



"Excellent Care – Earned by Veterans – Delivered Here"

# Voices of VISN 6

Official news from around *your* VISN

Vol. 6, No. 3

December 31, 2015

## Fayetteville Health Care Center Opens With Fanfare

By Steve Wilkins  
VISN 6 Public Affairs

A large congressional delegation joined VA leaders Jan. 4 to herald the opening of a new VA Health Care Center in Fayetteville, N.C.

The nearly 260,000 square ft. facility, which opened Nov. 3, 2015, at 7300 South Raeford Road provides outpatient health care services that supplement services offered by the Fayetteville VAMC and its other community based clinics.

Currently more than

66,000 Veterans receive care at Fayetteville VAMC and its community-based clinics, with future projections estimating 7 percent growth based upon current usage rates.

The delegation, including Senate Veterans Affairs Chairman Johnny Isakson, North Carolina Senator Richard Burr, Sen. Thom Tillis, Rep. David Price, and Rep. Renee Ellmers, joined VA Deputy Secretary Sloan Gibson, VHA Deputy Under Secretary for Health

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*Linnie Skidmore*

*VA and Congressional leaders join together to cut the ceremonial ribbon officially opening the Fayetteville Health Care Center Jan. 4.*

## Salem VAMC Director Selected For Promotion

VISN 6 Public Affairs

The Department of Veterans Affairs has announced that Dr. Miguel H. LaPuz, currently the director of the Salem VAMC, will be the next network director of VA's Sunshine Healthcare Network which oversees VA health services in Florida, Southern Georgia, Puerto Rico and the U.S. Virgin Islands. He is expected to transition in mid-February.

The VA Sunshine Healthcare Network, also known as Veterans Integrated Service Network or VISN 8, is based in St. Petersburg and encompasses seven health care systems

that include eight large medical centers, 57 outpatient clinics, and seven community living centers. With an operating budget of \$4.7 billion, VISN 8 provides health care to nearly 600,000 Veterans in 79 counties spanning 63,400 square miles oversee and to, according to a VA media release.

"We are excited to bring Dr. LaPuz on board as the new director of the VA Sunshine Healthcare Network," Janet Murphy, acting deputy under-secretary for health operations and management, said in a news release. "His sound leadership qualities and proven experience will be valuable assets for the



*Dr. Miguel H. LaPuz*

health care network, the employees and volunteers, and most importantly, for the Veterans we are honored to serve.

LaPuz has been direc-

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## From The Director

Happy New Year!

I've reviewed the data from 2015 and want to share some of the highlights.

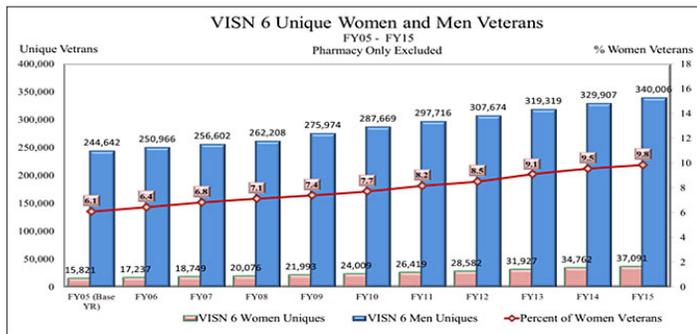
Many times I've said that access has been the top priority since I arrived in 2000. The VISN 6 team has worked to make this network the health care provider of choice for every eligible Veteran in our region. Data shows that we are on track as our efforts to provide the best possible care have been validated by more than 15 consecutive years of growth. Since 2012, we've welcomed nearly 50,000 new Veterans into our facilities, and during 2015 alone, almost 12,000 new Veterans entrusted us with their care.



cess will require considerably less travel to and from our clinics.

I'm very proud of what our team provided in 2015. We will continue to use every means to provide the highest-quality health care as effectively and efficiently, in the best environment, and as close to home as possible.

Sincerely,  
Dan Hoffmann



To meet the growing needs of our Veterans, we added more than 1,000 clinicians and staff during 2015. And, as a team, we provided more than 4.4 million outpatient visits; 25,000 medical admissions; 7,000 surgical admissions, and filled 8.9 million prescriptions.

Looking ahead, we must be ready to care for those Veterans presently enrolled as well as those who will follow.

