

# Lowcountry Beacon

## Family Medicine

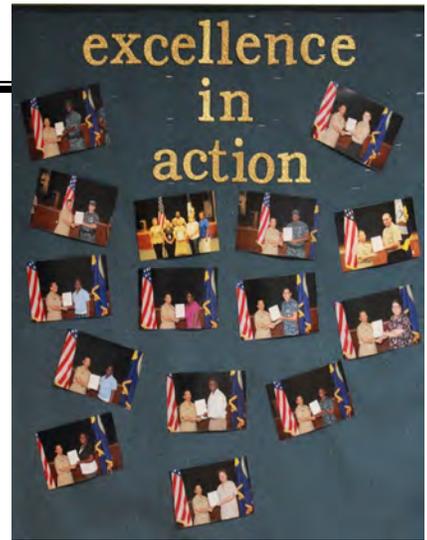


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# Excellence in Action



September, October

HN Alejandro Benvenuti  
 LT Rachael Bradshaw  
 HN Amanda Brause  
 Mr. Scott Briant  
 HN Robert Carlos  
 Mr. Dennis Deguzman  
 Mr. Jimmy Dodson  
 Mr. Hassel Estep  
 HN Corey Frazier  
 LTJG Scott Fuselier  
 Ms. Angela Gates  
 Ms. Carolyn Glover

Mr. Anthony Gomez  
 LT Denise Gripka  
 HM3 Jerry Harris  
 HM2 Precious Herndon  
 HM2 Hoa Ho  
 HN Lucas Hostettler  
 Mr. Anthony Ingram  
 CDR Christopher Kardohely  
 Ms. Geraldine Lange  
 HM2 Cynthia McCann  
 Dr. Peter Munson  
 Ms. Suzanne Patterson  
 LT Ivette Schmiege

Ms. Carrie Shaw  
 Ms. Teresa Smith  
 HN Shawn Studer  
 HN Danielle Tannous  
 LT Niko Vahamaki  
 LCDR Joel Wemette  
 Ms. Kerry Zinkand  
  
 Physical Therapy  
 Department

Excellence in Action is an employee recognition program designed to recognize a staff member who has excelled in performance or attitude. To recognize a staff member for the Excellence in Action (EIA) program, fill out an EIA card located near ballot boxes throughout the hospital or leave a comment in the Interactive Customer Evaluation (ICE) system by asking clinic staff for a comment card or visiting [www.ice.disa.mil](http://www.ice.disa.mil) and typing "Naval Hospital Beaufort" into the search bar.

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### Lowcountry Beacon

*An authorized publication of  
 U.S. Naval Hospital Beaufort*

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*Capt. Joan R. Queen  
Commanding Officer*

# A Message from the CO

## Taking Care of Family

As December begins, we are in the thick of the “most wonderful time of year.” It’s a time when the spirit of generosity and kindness settle on those around us. It’s a time when people reflect on the things they have to be grateful for and the things they have to look forward to. But, most of all, this is a time for family.

While most people define “family” as those to whom you are related by birth or law, many of us in the military have developed a broader and more inclusive view as to what makes a family. Many of us have come to think of those we serve with or those we have bonded with in our temporary communities as family too. I for one, consider the staff at Naval Hospital Beaufort as family. During my time here, I have come to know many of you well and have developed relationships that I will cherish for years to come. No matter who you consider part of your family, it’s important that we take care of our Naval Hospital Beaufort family.

During this past year, Naval Hospital Beaufort has had to say goodbye to some very special members of our family. We have said goodbye to staff who have left us due to illness and we have said final farewells to HN Valencia Compton and LCDR Michael Clarke. We will always cherish the memories of these members of our naval hospital family and how they touched our lives.

Over the past few years, as I have had the honor of serving as your Commanding Officer, I have seen how well you all work to take care of our family. Recently, during our Thanksgiving basket food drive, I was not surprised to see how generously you all gave to ensure that families in need would enjoy a wonderful Thanksgiving meal. In all, 36 baskets were collected. The different associations here at the hospital are always stepping up to volunteer for events, host activities, and donate to worthy causes, all of which increase morale. Wherever there is a need, I consistently see the hospital’s Sailors and civilian staff stepping up to lend a hand.

As we head into the holiday season and beyond, we need to continue taking care of our family. This could be something as simple as inviting a lonely Sailor who’s away from home to join you for a holiday meal. Or something as complex as encouraging someone you see struggling – emotionally, financially, or with a bad relationship – to seek help, because there are many resources available to help our family successfully navigate life challenges. We should never just stand by and watch one of our own suffer. Whether it’s the Navy Marine Corps Relief Society, with an office on Parris Island, behavioral health services here at the hospital or through MCCS, or the services of our chaplain, there is help for those who need it.

Taking care of your hospital family could also mean offering a ride or finding a cab when you notice a coworker has enjoyed a few too many holiday spirits. Better yet, ensure that a designated driver is identified ahead of time. I know we say this over and over, but drinking and driving do not mix. The Navy has zero tolerance for it, and I have zero tolerance for it. Drunk driving ruins careers, but even worse, it ruins lives. Before you get behind the wheel after drinking, or watch an inebriated shipmate slide into the driver’s seat, think about those who might be getting into that car too, another Sailor or a child. Think about the other people who may also be on the road. In a split second, an entire family could be torn apart by a drunk driver. In December 2010, according to the National Highway Traffic Safety Administration, 25 people died each day in alcohol-related crashes. In this situation, by looking out for our family, we are looking out for other families too.

In the near future, there will be more opportunities to take care of each other. There will be an “angel tree” and another food drive for those who would like to donate items to help ensure that everyone’s holiday is bright. For those who are leaders in the command, I encourage you to seize opportunities to be a role model to those around you, to mentor someone in need of guidance. And, we can all strive to be a positive influence in the lives our coworkers. As a family, we need to look out for each other and encourage good decision making.

I wish you a warm and wonderful holiday season as you spend it with your friends and family, whether they live many miles away or work just down the hall.



### Our Mission

*To be a committed partner in the delivery of quality and compassionate patient and family centered health care while maintaining operational readiness.*



# A Note from the XO



*Capt. Melanie J. Merrick  
Executive Officer*

## Family Resources

Every summer for the past 10 years, my older sister has planned and orchestrated a family vacation to the beaches of Destin in the Florida panhandle. She arranges our lodging in rental villas at a hidden sanctuary where we gather to relax and catch-up with each other's lives. For seven days, the children spend hours alternating between the beach and the pool and occasionally visiting the local waterpark and Gulfarium. I join them when I can, when deployments and overseas tours allow. We typically arrive on Saturday afternoon and join hundreds of other vacationers at the local Publix, stocking up on snacks, sodas, ice cream and breakfast foods.

