

SCUTTLEBUTT

VOLUME 2 ISSUE 9

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Training War Fighters To Help Others Heal REACH Program Offers New Beginnings

Story page 4

INSIDE: Lobby renovation complete - Partnering with a former NFL star

Hospital Corpsman 2nd Class Edwin Manansala, Jr., radiology technologist and REACH program mentor (left) and Hospital Corpsman 2nd Class Anthony Boswell, advanced radiology technologist (right back) teach REACH program student Lance Cpl. Brandon Pendergrass, Marine Corps infantryman how to properly X-Ray a patient. U.S. Navy photo by Hospitalman Lauren Robshaw

Seize Opportunities for Your Success



Capt. David A. Lane
Medical Corps
Commanding Officer

I've been looking forward to this month's *Scuttlebutt* article almost since the day my first writing went to press for the July issue. In that introductory piece, you may recall I outlined the four central pillars of my command philosophy – (1) delivering quality health care defines who we are, (2) seize opportunities to ensure current and future success, (3) embrace a “Ship, Shipmate, Self” culture, and (4) excel in taking care of our people in the spirit of SECNAV’s “21st Century Sailor” initiative. I also said I would expound on

each of these pillars in subsequent issues, and I think it’s important at this early juncture in my tenure as CO that everyone understands what I mean by seizing opportunities to ensure our current and future success.

It didn’t take me long after arriving here to conclude that NHCL feels like it should be a small medical center; however, we are trapped inside a community hospital with respect to our

capacities, capabilities, and even our organizational outlook. By that I mean, we simply don’t have the resources we need to provide the breadth and depth of clinical care we all feel should be providing to our principal beneficiary population, the local active duty personnel and their families, and secondarily to eligible retirees and their families.

For example, our TRICARE Prime enrollment is maxed out, but approximately 50% of the local active duty family population is enrolled to the local civilian network, a network that most experts conclude is already inadequate to meet the health care needs of the Jacksonville community. As a result, both civilian and military families in our area are dissatisfied with the lack of timely access to primary care.

We also refer a substantial amount of specialty care to our overtaxed civilian network, even in our big three clinical areas, obstetrics, orthopedics, and neurosciences (specifically, post-traumatic stress [PTS], traumatic brain injury [TBI], and substance abuse). However, because our local network of specialists has essentially the same clinical capabilities as we do, our patients have to travel one to two hours away to civilian referral centers or four hours away to Naval Medical Center Portsmouth. I suspect you feel as bad as I do about having to make these referrals as often as we do.

SEE OPPORTUNITIES page 8

Dental Corps Celebrates 100 Years



U.S. Navy photo by Hospitalman Matthew Heefner

Naval Hospital Camp Lejeune Dental Corps Sailors celebrate 100 years with a cake-cutting ceremony at the quarterdeck Aug. 23. From the original cadre of 30 assistant dental surgeons, the Dental Corps has grown to more than 2,500 active duty and reserve personnel. The Dental Corps plays a vital role in disease prevention, readiness, disaster response, and humanitarian relief.

scut-tle-butt

n.

1. Slang for spoken communication; through the grapevine
2. Nautical
 - a. A drinking fountain on a ship; gathering place
 - b. A forum for NHCL staff and beneficiaries to get ‘insider info’

Commanding Officer, NHCL

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Lobby Renovated, First Since 1983

By Hospitalman Dillon Winstead
Internal Medicine Department



U.S. Navy photo by Hospitalman Matthew Heefner

Jesse Mitchell (left) information specialist, team members from W.M. Mitchell Construction Company, Ens. Scott Sobieralski, facilities department, Capt. David A. Lane, commanding officer (middle), Cmdr. Jeffrey Jasinski, Naval Facilities and Engineering Command, and Lindsay Hathcock, facilities department cut the ceremonial ribbon at the grand opening of the Naval Hospital Camp Lejeune renovated lobby Aug. 6.

“I think our quarterdeck was emblematic of our hospital when it was new, back in the day. (It was) designed and built to support a smaller population than what we have now, and intended for medical services and practices of the 1980’s. I’m told it had a nice garden area that no longer exists. I’m also told that it was too small, it was dark, and looked rather rustic,” said the Commanding Officer Capt. David Lane, as he spoke at the lobby and quarterdeck area ribbon-cutting ceremony Aug. 6.

Lane continued his speech comparing the old lobby to the newer, modernized quarterdeck “It feels modernized and welcoming and completely in sync with how we practice medicine in 2012 and beyond” he stated.

