VA releases Asset and Infrastructure Review report

The Department of Veterans Affairs released its Asset and Infrastructure Review report on March 14, including recommendations by the VA Secretary to cement the department as the primary, world-class provider and coordinator of Veterans health care for generations to come.

The VA MISSION Act requires Secretary McDonough to publish the AIR report in the Federal Register and submit it to Congress and a presidentially appointed AIR Commission.

The AIR Commission will conduct public hearings as part of its review of VA’s recommendations before submitting its own recommendations to the president for further review in 2023.

The report’s release marks the beginning of an in-depth deliberative process. The AIR report is the result of years of research and analysis intended to help VA build a health care network with the right facilities, in the right places, to provide the right care for all Veterans, including underserved and at-risk Veteran populations in every part of the country — making sure our facilities and services are accessible to Veterans in their communities.

The recommendations center around improving access to and quality of care for Veterans by ensuring the department’s infrastructure in the decades ahead reflects Veterans’ needs and 21st century design standards. VA is investing heavily in its number one asset — its employees, strengthening its public/private strategic partnerships and elevating its role as the leading health care research entity and the leading health care workforce training institution in the country.

“VA came to these recommendations by asking ourselves one question above all else: what’s best for the Veterans we serve? Because that is our number one goal, today and every day. That’s what our Asset and Infrastructure Review recommendations are all about,” said VA Secretary Denis McDonough. “We’ve spent the last several weeks and months communicating about this with VA employees, union partners, state partners, Veteran service organizations, Congress, and more. I’m continuing to consult with our unions, and will do so moving forward, because I so appreciate the strong partnership we have with them.”

See "VA releases Asset and Infrastructure Review report" in Veterans Affairs News section for recommendations in the Western Massachusetts/Connecticut area.
Chapter/State News

Chapter elections this month

As Chapter elections for officers, directors and state council delegates will be held at the April membership meeting on April 7, 2022, we ask our members to offer their time and enthusiasm to continue the good works that Chapter 120 is known for in the veterans’ community. We need our members to offer their support, expertise, their ideas and their leadership to guide our organization down the right path to attain our basic goals – and establish new goals for our future. We are asking you, our members, to seriously consider running for these important positions. We need your help – we need your leadership and ideas to guide Chapter 120 for the next two years.

Please contact our Election Committee (Ken Lewis, Frank Mello or Tim Siggia) to submit your name for one of these positions. Help our Chapter continue our work to support all veterans and their families.

Positions open for candidacy:

**Officers:** President, Vice President, Secretary and Treasurer

**Board of Directors:** Five positions

**State Council Delegates:** Five positions

**Elections Committee:** Three positions

Election Rules are posted here:

Connecticut Chapter 120 Election Rules
Revised November 2, 2006

Section 1. Annual Elections

A. The Chapter officers will be elected on even numbered years at the April meeting and will serve a two (2) year term in office. They are the following: President, Vice-President, Secretary, and Treasurer.

B. The Board of Directors will be elected on even numbered years at the April meeting and will serve a two (2) year term of office.

C. The State Council Delegates will be elected on even numbered years at the April meeting and will serve a two (2) year term of office.

D. The Delegates to the National Convention will be elected on odd numbered years at the April meeting and will serve a two (2) year term in office.

E. The three (3) member Nominating Committee will be elected at the April meeting and will serve a one (1) year term.

Section 2. Candidates

A. Candidates must have been a member for a minimum of fifteen (15) days prior to the election.

B. Candidates must have on file with the Chapter, or present to the Nominating Committee their DD-214, or other proof of qualification for membership.

C. Candidates may be nominated from the floor on the night of the election. Candidates must be present to accept the nomination or have submitted a letter of intent to the Nominating Committee.

D. Candidates will be allowed space in the newsletter to campaign but not to defame or slander the other candidates. Space allowable will be at the discretion of the Newsletter Editor.