We forge ahead working many programs that will ultimately increase access. We continue to leverage technology, growing our telehealth capabilities in ways unthinkable just a few years ago. And, by spring we will add more than 1 million square feet of new health care space. Together, these Veteran-centric efforts will help to create access by decompressing the medical centers and reducing wait times. And, for many, increased ac-

### New Logo Coming

In line with the VHA realignment is the new VISN 6 logo. This artwork replaces the logo with the three stars which represented the three states, and the eight stripes which represented the medical centers. The new logo is designed to be more emblematic of who we are and what we do.



Dear Reader,

It's been my distinct privilege and pleasure to bring you this newsletter for the past five years. Since Nov. 2010, we've worked to capture, and deliver to you, all the VA-related news and information that could impact Veterans in this region. There have been many changes over the years with new programs, new processes, and new sites of care. Additionally, we've tried to highlight the many collaborative efforts between VA and the many communities we serve.

I'm confident that the information we provided in the last 58 issues has helped to raise the level of awareness and understanding of the issues, but most importantly, because of your feedback, I know that the information has contributed to the health and well-being of many, many Veterans.

It's now time for me to move on, but rest assured that VISN 6 will continue to share information using all means possible to include this periodical. Thank you for your support. I wish you all the best.

Respectfully,  
Bruce J. Sprecher

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



Questions or comments about the newsletter, e-mail Bruce. Sprecher@va.gov or call 919-956-5541.

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Mark Shelhorse M.D., Chief Medical Officer  
Bruce Sprecher, Editor, Dir. Public Affairs  
Steve Wilkins, Network Public Affairs  
Patrick Schuetz, Chitra Productions

### New Jacksonville Clinic Opens Jan. 11, Ribbon Cutting Jan. 14

By Jeff Melvin  
Fayetteville VAMC Public Affairs

VA and community officials will gather in Jacksonville Jan. 14 to cut the ribbon on the new CBOC at 4006 Henderson Drive. VA begins seeing patients at the new facility Jan. 11.

The ribbon cutting ceremony is open to the public and starts at noon with Rep Walter B. Jones scheduled to deliver the keynote remarks.

At 15,000 square feet, the Henderson Drive site is more than twice the size of the existing VA Midway Park facility it replaces. The temporary clinic on Brynn Marr Road will close.

The increased size brings both new services and capacity to serve more Veterans,” said Fayetteville VAMC Director Elizabeth Goolsby. “We want Onslow and Pender County Veterans to have better access to quality health care closer to their home. We look forward to continuing our dedication and commitment to serve our Veterans and ensure they receive the medical and mental health care they have earned.”

This new Jacksonville clinic joins the growing number of sites of care that fall under the management of the Fayetteville VAMC. “The growth in the Veteran population in eastern North Carolina has been steady and is projected to continue for the foreseeable future,” said

Goolsby. “This new larger clinic in Jacksonville, a new clinic in Sanford set to open in early 2016, along with the new Health Care Center in Fayetteville, the HCC that opened in Wilmington in 2013 and the clinic in



*New Jacksonville CBOC*

Goldsboro that opened in 2013, open the door to VA health care for thousands of Veterans.”

The facility was built by Construction Managers Inc., of Fremont, N.C., builders of the VA clinic in Goldsboro and the VA clinic set to open in Sanford in early 2016. The 10-year lease contract for the Henderson Drive facility includes construction and maintenance. The total value of the contract over the 10-year lease period is approximately \$3.8 million.

To reach the new Jacksonville clinic, call 910-353-6406, starting Jan. 11.

For information on Health Benefits eligibility, call 910-822-7016 or visit [www.fayettevillenc.va.gov](http://www.fayettevillenc.va.gov).

### Hampton’s Chaplain McCoy Assumes National Role



Story and photo by Daniel Henry,  
Hampton VAMC Public Affairs

VA Chaplain Michael McCoy, was joined by loved ones and colleagues as he was officially sworn as VA’s newest chief of the chaplain service.

McCoy, who took the oath of office with right hand raised and his left on a bible held by Sharon McCoy, his wife of 40 years, has served at Hampton since 1992 when he became the associate director of VA’s National Chaplains Center and has been a part of the Hampton community ever since.

