



VA MID-ATLANTIC HEALTH CARE NETWORK • VISN 6

Vol. 4, No. 11

“Excellent Care – Earned by Veterans – Delivered Here”

Voices of VISN 6

Official news from around *your* VISN

August 31, 2014

VA Secretary Visits Charlotte CBOC, Greets Veterans

VA Secretary Robert A. McDonald looks on as Air Force Veteran Debra Grant uses a new, automated kiosk to sign in for an appointment at the Charlotte Community Based Outpatient Clinic. The secretary greeted several Veterans, family members and staff on a tour of the facility after delivering a speech to the American Legion national conference in Charlotte on Aug. 26.



Luke Thompson

VA OIG Report Released, Actions Taken

The VA Office of Inspector General (OIG) released the final report of its review of systemic issues with patient scheduling and access issues at the Phoenix VA Health Care System on Aug. 26.

VA concurred with the recommendations in the final report and, in many cases, has already implemented action plans and made improvements that respond to the OIG’s recommendations.

“We sincerely apologize to all Veterans who experienced unacceptable delays in receiving care,” said VA Secretary Robert A. McDonald. “We will continue to listen to Veterans, our VA employees,

and Veterans Service Organizations to improve access to quality care in Phoenix and across the country and we will work to rebuild trust with Veterans and the American public.

The final report updates the information previously provided by the OIG in its Interim Report and contains final results from the review of the PVAHCS. VA outlined key action plans that expand access to care, improve staffing for primary care, and accountability measures in response to the final OIG report.

In response to recommendations in the May 2014 OIG Interim Report, the following improve-

ments were initiated in Phoenix and across the VA system:

- As of Aug. 15, the Veterans Health Administration has reached out to over 266,000 Veterans to get them off wait lists and into clinics.

- As a result of the Accelerating Access to Care Initiative, approximately 200,000 new VA appointments nationwide were scheduled for Veterans between May 15 and June 15, 2014.

- Nearly 912,000 total referrals to non-VA care providers have been made in the last two months. That is, over 190,000 more

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From The Director

Last month, I shared a bit about my travels throughout the VISN where I met with schedulers to learn about the challenges they have faced while working to match the needs of Veterans with available appointments. You may recall that this was part of a nationwide effort by all network and medical center directors. I'm happy to say that the end result of this effort will be a new, commercially available and user-friendly scheduling system.



While VA is working through the procurement process of the new system, the IT team is busy working to create several software patches to quickly address some of the smaller issues the schedulers identified. Additionally, IT is working to create a mobile application that will allow Veterans to request certain appointments using smart phones and tablets. You can read more about these innovations on Page 11.

If you're a regular follower of my column, you may recall our efforts to secure additional space to see Veterans who reside in our Fayetteville and Jacksonville catchment areas. After Deputy Secretary Gibson announced funding to allow emergency short-term leases in Fayetteville and Jacksonville, VA ran into a snag with the GSA over which agency had the authority to execute the leases. Veterans in this area will be happy to hear that the issue has been resolved and that we have been given the green light to move forward.

We are moving forward at full speed with securing properties in both locations. Concurrently, we have teams working the critical connectivity (IT) issues, furnishings, supplies, security and personnel issues required to bring these two sites of care on line as quickly as possible.

There are many other efforts in the works tied to the Accelerated Care Initiative; however, I need to caution everyone that not all of the measures are yet in full motion. To date, we have obligated more than \$40 million on purchased, or non-VA care. While we are certainly making use of every dollar provided to expedite care, Veterans still need to work through their Primary Care

teams before seeking care in the community if they are counting on VA to pay for it.

On Page 3, you'll see an article about the Veteran Crisis Line. Please read it. It includes one of the most important statements in this month's newsletter:

No one can do everything, but everyone can do something. One small act can make a difference.

