



New commanding officer takes helm



Members of the official party at the Captain James A. Lovell Federal Health Care Center change of command ceremony stand and applaud outgoing Commanding Officer Capt. Robert G. Buckley, right, during the ceremony. Navy Medical Corps Capt. Bradford Smith, far left, assumed command of Lovell FHCC, also taking on the role of deputy director. Next to Smith, left to right, is FHCC Director Dr. Stephen Holt, Deputy Surgeon General of the Navy Rear Adm. Terry Moulton, Veterans Integrated Service Network 12 Acting Director Renee Oshinski, and Chief of the Navy Medical Corps Rear Adm. Paul Pearigen. (Photo by Hospitalman James Stewart)

FHCC welcomes Navy Capt. Bradford Smith, Naval aviator and pediatrician

By Jayna Legg
Lovell FHCC Public Affairs

Lovell Federal Health Care Center (FHCC) held a change of command ceremony and retirement July 22.

Navy Medical Corps Capt. Bradford Smith assumed command of the FHCC from Capt. Robert G. Buckley. Smith also takes on the role of deputy director of the FHCC, the nation's only integrated federal health care center between the Department of Defense and Department of Veterans Affairs.

Deputy Surgeon General of the Navy, Rear Adm. Terry Moulton, praised Buckley for his dedicated leadership of the one-of-a-kind

integrated health care facility through critical high-level evaluations to determine the FHCC's future. Moulton said Buckley "made a significant difference."

"Capt. Buckley is one of those outstanding leaders all of you can be proud of," Moulton said. "He has been a caring and trusted leader and set the bar high. His exemplary leadership ensured the care of a benefit population of 85,000 ... His collaborative approach further shaped this tremendous (FHCC) template."

Buckley, who assumed command two years ago, retired from the Navy after 28 years.

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In-hospital hemodialysis starts for Community Living Center residents



Navy Veteran Courtney Cain is the first FHCC Community Living Center resident to receive hemodialysis treatment in the hospital instead of having to travel to a community provider for care. FHCC Director Dr. Stephen Holt, left, and then-Deputy Director/Commanding Officer Capt. Robert Buckley were on hand for the occasion. (Photo by Mass Communication Specialist 2nd Class Jacob Waldrop)

By Mass Communication Specialist 2nd Class Jacob Waldrop

Lovell FHCC Communications

Lovell Federal Health Care Center (FHCC) began offering hemodialysis at the facility for veterans living in the FHCC Community Living Center (CLC) July 6.

The expanded service will provide veterans residing in the CLC with a treatment they need without requiring them to travel to community health care facilities. For some, regular hemodialysis visits in the community required nearly an entire

day, three days a week.

"Although this is not a new clinic, or a new building or a ribbon-cutting event, I believe this is a special occasion," said FHCC Associate Director of Inpatient Services Capt. Deborah Kumaroo. "This is the beginning of a substantial cost-savings and is 100 percent patient-centered."

To make this happen, an original hemodialysis business case analysis (BCA) team expanded into a multi-disciplinary working group that included CLC leadership, infection control, pharmacy, information security, patient safety, and a Joint Commission representative.

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From the Desk of the Director

Lovell Voices project bonds employees through storytelling

Holt: "This employee engagement experience concentrates on how we and our work families examine our humanity"



By **Dr. Stephen Holt**
Lovell FHCC Director

This is an exciting time for the FHCC. In July, we celebrated the Change of Command for our incoming Commanding Officer Capt. Bradford Smith. Recently, we also had the most successful Long Term Care Survey of our Community Living Center in recent memory.

From a performance perspective, we continue to see improvements in our Strategic Analytics for Improvement and Learning (SAIL) data and other measures across the board. We also are making progress on selecting permanent key leadership with the selection of Dr. Nils Anderson as the Associate Director of Specialty Care, and Cmdr. David You as the Assistant Director of Specialty Care. We also are in the final stages of selecting a new Chief Medical Executive. Things are coming together fast.