Beginning on February 6, this project was the first major renovation since the building opened in 1983. In addition to the lobby and quarterdeck, the admissions office was also renovated. Inside the main lobby and quarterdeck area, the main atrium was removed and replaced with a large architecture wall, and the area was expanded as the staircase leading to the second floor was shifted towards the back of the lobby. The tiles were replaced and new furniture was installed; the Corpsman Memorial replica was placed as the centerpiece for the lobby - surrounded by Navy and Marine Corps flags and the National Ensign. The information desk and the two bathrooms above the lobby were included in the renovation project.

The lobby and quarterdeck area potentially hosts more than 200,000 active duty military, retirees and dependents passing through for hospital services. To handle the flow of traffic during the construction period, the hospital temporarily assigned sailors at key locations throughout the hospital to help direct patients and visitors. Signs were also provided, and staff was always on hand proactively asking patients and visitors if they could help them get where they needed to go.

“There’s a very relaxing sense of ease,” said Chief Hospital Corpsman John Stemple, directorate leading chief petty officer of mental health. “It’s a nice area for big events.”

Soyrorian McLendon, medical clerk working in internal medicine compares the new quarterdeck to a solarium, “It’s a place you can read, meditate, and be at peace.”

The commanding officer closed his speech saying, “I think our new quarterdeck is a terrific and visible symbol of the future direction of Naval Hospital Camp Lejeune. And what a magnificent quarterdeck – and future – it is.”

For photos of the renovated lobby, see the command Facebook page.

Can't Make Your Appointment? Cancel It!

Did you know you can help others receive the care they need? When you cannot make an appointment, be sure to call and cancel it so another patient has an opportunity to be seen!

In July, Naval Hospital Camp Lejeune saw 29,018 patients.

There were 2,859 patients who were “No Shows.”

This means 2,859 additional patients could have had an opportunity to be seen if the patient notified the clinic ahead of time.

To make an appointment, or cancel an appointment, call **450-HELP (4357)**.

REINTEGRATE

EDUcate

AND ADVANCE

COMBATANTS IN

HEALTH CARE



Training War Fighters

By Anna Hancock

Deputy Public Affairs Officer

Naval Hospital Camp Lejeune (NHCL) achieved a milestone in a one-of-a-kind initiative that trains war fighters to help others heal. NHCL is the first Navy Medicine command to successfully train and hire a qualified wounded, ill and injured Marine through the Bureau of Medicine and Surgery's (BUMED) REACH program into a part-time health care career Aug. 27. NHCL introduced the program in Nov. 2011.

REACH stands for Reintegrate, Educate and Advance Combatants in Health Care and targets Marines and Sailors with a strong likelihood of receiving a 30 percent or more disability rating based on DoD or VA standards. It is founded on mentorship, and fosters training, education advising, career coaching, and career experience through part-time employment.

NHCL's leadership and staff strongly believe in the program. The hospital's 22 civilian and active duty staff members collectively volunteered more than 10,000 hours mentoring REACH students since the program's implementation in Oct. 2011. NHCL has 24 REACH program participants, or students, currently enrolled, and the numbers are steadily increasing. NHCL offers opportunities to train in almost every area of the hospital.

Ultimately, the program offers wounded, ill, and injured Marines and Sailors, such as Felix Rivera, Navy Medicine's first part-time employee hired after being medically retired from the Marine Corps, a new beginning.

Felix's Story

In March 2009, Gunnery Sgt. Felix Rivera was the platoon sergeant for the Third Battalion, Eighth Marine Division (3/8), stationed in Helmand Province, Afghanistan. While leading a team of Marines at an Entry Control Point (ECP) they established within an Afghan National Police (ANP) compound, a stolen ANP truck approached the checkpoint. A suicide bomber hid explosives inside the truck, and detonated it. The bomb killed one Marine, 12 civilians, six Afghan National Policeman, and injured many.

Rivera, standing only 30 feet away, was thrown several feet by the explosion. His body was wounded from shrapnel and his face was severely injured.

"They medevac'd [medically evacuated] me to Kandahar because the blast took off the side of my nose," explained Rivera. "After a month undergoing surgeries and repairs, I somehow talked my way back to the field. I wanted to leave with my Marines."

Rivera noted how shortly after, he kept dropping the ball on small tasks and forgetting things. Rivera's commanding officer took notice and medically evacuated Rivera to Walter Reed National Military Medical Center at Bethesda. It was here that Rivera was diagnosed with Traumatic Brain Injury (TBI), Post-Traumatic Stress Disorder (PTSD), and a long list of additional medical conditions related to the blast such as insomnia, migraines, nightmares, neck and back injuries. Upon his return to his command in Camp Lejeune, N.C., he was reassigned to the Wounded Warrior Battalion East (WWBnE) awaiting discharge from the service.