E. Candidates will be allowed five (5) minutes to speak at the April meeting if desired.

F. Candidates may use the membership list for a mailing pursuant to the Chapter rules and Federal laws governing the membership list.

Birthday Wishes
Birthday wishes go to our members born in April. May you have many more!

Robert Bagge  Arthur Bagnall
Stephen Clark  James J. Gavin
Steven Harris  Walter Korfel
William V. Loder  Nathaniel Milliner
Carl Morin  David R. Motowidlak
William J. Neligon  John J. Orvis
Bruce E. Raccio  Gerald A. Sweeney
C. Daniel Thayer, Jr.

A special birthday wish for Gary Cutler, oldest son of Chapter 120 member John Cutler.
**Section 3. Voters**

A. To be eligible to vote, you must have been a member for fifteen (15) days prior to the election. This would include new members or reinstated members that are not paid up for the prior year.

B. Voting members must have on file with the Chapter, or present to the Nominating Committee, their DD-214 or proof of qualification for membership.

C. Voting members must have paid their dues for the current fiscal year. Membership may be renewed the night of the election, but must be paid prior to casting their vote.

**Section 4. Election Procedures**

A. The voting period will be from the close of nominations until 8:00 PM.

B. The quorum required to hold the election should be 10 members.

C. A candidate can request a recount of the ballots for his or her office if the margin between the candidates running for that office is 10% or less based on the number of total votes cast.

D. The ballots will be kept for one (1) year in a sealed envelope signed by the Nominating Committee or their appointees.

E. Results will be announced the night of the election.

F. If a Nominating Committee member is running for an elected position, they shall appoint a volunteer vote counter from the floor.

G. The vote will be taken by a secret paper ballot.

**Chapter 120 to march in East Hartford Memorial Day Parade**

The Chapter is marching in East Hartford’s Memorial Day parade this year. It is on May 30th, 10:00 am step-off at 9 Riverside Drive by Pratt and Whitney to the Fallen Star Memorial at Goodwin University. It’s a short walk, about six-tenths of a mile. All are welcome to come and join your Chapter.

East Hartford Mayor Mike Walsh along with the East Hartford Veterans Commission are excited to announce that East Hartford’s Memorial Day service will take place Monday, May 30, 2022 at 10 AM.

The event will consist of three parts, including a parade, program at the Fallen Star Memorial and celebration of East Hartford. The parade will begin promptly at 10 am, proceeding from 9 Riverside Drive to the Fallen Star Memorial located at Goodwin University.

“We are proud to bring back the Memorial Day parade to honor the sacrifices of all who fought for our freedom,” said Mayor Mike Walsh.

**POW/MIA News**

The National POW/MIA Memorial and Museum needs your help

On September 20th 2021, H.R.5297 – National POW/MIA Memorial and Museum Act was introduced to the 117th Congress. This Bill designates the Memorial and Museum that will be constructed on an approximately 26-acre area on the POW-MIA Memorial Parkway in Jacksonville, Florida, as the “National POW/MIA Memorial and Museum.”

H.R. 5297 will officially designate the Memorial and Museum as National. It needs co-sponsors, so please contact your Representative today to urge support.

The National POW/MIA Memorial & Museum is located on 26-acres in Northeast Florida at the former Naval Air Station Cecil Field, Master Jet Base (1941-1999) currently known as Cecil Commerce Center.

The original POW/MIA Memorial, located just south of the Chapel of the High-Speed Pass, was dedicated to those Naval Aviators stationed at NAS Cecil Field during Vietnam and Desert Shield/Storm eras. This area is often referred to as Heroes’ Walk & Freedom Trees. The “Vietnam War Memorial” was originally dedicated on September 11, 1973 by the families and service members who wanted to ensure these brave men would never be FORGOTTEN. A pavilion with a stage area, a metal starburst display of aircraft, and a granite base seal of this former Master Jet Base were located at the end of the boulevard amongst the pines. This area was often used by the base for recognition services and ceremonies.