Over the years, during these beach trips, we have endured many natural disasters including the after-effects of a hurricane, threatening tropical storms, the Gulf oil spill, and food poisoning (I blame it on the potato salad from the local BBQ joint). Despite these trials and tribulations, we still manage to have a good time and eagerly look forward to the next year. The formula for success is undoubtedly our kinship but also because we know what to expect from the resort and from each other. We have no lofty expectations to be waited on or catered to, we bring books, DVD's, and jigsaw puzzles to share. If the skies are cloudy and the rip tide closes the beach, we adapt and overcome.

We here at Naval Hospital Beaufort have endured our fair share of hardship, and like family, we pull together to help one another. While we are fortunate that no natural disasters have recently struck the Lowcountry, we do face the stresses of budgetary uncertainties, the worry over the safety of our deployed shipmates, and the challenges of illnesses and injuries among our co-workers and patients. During this Holiday season, we are reminded of the added stressors of this time of year for so many in our community.

When faced with a situation where a member of the Naval Hospital Beaufort family is struggling and you are concerned about the risk of suicide, I ask everyone to remember the acronym "ACE" – Ask, Care, Escort. In 2012, the number of suicides in the U.S. military averaged one per day. Statistically the risk of suicide increases over the holidays and one successful preventive measure is to simply express concern and ask the question: "Are you having thoughts of harming yourself or others?" By being aware and looking out for our military family, we can be proactive in ensuring that our shipmates who may be struggling get the help they need.

As Thomas Jefferson once said, "No society is so precious as that of one's own family." Our Navy and Marine Corps family is a unique community with numerous resources to assist with the unique stressors of military life. These resources can be found through the Fleet and Family Service Center, the Marine Corps Community Services, Military OneSource, your primary care provider, the Navy-Marine Corps Relief Society, the Chaplain's office and your Ombudsman.

Another excellent resource is your own sympathetic ear and willingness to listen and provide support. By being a good friend and a good shipmate, you can make a difference in the lives of those around you.

# From the Desk of the CMC

## Family Time

It is with tremendous excitement and humility that I write this, my first correspondence to you, my new shipmates and extended family, as your new Command Master Chief. It is indeed an honor to now call Naval Hospital Beaufort my new home. Thank you for the thorough introduction to our command and what we do. I appreciate that HMCM Kowitz made the transition for me from ship life to shore duty very easy. He left big shoes for me to fill. THANK YOU Master Chief Kowitz.



*CMDCM Leroy Hatcher  
Command Master Chief*

I would like to especially extend a warm thank you to our Naval Hospital Beaufort family members, who I consider an extension of our team and key enablers in our collective success. Thank you because you truly deserve the best for what you sacrifice on a daily basis. Your hard work does not go unnoticed and the crew of NHB knows how much you mean to them! Thank you for taking care of the kids, the houses, the cars, the pets, the bills, and most importantly for taking care of yourselves! Thank you for understanding the deployments, missed birthdays, holidays, anniversaries, and just simply being away from home. The debt we owe to you for your sacrifices can never be repaid, but if we could give you the Naval Achievement Medal, FMF pin, Good Conduct Medal, you would have it all because you are truly Superstars!

While stationed here in the beautiful South Carolina Lowcountry, there are plenty of resources and opportunities available to help you make the most of your family time while on shore duty. Marine Corps Community Services (MCCS) South Carolina offers plenty of family friendly activities. From checking out camping equipment and boats at Outdoor Recreation so you can enjoy the great outdoors together to coaching opportunities with their youth sports programs, you can find many things to enjoy as a family. They also have many great resources to help strengthen your family. The New Parent Support Program and the Exceptional Family Member Program both offer activities and classes to support parents through all the joys of raising children. Marine Corps Family Team Building also offers many classes and workshops that promote individual growth and provide opportunities for couples to make your relationships stronger than ever. As part of the Tri-Command, our Navy families are welcome and encouraged to participate in all that MCCS has to offer. I encourage you to use the time you have here at NHB to be with your family and enjoy this time with them because, as we all, know, part of a Sailor's life involves sea duty and deployments.

Of course, our single Sailors are family too and the MCCS Single Marine & Sailor Program offers many free activities and some really great trips. This program gives you opportunities to get out of the barracks, make friends, and enjoy being stationed in the Southeast.

Your continued support is valued and appreciated and I look forward to meeting you all and the entire NHB family.

# Chaplain's Corner



*Lt. Cmdr. Timothy Powell, Naval Hospital Beaufort's chaplain, during the hospital's recent Angel Tree gift drive.*

side, sharing machinery, and trading labor and goods as needed, without a hitch. Then the long collaboration fell apart. It began with a small misunderstanding, and it grew into a major difference, and finally, it exploded into an exchange of bitter words, followed by weeks of silence.

One morning, there was a knock on John's door. He opened it to find a man with a carpenter's toolbox. "I'm looking for a few days work," he said. "Perhaps you would have a few small jobs here and there I could help with? Could I help you?"

"Yes," said the older brother. "I do have a job for you. Look across the creek at that farm. That's my neighbor. In fact, it's my younger brother! Last week, there was a meadow between us. He recently took his bulldozer to the river levee, and now there is a creek between us. Well, he may have done this to spite me, but I'll do him one better. See that pile of lumber by the barn? I want you to build me a fence - an 8-foot fence - so I won't need to see his place, or his face, anymore."

The carpenter said, "I think I understand the situation. Show me the nails, and the post-hole digger, and I'll be able to do a job that pleases you."

The older brother had to go to town, so he helped the carpenter get the materials ready and then he was off for the day. The carpenter worked hard all that day -- measuring, sawing, and nailing. About sunset, when the farmer returned, the carpenter had just finished his job.

The farmer's eyes opened wide, his jaw dropped. There was no fence there at all. It was a bridge... a bridge that stretched from one side of the creek to the other! A fine piece of work,

## Building Bridges

*By Lt. Cmdr. Timothy Powell*

with handrails, and all!

And, the farmer's neighbor...his younger brother...was coming toward them with his hand outstretched... "You are quite a fellow to build this bridge; after all I've said and done."

The two brothers stood at each end of the bridge, and then they met in the middle, taking each other's hand. They turned to see the carpenter hoist his toolbox onto his shoulder.

"No, wait! Stay a few days. I've a lot of other projects for you," said the older brother.

"I'd love to stay on," the carpenter said, "but I have many more bridges to build."

How nice it would be for the carpenter to swing by our homes so our families might benefit from his bridge-building skill. He could help us build, repair, and maintain our relationships between us and those we love. Honestly, I suspect we won't actually hear a knock at our door; but maybe if we listen well enough, we might hear a builder knocking on our heart's door. Maybe there is a carpenter who can help us.