As we continue to grow as an integrated family bringing together the members of two great agencies, we also are looking at unique ways to define our special culture here at the FHCC. One of those efforts started this summer

with the first group of senior leaders participating in the two-day transformative Lovell Voices experience.

This employee engagement experience concentrates on how we examine our humanity and that of our work families (colleagues). Our humanity defines the best in us and lays out what we can become. It is central to our living an extraordinary life of meaning and contribution versus a monotonous life of stifling routine. It also allows us to connect in very meaningful and fulfilling ways to those around us. That connection translates into a special understanding, consideration and care for those around us and helps us live extraordinary and meaningful lives. It also helps us – Lovell FHCC employees – provide better, more compassionate and more meaningful care to our patients and their families.

The Lovell Voices experience has grown out of a very positive set of experiences used elsewhere in the federal government. Thanks to Command Master Chief Thomas Moore, Mr. Sam Abraham, Ms. Monyca Fisher and Ms. Marilyn Algire, who attended extensive training, the Voices experience was customized for the FHCC and our integrated family. They also ran the first two-day participative experience for senior leadership mentioned above.

At the end of the experience, it was almost unanimous it was the best training/transformational experience the attendees had ever participated in. Participants felt their whole approach to their work family and their connection with their work family had fundamentally changed for the better. It was heralded as an overwhelming success in bringing together FHCC staff from varying departments and backgrounds in ways never before achieved.

So by now, some may be thinking: "That's nice, but what exactly did you do that made this huge difference in people and how they view their work family?" The answer is very simple. We learned how to connect with each other and our individual humanities through storytelling. Yes, it was that simple – storytelling. But these weren't just any stories; these were highly personal stories about events in our own lives.

Through storytelling, we shared pivotal moments in our lives and how those moments helped shape who we are today and how we approach things. These stories helped us understand and connect with each other as never before. They were incredibly powerful and moving. They also taught us new ways to more easily and effectively connect with each other.

This experience really reminded us of the power of storytelling, which is so fundamentally interwoven into many societies. However, unfortunately, our current society and work environments have contributed to very sterile, superficial levels of interpersonal relationship. This probably has furthered the high levels of damaging cynicism and interpersonal distancing we see in society today. Think about that for a minute. Consider that the people who you trust the most and consider closest are those you share stories with as a way of establishing strong bonds and shared humanity.

So the next question is, how does this make the FHCC a better place? And that is the most important question! So let me answer that by saying that senior leadership has examined closely the last couple of years of All Employee Survey and Command Climate Survey

results. We concluded that the traditional approaches to dealing with employee satisfaction and engagement had value but were not going to be enough to take us to where we wanted to go in the future. And where is that?

The answer is, we want to be more like a family. We want a work environment where people think and treat each other and our patients, as family. We realize as employees, you spend more of your waking hours at work, or traveling to and from work, than any other thing you do. So making your work experience highly rewarding and fulfilling is a key objective of ours, and one way to do it is to make it more like a place filled with family than a place filled with associates. And guess what, that is the goal that has been set by both the VA Under Secretary for Health and the U.S. Navy Surgeon General as well.

So expect big changes as more and more members of our work family go through the Lovell Voices experience in the coming months.

The Apollo

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Creative Arts Festival finalists to compete nationally

Veteran Anthony Sarpy performs at the annual Lovell Federal Health Care Center Veterans Creative Arts Festival earlier this year. Sarpy, jazz singer Angela Walker and inspirational speaker Michael T. Brown all placed first in their categories and will advance to the national Veterans Creative Arts Festival in Jacksonville, Miss. Oct. 10-17. The following second- and third-place finishers in the Lovell FHCC competition received medals: John Pearce, Babette Peyton, Windy City Wailers, Vitale Duo, Ed Mosteig and Wayne Bolden. (Photo by Trevor Seela)



From the Desk of the Commanding Officer

Capt. Smith: “Everything we do here is for the patient”

All of us, no matter our role at the Lovell FHCC, has the job of providing world-class health care



By Captain Bradford L. Smith
Lovell FHCC Deputy Director/
Commanding Officer

It is with great pleasure that I write my first column for *The Apollo* as your new Deputy Director and Commanding Officer.