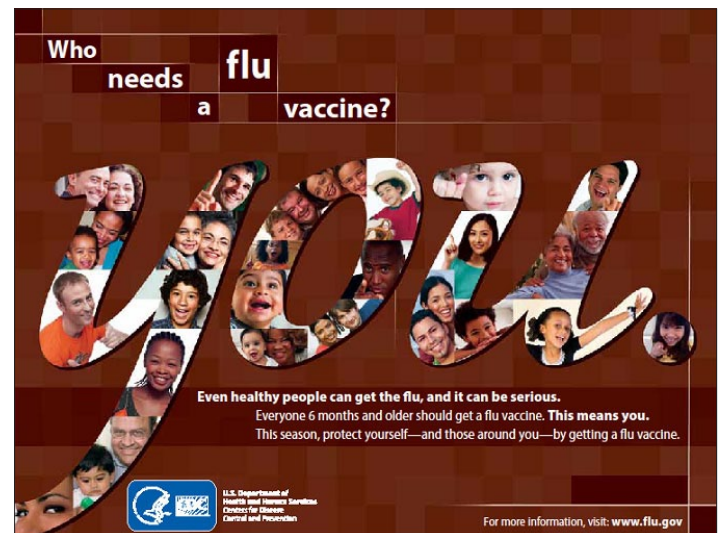
Veterans across this great nation are working through readjustment to life outside of the service and we all need to work together to ensure the greatest safety net of all. You can make a difference.

Please, copy the phone number in the article and keep it handy, and remember, help is available day or night.

Finally, I'd be remiss if I did not put in a plug for flu shots. It's that time of year again, and I really cannot stress just how important it is to get your flu shot. We are working to make them available as easily as possible. Please...for yourself...for your family...for your co-workers, neighbors and friends, protect yourself and get vaccinated.

Sincerely,

Dan Hoffmann



Time For Flu Shots!

Flu vaccines will be available in VISN 6 medical centers in mid-September. VA is encouraging all Veterans and staff to get vaccinated.

Influenza (flu) is a contagious disease which affects the lungs of healthy adults and those with chronic conditions and can lead to serious illness and hospitalization. The flu vaccine is recommended for everyone six months of age and older.

Veterans enrolled in VISN 6 VAMCs can contact their primary care team for more information.

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



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Veterans Crisis Line Available To All

By Kenita Gordon
VISN 6 public affairs

VA strives to make every effort to prevent Veteran suicide. The Veterans Crisis Line is one of many lifesaving resources VA offers.

The Crisis Line is a confidential resource that connects Veterans and their loved ones with VA responders via a toll-free number, anonymous on-line chat and even by text.

“The crisis line provides an immediate connection to responders who want to connect Veterans to local resources in a timely manner,” said VISN 6 Deputy Chief Mental Health Officer Sarah Magnes. “It provides a safety net for Veterans who may be contemplating self-harm.”

The Crisis Line is very active and requires a high-level of coordination between its responders and local facilities.

“Each one of our suicide prevention coordinators has a story about how they were contacted by the crisis

line to assist a Veteran. In one instance, the crisis line responder and a coordinator helped a Veteran who was about to overdose in his car,” said Magnes. “Through collaboration between the suicide prevention coordinator, VA, the local police and the crisis line, they were able to locate the Veteran, intervene to prevent his suicide and get him the necessary treatment.”

Magnes says similar cases can be found throughout the VISN and the country which reflect the value of the crisis line, its vital relationship with local suicide prevention coordinators and mental health staff.

This September and every day, VA urges Veterans and their loved ones to use resources like the Veterans Crisis Line.

For more information on VA's suicide prevention programs, visit

www.mentalhealth.va.gov/suicide_prevention.

No one can do everything, but everyone can do something. One small act can make a difference in the life of a Veteran or service member in crisis.



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

Operation North State's 1st Annual “Peer Fishin’ Festival”

Friday, Oct. 17, 2014
8 a.m - 4 p.m. (rain or shine)
1411 E. Beach Drive
Oak Island, NC 28465
910-278-6674



***Honoring NC's Wounded Warriors
and Disabled Veterans***

FREE for the first 325 Wounded Warriors, Disabled Veterans and Guests (caregiver, friend or family-member)

Lunch, Snacks, Beverages, T-Shirt, Bait, Tackle & Prizes will be provided (an alcohol-free event)

For more information, call 336-764-5967 or email: mailbox@operationnorthstate.com. Remember to bring rain-gear, a change of clothing in case it rains, chair, sunscreen, sunglasses, small cooler, a towel or two, and camera. And, if you have a standard rod/reel (6.5' to 7' with 10'-12' test-line), bring it, and if not, one will be provided.

TOWN HALL MEETINGS

All VA medical centers throughout the nation will be hosting Town Hall meetings intended to provide local Veterans a forum and for VA officials to hear directly from beneficiaries as a step toward improvement and to rebuild trust among Veterans.