Perhaps this carpenter will help connect us with folks who can help us build and repair, and maintain our relationships. There are so many programs and skilled people available to help. And because there are, why not step out and try if you have a relationship or relationships that need help? What do you have to lose?

In my life, one of my personal preferences in learning about building and maintaining relationship bridges is conversing with older couples who have been married for a million years. Because somehow and some way they managed—through the trials and tests of time—to stay together; and I love listening to them for little clues that will help me do the same. One of my favorite newspaper articles had the title and byline "Couple Married for 80 Years: They Still Fight Over the Remote."

In closing, perhaps miracles sometimes still happen? Maybe estranged brothers or sisters or spouses can come back together. Maybe they can learn to forgive greater and love better? In the area of relationships, most of the little miracles I have witnessed were founded on much hard work and tears. And when those little miracles did not happen, the same hard work and tears birthed hope. May God bless all of you! If you would like to sit down over coffee and chat, my door is open.

Sincerely,  
Chaplain Powell

# Family Medicine

By Regena Kowitz and Cmdr. Gregory Thier

At Naval Hospital Beaufort, taking care of family is at the heart of everything we do. And, by family, we mean everyone in our Navy and Marine Corps family, from the recruit reporting on day one of basic training to the retiree who served proudly for thirty years, and everyone in between, including their family members.

To provide the best possible care for this diverse population of patients, we offer a variety of primary care managers (PCM) and specialists who can take care of just about any illness or disease. Among these highly skilled medical professionals is one particular group who can handle just about anything that comes their way – our family medicine providers.

These specially trained care givers form an integral part of the hospital's Medical Home Port team and the primary care staff at the branch health clinics at MCAS Beaufort and MCRD Parris Island and they work hard every day to keep our patients healthy. Our family medicine team includes physicians, nurse practitioners, and physician assistants who are comprised of both civilian and active duty staff.

What exactly is a “family medicine” provider? According to Cmdr. Gregory Thier, director for medical services and a family medicine physician, the name says it all.

“One of the main goals of family medicine is to treat the patient both as an individual and as part of a larger family. You could say we focus on the family as a patient in and of itself. Family dynamics play a large role in how healthy our patients are, or can become. Without recognizing the tremendous impact a family has on an individual, we could provide care that would potentially not be heeded, used, or simply misunderstood, and we are trained to take all of this into account when we prescribe certain treatments. This



*Lt. Cmdr. Melissa Troncoso conducts an examination. Troncoso is a family practice nurse practitioner as well as the department head for Branch Health Clinic MCAS Beaufort.*

***“One of the main goals of family medicine is to treat the patient both as an individual and as part of a larger family. You could say we focus on the family as a patient in and of itself....” — Cmdr. Gregory Thier, director of medical services and family medicine physician***

somewhat holistic approach serves us to better understand our patients and their needs beyond the exam room.”

Treating an entire family as opposed to an individual patient also provides special insight into family dynamics that other specialties may not have, says Peter Munson, doctor of osteopathic medicine (D.O.) and one of Medical Home's family medicine physicians. “This can give us a slight edge into some patients with complex medical, social, and psychological conditions.”

According to Thier, the motto of family medicine is “cradle to grave.” This means that family medicine providers are trained to care for patients of all ages, in all stages of life. A family medicine provider can care for infants and children, performing routine well child checks and managing childhood illnesses. They can also care for a more seasoned generation, screening for and managing a variety of medical conditions that are associated with aging patients.

*(Continued on page 8)*

# Family Medicine



*Lt. Cmdr. Laura Bradford, a family nurse practitioner, works in Medical Home Port providing primary care to many of Naval Hospital Beaufort's beneficiaries.*

“By putting the focus on prevention and screening for disease, if one is found, we then help the patient prevent it from worsening through lifestyle changes and, if needed, medications.”

Family medicine providers are also extremely versatile. Thanks to their comprehensive cradle to grave training, family medicine providers can work in just about any clinical environment, anywhere in the world.

“We have the unique capability of caring for patients in the hospital setting, in stand-alone outpatient clinics, and with deployed units, both on land and at sea,” said Capt. Melanie Merrick, Naval Hospital Beaufort’s executive officer and a family medicine physician. “With our training in pediatrics and adult medicine, as well as obstetrics, we can also stand the primary watch for many specialties, especially when serving overseas.”

“We relish the continuity that comes in being able to see all members of the family no matter what their age or particular medical issue. The ultimate goal is to keep our patients as healthy as possible and improve their quality of life,” said Thier.

In fact, one of the main goals of Naval Hospital Beaufort’s family medicine team is prevention – keeping patients from developing chronic, debilitating medical conditions so that they enjoy longer, healthier lives.

“The focus of family medicine is really on prevention and wellness and treating the whole person and family, not just a specific body system,” says Lt. Cmdr Laura Bradford, a family nurse practitioner, who works in Medical Home.

***..one of the goals of Naval Hospital Beaufort’s family medicine team is prevention – keeping patients from developing chronic, debilitating medical conditions so that they enjoy longer, healthier lives.***



*NORFOLK (Sept. 2, 2011) Family and friends look on as the Military Sealift Command hospital ship USNS Comfort (T-AH-20) arrives at Naval Station Norfolk. Comfort deployed as the primary platform for Continuing Promise 2011, a five-month humanitarian assistance mission to nine countries in Central and South America and the Caribbean. (U.S. Navy photo by Mass Communication Specialist 2nd Class Rafael Martiel/Released)*

This valuable skill set makes family medicine providers highly valuable to the military because they are worldwide, multi-site deployable, embodying the Navy Medicine motto, “world class care, anytime, anywhere.”

In fact, members of Naval Hospital Beaufort’s active duty staff have deployed aboard the USNS Comfort, delivering humanitarian care and disaster relief to patients of all ages on ship and shore in Central and South America and the Caribbean. Additionally, members of our family medicine team have served as Individual

*(Continued on page 9)*

# Family Medicine

(Continued from page 8)

Augmentees (IA) deploying to places that include Iraq, Afghanistan, and Djibouti, delivering expert medical care to keep deployed Sailors and Marines healthy and medi-

***Essentially, family medicine providers are “jacks of all trades” whose training, skills, and broad knowledge base are invaluable to both Navy Medicine and those patients who choose them as their PCM.***

cally ready. These experiences equip Navy Medicine providers with a level of skill and knowledge that many providers working in the civilian sector simply don't have the opportunity to get.

Essentially, family medicine providers are “jacks of all trades” whose training, skills, and broad knowledge base are invaluable to both Navy Medicine and those patients who choose them as their PCM.