A driving force behind establishing the original memorial was Mary Hoff, wife of MIA Pilot LCDR Michael G. Hoff, still unaccounted for as of 2022. Mary was also instrumental in developing the POW/MIA flag, adopted by the National League of POW/MIA Families in early 1972 and now a congressionally approved National Ensign. Besides the American flag, this is the only other flag authorized to fly over the White House and the only other flag that can fly on the same flag staff below the American flag.

Undoubtedly, this flag has become a vital symbol for POWs and MIAs, their families and friends and for our current and future
The establishment of a National POW/MIA Memorial & Museum in Jacksonville will give visitors of all ages a fully planned indoor and outdoor complex to reflect, learn, do research, hear the stories, experience interactive displays and attend ongoing events.

Never Again Will One Generation of Veterans Abandon Another

armed forces. It assures our military that should they be captured or go missing, their nation will do all it can to bring them home.

At The Capitol

VA Committee moves bills out of committee
The Connecticut General Assembly Veterans Affairs Committee voted to move the following bills out of committee:

H.B. No. 5367 (RAISED) AN ACT CONCERNING SPECIAL REGISTRATION MARKER PLATES FOR MOTOR VEHICLES OF CERTAIN VETERANS AND MEMBERS OF THE ARMED FORCES. JFS to Floor

H.B. No. 5368 (RAISED) AN ACT CONCERNING THE COMPOSITION AND ORGANIZATIONAL STRUCTURE OF THE GOVERNOR'S GUARDS. JFS To Floor

H.J. No. 92 (COMM) RESOLUTION RECOGNIZING CHIEF HAROLD TANTAQUIDGEON. JF to Floor

H.B. No. 5370 (RAISED) AN ACT INCREASING THE COMPENSATION FOR PARTICIPATION IN MILITARY FUNERAL HONOR GUARD DETAILS. JF to Appropriations

H.B. No. 5373 (RAISED) AN ACT ESTABLISHING CONCURRENT JURISDICTION WITH THE UNITED STATES OVER OFFENSES COMMITTED BY MINORS ON FEDERAL MILITARY INSTALLATIONS IN THIS STATE. JF to Floor

H.B. No. 5371 (RAISED) AN ACT ESTABLISHING A PERSONAL INCOME TAX DEDUCTION FOR HONOR GUARD DETAIL COMPENSATION. JFS to Finance, Revenue and Bonding

S.B. No. 345 (RAISED) AN ACT EXEMPTING VETERANS FROM PAYMENT OF THE FARES FOR BUS PUBLIC TRANSPORTATION SERVICES. JF to Floor

S.B. No. 337 (RAISED) AN ACT CONCERNING FEDERAL VETERANS' BENEFITS AND INCOME ELIGIBILITY DETERMINATIONS FOR CERTAIN PUBLIC ASSISTANCE PROGRAMS. JF to Appropriations

S.B. No. 338 (RAISED) AN ACT CONCERNING A STUDY OF MUNICIPAL VETERANS SERVICES. JFS To Floor

S.B. No. 347 (RAISED) AN ACT CREDITING MILITARY TRAINING AND EXPERIENCE TOWARD CERTAIN LICENSES RELATED TO SUBSURFACE SEWAGE DISPOSAL SYSTEMS. JF to Floor

S.B. No. 342 (RAISED) AN ACT CONCERNING FEDERAL REIMBURSEMENTS FOR CERTAIN PHARMACEUTICAL PURCHASES. JF to Floor

S.B. No. 343 (RAISED) AN ACT CONCERNING A MILITARY OCCUPATIONAL SPECIALTY WORKING GROUP AND A GRANT PROGRAM FOR THE REIMBURSEMENT OF CERTAIN LICENSING, CERTIFICATION, REGISTRATION OR TUITION FEES. JF to Floor