A graduate of Morehouse College’s Interdenominational Theological Center in Atlanta, Ga. and a former Navy Chaplain, McCoy is now the top professional Chaplain in the Department of Veterans Affairs. In that office he leads the ongoing integration of spiritual and pastoral care into the multidisciplinary spectrum of VA health care.

Chaplain McCoy also manages and directs the National Chaplain Center where he leads policy development and the implementation of professional standards for the practice of chaplaincy in VA.

# Harnett Co. Veterans Court Honors Fayetteville VAMC Liaison

By Jeff Melvin  
Fayetteville VAMC Public Affairs

Fayetteville VAMC Veterans Justice Outreach (VJO) Specialist Curtis Morrow was recognized by the Harnett County Veterans Treatment Court (VTC) during a ceremony Nov. 4 to mark the court's two-year anniversary.

Morrow was one of three individuals and four organizations presented with Silver Eagle Awards for outstanding service to the Veterans participating in the Court and to the Court Team. He serves as a VTC consultant and the FVAMC liaison between the assorted parties involved in the Veterans Treatment Court program. VJO Specialists work with Veterans in a variety of justice system settings, but their work in the courts is the most visible.

"Curtis has planned and facilitated addressing the psychosocial and clinical needs of the Veterans who participate in the Court," said Fayetteville VAMC Director Elizabeth Goolsby. "An Air Force Veteran, Curtis is another example of the ways our dedicated staff provide care and services for our Veterans."

Established in November 2013, The Harnett County court was the first of its kind in North Carolina to give Veterans in trouble with the law a second chance by giving those who have committed certain misdemeanors treatment instead of traditional punishment.

In November 2014, following Harnett County's example, Cumberland County, which has one of the largest veteran populations per capita in the country opened the state's second VTC. In March 2015, Buncombe County joined the fold, giving the state three VTCs.

These special courts help veterans with mental health or substance abuse problems receive treatment rather than jail time. Veterans avoid jail time by getting help for underlying problems that sent them to court, pairing with Veteran mentors who meet with them regularly and help keep them on track to rehabilitation. VTCs provide the treatment and structure they need to resume productive lives.

"The Court combines aspects of the legal system, psychosocial needs, medical needs and mental health needs to help the Veteran address the root cause for the offense. In some cases, it prevents a legal conviction that could permanently harm the individual's chances for a job, housing, and educational opportunities in the future," Goolsby said.

Judge Jackie Lee, who took over administration of the Harnett County VTC last year, said the statistics related to Veterans courts are impressive, but don't tell the full story of what the court has meant in the lives of the Veterans who've come through it.



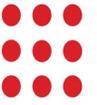
*Courtesy Photo*

*Curtis Morrow, far right, Fayetteville VAMC Veterans Justice Outreach Coordinator, was presented the Silver Eagle Award by the Harnett County Veterans Court for outstanding service to the Veterans participating in the Court and to the Court Team.*

"When you have these Veterans come in here with their shoulders slumped, their eyes downcast and they're relics of who they were when they were in the service, and then when they graduate, they are who they once were, proud soldiers with their shoulders erect, their eyes direct and a smile on their face — to see that change, that's what this court is about," Judge Lee said.

For more information about the VJO program, call Curtis Morrow at 910-488-2120 ext. 7225, or email [curtis.morrow@va.gov](mailto:curtis.morrow@va.gov). For information about the Harnett County VTC, contact Mark Teachey at 910-814-4515 or [Mark.A.Teachey@nccourts.org](mailto:Mark.A.Teachey@nccourts.org). Contact coordinator Craig Shore at 910-475-3243 or [Craig.V.Shore@nccourts.org](mailto:Craig.V.Shore@nccourts.org) for information about the new Cumberland County VTC. For information about the Buncombe County VTC, contact coordinator Eric Howard at 828-259-6601 or [Eric.D.Howard@nccourts.org](mailto:Eric.D.Howard@nccourts.org).

For information about Veterans Courts in general, visit [www.justiceforvets.org](http://www.justiceforvets.org).

**Veterans**    
**Crisis Line** 1-800-273-8255  
PRESS 1

# McGuire VAMC Offers An All-Female Therapy Program

By Armenthis Lester  
Richmond VAMC Public Affairs

Women are the fastest growing group among Veterans. The steady influx of women has provided the VA fresh opportunities to evolve into an organization where women are not only welcomed, but celebrated.