A good reason to choose a family medicine provider as a PCM, according to Thier, is their ability to provide continuity of care throughout a patient's entire lifespan and that they can care for everyone in the family. Another reason is their wide range of skills that provide one-stop shopping for patients.

“Some family medicine providers are trained to do procedures such as vasectomies, colposcopies, minor skin biopsies and more,” said Thier. “By having your PCM per-

form these procedures, it's another great way to improve continuity with one provider.”

But, one of the best things about family medicine providers, says Thier, is their innate kindness and easy-going natures. Not only does this characteristic help these providers develop strong and lasting bonds with their patients, but it's also one of the hallmarks of family medicine, which makes it truly unique among the many medical specialties.



*Cmdr. Gregory Thier, far right, Naval Hospital Beaufort's director of medical services and a family medicine physician, prepares for a mass casualty drill while deployed to EMF Djibouti.*

## Command in the Community: Holiday Cheer



**S**ome of Santa's elves wear blue camouflage. In the week leading up to Christmas, HM1 Donna Patrick and over 30 Sailors volunteered to help make the season a little brighter for local children in need.

For the past four years, Patrick has helped coordinate the donation of hundreds of gifts to be given to children, military and civilian, throughout the Beaufort community. Beginning shortly after Thanksgiving, Patrick starts shopping and right before Christmas, she seeks volunteers to help wrap gifts and stuff stockings. This year, the Sailors who volunteered helped wrap over 500 gifts.



*HM1 Donna Patrick prepares a stocking that will be delivered along with gifts to a local child.*

Thanks to Patrick's efforts, nearly 80 children, from ages 3 months to 16 years, will receive 4-8 gifts each and a stocking filled with goodies.

# Department in the Spotlight: Medical Home Port



*NHB Medical Home Staff*

**M**edical Home Port is the clinic at Naval Hospital Beaufort that's responsible for providing primary care for many of the hospital's beneficiaries. Primary care specialties within the clinic include family medicine, pediatrics, and internal medicine.

Medical Home Port which was implemented in January 2011 at the naval hospi-

tal, is a Navy Bureau of Medicine and Surgery initiative to best meet the needs of our unique beneficiaries. Medical Home Port applies a team concept to provide integrated, all-inclusive care that focuses on readiness, prevention, wellness, and disease management.

In addition to primary care providers, Naval Hospital Beaufort's Medical Home has a nutritionist and internal behavioral health consultant on staff. The nutritionist can work hand-in-hand with primary care managers to help patients achieve healthy outcomes by managing weight and various diseases with proper nutrition.

The internal behavioral health consultant will also work with primary care providers to offer behavioral management solutions to many symptoms often associated with chronic diseases as well as emotional and

*By Regena Kowitz*

behavioral difficulties including stress, anxiety, and family challenges. Both of these specialists provide supplemental services that enhance the care delivered in Medical Home.

In addition to our providers and specialists, the Medical Home team includes dedicated nurses, Hospital Corpsman, schedulers, and front desk staff who help ensure that Medical Home runs smoothly and patients receive quality care.

## By the Numbers

- **Total Patient Visits—17,077**

*Totals are for calendar year 2011*

## Ombudsman's Corner: Military Spouse Career & Education

The holidays are fast approaching, and shortly after that, a brand new year! What better time to make a resolution to better your education and/or employment? Let's face it, life as a military family has both rewards and challenges, but one big challenge is for the military spouse in their quest to find employment at a new duty station. Thankfully, there are many resources available to service members and their families for both education and employment opportunities.

**The Military Spouse Career Advancement Accounts (MyCAA) Program** is an employment assistance program that provides up to \$4,000 of financial assistance to eligible military spouses who are pursuing a license, certification or Associate's degree in a portable career field and occupation. <https://aiportal.acc.af.mil/mycaa/Default.aspx>

**Military Spouse Employment Partnership (MSEP)** employers are moving out smartly on their commitment to recruit, hire, promote and retain military spouses within their organization. For each of them, the definition of "portable careers" will vary depending on the nature of their business. But what they all have in common is that the occupations they identify as "portable" will lead to employment continuity for spouses as they move to new duty stations throughout their service member's career. Current MSEP partners have pledged to hire scores of military spouses in the days and weeks ahead with others offering to host job fairs, special spouse events, training and mentoring programs which

help spouses connect to their employer networks in hopes of bringing spouses into their "corporate family" and industry long-term. MSEP partners aren't just offering traditional jobs for women, or jobs at entry level. The jobs they want military spouses to fill are amazing with tremendous growth and portable career potential. <https://msepjobs.militaryonesource.mil>

**SECO Career Center (SECO)**'s primary purpose is guiding military spouses as they identify their employment interests and options and their own strengths, skills, and goals. SECO consultants work with military spouses to obtain the education and opportunities for finding a portable career. These bachelor's and master's-level consultants assist spouses with all aspects of career development, including career exploration, education and training, employment readiness, and career connections. For more information, visit the SECO Career Center at Military OneSource or call 1-800-342-9647.

In addition to sites mentioned, visit the Military Spouse Career Center at <http://www.military.com/spouse/job-search>, MCCA-SC at <http://www.mcca-sc.com/support/jobs.asp>, and USA Jobs at <https://www.usajobs.gov/>. With all of these resources available, furthering your education has never been easier!

**Contact information:** For anyone requiring assistance from the command Ombudsman, please call 228-5631 (office) or 263-3284 (cell).

# Sailor in the Spotlight: HN Christina Heid

**Name:** HN Christina M. Heid

**Hometown:** Arlington, TX

**Years of Naval Service:** 1 year, 7 months.

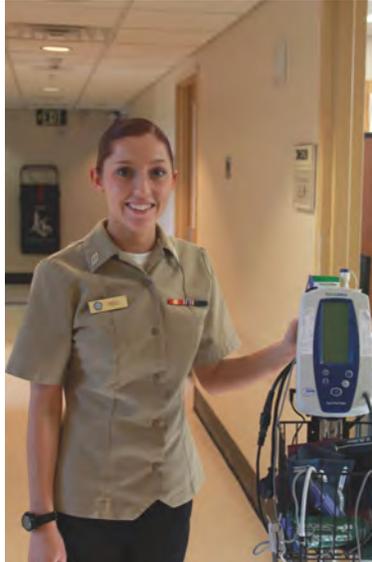
**Time onboard:** 1 year, 1 month

**Work Center:** Medical Home

**What do you enjoy most about your job?** Number one, I enjoy the fact that I have an opportunity here to learn and take care of other people. I also enjoy being able to impact a patient's appointment so that they can look back on their visit as an enjoyable experience and possibly feel that I had a role in that.