It is truly an honor to be part of this great team here at the Captain James A. Lovell Federal Health Care Center, and I am already extremely impressed by the amazing staff that delivers world class care each and every day.

As a way of introduction, I offer the following philosophies so everyone is aware of my priorities. Of greatest importance, and the idea that should guide all decisions, is everything we do is for the patient.

Whether it be caring for our nation’s heroes, or readying tomorrow’s warriors, know that every one of us, regardless of our job title or role in the facility, is here to provide world-class care.

We will accomplish this through taking care of our facility, taking

care of each other, and taking care of ourselves. When issues with the facility are noticed, it is critical that we work to fix those problems before they impact patient care.

“We also must respect and take care of each other. Treat your coworkers the way you would want to be treated.”

Capt. Bradford L. Smith
Capt. James A. Lovell Federal
Health Care Center
Deputy Director & Commanding
Officer

We also must respect and take care of each other. Treat your coworkers the way you would want to be treated.

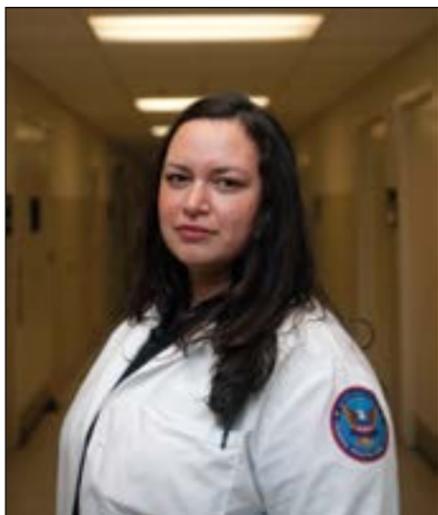
And of course, we must take care of ourselves. Avoid making destructive decisions, because if you are not at 100 percent, it prevents us from giving 100 percent to our patients.

Finally, I need every one of us to be looking at our systems and processes. So often challenges are due to system failures, and through correcting the systems and processes, outcomes will improve. When challenges exist, we need to identify the barriers and work together to remove them.

Again, I am very excited to join the team of this amazing institution. I look forward to working together and continuing our journey toward being among the finest institutions in the world!

Hepatitis C (HCV): New treatments available with higher success rate

Clear symptoms are not always present; therefore, patients may have HCV for decades and not know it



Dr. Lyuba Dragilev

By Hospitalman James Stewart
Lovell FHCC Communications

More than 170,000 Veterans are known to have chronic Hepatitis C (HCV) and are getting care in the Department of Veterans Affairs (VA) system. But many hundreds of thousands more still need to be screened.

Patients may have HCV for decades before they have any clear symptoms, so many do not know they have it. A blood test is the only way to diagnose Hepatitis C.

Dr. Lyuba Dragilev is a clinical pharmacist at the Lovell FHCC’s Gastroenterology Clinic. Dragilev went through residency training here at the FHCC in 2010, and has been working here at the FHCC ever since. *The Apollo* spoke with Dr. Dragilev about recent updates and the importance of being educated on Hepatitis C screenings and treatment plans.

Hepatitis C has been in the news frequently as new treatments for treating the virus are approved. Lovell FHCC also wants patients to know how to get tested and treated.

The Apollo: What is Hepatitis C?

Dragilev: Hepatitis C is a virus that affects the liver. It can cause irreversible damage and lead to cirrhosis and liver failure.

The Apollo: How is Hepatitis C contracted?

Dragilev: It is a borne pathogen so it can be contracted from blood exposure such as needle sticks, IV drug use and via organ transplants (before July 1992). The Centers for Disease Control estimates that about 3.2 million Americans (about one in 50) are infected with Hepatitis C.

The Apollo: Who’s most at risk to contract Hepatitis C?

Dragilev: Baby boomers (people born between 1945-1965) are at a high-risk. Anyone who’s received an organ transplant or a blood transfusion or clotting factors prior to 1992, and those with a history of drug abuse are at high risk. Veterans have higher rates of Hepatitis C than the rest of the country.