"It was a really long process to get discharged – a little over three years," said Rivera. "I was sent back to Bethesda, the veterans

Naval Hospital Camp Lejeune's (NHCL) Psychiatric Technician Esperanza Franco trains Felix Rivera, a student-trainee health technician recently hired by NHCL, on how to proctor and score a frequently used personality test administered to mental health patients. NHCL hired Rivera through the Reintegrate, Educate and Advance Combatants in Health Care (REACH) program – a Navy Medicine-wide mentorship-based program for wounded, ill, or injured Marines or Sailors.

U.S. Navy photo by Anna Hancock

To Help Others Heal

hospital in Tampa...I didn't feel like I was making any improvements. It felt like a dark cloud for a very long time."

Rivera and his wife first learned of the REACH program from a recovery care coordinator at WWBnE.

"My wife told me I was doing it," Rivera said. He continued to explain his fears about transitioning back into civilian life, trying to hold a job with TBI, and possibly going back to school after more than 20 years.

"I guess I didn't have confidence in myself. But then I thought - what do I really have to lose? Going to school? Possibly getting a job at the naval hospital? I chose mental health because I wanted to help other Marines."

REACH - Training War Fighters to Help Others Heal

The program is co-sponsored by BUMED's Total Force and Wounded, Ill and Injured programs, and was launched in May 2011. Within the year, it was implemented within three naval medical centers and one additional naval hospital.

"REACH is designed to provide support to the wounded, ill, and injured service member throughout each step of the member's separation from the military and reintegration into civilian life," said Kevin Kesterson, NHCL's REACH program career coach. "The program is all about gaining skills and gaining experience and going to school. Many view it as their way to help other Marines and Sailors they fought next to."

Each program site has a coordinator, career coach, and mentors who work one-on-one with each Marine or Sailor who is referred to the program. The coach meets with the service member, or REACH program candidate, to discuss the details of the program, and determine if he or she meets the qualifications to enroll. If eligible, the coach works with the candidate's chain of command to officially get the candidate enrolled as a REACH program student.

"I sit down with all my students and talk about what they want to do when they transition out of the military," noted Kesterson. "We make a career plan together, and I work with the department heads and mentors to place the student in an area they can job shadow their mentor for six to 10 hours per week."

The program's unique design also fosters academic learning. The coach assists the REACH program student to choose a school and field of study that would prepare them to qualify for a part-time Federal civil service job in their desired career field while attending school. Since the students are on active duty or recently separated from the military, they are able to fund their education using tuition assistance or their veteran's benefits.

Extending even beyond active duty service, it is designed to continue working with service members after separating from the military, until the member graduates from their chosen academic program. Then assist the former Marine or Sailor with applying for full-time Federal health care careers.

The Program's Success

About a year after entering the REACH program and medically retiring, the naval hospital hired Rivera as a part-time student trainee health technician with the Mental Health Department. He proved successful throughout his volunteer career experience in the clinic, and he began a bachelor's degree program in psychology. His career goal is to obtain a full-time psychology technician position within the naval hospital, and ultimately become a psychologist or psychiatrist. He attributes the program to completely changing his life and improving his self-confidence.

Rivera's REACH program mentor Hope Franco, psychiatric technician with the Mental Health Department recalls, "Many Marines think 'Oh no! What am I going to do with this diagnosis?' Well, we can show Marines that they do not become the diagnosis, they can still live. Felix is a true example of this."

Franco volunteered more than 250 hours mentoring reach students and encourages other naval hospital staff members to do the same.

"The Marines coming through [REACH] have been a blessing to me too. I've learned a lot about myself and my future career goals. I want to be more like Felix!" she remarked of his high career aspirations and goals.

NHCL's program is gaining momentum. Kesterson believes there are no limits to the successes for the individuals who enroll, or the benefits the mentors gain from working with the Marines and Sailors.

"We used to say we [the program] will support them through recovery. Now I believe it is part of their recovery. It gives them hope," said Kesterson.

If you are interested in mentoring, or becoming a REACH student, call 450-3566 or 459-3493 for more information.

HOSPITAL ROUNDS

Pregnancy Exercise Program

Did you know our Health Promotion and Wellness Department offers a prenatal and postnatal pregnancy exercise program? If you are six months pregnant or under, join our trainer for strength training and/or yoga. Mondays and Wednesdays at TT2 Fitness Center from 10:30 - 11:30 and Thursdays at French Creek Fitness Center at 3:30 - 4:30. Childcare may be available and classes are open to eligible TRICARE beneficiaries. Call 451-3712 for more information.