S.B. No. 344 (RAISED) AN ACT CONCERNING STATE CONTRACTING PRICE PREFERENCES FOR VETERAN-OWNED BUSINESSES. JF to Floor

On The Hill

Sens. Moran, Hassan, Tester Introduce Elizabeth Dole Act
On March 17, U.S. Senators Jerry Moran (R-Kan.), Maggie Hassan (D-N.H.) and Jon Tester (D-Mont) – members on the Senate Veterans’ Affairs Committee (SVAC) introduced the Elizabeth Dole Home and Community Based Services for Veterans and Caregivers Act to expand community-based services for aging and homebound veterans.

Also referred to as the Elizabeth Dole Act, this legislation exemplifies Sen. Dole’s passion for finding enduring solutions for veterans in need of long-term care and their attentive family caregivers.

“Senator Elizabeth Dole represents the millions of caregivers who have worked behind the scenes to care for our nation’s veterans who are impacted by advanced age or catastrophic injuries,” said Sen. Moran, ranking member of the Senate Veterans’ Affairs Committee. “Caregivers help these homebound veterans maintain their independence and stay in their own homes in their own communities for as long as possible. The Elizabeth Dole Act is a concrete step in the right direction and delays the need to send these veterans to long-term institutional care by expanding access to home and community-based programs and increasing coordination efforts. It is fitting we name this legislation after an honorary Kansan – Elizabeth Dole – who has worked as an advocate to honor and recognize our veterans and their caregivers.”

“Veterans who have served bravely in defense of our freedoms must have access to the health care that they need, and for many, that includes the work of caregivers,” said Sen. Hassan, a
member of SVAC. “We must recognize the incredible work of caregivers who allow veterans to maintain their independence and self-determination—the very values that they fought for in uniform. The Elizabeth Dole Act recognizes the critical work of caregivers and helps expand home and community-based services for our nation’s veterans. I urge my colleagues to pass our bipartisan bill and honor the promise we made for veterans to be there for them.”

“In rural Montana where health care options can be few and far between, family caregivers continue to face challenges accessing high-quality care for their loved ones,” said Sen. Tester, Chairman of the Senate Veterans’ Affairs Committee. “Our bipartisan bill will expand home and community-based health services for our most vulnerable veterans—providing veterans and their caregivers the support they need right at home.”

“Fittingly, this bill is a true reflection of Senator Elizabeth Dole’s legacy,” said Steve Schwab, CEO of the Elizabeth Dole Foundation. “It helps uphold the promise our nation makes to the military families bearing the wounds and illnesses of war. It is precisely focused on providing solutions that will directly address the most common and persistent hardships of our veterans, their families, and their caregivers. We applaud Senators Moran, Hassan, and Tester for bringing this transformational legislation to the Senate floor.”

“Over half of all veterans that use VA are over the age of 65,” said Congresswoman Julia Brownley. “Age, combined with their unique health needs, makes many elderly veterans especially vulnerable to going into nursing homes and institutional care. Our nation’s veterans deserve the right to age comfortably and with dignity in their homes. The research is clear: providing health services and assistance in home settings improves health outcomes and delays, if not prevents, nursing home placement for people with disabilities and the elderly. However, VA’s current programs need to be improved and expanded to ensure that all veterans have access to these types of services. I introduced the Elizabeth Dole Home and Community Based Services for Veterans and Caregivers Act to ensure that every veteran has access to the care they need, when and where they need it. The focus of my legislation is to keep veterans in their homes for as long as possible, if they want, bringing them the care they need to the place they feel most comfortable, and ensure that every VA medical center has these necessary support programs. By expanding home and community-based services, veterans will have the assistance needed to remain members of their communities, to be present in their family lives, to support their caregivers, and to age with dignity.”

U.S. Representatives Jack Bergman (MI-01) and Julia Brownley (CA-26) introduced the companion legislation in the House of Representatives.