To meet the ever-changing needs of the Veteran population, the recreation therapy section of the Physical Medicine and Rehabilitation Department at Richmond VAMC offers female Veterans the chance to participate in leisure activities known to them and/or acquire and develop new leisure interest and skills. In addition to receiving therapy, the members of this all-female group also enjoy camaraderie and support from one another.

While participating in the recreation therapy program at Richmond, female Veterans learn they are not alone. Shari Hicks, Veteran and Chief of Recreational Therapy speaks on the benefits of an all-female group, "They develop a sense of community as they meet together to share experiences, ideas and provide emotional support for one another. They are also able to learn more about themselves and build interpersonal relationships in a positive and welcoming environment." This can be difficult to accomplish when men are present. According to Hicks, "Women are more comfortable around other women."

When asked about the group and what it means to her, Army Veteran Debra Austin, became emotional. "I deal with a lot of different things...this group plays a major part in my recovery. God bless whoever thought of it." Michaun Harrison, an Army Veteran who says she is legally blind, has PTSD, and travels with a guide dog, said she refrained from social gatherings because of her disabilities. However, after attending several outings with the group, Harrison had an epiphany, "You don't have to stop living because of your disability."

Recreational Therapy reinforces the notion that leisure is an important aspect of life. Ample amounts of research suggest there is a strong correlation between leisure and quality of life. According to Hicks, the female Veterans recreational therapy program at Richmond provides not only therapeutic benefits, but it fosters sisterhood.

A popular get-together among the ladies is the monthly "Ladies Night Out." These gatherings feature a variety of activities which reinforce or introduce new leisure activities. A recent "Ladies Night Out" featured a Paint Night led by local artist, Amiri Richardson-



*Tomeka M. Graham*  
Female Veterans display their completed works of art during Paint Night.

Keys. During this activity, the group is shown a completed piece of art to be used as a guide. Then, the group is collectively led in an introductory painting lesson. The result was a collection of fine art whose diversity reflected the women in the room.

Recreation therapy programs offered to female Veterans through the Richmond VAMC include:

- Leisure Education
- Sports & Adaptive Sports
- Community Re-entry Training
- Monthly "Ladies Night Out"
- Expressive Writing Group
- Resource Awareness
- Open Mic Night

Women Veterans using Richmond VAMC interested in this program should consult their primary care or mental health provider.

Your future is bright. Don't cloud it with smoke.

An advertisement for Women Veterans Health Care. It features a woman in a white uniform hugging a young child, with an American flag in the background. To the right, a framed photo shows a group of women sitting together. In the foreground, a bowl of popcorn sits on a wooden surface. The text "VA can help you quit." is positioned to the right of the framed photo.

VA can help you quit.

WOMEN VETERANS HEALTH CARE

VA EXCELLENCE 2016

www.va.gov/healthcare

10/2015

## Fayetteville continued from Pg 1

for Operations and Management Janet Murphy, VA Mid-Atlantic Health Care Network (VISN 6) Director Dan Hoffmann and Fayetteville VAMC Director Elizabeth Goolsby for the event.

According to Goolsby, the new health care center is “already making a dent in wait times.” Gibson, who has watched the progress of Fayetteville health care since a national crisis concerning Veteran access to care was recognized in 2014 declared the HCC is “hugely satisfying.”

Gibson’s statement is reflected in Third Floor Nurse Manager Kimberly Bronson’s claim that the facility not only feels more comfortable to work in, but also enables more efficient patient centered care.



Steve Wilkins

Veteran health care is delivered through collaborative teams called Patient Aligned Care Teams, which focus on whole-person care and life-long health and wellness. Veterans are the center of their care team that includes their family members, caregivers, and their health care professionals — primary care provider, nurses and an administrative clerk. The building’s architectural design enables PACT teams to work with patients and meet their needs more effectively.

Bronson, who came to VA from the Army says the PACT model of care is similar to a patient centered model used by the Army, but now that she has seen it in operation in the new facility as it was intended, claims it will enable even greater patient-centered care than the Army model, a benefit to the Veterans receiving treatment there.