Meetings are open to the public.

Tentative dates for VISN 6 medical centers are shown below. Dates are subject to change and people interested in attending should contact the public affairs office at their local medical center.

Asheville VA Medical Center	9/18/2014
Beckley VA Medical Center	9/24/2014
Durham VA Medical Center	9/16/2014
Fayetteville VA Medical Center	9/19/2014
Hampton VA Medical Center	9/10/2014
Richmond VA Medical Center	9/25/2014
Salem VA Medical Center	9/15/2014
Salisbury VA Medical Center	9/16/2014

Richmond Rural Health Team Reaches Out At Forum

By Steve Goetsch
Richmond VAMC public affairs

On Aug. 14, Richmond VAMC's Rural Health Team participated in a Veterans outreach forum hosted by the American Legion Post 175 in Mechanicsville, Va.

The forum allowed Veterans the opportunity to ask questions and get information about counseling services, traumatic brain injuries, employment programs, women's healthcare and housing as well as providing Richmond's rural health team the opportunity to build partnerships, provide education and facilitate Veteran enrollment.

The event was the first of its kind for the post and its Veteran Service Officer Jerry Tate, who attributes the event's success to the great collaboration between his organization and the Richmond Rural Health Team. "I had never hosted an event like this at the post," said Tate. "The key to its success was the support we received from Sharon Rhone [Richmond Rural Health Integrator], her team and the auxiliary."

The outreach event was received well by local Veterans who provided feedback for the VA. "I wish we would have more events like this. You would have the citizenry on your side if you did more things like this," said Kenneth Winston, an Army Veteran who came to the event in search of VA support for his uncle, a World War II Veteran. "You can't assume everyone knows where a VA hospital is or how to use GPS," said Winston.

Winston went on to comment that he thought outreach events were a great way to service remotely-located Veterans, build trust, and encourage Veterans to enroll for their benefits.

Seeing VA employees face-to-face in the local communities was significant to all the Veterans in attendance,



Steve Goetsch

Sharon Rhone, Richmond VAMC rural health integrator discusses possible services to add to future events with American Legion Post 175 members Jerry Tate and Eugene Truitt Aug. 14, at the inaugural Veteran's Outreach Forum held in Mechanicsville, Va.

and that is an important part of building trust and providing encouragement.

Ronald Edwards, a Vietnam Veteran, feels gatherings like this one in Mechanicsville are part of a very long healing process.

These forums are also vital to Veterans who may be apprehensive or have misconceptions on what services are available to them. "I had been bugging a friend for six or seven months to apply for benefits," Tate said. "I finally talked him into coming to this event and we got him enrolled in 15 minutes."

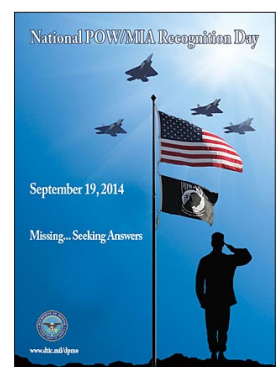
Continued on Pg 7

THE POWER OF AIRMEN

Happy 67th Anniversary
U.S. Air Force
Sept. 18, 2014

POW/MIA Day

Ceremonies will be held on Sept. 19 across the country to commemorate the sacrifices of the missing servicemen and their families. The 2014 National POW/MIA Recognition Day poster honors those still missing from our nation's past wars and conflicts and those who made the ultimate sacrifice and whose remains have not yet been recovered and returned home. For additional information about National POW/MIA Recognition Day, visit the Defense POW/Missing Personnel website at www.dtic.mil/dpmo.



VISN 6 Leadership Group Bolsters Supervisor Training

Facility directors from around the network gathered with VISN Director Dan Hoffmann Aug. 14, in Durham to commemorate the conclusion of this year's VISN leadership program.

The Leadership Development Institute (LDI) program combined eight months of academic work followed by a 12-week action learning project, designed to foster leadership development in high-potential employees.

The 2014 LDI class, with representatives from each of the VISN's eight medical centers, convened to present the results of their Action Learning Project to VISN leadership.

Throughout the course, participants engaged in personal assessments, a peer mentoring experience and produced a personal development plan. The capstone of each year's LDI program is the network-level project.