The Elizabeth Dole Home and Community Based Services for Veterans and Caregivers Act:

- Increases the expenditure cap for non-institutional care alternative programs to nursing home care from 65 percent to 100 percent;
- Establishes partnerships to conduct alternative care programs within the community and require VA coordination with other VA programs;
- Expands access to home and community-based alternative care programs to veterans living in U.S. territories and native veterans enrolled in IHS or tribal health program;
- Requires the creation of a centralized website to disseminate information and resources related to home and community-based programs;
- Creates a pilot program for home health aide services for veterans that reside in communities with a shortage of home health aides; and
- Requires VA to establish a warm handoff process for veterans and caregivers ineligible for the Program of Comprehensive Assistance for Family Caregivers.

Veterans Affairs News

VA releases Asset and Infrastructure Review report
(Continued from front page)
Recommendation and Justification

1. Modernize and realign Central Western Massachusetts VAMC by:
   1.1. Relocating Community Living Center (CLC), Residential Rehab Treatment Program (RRTP), and outpatient services currently provided at the Central Western Massachusetts VAMC to current or future VA facilities and discontinuing those services at the Central Western Massachusetts VAMC
   1.2. Establishing a strategic collaboration to provide inpatient mental health services and discontinuing those services at the Central Western Massachusetts VAMC
   1.3. Relocating urgent care services to community providers and discontinuing those services at the Central Western Massachusetts VAMC
   1.4. Closing the Central Western Massachusetts VAMC

2. Modernize and realign the West Haven VAMC by:
   2.1. Relocating CLC and RRTP services currently provided at the West Haven VAMC to current or future VA facilities and discontinuing those services at the West Haven VAMC
   2.2. Modernizing the West Haven VAMC

3. Modernize and realign the Newington MS CBOC by:
   3.1. Establishing a new CLC at the existing Newington MS CBOC
   3.2. Establishing a new RRTP at the existing Newington MS CBOC

4. Modernize and realign outpatient facilities in the market by:
   4.1. Relocating the Winsted CBOC to a new site in the vicinity of Torrington, Connecticut, and closing the existing Winsted CBOC
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4.2. Relocating the Stamford CBOC to a new site in the vicinity of Norwalk, Connecticut, and closing the existing Stamford CBOC

4.3. Relocating the Springfield MS CBOC to a new site in the vicinity of Springfield, Massachusetts, and closing the existing Springfield MS CBOC

Complementary Strategy

In addition to the recommendation submitted for AIR Commission approval, VA also anticipates implementing a complementary strategy that supports a high-performing integrated delivery network:

Connecticut facilities
West Haven VAMC

- Expand specialty care services at the Waterbury CBOC, which may result in classification of facility as an MS CBOC: In FY 2019, there were 18,473 enrollees within 30 minutes and 55,376 enrollees within 60 minutes of the Waterbury CBOC. Expanding optometry, physical therapy, audiology, podiatry, women’s health, and outpatient mental health services at this point of care will improve access for Veterans living in New Haven County and decongest the West Haven VAMC.

- Expand specialty care services at the New London CBOC, which may result in classification of facility as an MS CBOC: In FY 2019, there were 8,450 enrollees within 30 minutes and 39,116 enrollees within 60 minutes of the New London CBOC. Expanding optometry, physical therapy, audiology, podiatry, women’s health, and outpatient mental health services at this point of care will improve access for Veterans living in New London County and decongest the West Haven VAMC.

- Expand outpatient specialty offerings at the Newington MS CBOC to improve access and strengthen partnership with the University of Connecticut (UConn): The Newington MS CBOC is approximately 8 miles from the UConn School of Medicine in Farmington, Connecticut, and in FY 2019 there were 67,180 enrollees within 60 minutes. A stronger partnership improves recruitment and increases opportunities for VA-delivered care.