More than 200 Veterans, staff members and public attendees were first treated to aerial entertainment, a landing of the All Veteran Parachute Team from Rafeord, N.C. who braved the cold, windy day to float to Earth then present a commemorative flag to Gibson and

## LaPuz continued from Pg 1

tor of the Salem VAMC since 2011. A new director for the medical center has not yet been named.

In a note to the Salem staff, LaPuz stated that the executive leadership team is committed to a seamless transition and that there will be no visible changes in day-to-day operations following his departure. He also

other items to members of the Congressional delegation and facility leaders.

The parachute landing was followed by the pledge of allegiance and a stirring saxophone rendition of the National Anthem by Fayetteville’s CBOC coordinator Alvin Scroggins (U.S. Army, Retired), and an invocation from Chaplain Paul Witt.

Goolsby, introduced the members of the congressional delegation who offered brief remarks, recognizing the growth of the Veteran population in North Carolina (10 percent of the North Carolina population, according to Tillis), the challenges VA has had with meeting the needs of a growing eligible Veteran population and expansion of VA benefits, including recent legislation affecting Camp Lejeune Veterans, according to Price. Hoffmann then introduced Gibson, noting his involvement with and commitment to Fayetteville VAMC’s success in maximizing access and timely care for area Veterans.

The program closed with Congressional and VA leaders gathering to cut the ceremonial ribbon in front of the dais, and All Veteran Parachute Team member Sunnydale J. Hyde serenading the group with his version of Lee Greenwood’s evocative song “God Bless the USA.” Members of the audience heartily joined in the song that ended the ceremony.



Brad Garner



Brad Garner

# Telemedicine Helps Get Diabetes Under Control

By Mitchell (Mitch) Mirkin, Senior Editor/Writer,  
VHA Office of Research and Development

A new telehealth program developed at the Durham VAMC may be sweet news for Veterans whose diabetes has not responded to standard care.

The program is called ACDC—short for Advanced Comprehensive Diabetes Care. Tested in a pilot study of 50 Veterans with persistently poor diabetes control, the approach beat standard clinic-based care for nudging blood sugar levels toward normal. The pilot study results went online Nov. 5, 2015, in the journal *Telemedicine and e-Health*.

Half the Veterans in the study got “usual care,” without any special interventions. They also got an education packet.

The other half took part in the telehealth program. It combined four key elements:

- The telehealth patients were asked to check their blood sugar before each meal and at bedtime. Upon receiving a daily automated reminder call, they used an interactive voice system to transmit their readings to the clinic.

- Every two weeks, a nurse checked in with the patient by phone, with the conversation lasting about 30 minutes. During most calls, the nurse delivered an education module. The topics included, for example, the fine points of checking blood sugar, how to know when blood sugar is dropping too low, and warning signs of diabetes complications.

- Doctors reviewed patients’ cases every two weeks to see if any medication tweaks were needed, based on data forwarded by the study nurses.

- The study team checked for depression—which often foils self-care—and quickly called in a psychiatrist for in-person evaluations when needed.

Lead researcher Dr. Matthew J. Crowley and colleagues write that these four elements work together to “target factors underlying persistent poorly controlled diabetes.”

Moreover, they say that because the ACDC program doesn’t require staffing or equipment beyond what VA medical centers already have in place, it can potentially be scaled up nationwide.

Crowley noted in an interview that “VA is way ahead of the curve in developing telemedicine infrastructure, and we specifically designed this approach to take advantage of that fact for those Vets most in need.”

### Researchers compared average blood sugars

The researchers compared several outcomes across the two study groups. The main measure was HbA1c, which shows average blood sugar levels over the past two to three months. After six months, the usual-care



*Linnie Skidmore*

*Dr. Matthew Crowley meets with diabetes patient Jon Morris at the Durham VA. Crowley’s team is studying how to use telehealth to boost care for Veterans with diabetes whose condition has not responded to standard clinic-based care.*

group showed a slight reduction: from 10.5 to 10.2. The drop was sharper in the ACDC group: 10.5 to 9.2. That may not sound like a lot, but the researchers say that over time such an improvement in blood sugar could significantly cut the risk of heart attack or other complications, and death.

“You need to consider the population we’re working with—these are patients for whom nothing else has worked. A 1 percent change is actually a pretty big deal in this population,” says Crowley.

The reduction in blood sugar, not surprisingly, was greater for those ACDC participants who took part in more phone encounters. For patients who completed more than 6 of the scheduled 12 encounters, the average A1c improvement was nearly 2 percent.

