 million today, and women are projected to be more than 10 percent of the Veteran population by 2020. The average age of female Veterans is 48 (male 63). Of the 1.8 million U.S. women Veterans, more than 500,000 have enrolled in the VA health care system. That number is expected to grow by 30% in the next five years. Women currently comprise more than 14% of the active duty military, nearly 18% of Guard and Reserves, and nearly 6% of VA health care users. More than 50% of female OEF/OIF Veterans have received VA health care.

Streamlined Online Application To Launch At Demobilization Sites

WASHINGTON – The Department of Veterans Affairs partnered with the First Army at Camp Shelby, Miss., to launch a streamlined version of its online application for VA health benefits (VA Form 1010EZ) for service members returning from deployment. VA will introduce it at demobilization sites nationwide by early spring 2012.

“This online application demonstrates VA’s commitment to work with the Department of Defense to make it easier for servicemembers to get the care they earned by their service,” said Secretary of Veterans Affairs Eric K. Shinseki. “The new, online system noticeably reduces the paperwork and reduces a 10-day process to three days.”

The application is used to enroll in the VA health care system, which has more than 1,000 sites of care across the country.

Enrollment for VA health care is done as part of a service-member’s demobilization. The online form allows the application to be completed during a regularly scheduled briefing for all service members on VA benefits.

Quick enrollment is important for returning troops because recently discharged combat Veterans are eligible for five years of cost-free care and medications for conditions potentially related to combat service.

The new application was piloted as part of the demobilization process at Camp Shelby. Based on the results, VA plans to collaborate with DoD to offer this online application at all 61 demobilization sites nationally.

For more information, contact VA at 1-877-222 VETS (8387) or visit www.va.gov/healthbenefits.

VA, NASDVA Sign Partnership Pact

WASHINGTON – Building upon a 66-year partnership with the states, the Department of Veterans Affairs has signed a formal agreement with the National Association of State Directors of Veterans Affairs (NASDVA) to enhance their relationship.

“State agencies are invaluable partners in providing services to Veterans,” said Secretary of Veterans Affairs Eric K. Shinseki. “Our historic collaboration with NASDVA has ensured that countless Veterans receive the benefits they have earned.”

The agreement pledges the two groups to maintain “effective communications, an exchange of ideas and information, identification of emerging

needs, and continuous reevaluation of existing programs.”

NASDVA represents the state departments of Veterans affairs in dealings with VA and with Veterans residing in their respective states. The states fund about \$5 billion in benefits and services for Veterans.

The involvement of state governments in Veterans affairs goes back to the American Revolution, with the federal government becoming involved after the Civil War. In 1946, NASDVA was created to coordinate programs between VA and the states, territories and the District of Columbia.

Secretary Shinseki signed the agreement Feb. 13 during the NASDVA mid-winter conference in Alexandria, Va.

Volunteer Opportunities

For info. on opportunities to volunteer in your area, contact:

Asheville	Darlene Laughter	828-299-2514
Beckley	Cheryl Yost	304-255-2121, ext. 4162 or 4165
Durham	Ronni Miller	919-286-0411, ext. 7810
Fayetteville	Norma Fraser	910-822-7027
Hampton	Judith Curtis	757-722-9961, ext. 3124
Richmond	Janet Langhorne	804-675-5000, ext. 4989
Salem	Ann Benois	540-224-1919
Salisbury	Nancy Perry	704-638-3409



When To Get Seasonal Flu Vaccine

Yearly flu vaccination should begin in September, or as soon as the vaccine is available, and continue throughout the flu season, which can last as late as May. This is because the timing and duration of flu seasons vary. While flu season can begin as early as October, seasonal flu activity peaks in January, February or later.

Influenza is responsible for 200,000 hospital admissions and 36,000 deaths nationwide every year. According to the federal Centers for Disease Control and Prevention, vaccination of all health care work-

ers is strongly recommended to prevent transmission of the illness to patients, especially those with long-term medical conditions who are at high risk for serious complications from the flu. The CDC recommends that all health care workers – even those who are not directly involved in patient care (e.g., clerical, housekeeping and administrative staff, volunteers, etc.) – be vaccinated annually.

If you have questions about whether you should get a flu vaccine, consult your health care provider.

VA Joins Mortgage Bank Settlement

WASHINGTON – VA announced its participation in the largest state-federal legal settlement in history that deals with problems within the mortgage industry.

VA joined with the Department of Justice, a coalition of state attorneys general and other federal agencies in the settlement.

The nation’s five largest mortgage servicers have agreed to this landmark \$25 billion settlement that addresses past mortgage loan servicing and foreclosure abuses, provides substantial financial relief to borrowers, and establishes significant new homeowner protections in the future.

In addition to cash payments to avoid litigation, the banks also agree to undertake other activities, such as principal forgiveness, interest-rate-reduction refinancing, and forbearance during unemployment.

The settlement also enhances protections available under the Servicemembers Civil Relief Act and provides additional assistance when servicemembers are forced to sell

their home at a loss due to reassignment to another location.

VA has always provided assistance to Veterans and servicemembers who experience trouble paying their mortgage, whether they have a VA loan or not. Depending on the situation, VA’s loan specialists can intervene on a Veteran’s behalf to help pursue home-retention options such as repayment plans, forbearances and loan modifications.

To get help, Veterans and servicemembers – even those without a VA guaranteed loan – may call a national toll-free number, 877-827-3702 to speak with VA loan specialists who will provide information about the process of obtaining a VA-guaranteed home loan, or assistance in retaining their home loan or avoiding foreclosure.