**What do you do in your off duty time?** Watch seasons of the TV series "House," work out, and hang out with friends.

**Favorite movie:** "Tommy Boy"



**Favorite food:** Mom's meatloaf and mashed potatoes.

**Share something interesting about yourself:** Although I am from Texas, my favorite college team is Oklahoma State Cowboys; still proud of my Dallas Cowboys though!

**What HN Heid's Supervisor has to say:** HN Heid is by far the best corpsman I've ever worked with in my 3.5 years here. She is thorough, efficient, hard-working and dedicated. She takes great initiative, and is an excellent leader. I never have to worry about tasks that I assign to her. She has very high caliber work ethic, and I trust her implicitly. She

essentially single-handedly restored the pap/cervical cancer screening program for all of Medical Home, and designed a new system of notification, tracking, scheduling and assisting. She has captured many "lost" patients, and helps us meet our goal of high-quality care. She is caring and considerate with patients as well. She is a brilliant sailor! — Lt. Pamela Edwards

# Civilian in the Spotlight: Ms. Geraldine Lange, RN

**Name:** Geraldine Ann Lange (Gerry)

**Hometown:** Roxborough, Philadelphia, PA.

**Time onboard:** 4 years, 9 months

**Work center:** Medical Home, Team 1

**What do you enjoy most about your job?** I love people!

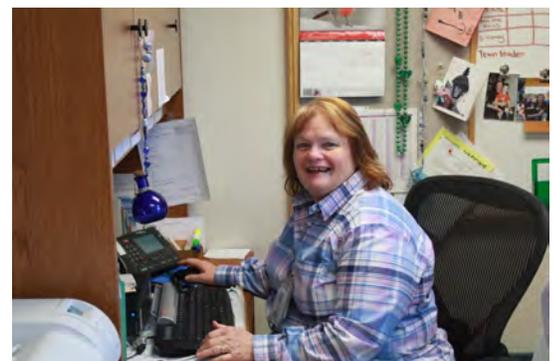
**What do you do in your off duty time?** Serve the Lord, travel, read, and sew.

**Favorite movie:** "Eat, Pray, Love"

**Favorite food:** Chinese

**Share something interesting about yourself:** I have been in nursing for 41 years; 20 of which were spent in the Navy Nurse Corps, 16 years as a civilian nurse, and these last 5 years as a civil service nurse. Then, on Mar. 31, 2013, I will retire and go on the mission field. I look forward to this next chapter & adventure.

**What Ms. Lange's Supervisor has to say:** Geraldine Lange has been a nurse in the Medical Home Port for the last five years, working with the providers to deliver excellent medical care. She is dedicated to her job, her physicians, her team, and her patients. She is the epitome of "Always Caring," going the extra distance to ensure her patients are taken care of and given excellent customer service. Her years of experience as a nurse and her additional experience as a Navy Nurse have benefited everyone she comes in contact with. She is always positive, upbeat and ready to lend a helping hand to anyone who needs it. — Lt. Cmdr. Mark Watson



# Health Promotions & Wellness: Healthy Weight & the Holidays

By Ivette Moore

The holiday season brings joy and warmth to people around the world. It is a time for us to gather with family and friends to celebrate, and with celebration comes food. Cookies, candy, eggnog and other treats can be very tempting and make it easy to over-indulge. According to the National Institutes of Health, in the U.S., the 6 weeks between Thanksgiving and New Year's Day cause, on average, 0.8-1.4 pounds of weight gain (five times more in those who are overweight or obese), accounting for 51% of the yearly weight gain in the typical American.

Holiday pounds can pile up quickly over the years, and the consequences of poor food choices can last a lifetime. Here are some healthful tips to avoid holiday weight gain and keep your family healthy during the New Year:

- Make sure you keep you and your family moving. Find fun ways to stay active, such as dancing to your favorite holiday music. Be active for at least 2½ hours a week. Help kids and teens be active for at least 1 hour a day.
- Daily walks or a bike ride can help your family to stay healthy and reduce stress. Try to fit a workout before the party or during the party go for a walk with other guests or toss a ball outside with the children. Wii, Xbox and Play Station can offer fun indoor exercises for all ages. Make a promise to continue exercising in the New Year.
- Fruits and vegetables are part of a well-balanced and healthy eating plan. Choose fresh fruit as a festive and sweet substitute for candy. Select just one or two of your favorites from the host of tempting foods.
- Learning how to eat healthy during the holidays, learn how to prepared healthy meals and try new delicious



*Health Promotions display from the 2012 Naval Hospital Beaufort Health & Wellness Fair. The hospital hosts an annual fair in September to highlight resources and provide information on how patients and staff can live a healthier lifestyle.*

healthy recipes.

- If you are hosting the party you are in control of the ingredients that are added to the favorite holiday recipes – but as a guest it is not easy. Make sure you bring a low-fat dish, most hosts will welcome an additional dish.
- Avoid or reduce stress caused by holidays, vacations, or special events. Plan daily times to relax. Practice yoga, meditation and get enough sleep.

• Trying to keep your family healthy can be very challenging so please plan ahead. With balance and moderation, you can enjoy the holidays the healthy way!

## January is Healthy Weight Month



NHB offers a “Healthy Weight Class” presented by Mrs. Frankie Cox, registered dietitian. The class begins Jan. 9, 2013, 1130-1230, in the 4<sup>th</sup> floor conference room.

This class is designed to help you make healthier life-style choices, adopt healthier eating habits and incorporate good nutrition into your lifestyle to help you manage your weight.

Space is limited, so please register no later than Jan. 7, 2013, at 228-5486/5344.

## February is Healthy Heart Month

Be kind to your heart and your waistline with a variety of heart healthy desserts. The NHB Health Promotions Department is hosting a “Heart Healthy Dessert” contest for Valentine’s Day. The contest will take place Feb. 14, 2013, 1130-1300, in the NHB Fitness Center. For more details, call 228-5486/5344.



# Safety: Family Fire Safety

By Sue Hollingsworth

**W**e participate in fire drills at work to prepare and practice for a real fire emergency, but how many of us apply the same principles at home? Why not? This is especially important during the colder months when the risk of fire emergencies increases (fireplaces, space heaters, holiday decorations, malfunctioning heating units, etc.).

## *When a fire strikes is not the time to figure out your escape plan*

Working smoke alarms provide the minutes needed to escape a fire safely. Home fire escape planning and practice ensures that everyone knows how to use those minutes effectively. The following information from the National Fire Protection Association provides a wealth of information to keep your family or roommates safe. Practice with your entire household. Children need to know and practice your plan as well!