The ACDC group, but not the usual-care group, had lower blood pressure after six months. They also did better on an overall measure of diabetes self-care, although their self-reported medication adherence remained the same as that of the usual-care group.

The groups also remained about equal with regards to depression symptoms. But most of the ACDC group already had psychiatry care in place, so the study intervention may have added little to their care in this area.

The researchers acknowledge that intensive telehealth care doesn’t suit everyone’s tastes. Almost half of the patients who were approached to be in the study declined to take part. But among those who did, most

[Continued on Pg 8](#)

# Workers Ready Kernersville HCC For Grand Opening In February

Workers put finishing touches on the new Kernersville Health Care Center. The 280,000 net usable square foot building is scheduled for a grand opening celebration Feb. 26. Operated by the Salisbury VAMC, the HCC will offer primary and specialty care, dental, diagnostic, laboratory, mental health, pathology, radiology and ancillary services. More than 150,000 Veterans live in the Triad, making it the largest concentration of Veterans in the state. The HCC is located between the cities of Greensboro, High Point and Winston-Salem.

*Courtesy Photos*



## Diabetes continued from Pg 8

said they found the program acceptable. On a follow-up survey, most agreed that ACDC “seemed like an appropriate way to address my diabetes.” Most said it fit their lifestyle, and that they were willing to continue using the skills they learned.

### Larger study in the works

Now Crowley and colleagues are seeking funding to study the model across several sites, with up to 300 patients. “We want to further examine ACDC’s effectiveness, feasibility, and generalizability at different VA centers,” he says.

“Because VA has built a unique nationwide telemedicine infrastructure, we see major potential for implementing this approach to persistent poorly controlled diabetes at centers across the country. We see the

larger study as the next step toward that objective.”

He says his group is also taking a closer look at what “usual care” actually looks like for those with persistent poor control of their diabetes. For example, are they typically missing scheduled appointments?

“My sense based on our prior work,” says Crowley, “is that many patients with persistently poor diabetes control have very real barriers that make improvement under usual care more difficult—for example, competing demands from employment, transportation problems, and difficulty adhering to the complex self-management behaviors that diabetes requires.”

Through the ACDC research, he says, “We’ve been able to identify and focus on a subgroup of Veterans that really needs something different than ‘usual’ care.”

### WWI Centennial Commission To Announce Memorial Design Completion Winner

The U.S. World War I Centennial Commission has scheduled a press event to formally announce the winning design team for their World War I Memorial Design Competition. The event will take place at the National Press Club, in Washington, D.C. Jan. 25.

The Centennial Commission was set up by Congress in 2013 to provide education and commemoration programs regarding American service during the war. The commission was also authorized to create a national-level memorial to the war in the nation's capital.

The commission hosted an open, international design competition that began in May 2015 with the first of two competition stages. Stage I garnered over 360 design concepts from designers around the world. In

August, the design jury selected five finalist design teams to participate in Stage II of the competition.

Those five finalist teams have been working with representatives from the Centennial Commission, the U.S. National Park Service, the U.S. Commission of Fine Arts, and the National Capital Planning Commission, to develop and refine their design concepts. The designs must meet a number of criteria related to cost, site considerations, environmental impact, historical value, and design merit.

The members of the design jury are currently reviewing the finalists' work, and will select a team to recommend for endorsement by the Centennial Commission.

The site for the World War I Memorial will be Pershing Park, at the corner of 14th Street NW and Pennsylvania Avenue, in Washington D.C. The site, which was authorized by Congress in 2014, is directly next door to the White House Visitors Center.

For more information about the U.S. World War I Centennial Commission, go to [www.ww1cc.org](http://www.ww1cc.org).

### Medal Of Honor Marks 154 Year Anniversary Of Inception

One hundred and fifty-four years ago, during the first winter of the American Civil War, Congress authorized the nation's first Medals of Honor (MOH) on December 21, 1861 for exemplary men of the U.S. Navy.

Two hundred "medals of honor" were approved by that law for bestowal upon "such petty officers, seamen, landsmen, and marines as shall most distinguish themselves by their gallantry in action and other seamanlike qualities during the present war." John Williams, Captain of the Main Top on the U.S.S. Pawnee, was the first MOH recipient for his actions during the attack on Mathias Point, Virginia, on June 26, 1861.