Controlling Diabetes Class

Take control of your diabetes! Join our Family Medicine staff Sept. 26 from 1:00 p.m. - 4:00 p.m., in the FM conference room to learn more about how. Light lunch will be served. RSVP by Sept. 14 to Irene Sargent at 450-4481.

Nine Sailors Selected for CPO

Congratulations to NHCL's nine HM1's who were selected for advancement to Chief Petty Officer!

Jennifer Avila
James Fisher
Jason Houchins
Jeremiah Johnson
Raymond Kunze

Scott Lovvorn
Richard Neilson
Thomas Peterson
Christopher Holzworth

Chief selection is a major career milestone, and is a testament to our Sailors' hard work, dedication, and leadership.

Bravo Zulu CPO selects!

Galley Serving Night Meals

Effective Sept. 10 through Nov. 5, the Naval Hospital Camp Lejeune's nutrition management staff will open the galley from 11:00 p.m. - 12:00 a.m. to accommodate hospital staff working the late shift.

During this time, the department will determine whether or not a need exists to continue this service on a permanent basis.

Enlisted personnel are required to show their meal card, otherwise the night meal rate is \$4.55. See the intranet for more details.

DIRECTORATE CHALLENGE



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Contact HMCS Shannon Dittlinger for more information.



Join the Conversation!
www.facebook.com/nhclejeune

Interpreter Services for Staff

Language Line Services - translation services - and sign language interpreters are available for Naval Hospital Camp Lejeune staff members to assist with communication between themselves and staff members, patients, and/or visitors who have limited English proficiency, or who may be deaf or hearing impaired. Staff members are strongly encouraged to use this service whenever and wherever there is a need.

Dial the language line service's toll free number 866-874-9372 and enter the NHCL ID. The ID can be obtained from Lindy Eatherington, NHCL's patient safety manager.

For more information contact Operations Management Department at 450-4693.

Teaming Up With Former NFL Star to End Mental Health Stigma

By Anna Hancock
Deputy Public Affairs Officer

Naval Hospital Camp Lejeune's department of mental health teamed up with former NFL superstar, Olympian and mixed martial artist to campaign against the stigma surrounding mental health, Aug. 9.

Herschel Walker visited the naval hospital to encourage Marines and Sailors to seek help when they need it, particularly service members suffering from post-traumatic stress or other mental and behavioral health-related conditions who may be afraid to ask for help.

Widely known as one of the greatest football running backs of all time, Walker had a distinguished professional athletic career with pro football teams including the Dallas Cowboys and Philadelphia Eagles. Walker won the Heisman trophy in 1982 and competed in the 1992 Olympics. Shortly after he retired from his pro-football career, he was diagnosed with dissociative identity disorder (DID), formerly known as multiple personalities disorder.

In a speech given to naval hospital patients, visitors, Marines, Sailors, and staff members, Walker noted that it wasn't until after he recognized a pattern of violent and angry behavior starting when he was young, that he needed to seek help.

"I was angry. I had no fear. I felt no pain. You couldn't stop me," said Walker. "But I was doing things I didn't remember."

He continued to explain how games of Russian roulette became his norm, and how normal day to day aggravations sparked unnaturally angry, sometimes violent responses. Then after friends and family confronted him with the scenarios, he was still reluctant to ask for help because of the stigma that exists surrounding mental health.

"...I said something's wrong. I have a problem. And I went to the hospital. We all fall short of the glory of God in some way," Walker told the audience. "But even after I got to my first group session, I was like - 'these people are crazy!' I lied to the group for about four days before I accepted help...Being honest and getting help was the best thing I ever did."

Walker was later invited to tour several inpatient and outpatient mental health programs and group therapies such as the Expressive Art Therapy Group. He spoke to more intimate audiences of patients throughout the day encouraging them to continue seeking treatments, then sharing his personal challenges.

Walker lauded NHCL's department of mental health after his visit.

"Sometimes we all aren't able to communicate well. Or what we're going through," Walker explained. "We all have problems that we can overcome with the right resources. I'm happy to see that [the Naval Hospital] is proactive in offering many different treatment options. It's been needed for a long time."