A home escape plan includes:

- Two exits from every room in the home (usually a door and a window). If you have multiple floors – develop an escape route to include a rescue ladder or rope.
- Properly installed, working smoke alarms throughout the home – tested monthly!
- A meeting place outside in front of the home where everyone will meet immediately upon exiting. Select a location easy for children to remember.
- Knowing the local emergency phone number (911 works throughout Beaufort County). In the event of a fire — call from the closest available phone **OUTSIDE** the structure, like a neighbor's home or cell phone.

All exits should be unblocked and open easily. Security bars on windows should have quick-release devices, which unlock the bars from inside the home, and allow access to the window.

Home fire escape plans should be practiced regularly, at least twice a year – more often if you have small children. Get out and stay out! Never go back in a burning building

to save someone or retrieve other items. If a person or pet is trapped inside, alert the fire department immediately.

Fire spreads rapidly. In some instances, you and your household may have as little as **two minutes** from the time the smoke alarm sounds to escape safely.

According to an NFPA survey:

- 1 out of every 3 American households (32%) have actually developed and practiced a home fire escape plan.
- 1/3 thought they would have at least six minutes before a fire in their home would become life-threatening. In reality, the time available is often less.
- Only 8% of U.S. households said their first thought on hearing a smoke alarm would be to get out.

**Home fire escape planning and drills are basic but essential elements of fire safety.**



# DAPA Debrief: How Alcohol Affects Families

By HMC Amanda Hughes

As the alcoholic's drinking increases and adopts a primary place in his/her world, it assumes membership in everyone's life. Family members and loved ones are forced to ignore their own needs, in order to facilitate the functioning of the household.

In addition, alcoholism brings its own chaos into the family system. For instance, a loved one cannot easily predict the behaviors of the problem drinker. To compensate for this puzzle, the family member adopts a rigid, two dimensional role that enables the family to continue functioning on some level. The following are roles that are typical in alcoholic families:

- **The Caretaker:** Usually a parent accepts this role. He/she tends to everyone's needs in the family. A caretaker loses his/her sense of self in tasks of a domestic nature. The caretaker's purpose is to maintain appropriate appearances to the outside world. The caretaker never takes the time to assess his/her own needs and feelings. Others cannot bond with the caretaker due to the bustle of activity.
- **The Hero:** Alcohol bestows this role onto the individual whose accomplishments compensate for the alcoholic's behavior. This could be a child who excels in academics, athletics, music or theatre. His/her deeds assure the family that their definition is more than alcohol. The hero role raises the esteem of the family, but the hero does not receive attention for anything besides an achievement; therefore, inner needs are not met.
- **The Scapegoat:** The family assigns all ills to the person who harbors this role. For example, they may tell this person that, "Mom would not drink so much if (scapegoat's name) were not always in trouble." The scapegoat puts the focus away from alcohol thereby allowing the alcoholic to continue drinking. This role may seem strange in purpose. However, if there were no scapegoat, all other roles would dismantle.
- **The Mascot/Cheerleader:** Often this child is named a class clown in school. The individual is the most popular in the family. Purpose: To provide levity to the family. Negative Consequence: The laughter prevents healing rather than produces it. In addition, the mascot frequently demonstrates poor timing for the comic relief.

The examples listed above are not exhaustive but help to demonstrate the amount of energy that the loved one uses to placate alcoholic reactions and stress.

In conclusion, to prevent alcoholism from usurping a loved one and his/her family, education can offer further help. Refer a loved one to Al-Anon, a Twelve Step program for those who have a relationship with someone who has a drinking problem. Additionally, a visit to the local book store in the Self-Help section can provide further education on the way alcoholism affects loved ones. No matter what, let the person know that he/she matters.



*For information on the Navy's drug and alcohol policies and programs, please contact your Command DAPA HMI Carlos Aguilar at (843)228-5499.*

# Security Brief: Traffic Safety & Base Parking

By AO1 (AW) Anthony Lupinetti



Also, if the area in which you want to park is not a designated and marked parking spot, do not park there. As a reminder, parking on any grassy areas is prohibited without prior approval from the Commanding Officer.

***Patient parking is exactly that, patient parking. If you are staff and not a patient, your vehicle belongs in staff parking.***

In the recent months there has been a dramatic increase in the average amount of traffic accidents on base. The majority of these accidents have happened in the parking lots, and they can easily be avoided if we all slow down and pay close attention to our surroundings while operating a motor vehicle.

For those who are unfamiliar, here is a reminder about the traffic laws and base policies for Naval Hospital Beaufort:

- The base speed limit is 20 mph and 15 mph in the housing area.
- The use of cell phones is strictly prohibited unless using a hands free device.
- A common traffic violation on base is the failure to make complete stops at stop signs – please come to a full and complete stop before proceeding. This is extremely important not just for you and the other people on the road but for the safety of pedestrians and people that exercise on base as well.

Base parking is also a common problem area. Patient parking is exactly that, ***patient parking***. If you are staff and not a patient, your vehicle belongs in staff parking. If you or your dependent need to use patient parking for an appointment, stop at the front gate and security personnel will issue a patient parking pass for the vehicle.

Another common parking violation happens when people who do not have handicapped plates or a placard park in the handicapped parking spaces. If you do not have a handicap license plate but you do have a valid handicap parking pass, please ensure it is properly displayed on the mirror or dash board.

Also, the parking area in front of the Quarterdeck is for the command suite and VIP visitors. It is not for quick trips to the pharmacy or any other reason for coming to the hospital.

One last note: the weather is getting colder which means a higher probability of ice accumulating on the roads, sidewalks, and stairs. Please elevate your caution, lower your speed, and watch your step during these cold winter months.



# Staff Education and Training



## Emergency Preparedness Response Course (EPRC/CBRNE):

NAVMED EAST requires that all personnel with a CAC card are required to complete the mandatory EPRC course (CBRNE course) every 3 years. There are three different versions:

- J3O P-US261-HB Basic
  - Housekeepers, office workers, facility workers, non-medical, non-security personnel
- J3O P-US260 Operator
  - First responders/receivers; general Corpsmen, non-clinicians, clinical support staff, security personnel
- J3O P-US258 Clinician
  - Healthcare providers; doctors, dentists, nurses, physician assistants, nurse anesthetologists, Independent Duty Corpsmen

Once the course is completed, provide copy of certificate of completion to Mr. Marcell or HM3 Roe in the Emergency Management Office.

Go to: <http://jko.jten.mil/>



PS3 Lauren Torres-Pena and Lt. Amy Clark practice life-saving measures on a simulated patient during a recent decontamination drill at Naval Hospital Beaufort.