Often, people infected with Hepatitis C are not aware of their infection because they have no symptoms, and they are not feeling ill. Therefore, getting tested is the most important step.

The Apollo: How can patients get tested for Hepatitis C?

Dragilev: All patients need to do is ask their Primary Care provider to submit a lab request for a Hepatitis C screening.

The Apollo: Can you describe what the Hepatitis C test is like?

Dragilev: The Hepatitis C test is fairly simple. It just involves a quick and easy blood draw or finger stick.

The Apollo: Who administers the Hepatitis C test?

Dragilev: The patients’ Primary Care provider will place an order, and the patient then goes to the lab for a regular blood draw and screening.

The Apollo: What’s Hepatitis C treatment like?

Dragilev: Treatment for most people will last about 12 weeks, and most of the time, we can treat it with one of the newer medications. The newer medications are incredible and have a success rate over 95 percent. This is fantastic news for patients with Hepatitis C.

The Apollo: Have there been any recent changes in Hepatitis C treatment?

Dragilev: Hepatitis C treatment used to primarily consist of interferon and ribavirin, which patients had to take for 48 weeks. Those treatments had a 30 to 50 percent success rate, which is quite low.

About five years ago, the Food and Drug Administration approved new treatments for Hepatitis C. These new medications offer a higher success rate, and so within the last few years, we’ve gotten a lot better at treating Hepatitis C.

The Apollo: What does Lovell FHCC offer for patients as far as counseling and a treatment plan once they’re diagnosed with Hepatitis C?

Dragilev: Once the patient is diagnosed with Hepatitis C, the Primary Care provider can place a consult for Hepatitis C treatment, and they would come to see me. At that point, I educate the patient on preventing transmission and what treatment could be like depending on what course they choose. Then we schedule all their labs and a start date, essentially.

The Apollo: What else should patients know about Hepatitis C?

Dragilev: Everyone should be screened for Hepatitis C because you could have Hepatitis C for decades and not know it. It can be completely asymptomatic for most patients.

Hepatitis C is very treatable, and the treatment isn’t nearly as rough as it used to be due to the launch of new medications. For more information, I would also direct patients to the very helpful guide the VA has compiled for patients. They can find it by visiting: <http://www.hepatitis.va.gov/products/patient/hepatitisC-booklet.asp>.

ONE TEAM *Extra*

News Employees Can Use

FHCC Sailors win Gallery-Renken awards

Three FHCC Sailors were honored at Naval Station Great Lakes recently and presented the Rear Adm. Gallery-Rear Adm. Renken Award of Merit for community involvement.

Lt. Nabil Tahan won in the junior officer category; Senior Chief Hospital Corpsman (HMCS) Kristine Breault won in the senior enlisted category, and Gunner's Mate (GM) 1st Class Sean Rounds won in the junior enlisted category.

Rear Adm. Gallery was a Naval aviator who served with distinction in combat during World War II. Rear Adm. Renken commanded a convoy of 40 minesweepers during the invasion of Normandy in 1944. Both served as commandants at Naval Station Great Lakes and shared a passion for public service.

Breault is quoted by a *Great Lakes Bulletin* reporter as saying she was surprised to receive the award, but also pleased because



From left to right, HMCS Kristine Breault, GM1 Sean Rounds, Navy League member Roycealee Wood, Lt. Nabil Tahan and Navy League member Ted Rock cut a cake at the ceremony for the Gallery-Renken awards. (Photo Provided)

it is important to recognize Sailors for their community involvement and volunteering, and let them know they are appreciated. "Being in the military is a 24/7 job, but we can still do things that we love in our own time," she said.

Lt. Tahan named information officer of year

Navy Lt. Nabil Tahan has been named the Navy's Capt. Dooling Information Professional Officer of the Year.

The award was presented to Tahan by Navy Surgeon General Vice Admiral Forrest Faison III at the Defense Health Information Technology Symposium in July.