Recognizing that effective supervisor training programs are critical to successful operations and that leaders set the tone for subordinates, this year's project identified gaps in VA's Nuts and Bolts online supervisor training tool. In addition to reviewing the materials, the group conducted interviews with front-line supervisors, senior managers and union officials.

The graduates' presentation offered solutions to filling the gaps in communication, labor relations and face-to-face training.

The end result of their efforts is a new toolkit to help leadership round out a supervisor training program. The tool kit will help new supervisors better deal with employee attendance and communication, union issues and sensitive conversations with subordinates.



Lenny Skidmore

Twenty-four Leadership Development Institute graduates gather together for the first time following their 10-month virtual academic and practical course work.

Moving to enlist the new LDI graduates, who represent the strength of VA's future, Hoffmann harkened to a message about moving VA forward. Following the tumultuous events recently rocking the department, Deputy Secretary Sloan Gibson said, "We can turn these challenges into the greatest opportunity for improvement in the history of the Department."

Hoffmann declared the new LDI leaders should be devoted to restoring the VA mission "with the utmost integrity."

Leadership Development Institute Graduates Of 2014

Asheville VAMC
John Murray

Beckley VAMC
Tara Ballard
Elizabeth Ethier

Durham VAMC
Fawzia Salahuddin
Tung Tran
Stephen Wilkins*

Fayetteville VAMC
Amin Faiz
Tawnia Smith

Hampton VAMC
Tracey Jackson
Molly Jones
Sonia Motley
Shireesha Narla
Karen Schrader*
Kennith Swanson

Richmond VAMC
LeeAnna Gregaitis*
Jonathon Kodadek
Brenda Richardson
Taquisa Simmons

Salem VAMC
Ashley Hicks*
Margaret Mulcahy
Anjali Varma
Bridgette Vest

Salisbury VAMC
Christine Murray*
Eric Richards
Thomas Stagg

**Indicates team leaders among graduates.*

Asheville Administrator Receives Regional Recognition

Lorraine Hummel, the Asheville VAMC Information Security Officer (ISO), was recently named the winner of two VA Region 3 awards – the Fiscal Year 2013 and 2014 Customer Service ISO and Innovations ISO.

Region 3, which is made up of VISNs 6, 7, 8, 9, 10, and 11 encompasses thousands of employees with a diverse range of information technology needs and challenges, which makes Hummel's recognition all the more rewarding.

One of Hummel's customers submitted a nomination on her behalf and stated she "provided in-depth assistance to users and peer ISOs in the setup of the Public Key Infrastructure (PKI) certificates" for a corporate mailbox system that is used by each facility in VISN 6. This high priority initiative enabled the VA to manage contracted disability exams.

Though she was tasked with a variety of other field security initiatives, she still took the time to make herself available during the processing and installation of the PKI certificates onto users' workstations.

Hummel worked tirelessly through any of the issues that arose, often serving as liaison between the national PKI Help Desk and individual users of the corporate

mailbox. With her help, the sites met the requirements and were able to communicate successfully with a variety of vendors that ensured the VISN 6 site was able to meet this high-priority initiative.

Another customer said that Hummel played a vital role in the initial rollout, training, and coordination, and a leadership role in the subsequent implementation of the VA Office of Information Technology Governance Risk Compliance (GRC) program in Region 3.

"Ms. Hummel's hard work and ability to perform multiple roles during the implementation phase of GRC and ultimately performing as the Region 3 Lead, contributed to the success of the GRC implementation," said the customer.



Lorraine Hummel

OIG Report continued from Pg 1

referrals to non-VA care providers than the same period in 2013 (721,000).

- As of Aug. 15, VA has decreased the number of Veterans on the Electronic Wait List (EWL) 57 percent.
- Reduced the New Enrollee Appointment Report (NEAR) from its peak of 63,869 on June 1, 2014 to 1,717 as of Aug. 15, 2014
- VA has reached out to more than 5,000 Veterans in Phoenix to coordinate the acceleration of their care including all Veterans in Phoenix identified as being on unofficial lists or the facility EWL.
- Since May 15, VA has scheduled 2,300 appointments at the Phoenix VA Health Care System and made 2,713 referrals for appointments to community providers through non-VA care.