## BLS Classes for 2013

	<u>Instructor *</u>	<u>Provider</u>	<u>Renewal</u>
Jan	14	15	16
Feb	11	12	13
Mar	11	12	13
Apr	15	16	17
May	13	14	15
Jun	10	11	12
Jul	15	16	17
Aug	12	13	14
Sep	16	17	18

## ACLS Instructor Classes for 2013

- Feb 20
- May 29
- Aug 28

\* Required to teach an ACLS class the following day:

- Feb 21-22
- May 30-31
- Aug 29-30

## ACLS Refresher Classes for 2013

- Mar 14
- Jun 13
- Sep 19

## Sexual Assault Prevention and Response

This instructor-led training/discussion sessions will be facilitated to completely deliver this training by Mar. 31, 2013 to all E6 and below as directed by NAVAD-MIN 333/12. Training dates to be determined.

# New Service: Internal Behavioral Health Consultant



**A**t Naval Hospital Beaufort, our Medical Home Port offers Internal Behavioral Health Consultation Services (IBHC). Our Behavioral Health Consultant has received special training in the behavioral management of health problems. They can provide assistance

when habits, behaviors, stress, worry, or emotional concerns about physical or other life problems interfere with daily life and/or overall health.

The IBHC works with your Primary Care Manager (PCM) to evaluate the mind-body-behavior connection and provide brief, solution-focused interventions. Together, the IBHC and your PCM can consider all of the physical, behavioral, and emotional aspects of your health concern and help you determine a course of action that will work best for you.

## What kinds of health concerns does a IBHC see?

The IBHC can help you reduce symptoms associated with various chronic medical conditions or help you cope better with specific conditions including:

- Headaches
- Sleep
- High Blood Pressure
- Asthma
- Diabetes
- Obesity
- Chronic Pain
- Irritable Bowel Syndrome

The IBHC can also help you and your PCM develop skills to effectively manage emotional or behavioral difficulties such as:

- Depression
- Anxiety
- Stress
- Anger
- Family Problems
- Bereavement
- Relationship Problems

The IBHC can help you and your PCM develop behavioral change plans for weight loss, exercise, or other lifestyle modifications.

## Who is eligible to receive these services?

The service is available to all Medical Home Port patients as a part of good overall health care.

## What should I expect when I see the IBHC?

You can expect the IBHC to ask you specific questions about your physical symptoms, any emotional concerns you are experiencing, your behaviors, and how all of these might be related.

Appointments are typically no longer than 30 minutes, allowing the IBHC to provide brief solution-focused assessment and treatment. You can also expect to be seen in Medical Home and for the IBHC to have a close working relationship with your PCM.

**Remember:** You and your PCM remain in charge of your health care – the IBHC’s primary job is to help you and your PCM develop and implement the best integrated health care plan for YOU!

## How is this service different from Mental Health?

The services provided by the IBHC are simply another part of your overall health care and are not specialty mental health care. Documentation of your assessment and recommendations from the IBHC will be written in your medical record. A separate mental health record will not be kept when you see the IBHC.



Communications with your IBHC may not be entirely confidential. Your IBHC will make every effort to protect your privacy. But, like *all* providers, they *must* report information from any active duty patient that could have a negative impact on their mission.

The IBHC will not provide traditional psychotherapy. If you request, or the IBHC thinks you would benefit from specialty mental health services, the IBHC will recommend that you and your PCM consider specialty mental health services.

If you are interested in scheduling an appointment with an IBHC, please discuss this with your PCM.

# Historic Highlights: Family History

*By HMC Amanda Hughes, Command Historian*

**G**enealogy is the study of families and the tracing of their lineages and history. Genealogists use oral traditions, historical records, genetic analysis, and other records to obtain information about a family and to demonstrate the kinship and pedigrees of its members.

The pursuit of family history tends to be shaped by several motivations, including the desire to carve out a place for one's family in the larger historical picture, a sense of responsibility to preserve the past for future generations, and a sense of self-satisfaction in accurate storytelling.

Historically, in Western societies the focus of genealogy was on the kinship and descent of rulers and nobles, often arguing or demonstrating the legitimacy of claims to wealth and power. The term often overlapped with heraldry, in which the ancestry of royalty was reflected in their coats of arms.

Genealogical research in the United States was first systematized in the early 19th century, tracing one's genealogy was seen as an attempt by colonists to secure a measure of social standing within the British Empire, an aim that was counter to the new republic's egalitarian, future-oriented ethos. As Fourth of July celebrations commemorating the Founding Fathers and the heroes of the Revolutionary War became increasingly popular, however, the pursuit of 'antiquarianism,' which focused on local history, became acceptable as a way to honor the achievements of early Americans. In the 1820s, production of genealogical and antiquarian tracts slowly gained a devoted audience among the American people.

Genealogists use a wide variety of records in their research. To effectively conduct genealogical research, it is important to understand how the records were created, what information is included in them, and how and where to access them. Records that are used in genealogy research include birth and death records, census data, marriage certificates, land ownership deeds, wills, passenger ship logs, newspaper articles, and tombstone records.

Genealogists must consider the effects that copying and compiling errors may have had on the information in a source. For this reason, sources are generally categorized in two categories: an original source, one that is not



based on another source and a derivative source, information taken from another source. This distinction is important because each time a source is copied, information about the record may be lost and errors may result from the copyist misreading, mistyping, or miswriting the information. Genealogists should consider the number of times information has been copied and the types of derivation a piece of information has undergone. The types of derivatives include: photocopies, transcriptions, abstracts, translations, extractions, and compilations.

The benefits of family history projects may vary according to the people who pursue the hobby. Some schools engage students in such projects as a means to reinforce lessons regarding immigration and the history of the nation. Other benefits include family medical histories with families with serious medical conditions that are hereditary. Whatever the reason someone chooses to research their family tree, it can be an exciting and rewarding experience.