Two months later, Senator Henry Wilson of Massachusetts—the same senator who proposed establishing the first African American regiments and the National Home for Disabled Volunteer Soldiers (VHA origins)—introduced a bill to establish a Medal of Honor for "privates in the Army of the United States who shall distinguish themselves in battle."

On July 12, 1862, the Army Medal of Honor was signed into law by President Lincoln and 2,000 medals were authorized "to be presented, in the name of the Congress, to such non-commissioned officers and privates as shall distinguish themselves by their gallantry in action, and other soldier-like qualities."

Special lifetime pensions were authorized by Con-



gress for Medal of Honor recipients on April 26, 1916. Other benefits for them and their dependents have been added over the years.

A Medal of Honor for the Air Force was authorized by Congress on Aug. 10, 1956.

In 1963, 27 out of 291 living Medal of Honor recipients worked for the Veterans Administration.

Dr. Joel Boone, former VA Chief Medical Director (Under Secretary for Health equivalent) from 1951-1955 is the only Medal of Honor recipient in that position to-date.

In 1976, the year of America's Bicentennial, the National Cemetery System (now known as the National Cemetery Administration) created special headstones to mark the graves of Medal of Honor recipients. The first MOH headstone was installed at Arlington National Cemetery at the grave of Maj. Gen. William "Wild Bill" Donovan on May 12, 1976.



*Dr. Joel Boone is awarded the Medal of Honor in 1920 by then-Assistant Secretary of the Navy Franklin Delano Roosevelt.*

### New Members To VA Advisory Committee On Minority Veterans

VA has announced the appointment of four new members to the Advisory Committee on Minority Veterans. The committee was chartered on Nov. 2, 1994, and advises the Secretary of Veterans Affairs on the needs of the nation's 4.7 million minority Veterans on compensation, health care, rehabilitation, outreach and other benefits and programs administered by the VA. The committee assesses the needs of Veterans who are minority group members and recommends program improvements designed to meet their needs. The committee members are appointed to two or three-year terms. Minority Veterans comprise nearly 21 percent of the total Veteran population in the United States and its territories.

#### The new committee members are:

**Melissa Castillo:** Navy Veteran of San Antonio, Texas. Served as the Assistant Regional Director for San Antonio Region, Veterans County Service Officer Association of Texas; Assistant Women Veterans Coordinator; Advisor to the US Army Survivor Outreach Services Program; and Advisor to the Alamo Community College District Veterans Affairs Committee. Currently serves as the Assistant Veterans Service Officer at the Bexar County Veterans Service Office in San Antonio, Texas, and is an accredited Veterans Service Officer.

**Benno Cleveland:** Army Veteran of Fairbanks, Alaska. Served two tours in Dong Tam, Vietnam where he earned a Purple Heart. He also served as Senior Vice Commander and Department Commander of the Military Order of the Purple Heart. In recognition of his distinguished military service, the Alaska Federation of Natives bestowed him with their "Veteran of the Year"

honors in 2014 at their Annual Convention in Anchorage. Mr. Cleveland also founded the Alaska Native Veterans Association and is currently serving as President.

**Ginger Miller:** Navy Veteran of Accokeek, Maryland, and former homeless disabled Veteran. Ms. Miller became Founder and CEO of two nonprofit organizations that serve Veterans and their families: John 14:2, Inc. and Women Veterans Interactive. She served as Chairwoman of the Prince George's County Veterans Commission; Commissioner, Maryland Commission for Women; member of the Maryland Veterans Resilience Advisory Council; and a member of the Maryland Caregivers Support Coordinating Council. She is currently a member of Disabled American Veterans.

**Xiomara Sosa:** Army Veteran of Summerville, South Carolina. Ms. Sosa is the Founder and Principal of XAS Consulting, LLC, an integrative mental healthcare and holistic wellness consulting firm. She served on the Women Veteran Social Justice board of directors; Military Partners and Families Veteran Initiative; the Semper Fidelis Health and Wellness Advisory Board; and a current member of the Women in Military Service for America Memorial Foundation, Inc.