"Even before the OIG's interim report, VA had taken actions to address the issue of patient scheduling and access, working in close concert with Veteran Service Organizations," said Interim Under Secretary for Health Carolyn Clancy. "We've initiated development of a more robust process for continuously measuring patient satisfaction at each site, and will expand our patient satisfaction survey capabilities in the coming year, to capture more Veteran experience data through telephone, social media, and on-line means."

Additional actions include:

- Began updating the antiquated appointment scheduling system beginning with near-term enhancements to the existing system and ending with the acquisition of a comprehensive, state-of-the-art, "commercial off-the-shelf" scheduling system.
- Directed that every Medical Center Director conduct regular in-person visits to all of their clinics, to include interacting with scheduling staff to ensure all scheduling practices are appropriate. Veterans' Integrated Systems Network (VISN) Directors conducted similar visits. So far, 2,450 visits have been conducted nationwide.
- Removed the 14-day access measure from all individual employee performance plans to eliminate any motive for inappropriate scheduling practices or behaviors. In the course of completing this task, over 13,000 performance plans were amended.
- Added primary care to the services available to Veterans through VA's Patient-Centered Community Care (PC3) contracts, a key and evolving part of the non-VA medical care program.
- Established an interdisciplinary accountability review team to ensure leadership accountability for improprieties related to patient scheduling and access to care, whistleblower retaliation, and related matters that impact public trust in VA.

Fayetteville VAMC Offering Marriage, Family Therapy

By Dr. Patricia Rowan, LMFT
Fayetteville VAMC

The Fayetteville VAMC has recently expanded its mental health services to include Marriage and Family Therapy.

Marriage and Family Therapists, commonly referred to as MFTs, are mental health professionals trained and licensed to diagnose and treat individuals, couples, families, and groups. They offer treatment for a wide-range of mental health issues including adjustment disorder, PTSD, anxiety, depression, schizophrenia, and other psychological disorders. MFTs also offer premarital education, life coaching, and teach new coping skills through psychoeducation.

Marriage and Family therapy is based on the research and theory that mental illness and family problems are best treated within a family context. MFTs are trained in family relational systems that focus on understanding the Veteran's symptoms and interactional patterns within their existing environment.

Veterans and their families can face daily challeng-



Dr. Patricia Rowan



es that relate to their intimate relationships and other aspects of family life. By adding this service, we can help Veterans address these challenges and potentially help keep families together.

The length of treatment depends on various factors with the average treatment being 12 sessions. Veterans can be referred by any VA health care provider.

Although all the facilities in VISN 6 offer couple and family therapy, Fayetteville VAMC is the only VISN 6 facility that offers this service with professionals who are solely dedicated to this purpose. Fayetteville's MFTs staff treated more than 700 Veterans and their families so far this fiscal year.

VA MFTs must receive their education and training from a Commission on Accreditation for Marital and Family Therapy Education program. This accreditation promotes the health, safety and welfare of Veterans by ensuring that competent marriage and family therapy professionals are selected.

For more information, Veterans should contact their Primary Health Care team or mental health provider.

Rural Health continued from Pg 4

In addition to enrollment processing, rural health team member Charles Johnson says he receives all types of questions, some that he has difficulty in answering. "Giving a Veteran bad news about a claim status is the worst part of my job," Johnson said. "I always try to say or provide some advice to leave them with a bit of hope and encouragement."

Johnson shared some important tips with Veteran Roger Fling, who was enrolling for the first time and had some concerns with how his income level impacted his deductibles. "What Veterans need to remember is even after a Veteran has been enrolled, the expanded enrollment is based on a threshold."

Johnson emphasized that thresholds vary by geo-



Steve Goetsch

Charles Johnson, Richmond VAMC Rural Health Team member, shows Vietnam Veteran Roger Fling his enrollment data Aug. 14.

graphic location and can change when a Veteran moves.

"I assisted a Veteran who was confused about his eligibility, and I was able to inform him he was changed to a different priority group," said Johnson. "We then went over his financials and were able to accurately assess his eligibility."

Richmond's rural health team serves a large catchment area, logging almost 12,000 miles annually. With summer time being one of their busiest seasons, they carefully plan their schedule in order to participate in outreach events.

Organizations interested in hosting a visit by the team should contact Sharon Rhone at 804-675-5000 ext. 3382.



Steve Goetsch

Jose Illa, Richmond VAMC OEF/OIF patient representative, talks about support services with Vietnam Veteran Ronald Edwards Aug. 14.