# NHB on the Move



## Hails

*Sept., Oct., Nov.*

HM2 Cody Beers  
 LT Era Burrows  
 HM3 John Bitela  
 CAPT Thomas Canaan  
 HM2 Dain Carmen  
 LTJG Michael Carpenter  
 HMC Clifton Casimier  
 HM3 Daniel Dor  
 AT1 Michael Eure  
 CS2 Latoya Farrish  
 HR Allan Flores  
 LCDR Jay Friedman  
 HM2 Timethian Grier  
 HN Joseph Hansen  
 CMCMDM Leroy Hatcher  
 LCDR Kellye Hoffman  
 LT Timothy Howarth  
 HA David Hunter  
 HM1 Allen Ison  
 HM1 Samuel Johnson  
 CAPT Lena Jones  
 HA Mark Jordan  
 HA Courtney Kozloski  
 LTJG Carolyn Krech  
 LCDR Trent Marcus  
 HM3 Jason McDaniel  
 HM3 Ryan Meaux  
 CDR Sandra Middleton

HMCS Shannon Murray  
 LTJG Tanikka Nix  
 LT Jason Notario  
 HN John Ohimei  
 LTJG Christie Ouellette  
 HN Thomas Poore  
 LCDR Timothy Powell  
 LCDR Browyn Richards  
 HA Ryan Rubright  
 HN Shyler Salovinkhazem  
 HA Joseph Salvatore  
 HA Brandon Shaffer  
 HN Dedrick Simmons  
 LT Aaron Stoll  
 HN Shayna Sutton  
 LT Melissa Thomas  
 HA Rosco Thurman  
 HN Matthew Tomasello  
 HR James Waldroup  
 HM1 Anna Wilson  
 HN Jillian Zemel

## Farewells

*Sept., Oct., Nov.*

HM3 Julius Alexander  
 MA3 Billy Atwater  
 CAPT Richard Bex  
 Ms. Sarah Brady  
 MASN Stephanie Broussard  
 HN Jesse Burdine

HM3 Rudy Caballeros  
 LT Jennifer Dolder  
 LT Jennifer Epstein  
 HM3 Heather Graham  
 HN Jason Hendrix  
 CAPT Joseph Karitis  
 LT Michelle Kelly  
 HN Samantha Kessler  
 LT Joseph LaBarbera  
 HM2 Mario Lara  
 PS2 Gregory Magness  
 LCDR Gerald Maxwell  
 LCDR Felecia McCray  
 CAPT David Metzler  
 HM3 Terrence Moses  
 AME3 Danyle Murray  
 HM1 Vincent Nesbitt  
 HN Traves Niles  
 LCDR Brian O'Neil  
 HN Aminatu Paseda  
 HM3 George Potts  
 HN Juan Ramirezcalala  
 HM2 Nicholas Smith  
 LS2 Alvin Williams  
 HM1 Bryan Wolfinger  
 HN Zachary Wrightsman

## Homecomings

*Sept., Oct., Nov.*

HMC Kenneth Bush  
 HN Andrew Closson

LCDR Michael Connor  
 HM3 Matthew Dehaven  
 LT Brenda Doss  
 HM1 Andrew Foster  
 HM2 Randy Fuhrman  
 LTJG Patrick Hickey  
 HM1 Chad Keast  
 HM2 Christopher Lanier  
 LTJG Michelle Papineau  
 HMC Gerald Ramones

## Deployments

*Dec., Jan., Feb.*

HN Cotton  
 LTJG Kathleen Dewolf  
 HN Keith Douglas  
 MA2 Markus Guinn  
 HM1 Windy Green  
 HM2 Precious Herndon  
 HM3 Kirby Reynolds  
 LTJG Philip Richmann  
 HM3 Justin Simoneaux  
 HM2 Eytayo Sobo

# Sailors of the Quarter



Senior Sailor of the Quarter  
 HM1 Walters



Junior Sailor of the Quarter  
 HM2 Herndon



Blue Jacket of the Quarter  
 HN Carlos

# Civilians of the Quarter



Senior Civilian  
 Ms. Cynthia Davis



Civilian  
 Ms. Dawn Devito



Contractor  
 Ms. Carrie Hewette

# Educational & Developmental Intervention Services

*By Regena Kowitz and LeeAnn Dodge*

**M**any Naval Hospital Beaufort beneficiaries don't know about the Educational and Developmental Intervention Services (EDIS) program, which is available for eligible families living in the Tri-Command. EDIS is a multidisciplinary team consisting of a speech language pathologist, an occupational therapist, an early childhood special educator, and a nurse.



The services offered by EDIS include occupational therapy, speech therapy, and special instruction. These services are available for children up to their 3<sup>rd</sup> birthday, after which services are provided through local schools. Children must also live in military housing to be eligible, but the EDIS team can help families living off-base find a local early intervention program.

When working with children and their families, the team emphasizes a transdisciplinary model. For example, the occupational therapist may be in a home working with a child who is on the program for feeding and sensory issues but during each session she may also work on the child's language skill development. The team works with the whole child and family, not just one area of development.

“Children learn best in their natural environments and through incidental teaching throughout their daily routines and this is what makes interacting with the whole family so important,” said LeeAnn Dodge, the EDIS program manager and a registered nurse. “We encourage our families along the way and we're there to be their coach, but they are with their child the most. The one or two days a week we come is not going to make the difference without support from the family. It is what they are doing when we are not there that makes the difference. It is what they are doing during meal time, bath time, and play time to promote the child's development that is ultimately going to improve their child's development.”

Dodge also encourages families to participate in the many activities offered throughout the Tri-Command that provide children opportunities to interact with their peers. The Exceptional Family Member Program offers “Sensory Story Time” and a movement class and the MCCS New Parent Support Program offers play groups each week. Peers serve as a great role model for learning, adds Dodge.

Children typically access EDIS services by referral from their primary care managers (PCM) who are an integral part of the early intervention team. During well-child visits, the PCM conducts developmental screenings, which are helpful in detecting infants and toddlers who may be exhibiting developmental delays. At Naval Hospital Beaufort, EDIS is part of the Medical Home Port Team and, with permission from the families, they work closely with providers to monitor progress. If a child is eligible for services and sees a network PCM (a provider not at the naval hospital), the EDIS teams will request consent from the family to release information to their PCM to facilitate progress updates.

Another option for seeking EDIS services is a self-referral, which is done when parents contact the EDIS team themselves.

“We also hear from parents who are concerned about their child's development when they compare their child to another child who may be close to the same age,” said Dodge. “We also have some families who contact EDIS when they become increasingly concerned about their child's behavior and increased temper tantrums, which we often see in children with language delays. If they are unable to get their wants and needs met, children become frustrated and behaviors can escalate.”

According to Dodge, there are several things parents can do to proactively support their child's developments including making sure to bring their child in for well-child visits, listening to their PCM, and asking questions about typical developmental milestones.

“We encourage parents not to compare their child to other children because all children develop at different rates,” said Dodge. “But parents always know their child best and if there is ever anything that has them worried it is better to be safe than sorry. That is what we are here for. I would rather have a parent call than worry about their child's development.”

Once a child is screened, evaluated and determined eligible, the EDIS services are delivered based on the needs of the child and the family. In addition to having children screened, Dodge says one of the best things a parent can do is to get out of the house with their children and give them opportunities to interact with the world around them.

“The Tri-Command has so many activities that are free for families with young children and one of the best thing parents can do for their young children is provide them opportunities to socially interact with their peers.”

For more information, contact the EDIS staff at 228-5276.