"It gives me great pride to announce this award," said Cmdr. Andrew Archilla, FHCC associate director of resources, who nominated Tahan. The award recognizes Tahan for outstanding service as the department head and Chief Information Systems Officer in 2015. Tahan is cited for achieving "90 percent integration of critical integrated electronic health record



Lt. Nabil Tahan, holding a certificate, also was awarded the Navy and Marine Corps Achievement Medal this summer. (Photo by Hospitalman James Stewart)

interoperability measures," during his day-to-day support of Recruit Training Command.

Lovell FHCC LEAD Class of 2016 graduates



Left to right, graduates of Leadership Effectiveness, Accountability and Development (LEAD) pose with their diplomas: Angela Young, Dennis McClintock, Tyfanie Petersen, Sudha Patel, Trevor Seela and Desmond Miller. LEAD is the first tier of the Department of Veterans Affairs leadership development program, offered to employees in civilian wage grades 5-11 (or wage-grade equivalent), and equivalent enlisted military ranks (E5 and E6). Students commit to monthly meetings, group work and a final presentation over a period of nine months. This year's class presented a final project to leadership on the FHCC's organizational structure. Each student also attended and observed the meetings of a FHCC committee and reported on the committee's contributions and progress towards meeting strategic goals. (Photo by Stephanie Caccomo)

Congratulations!

- **Jessica Pinder**, Veterans Justice Outreach Coordinator, was featured in an Employee Spotlight Story on the VA Homeless Veterans Intranet website: <http://vaww.va.gov/homeless/>
- **Dr. Emmeline Hazaray** achieved Distinguished Fellowship status in the American Academy of Child and Adolescent Psychiatry.
- **The FHCC Laboratory** was reaccredited for two more years by the College of American Pathologists.
- **The FHCC** successfully passed the Navy Inspector General (IG) inspection this summer, which consisted of 11 reviewers completing a three-day review of 67 FHCC programs.
- **The FHCC** has surpassed the VA 101 training goal for FY 2016. More than half of staff members have completed the VA 101 course, a goal of the Secretary of the Department of Veterans Affairs (VA).
- **HM1 (SW) Mary Schlunsen** was named Senior Sailor of the third Quarter.
- **HM2 Andrea Miller** was named Sailor of the third Quarter.
- **HM3 Shannon Stoddard** was named the Junior Sailor of the third Quarter.
- **Hospitalman Jonathan Bulley** was named Blue Jacket of the third Quarter.
- **Lt. Sharon Hoff**, USS Red Rover, submitted a proposal to Liletta's Intrauterine Device pharmaceutical representative, resulting in a negotiated reduction in cost, from an average \$535 to \$50 per unit. Her efforts paved the way for the offer being available for the Department of Defense, Veterans Health Administration and several other government agencies.
- **USS Tranquillity blood donors** reclaimed the Armed Forces Blood Program trophy.
- **The FHCC Psychiatry Residency program**, under sponsorship of Rosalind Franklin University/The Chicago Medical School, has received "continuing accreditation - without citations" status by the Accreditation Council for Graduate Medical Education. It is led by **Dr. David Garfield, Dr. Chandra Vedak and Dr. Paul Hung**.

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Major League Baseball umpire visits with Lovell FHCC patients



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 - FHCC celebrates Hispanic Heritage
 - State of Women Veterans campaign launched
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Outgoing Commanding Officer Buckley also retired (cont.)

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As a Medical Corps officer, his career included service as Force Surgeon, U.S. Central Command, in Bahrain. Buckley served as a doctor of emergency medicine several times, including when he deployed to Iraq with the 1st Marine Expeditionary Force as the officer-in-charge of Shock Trauma Platoon (STP)-7 during Operation Iraqi Freedom in 2003.

Buckley said he was honored to serve at the FHCC and work to further the integration of the two cabinet-level agencies.

“Integration across two federal health agencies is hard,” Buckley said. “But I’m convinced the FHCC will continue to serve as a model for partnerships ... It is fully blended and will continue to benefit our beneficiaries. It makes no sense to keep shared needs of patients and the shared (Department of Defense and VA) abilities apart.”