Information about the VA Home Loan Guaranty program is also available online at www.benefits.va.gov/homeloans. To see videos of Veterans who reached out to VA and were able to keep their homes or avoid foreclosure, please visit www.benefits.va.gov/homeloans/alt-foreclosure.asp.

VISN 6 Sites of Care

Albemarle POC
1845 W City Drive
Elizabeth City, NC
252-331-2191

Asheville VAMC
1100 Tunnel Road
Asheville, NC 28805
828-298-7911, 800-932-6408
www.asheville.va.gov/

Beckley VAMC
200 Veterans Avenue
Beckley, WV 25801
304-255-2121, 877-902-5142
www.beckley.va.gov/

Beckley Vet Center
1000 Johnstown Road
Beckley, WV 25801
304-252-8220

Brunswick Outreach Clinic
20 Medical Campus Drive
Supply, NC 28462
910-754-8574

Charlotte Vet Center
2114 Ben Craig Dr.
Charlotte, NC 28262
704-549-8025

Charlotte CBOC
8601 University East Drive
Charlotte, NC 28213

Charlottesville CBOC
650 Peter Jefferson Pkwy
Charlottesville, VA 22911
434-293-3890

Danville CBOC
705 Piney Forest Rd.
Danville, VA 24540
434-710-4210

Durham VAMC
508 Fulton St.
Durham, NC 27705
919-286-0411, 888-878-6890
www.durham.va.gov/

Emporia CBOC
1746 East Atlantic Street
Emporia, VA 23847
434-348-1500

Fayetteville VAMC
2300 Ramsey St.
Fayetteville, NC 28301
910-488-2120, 800-771-6106
www.fayettevillenc.va.gov

Fayetteville Vet Center
4140 Ramsey St.
Fayetteville, NC 28311
910-488-6252

Franklin CBOC
647 Wayah St.
Franklin, NC 28734-3390
828-369-1781

Fredricksburg CBOC
1965 Jefferson Davis Highway
Fredericksburg, VA 22401
540-370-4468

Greensboro Vet Center
2009 S. Elm-Eugene St.
Greensboro, NC 27406
336-333-5366

Greenbrier County CBOC
804 Industrial Park Rd.
Maxwelton, WV 24957
304-497-3900

Greenville CBOC
800 Moye Blvd.
Greenville, NC 27858
252-830-2149

Greenville Vet Center
1021 W.H. Smith Blvd.
Greenville, NC 27834
252-355-7920

Hamlet CBOC
100 Jefferson Street
Hamlet, NC 28345
910-582-3536

Hampton VAMC
100 Emancipation Dr.
Hampton, VA 23667
757-722-9961, 888-869-9060
www.hampton.va.gov/

Hickory CBOC
2440 Century Place, SE
Hickory, NC 28602
828-431-5600

Hillandale Rd. Annex
1824 Hillandale Road
Durham, North Carolina 27705
919-383-6107

Jacksonville CBOC
241 Freedom Way
Midway Park, NC 28544
910-353-6406, 910-353-6406

Jacksonville, N.C. Vet Center
110-A Branchwood Driv
Jacksonville, NC 28546
910-577-1100

Lynchburg CBOC
1600 Lakeside Drive
Lynchburg, VA 24501
434-316-5000

Morehead City CBOC
5420 U.S. 70
Morehead City, NC 28557
252-240-2349

Norfolk Vet Center
1711 Church Street
Norfolk, VA 23504
757-623-7584

Princeton Vet Center
905 Mercer Street
Princeton, WV 24740
304-425-5653

Raleigh CBOC
3305 Sungate Blvd.
Raleigh, NC 27610
919-212-0129

Raleigh II Annex
3040 Hammond Business Place
Raleigh, NC 27603
919-899-6259

Raleigh Vet Center
1649 Old Louisburg Rd.
Raleigh, NC 27604
919-856-4616

Richmond VAMC
1201 Broad Rock Blvd.
Richmond, VA 23249
804-675-5000, 800-784-8381
www.richmond.va.gov/

Roanoke Vet Center
350 Albemarle Ave., SW
Roanoke, VA 24016
540-342-9726

Robeson County CBOC
139 Three Hunts Drive
Pembroke, NC 28372
910-521-8452

Rutherford County CBOC
374 Charlotte Rd.
Rutherfordton, NC 28139
828-288-2780

Salem VAMC
1970 Roanoke Blvd.
Salem, VA 24153
540-982-2463, 888-982-2463
www.salem.va.gov/

Salisbury VAMC
1601 Brenner Ave.
Salisbury, NC 28144
704-638-9000, 800-469-8262
www.salisbury.va.gov/

Staunton CBOC
102 Business Way
Staunton, VA 24401
540-886-5777

Tazewell CBOC
123 Ben Bolt Ave.
Tazewell, VA 24651
276-988-2526

Virginia Beach CBOC
244 Clearfield Avenue
Virginia Beach, VA
757-722-9961, ext. 1900

Virginia Beach Vet Center
324 Southport Circle, Suite 102
Virginia Beach, VA, 23452
757-248-3665

Wilmington CBOC
736 Medical Center Drive
Wilmington, NC 28401
910-763-5979

Winston-Salem CBOC
190 Kimel Park Drive
Winston-Salem, NC 27103
336-768-3296

Winston-Salem Annex
2101 Peters Creek Parkway
Winston-Salem, NC 27127
336-761-5300

Wytheville CBOC
165 Peppers Ferry Rd.
Wytheville, VA 24382-2363
276-223-5400