VA Grants Help Homeless Veterans In VISN 6

In August, VA awarded over \$13 million in grants to community organizations in N.C., Va., and W.Va., that will serve thousands of homeless and at-risk Veteran families as part of VA's Supportive Services for Veteran Families (SSVF) program.

"By working with community non-profit organizations, we have enlisted valuable partners in our fight to end homelessness," VA Secretary Robert McDonald said. "The work of SSVF grantees has already helped thousands of homeless Veterans and their families find homes and thousands more have been able to stay in their own homes."

The SSVF program, which is in its fourth year, awards grants to private non-profit organizations and consumer cooperatives that provide services to very low-income Veteran families living in – or transitioning to – permanent housing. Those community organizations provide a range of services that promote housing stability among eligible Veteran families.

Under the terms of the grants, homeless providers will offer Veterans and their family members outreach, case management, assistance in obtaining VA benefits and assistance in receiving other public benefits. Community-based groups can offer temporary financial assistance on behalf of Veterans for rent payments, utility payments, security deposits and moving costs.

VA estimates these grants will serve approximately 115,000 homeless and at-risk Veteran families nationwide. This year the SSVF program granted 301 com-

munity agencies funding for homeless prevention – 15 of those organizations are located in W.V., N.C. and Va.

For more information about VA's homeless programs, visit www.va.gov/homeless.

Organizations Receiving Grants

In Virginia:

- Virginia Supportive Housing
- Volunteers of America Chesapeake
- Total Action Against Poverty
- Quin Rivers, Inc.
- Office of Human Affairs, Inc.
- Virginia Beach Development Corporation
- Southeastern Tidewater Opportunity Project of Hampton Roads.

In West Virginia:

- West Virginia Community Action Partnerships

In North Carolina:

- United Way of Forsyth County, Inc.
- Passage Home, Inc.
- Asheville Buncombe Community Christian Ministry
- Family Endeavors, Inc.
- Community Link Programs of Travelers Aid Society of Central Carolinas, Inc.
- Volunteers of America of The Carolinas, Inc.
- The Alston Wilkes Society

Veterans Employment Center Now Available

Veterans who are searching for employment may now take advantage of a new tool offered by VA.

The Veterans Employment Center (VEC) on VA's eBenefits site was launched in April of this year. It is the first government-wide product that provides verified job seekers the tools to translate their military skills into plain language and build a profile that can be shared instantly with public and private employers that have real job opportunities.

There are currently over 1.5 million jobs listed on the VEC, and hundreds of employers have made commitments to fill more than 165,000 positions with Veterans, transitioning Service members, Guard and Reserve members, and their families.

Benefits gained from the VEC:

- Skills Translator: Translate military occupational codes into civilian skill equivalents and learn about related civilian career paths.
- Profile & Resume Builder: Import results from

the skills translator into an online profile that you can download or publish to employers on the VEC.

- Veterans Job Bank (VJB): The VJB allows you to search over 1.5 million jobs in addition to all federal jobs – including positions reserved especially for Veterans.

- Employer Resources: Employers are able to post jobs and search the online bank of job seekers.

- Employer Commitments: Job seekers may view a list of of employers and organizations that have made a commitment to hire or train Veterans with links directly to their sites.

- Other Resources: The VEC contains or links to a broad set of other informational resources designed to help you find meaningful career opportunities and take advantage of special government and partner programs.

If you looking for a job or are an employer committed to hiring Veterans, please register on the VEC at www.ebenefits.va.gov/ebenefits/jobs.

Telehealth Conf. Covers ALS, Audiology, Spinal Cord Injury

The growth of the Telehealth modality over its eight year existence in VISN 6 was evident throughout presentations of program development during the annual VISN 6 Telehealth Strategic Planning Conference in Durham Aug. 5-7.

Telehealth uses electronic communications technology to treat Veterans, often alleviating their need to travel for service. It can place skilled providers with availability into areas lacking sufficient services, thereby increasing Veterans' access to care. Currently more than 28,000 Veterans in VISN 6 have received care through Telehealth services (600,000 nationwide). Because the technology is so pervasive, program lead Mary Foster suggested, "We need to integrate Telehealth into our Systems Redesign program to capture the essence of the technology and comprehensively grow Telehealth services across disciplines."