“What staff and volunteers have shared with me is that they most appreciate that Capt. Buckley is present, and interactions with him are meaningful.”

**Dr. Stephen Holt
Lovell FHCC Director**

Reflecting on his retirement, Buckley thanked the Navy, and his wife and two children - one who followed his footsteps into the Navy. “I’ve gone places I never ever thought I would, and done things I never thought I could do,” Buckley said.

FHCC Director Dr. Stephen Holt said Buckley truly exemplified the facility’s mission of “Readying Warriors and Caring for Heroes. “What staff and volunteers have shared with me is that they most appreciate that Capt. Buckley is present, and interactions with him are meaningful,” Holt said. “They are accustomed to seeing him across the facility and at the clinics on a regular basis. But it is more than just seeing him. They receive a warm and friendly greeting and feel his interest in what their role is here at Lovell FHCC in promoting our sacred mission.”

Holt went on to thank Buckley, “on a personal note, for his professionalism, dedication and comradery when I came on board at Lovell FHCC.”

Holt said, “He helped make my transition a smooth one, and a satisfying one. Working with him has been a pleasure. Leading Lovell requires the leaders, Navy and VA, to work together interdependently as one. In Capt. Buckley, I have felt as though I experienced true partnership, while learning the nuances that make this organization unique.”

Chief of the Navy Medical Corps Rear Adm. Paul Pearigen, guest speaker and long-time friend of Buckley, praised Buckley’s outstanding service to the FHCC, and the Navy.

“You can see the breadth of his assignments ... He’s been asked to do something away from the fold time and time again because of his leadership abilities and adaptability, and he didn’t let the Navy down,” Pearigen said.



Captain James A. Lovell Federal Health Care Center sailors line the rails above the change of command ceremony between outgoing Commander Capt. Robert Buckley and incoming Commander Capt. Bradford Smith July 22. Smith, a Naval aviator and pediatrician, also assumes the role of FHCC deputy director. Buckley also celebrated his retirement after 28 years of naval service. (Photo by Mass Communication Specialist 2nd Class Jacob Waldrop)

“Bob is the real thing. The Navy, and me, will be forever in his debt,” said Pearigen, who also is the Navy Bureau of Medicine and Surgery liaison to Defense Health Agency. Smith, a Navy aviator and board-certified pediatrician, said during his remarks he is happy to return to the Naval Station Great Lakes area to serve at the FHCC, which he called “an amazing institution.”

“It’s truly an honor to be here,” he said, noting that he was part of the initial planning for the creation of the FHCC. “I’m really invested in this ... I’ve been watching the FHCC over the years and celebrated every victory.”

In 2001, Smith reported to the former Naval Hospital Great Lakes, Ill., where he served as the department head of pediatrics

and successfully implemented the concepts of Medical Home more than five years before it became the standard across Navy Medicine. He also served on a deployment to Djibouti, Africa, as the senior medical officer and deputy officer in charge of the expeditionary medical force.

In 2009, Smith was named deputy chief of staff, Navy Medicine National Capital Area, where he was instrumental in the successful execution of the historic Base Realignment and Closure integration between Walter Reed Army Medical Center and the National Navy Medical Center in Bethesda, Maryland. Before coming to Lovell FHCC, Smith was the executive officer, Navy Medical Center Portsmouth.

CLC residents don’t have to travel, face long wait for hemodialysis (cont.)

Continued from page 1

The group investigated the FHCC’s existing hemodialysis contract and worked with the Great Lakes Acquisition Center to rewrite the new contract to include hemodialysis for CLC residents. When the news was passed to the veterans residing at the hospital, they were very excited about it, Kumaroo said.

“This will make getting treatment a lot more convenient for me,” said Courtney Cain, a retired Navy fire controlman. “It will save me a lot of time out of my day now that I don’t have to add an hour-long trip, three times a week, on top of my four-hour treatments.”