More than 50,000 of NHCL's 120,000 patients are active duty Marines and Sailors – many have deployed to combat environments



U.S. Navy photo by Anna Hancock

A patient from Naval Hospital Camp Lejeune's mental health department requests Herschel Walker sign a piece of artwork at the naval hospital art therapy studio on Aug. 9 after hearing Walker speak about his professional athletic career and proactive steps to get help for his dissociative identity disorder (DID). The patient painted the artwork while being cared for within the naval hospital's Expressive Art Therapy Group. NHCL teamed up with Walker to end the stigma on asking for mental health help.

multiple times and have an increased chance of suffering from post-traumatic stress or experiencing trauma. The mental health staff members make it common place to consistently reevaluate treatment options and whether or not the team is effectively reaching the patient populations and meeting their needs.

"We are glad that our Marines and Sailors had an opportunity to hear an Olympic competitor and professional athlete reemphasize that it's OK to ask for help," said NHCL's department of mental health Director Cmdr. Sawsan Ghurani, board certified psychiatrist. "And not only that it's OK to ask, but there are many others in their shoes. And with help, they've recovered and become well again."

Tell Us How We're Doing

ICE Available As Patient Resource

By **Linda Mabry**
Patient Relations Coordinator

Naval Hospital Camp Lejeune's Interactive Customer Evaluation system, or ICE, as it is commonly known, is a DOD internet-based, electronic customer comment card system. The purpose of the ICE system is to enable DOD organizations to collect feedback, whether negative or positive, about the products and services they provide so that they may improve upon them to meet customer expectations.

All NHCL clinics, outlying clinics and inpatient areas are accessible via the ICE system. Easily navigated through NHCL's website, the electronic comment cards consists of questions and a

general comments box for further information. Once submitted, an ICE comment card e-mail arrives to the designated hospital service provider manager and the issue is addressed. All complimentary comments are forwarded to management for staff recognition.

While submissions can be anonymous, if a submitter's comment is too vague, NHCL will be unable to accurately address the issue. Most of NHCL comment cards are positive. However, when the negative comments are submitted, it is recommended that the

submitter provide contact information for further follow-up, either for specifications or to let them know the issue, compliment or suggestion has been taken for action.

For our patients' convenience, designated ICE computers are located throughout NHCL and outlying areas in the following locations: information desk/quarterdeck, OB/GYN clinic, Family Medicine Clinic, surgical family waiting area on the second

floor, the lab waiting area, the Emergency Department/ Orthopedics waiting area, newborn care clinic waiting area, ENT/eye clinic waiting area, internal medicine clinic waiting area, the branch clinics, and the MCAS Family Medicine Clinic.

Patients may also use their personal computers to submit comment cards by going to the NHCL's



website and clicking on the ICE icon.

NHCL encourages the use of the ICE system so you can tell us how we are doing in meeting your health care needs. It provides a way for you to give us your suggestions and compliments for our staff.

If you have questions about the NHCL ICE system, please contact Patient Relations at **450-4154/4155**

OPPORTUNITIES from page 2

Admittedly, it won't be easy to narrow the gap between the capabilities we have and those we need, especially in an era when DoD is tightening its budgetary belt. But that's what the philosophical pillar about seizing opportunities to ensure success is all about. Our transformation from a community hospital to a small medical center (future success) won't happen overnight, but it can't happen at all until we're all on board with the concept and until we are innovative and make the most of what we have and consistently operate at or near peak capacity in all or most of our clinical areas (current success).

With this last thought in mind, I ask leaders at all levels and in all directorates and departments to look for ways within current fiscal means to improve current access to care for the patients already empanelled to us. Tactically on the outpatient side, this may mean working closer with our Healthcare Operations Directorate to improve template and appointment management and expanding our "right of first refusal" (ROFR) options. This is especially important as we prepare to move into the beautiful new west wing,

that will more than double our clinical area for family medicine, obstetrics, orthopedics, ophthalmology, and physical therapy.

On the ambulatory procedure and inpatient side, it might mean revising outdated clinical practices that result in unnecessary patient transfers, or possibly using resource sharing agreements with nearby facilities, including Onslow Memorial Hospital and Naval Health Clinic Cherry Point, to increase our clinical capacity and throughput.

Meanwhile, our Board of Directors and I are working on defining what a significantly expanded Naval Hospital Camp Lejeune should look like through a strategic planning process we're calling "NHCL 2022 - the art of the possible." In addition, we are working closely with Navy Medicine East, the Bureau of Medicine and Surgery, and even with Headquarters Marine Corps to describe our anticipated near- and long-term requirements for people and facilities. The feedback we've received from our early discussions suggests seizing opportunities like I've mentioned above is exactly what our higher headquarters want us to do.

Thank you for seizing opportunities for success in your areas. My door is always open for shipmates with questions.