Telehealth equipment has been added to 73 clinics throughout the VISN in a variety of specialties, and this year, Telehealth was added as a goal to the VISN 6 Strategic Plan. The use of Telehealth has efficiently and economically enabled expansion of Veterans' access to care in specialties including audiology, cardiology, der-



Steve Wilkins

VISN 6 TeleAudiology program director Nancy Jones helps vendor representative Kimi Chin demonstrate new Telehealth video equipment during a simulation offered to participants of the VISN 6 Telehealth Strategic Planning Conference Aug. 5-7 in Durham.

Continued on Pg 10

VA Honors Hispanic Heritage

VA joins the nation in commemorating Hispanic Heritage Month Sept. 15 through Oct. 15. This year's theme is, "Hispanics: A legacy of history, a present of action, and a future of success."

Hispanic Heritage Month recognizes the significant contributions made by people of Hispanic descent to our nation. Sept. 15 was chosen as the starting date because it is the day of independence for five Latin American countries: El Salvador, Costa Rica, Honduras, Guatemala, and Nicaragua.

Hispanics contribute to America's diversity by sharing their cultural history and traditions. For their heroism, sixty Hispanic service members have received the Medal of Honor. One of the most recent living recipients is Sgt. 1st Class Leroy A. Petry, U.S. Army Veteran, whose hand was destroyed in combat on May 26, 2008.

At the time of conflict, Petry was deployed to Afghanistan with the Company D, 2nd Battalion, 75th Ranger Regiment out of Joint Base Lewis-McChord, Wash. He and his comrades were under attack and wounded when insurgents threw a grenade just a few feet from them. Petry quickly reacted and threw the grenade back at the enemy. His speedy reaction saved his life and those of two comrades but resulted in the



Courtesy Photo

On July 13, 2011, Medal of Honor recipient Army Sgt. 1st Class Leroy Petry describes to reporters the combat action that occurred near Paktya, Afghanistan, on May 26, 2008, which resulted in his nomination to receive the nation's highest award for valor in the Pentagon.

loss of his right hand.

Petry remained on active duty until his retirement from the U.S. Army in July 2014.

VA Fights Against Veteran Identity Theft

VA has launched a new campaign titled More Than a Number, to educate Veterans about identity theft prevention.

“We recognize that for Veterans, as for all Americans in the digital age, identity theft is a growing concern,” said Steph Warren, VA’s chief information officer. “Our goal is to help educate and protect those who have protected this great country.”

As part of the campaign, VA’s Office of Information and Technology launched a new website containing identity theft resources for Veterans and their beneficiaries. The website features educational information, interactive multimedia and links to other online identity theft prevention resources. The campaign also includes a toll-free help line offering support for Veterans, their

beneficiaries and VA employees who have questions and concerns about identity theft.

“Small changes can have big consequences,” Warren added. “Little things like shredding banking statements before throwing them away or using strong and unique passwords for all of your accounts can make a significant difference in protecting your identity from thieves who may try to use your personal information.”

For additional information, visit www.va.gov/identitytheft or call 1-855-578-5492.



VA Expands Patient-Centered Community Care Contracts

VA has added primary care to the services available to Veterans through VA’s Patient-Centered Community Care (PC3) contracts, a key and evolving part of the non-VA medical care program.

Prior to the primary care addition, eligible Veterans were able to access inpatient specialty care, outpatient specialty care, mental health care, limited emergency care and limited newborn care for female Veterans following childbirth under PC3.

“With the addition of primary care services, VA Medical Centers can now use PC3 to provide additional types of care in order to reduce wait times,” said VA Secretary Robert A. McDonald. “This modification is another example of how we are working to ensure Veterans get the care they need, when they need it and where they want to be seen.”

This modification supports VA’s Accelerated Care Initiative, helping to move Veterans off of waitlists and

into care. Additionally, reduced commuting standards will require that contracted providers schedule appointments closer to the Veterans’ homes.

The initial PC3 contracts were awarded in September 2013 to Tri-West and HealthNet and have been used as part of the non-VA medical care program to purchase care in the community.

VA Medical Centers can purchase non-VA medical care for Veterans through contracted medical providers when they cannot readily provide the needed care due to geographic inaccessibility or limited capacity.

In addition, VA is reviewing how PC3 may be used to help implement the newly enacted Veterans Choice, Access, and Accountability Act of 2014. Through PC3, Veterans can expect to receive high-quality health care that is coordinated with their VA providers.