- Establish a strategic collaboration to add outpatient surgical and endoscopy services in the vicinity of Hartford, Connecticut. If unable to enter into a strategic collaboration, continue to utilize community providers: Creating a strategic collaboration through a sharing arrangement allows VA to supplement its capabilities with outpatient surgical and endoscopy services in the Hartford, Connecticut, area. This arrangement allows VA providers to deliver outpatient surgical and endoscopy services to Veterans living in the Hartford area. In FY 2019, there were 17,417 enrollees in Hartford County. Hartford, Connecticut, is approximately 42 minutes from the West Haven VAMC.

- Establish strategic collaborations with appropriate Federally Qualified Health Centers (FQHCs) and community providers in Putnam (Windham County), Stafford Springs (Tolland County), and Sharon (Litchfield County) Hospital Service Areas to improve primary care and outpatient mental health access for rural Veteran population: These areas are outside the 30-minute drive time radius to a VA point of care but lack sufficient population to establish a VA point of care. The closest VA point of care for Veterans living in Putnam is the Willimantic CBOC, 43 minutes away. The closest VA point of care for Veterans living in Stafford Springs is the Springfield MS CBOC, 36 minutes away. The closest VA point of care for Veterans living in Sharon is the Winsted CBOC, 45 minutes away. There are several FQHCs that are closer than the VA points of care. Partnerships will improve access to care for Veterans.

- Establish a residency program with the UConn School of Medicine and the Newington MS CBOC in Hartford, Connecticut (Hartford County), to develop a pipeline for physicians and surgeons: Expanding partnerships with UConn in Hartford, Connecticut, will improve recruitment and allow for staffing flexibility. Shared VA/affiliate physicians can hold clinics at the Newington MS CBOC and perform outpatient surgeries and procedures in the local affiliated community hospital.

- Align the leadership team at the Newington MS CBOC to continue to report to the West Haven VAMC: Currently, the leadership team at the Newington MS CBOC reports to the West Haven VAMC. If the Newington MS CBOC is reclassified as a VAMC, VA recommends keeping the existing administrative structure to avoid the expense of additional administrative staff.

- At the Newington MS CBOC, relocate Veterans Benefits Administration (VBA) and Community Care functions to vacant areas of VA land to free up space for clinical services in new addition: VBA is currently located on the third and fourth floor of the new clinic addition at the Newington MS CBOC. This area would be ideal for the expansion of primary and specialty care services. There are vacant spaces in several buildings on campus which could be re-purposed to support VBA.

- Establish utilization management standards for the use of physical medicine and rehabilitation services within Community Care: Physical therapy has had one of the largest increases in Veterans Community Care Program (VCCP) authorizations, and demand for outpatient rehabilitation therapy is projected to increase 75.8% between FY 2019 and FY 2029. Providing care coordination and utilization management will improve access and continuity of care for Veterans and reduce VCCP costs.

Visit AIR Commission report for more information: https://www.va.gov/aircommissionreport/
VA promotes greater access to voter information to Veterans and families

The Department of Veterans Affairs unveiled a series of measures, March 24, promoting greater access to voter information for Veterans and their families as part of the department’s proposed designation as a voter registration agency under the National Voter Registration Act.

In accordance with Executive Order 14019: Promoting Access to Voting, these steps are part of VA’s “whole health” approach to care, ensuring Veterans and their families are able to exercise the right to vote which Veterans fought and served to protect.

“We’re doubling down on the voting support we already provide — expanding access where we can and looking to do even more,” said Deputy Secretary for Veterans Affairs Donald Remy. “We’re providing assistance with the voting process for tens of thousands of inpatients and residents at our hospitals, nursing homes and treatment centers, along with homebound Veterans and their caregivers. This is a major undertaking as VA expands this effort, putting voting access right at the fingertips of all Veterans who may need it.”

VA launched a survey to over 12 million Veterans and their families in a first-of-its-kind effort to better understand Veterans’ experience with the voter registration process, and to better assist Veterans in addressing and overcoming any challenges. VA also developed a website for Veterans with nonpartisan information about voter registration and elections.