July 6 Cain became the first CLC resident to receive the treatment at the FHCC. He simply traveled to the FHCC inpatient ward in another part of the hospital, where he recognized the nurses and other FHCC employees who took care of him. Before Cain’s treatment, the entire procedure was simulated

from start to finish with the six contracted DaVita nurses and FHCC staff, Kumaroo said, including medication orders, patient preparation, and returning the patient back to the CLC.

“This will make getting treatment a lot more convenient ... It will save me a lot of time now that I don’t have to add an hour-long trip, three times a week, on top of my four-hour treatments.”

**Courtney Cain
Retired Navy CLC resident**

“The BCA team has been working very hard to ensure that we will continue providing dialysis treatment to our patients here at the hospital,” Kumaroo said.

“They researched options for adding the CLC members into the contract, which will provide additional work for our contract nurses as well as make the veterans’ lives easier. These efforts resulted in continuing



In the center, Navy Veteran Courtney Cain prepares to receive hemodialysis treatment in the Medical-Surgical unit at the FHCC. He was the first FHCC Community Living Center resident to receive hemodialysis at the FHCC instead of traveling to be treated in the community. (Photo by Mass Communications Specialist 2nd Class Jacob Waldrop)

to provide dialysis to our patients but also allowed us to include our veterans that reside at the CLC.”

Kumaroo credited FHCC Nephrologist Dr. Sylvia Yoon, who interviewed CLC hemodialysis patients, and FHCC Acting Assistant Director of Facility

Support Lisa Baker, who oversaw the simulation and training, as well as Business Manager Arne De LaPena for making the service enhancement happen. Kumaroo said the ultimate goal is for the FHCC to open its own hemodialysis unit for all of its patients.

WWII former prisoner of war recounts harrowing story

Nathan Firestone, 15th Air Corps, held captive by Germans six months

By Jayna Legg
Lovell FHCC Public Affairs

Highland Park Veteran Nathan Firestone remembers lining the sidewalks to salute then-President Franklin D. Roosevelt when he visited troops before they left to fight in World War II.

At the time, Firestone was serving in Italy in the 15th Air Corps. He didn't know it then, but he would later become a prisoner of war in Nazi Germany and endure six months of hardships and lasting injuries.



Former Prisoner of War Nathan Firestone speaks at the FHCC POW/MIA Recognition Day event. Photo by Hospitalman James Stewart)

The draftee from Chicago was a lead navigator in a B24 bomber when he was shot down in 1944 over Austria. He had been instructed how to parachute but it was the first time he actually did it. It was October in Europe. He froze his hands and feet while he and other surviving crew members walked through the Austrian Alps for nine days and nights before they were captured.

"I was the last one to be captured," Firestone said, as he recounted his remarkable story to the audience at the Lovell Federal Health Care Center's Prisoner of War/Missing in

Action (POW/MIA) Recognition Day event in September. "We were hit so bad that one of our crew froze his hands before he jumped, and then he couldn't open his chute. He was a casualty."

Firestone said he was turned in to the police and the Germans by a farmer who pretended to help. "We were hiding in a field and heard 'Raus mit der hants,' (up with your hands)," he remembered. "It was a policeman and the farmer with a double-barrelled shotgun, and just to show us he could, the policeman aimed at a nearby tree and fired his rifle. You could hear the branch break."

The policeman then fired another shot at the tree. "The second one didn't hit, so out of excitement and nervousness, I laughed," he said.

His captors quickly found the saw he had hidden in his underwear, but the joke was on them, he said, because they didn't find farther down in his underwear the compass that would be a key to a successful escape.

Firestone wasn't afraid to break the rules, which led to him escaping on his own terms. "In camp, you were supposed to go through channels if you were going to plan an escape, like everything in the military. I just asked a couple of guys if they wanted to escape. We didn't go through channels."

He and two others made their break when the prisoners were marched to another camp. In bitter cold, they walked to friendly lines near Nuremberg and linked up with the Americans. He was flown back to his home in Humboldt Park and assigned to Edward Hines Jr. Veterans Affairs Hospital to be treated for his injuries, which included serious back injuries, lost teeth and ulcerative colitis.

"I remember we were over Lake Michigan in an Army plane when the announcement was made, 'This is V-E (Victory in Europe) Day,'" he said.