#### The new members join current members:

- Marvin Trujillo, Jr., Committee Chairman, Marine Corps Veteran
- Many-Bears Grinder, Col. (USA-Ret)
- Patricia Jackson-Kelley, Lt. Col. (USA-Ret)
- Librado Rivas, Command Sgt. Maj. (USA-Ret)
- Teresita Smith, Sgt. First Class (USA-Ret)
- Rebecca Stone, Staff Sgt. (USA-Ret)
- Cornell Wilson, Jr., Maj. Gen. (USMC-Ret)
- Anthony Woods, Army Veteran

January 17 marks the  
*25th Anniversary*  
of the start of  
*Desert Storm*



# VISN 6 Sites Of Care & VA Vet Centers

## MEDICAL CENTERS

**Asheville VAMC**  
1100 Tunnel Road  
Asheville, NC 28805  
828-298-7911, 800-932-6408  
[www.asheville.va.gov/](http://www.asheville.va.gov/)

**Durham VAMC**  
508 Fulton St.  
Durham, NC 27705  
919-286-0411, 888-878-6890  
[www.durham.va.gov/](http://www.durham.va.gov/)

**Fayetteville VAMC**  
2300 Ramsey St.  
Fayetteville, NC 28301  
910-488-2120, 800-771-6106  
[www.fayettevillenc.va.gov/](http://www.fayettevillenc.va.gov/)

**Hampton VAMC**  
100 Emancipation Dr.  
Hampton, VA 23667  
757-722-9961, 866-544-9961  
[www.hampton.va.gov/](http://www.hampton.va.gov/)

**Richmond VAMC**  
1201 Broad Rock Blvd.  
Richmond, VA 23249  
804-675-5000, 800-784-8381  
[www.richmond.va.gov/](http://www.richmond.va.gov/)

**Salem VAMC**  
1970 Roanoke Blvd.  
Salem, VA 24153  
540-982-2463, 888-982-2463  
[www.salem.va.gov/](http://www.salem.va.gov/)

**Salisbury VAMC**  
1601 Brenner Ave.  
Salisbury, NC 28144  
704-638-9000, 800-469-8262  
[www.salisbury.va.gov/](http://www.salisbury.va.gov/)

## OUTPATIENT CLINICS

**Albemarle CBOC**  
1845 W City Drive  
Elizabeth City, NC 27909  
252-331-2191

**Brunswick Outreach Clinic**  
20 Medical Campus Drive  
Supply, NC 28462  
910-754-6141

**Charlotte CBOC**  
8601 University East Drive  
Charlotte, NC 28213  
704-597-3500

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

**Chesapeake CBOC**  
1987 S. Military Highway  
Chesapeake, Va 23320  
757-722-9961

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

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

**Fayetteville HCC**  
7300 So. Raeford Rd  
Fayetteville NC 28304  
910-488-2120  
800-771-6106

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

**Fredericksburg CBOC**  
130 Executive Center Pkwy  
Fredericksburg, VA 22401  
540-370-4468

**Goldsboro CBOC**  
2610 Hospital Road  
Goldsboro, NC 27909  
919-731-4809

**Greenville HCC**  
401 Moye Blvd.  
Greenville, NC 27834  
252-830-2149

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

**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**  
4006 Henderson Drive  
Jacksonville, NC 28546  
910-353-6406

**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

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

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

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

**Rutherford County CBOC**  
374 Charlotte Road  
Rutherfordton, NC 28139  
828-288-2780

**Staunton CBOC**  
102 Lacy B. King 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

**Wilmington HCC**  
1705 Gardner Rd.  
Wilmington, NC 28405  
910-343-5300

**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

## DIALYSIS CENTERS

**VA Dialysis and Blind Rehabilitation Clinics at Brier Creek**  
8081 Arco Corporate Drive  
Raleigh, NC 27617  
919-286-5220

**VA Dialysis Clinic Fayetteville**  
2301 Robeson Street, Ste. 101  
Fayetteville, NC 28305  
910-483-9727

## VET CENTERS

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

**Fayetteville Vet Center**  
2301 Robeson Street  
Fayetteville, NC 28305  
910-488-6252

**Greensboro Vet Center**  
3515 W Market Street, Suite 120  
Greensboro, NC 27403  
336-333-5366

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

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

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

**Raleigh Vet Center**  
8851 Ellstree Lane  
Raleigh, NC 27617  
919-856-4616

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

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