By summer 2022, VA plans to seek designation, by state officials in six states, as a voter registration agency under NVRA and to launch a pilot voter assistance program at VA facilities in those states — with an eye to the geographic and demographic diversity of the Veteran population.

To learn more or to take the survey, please visit VA.gov/vote

The Wall celebrates 40th anniversary of its groundbreaking

Some of the driving forces behind the Vietnam Veterans Memorial, which broke ground nearly 40 years ago, came together Saturday (March 26) to commemorate the 40th anniversary of its groundbreaking.

Former Defense Secretary Chuck Hagel was the keynote speaker at the ceremony, which happened at the memorial in Washington, D.C.

Jan Scruggs, the founder of the Vietnam Veterans Memorial, organized the event and was one of its speakers. Wounded in combat at 19, he came up with the idea for the memorial a decade later.

“It really did bring the nation together and help people recover from the war,” Scruggs said, adding that the wall became a platform for exchanging views without the vitriol that the controversial conflict had stoked.

Scruggs raised more than $8 million from private donors to fund the construction. The groundbreaking took place on March 26, 1982. Today it chronologically lists the names of the 58,281 Americans who sacrificed their lives during the war or remain unaccounted for.

Other speakers included Army veteran and historian James Reston, Jr., author of “A Rift in the Earth: Art, Memory, and the Fight for a Vietnam War Memorial;” and Tom Shull, director and CEO of the Army & Air Force Exchange Service. He was a White House fellow at the time who helped facilitate the construction and dedication of the Vietnam Veterans Memorial, securing the approvals needed to clear the way for the groundbreaking.

Special recognition was also given to “Bud” MacFarlane who helped advance the then-controversial Maya Lin design in the Reagan White House.

Receive “The Connection” by E-Mail

The monthly Chapter 120 newsletter, The Connection, is available by e-mail. Currently, 100 members receive the newsletter by e-mail, saving the Chapter over $1,600 in printing and postal fees annually. The newsletter is available in Adobe format (.pdf), attached to your e-mail. If you wish to receive the newsletter via e-mail, please e-mail the newsletter editor at ctchapter120@aol.com
The M60 General Purpose Machine Gun Was One of the Vietnam War’s Iconic Weapons

Five variants of the M60 served in Vietnam, equipping virtually every vehicle, armored personnel carrier, tank, helicopter and Navy patrol craft.

During the late morning hours of July 1, 1970, five 82 mm mortar rounds struck Fire Support Base Ripcord in northern South Vietnam. Small-arms fire and rocket-propelled grenades followed. Defending the base’s perimeter, Delta Company, 2nd Battalion, 506th Airborne Regiment, 101st Airborne Division, engaged North Vietnamese Army troops about 700 yards away.

Thus began the 23-day battle for Ripcord, one of the last major battles between the U.S. and North Vietnamese armies, which ended when American forces were ordered to evacuate. The fighting sometimes pitted individual American companies against two NVA battalions. The American platoons’ M60 machine guns played a decisive role in those fights.

The M60, introduced in 1957, incorporated features of the German MG-42 machine gun and FG-42 assault rifle. It fired over an open bolt, used a disintegrating link belt feed and had a quick-change barrel. The M60 was lighter than the M1919A4 and A6 Browning machine guns it replaced, but early models could be unreliable in Vietnam’s harsh conditions.

Newsletter articles/ stories/photos

Any articles, stories and/or photos submitted for the newsletter must be received by the "cut off" date for any given month. Photos must be accompanied by text which describes the event, names, dates and any other pertinent facts so our readers understand the story behind the photo(s). The newsletter editor will announce the "cut off" dates at each Chapter meeting. The "cut off" date for our May 2022 newsletter is 22 April 2022. Due to space availability, the editor reserves the right to include or not include photos for a given month.