Sept. 15 wasn't the first time Firestone, 97, spoke at the FHCC's annual ceremony to honor former

POWs and those still missing in action. He spoke at the same event a decade previously, and the joke was made that he is invited back in 10 years. Firestone said he had a lot of practice telling his story when he returned to the United States. A relative arranged for him to speak to groups of about 35 people for three hours, three nights in a row. He went on to finish college and become an accountant. He married, has three children and is a member of the Jewish War Veterans.

Throughout his military experiences and beyond, he kept his wry sense of humor, which is reflected in part by the title of his autobiography, "Extra Joker," written under the pseudonym Nicky Fox. Firestone explained that one of the crew named their plane "Extra Joker" after a Joker playing card. The photos of the plane on the cover and in the book were taken by Sgt. Leo Stoutsenberger, who received the Distinguished Flying Cross.

"We were hit so bad that one of our crew froze his hands before he jumped, and then he couldn't open his chute. He was a casualty."

Nathan Firestone
Former WWII Prisoner of War
15th Air Corps

Several of the nearly 100 people in the audience were patients in Lovell FHCC residential treatment programs and gathered around Firestone to take photos with him and buy his book after the ceremony.

"It's all about old heroes like him, not the chain of command" said Army Veteran paratrooper Jeremy P., who asked that his last name not be used. "It's not about the politics. It becomes about the guy on your right and left, and our forefathers."

Veteran Robin Clark said it was an honor to meet Firestone. "There are only a few WW II Veterans left ... just the fact that he is present and sharing his story of hope - it gives us others hope," Clark said.

MOVE! Walking Warriors team wins third in national competition

Eight-week Physical Activity & Conscious Eating Challenge encouraged meeting nutrition goals, daily activity

By Erin Thompson
Lovell FHCC MOVE! Coordinator

The FHCC Walking Warriors placed 3rd out of 29 Veterans Affairs (VA) facilities in the eight-week Spring PACE (Physical Activity & Conscious Eating) Challenge.

The PACE challenge is a friendly competition open to MOVE! participants across the country. Participants utilized the President's Challenge Website (www.presidentschallenge.org) to join the team and record their physical activity and

nutrition goals for eight weeks. Participants were encouraged to be active at least 30 minutes a day, five days per week and to achieve nutrition goals each week. The website assigns a point level to different physical activities which contribute to individual and group rankings.

As a team, the FHCC Walking Warriors accumulated over 1 million points with an average of 57,253 points per team member. Of the 20 participants, 13 achieved the Active Lifestyle Award (be active 30 minutes, five days per week for at least six weeks); six earned the Bronze Award (achieving 40,000 points or more), and four earned the Silver Award (90,000 points or more).

Navy Veteran Kevin Birnbaum lost 12 pounds during the course of the challenge. "The PACE Challenge couldn't have come at a more perfect time," Birnbaum said. "In the eight months that I have been in the MOVE! Program, Erin Thompson's passion

for caring and encouraging people to do better really motivated me to be healthier.

"The PACE challenge helped me step up my game and take it to the next level," he said. "Erin kept us accountable with weekly motivational messages on the website, and it was neat to see how our team compared with the rest of the VA's in the country."

It's possible you may have noticed Navy Veteran Joe Dusa walking in the tramway during the challenge. "When I first started the President's Challenge, I was just trying to get the daily points necessary each day," Dusa said.

"As the challenge progressed, I found myself coming to the FHCC early to walk the tramway, take the stairs, and park further away just to get in those extra few steps when I had appointments," Dusa said. "By the time the challenge was wrapping up, I was obsessed with getting up a little earlier and taking every opportunity to get in extra steps."

A ceremony to honor the FHCC Walking Warriors took place in June to honor individual and team achievements. For more information about the MOVE! weight-management program, call Amy Zurcher at 224-610-7137.



Pictured are the MOVE! program Walking Warriors, who placed third out of 29 VA facilities participating in the Spring Physical Activity & Conscious Eating (PACE) Challenge. (Photo by Trevor Seela)