For more information on PC3, visit www.nonva-care.va.gov/PC3/index.asp.

Telehealth continued from Pg 9

matology, diabetes, epilepsy, eye care, neurology and other services.

Adoption of Telehealth into the strategic plan is a signal that VISN leadership believes in the potential of Telehealth to positively impact the availability and quality of Veterans’ care in the VISN.

During a moment that became a conference highlight, Dr. Teodoro Castillo and Melodie Andereson talked about challenges and benefits to their Clinical Video Telehealth Ipad program in Richmond’s McGuire VAMC, enabling Veterans to communicate from their homes with providers. The program, a 2012 VHA Innovation Award winner implemented in March 2013,

alleviates special challenges, including travel and care coordination for Spinal Cord Injury patients.

Dr. Nancy Jones disclosed that now, “Telehealth outcomes are as good as traditional face-to-face encounters in audiology.”

Dr. Richard Bedlack offered another big “Ah-Ha” moment as he announced expansion of his Telehealth program treating ALS patients, when he shared that Veterans are more likely to develop the disease than their civilian counterparts. Bedlack said his program is essential to so many ALS-stricken Veterans because of the access to specialists, who are rare throughout the VISN and the nation.

VA Takes Next Step To Modernize Scheduling System

On Aug. 25, VA announced plans to issue a Request for Proposal (RFP) for a new Medical Appointment Scheduling System; the next step in a series of actions VA has taken to replace its antiquated legacy scheduling system. The new system will improve access to care for Veterans by providing medical schedulers with cutting-edge, management-based scheduling software. The RFP will be made public by the end of September 2014 and will provide eligible vendors 30 days to respond from the day of issuance.

“We want this process to be open to all eligible vendors to make sure the Nation’s Veterans have the full benefits the innovative marketplace has to offer,” said VA Secretary Robert McDonald. “When we can put a solid scheduling system in place, this will free up more human resources to focus on direct Veterans’ care. As VA recommits to its mission of caring for Veterans and evaluating our actions through the lens of what serves them best, we know a better scheduling system is necessary to provide them the timely, quality health care that they have earned and deserve.”

VA will issue a draft RFP prior to releasing the full RFP to maximize industry and stakeholder input. The solicitation will require a two-part demonstration of capabilities: a written proposal and a technical demonstration to scheduling staff. VA hopes to award the contract by the end of the calendar year.

“VA chose a full- and open-competitive strategy to acquire a ‘commercial, off-the-shelf’ scheduling system,” said Stephen Warren, VA’s Chief Information Officer. “We want a system that is user-friendly and tai-

lored specifically for our Veterans.”

Even as VA issues an RFP to replace the existing system, efforts are underway to make the current system easier to use for schedulers and Veterans. Among those enhancements:

- VA recently awarded a contract to improve the existing scheduling interface, providing schedulers a calendar view of resources instead of the current text-based, multiple-screen view. This update is scheduled to begin roll out beginning in January 2015.

- VA is developing mobile applications to allow Veterans to directly request certain types of primary care and mental health appointments (scheduled to begin deployment December 2014). Another application under development will give VA schedulers an easier-to-use interface to schedule medical appointments (scheduled to begin deployment December 2014).

- VA is rolling out new clinical video telehealth capabilities in October 2014 to further enhance access to care.

As part of the current RFP preparation process, VA is working with Veteran Service Organizations (VSO) to incorporate the groups’ feedback on requirements important to Veterans. VA’s VSO partners are currently reviewing user experience and business process documentation, and VA will continue to consult with VSOs as it works toward publishing its acquisition solicitation.

VA’s acquisition process will comply with recently established legislative requirements related to the Department’s scheduling software.

VA Moves To Streamline Identification Of Rural Land Areas

In order to more accurately identify and serve rural Veterans, VHA is improving the method it uses to define urban, rural and highly rural land areas.

“The Department of Veterans Affairs is committed to providing high quality health care to Veterans when and where they need it, including rural and highly rural areas of the country,” said Secretary Robert McDonald. “With this change, we will be better able to deliver services to Veterans when and where they need them.”

The current method is being replaced by a more accurate method, modeled on one used by other leading federal agencies. It is anticipated that implementation will begin before Oct. 1, 2014. The Rural-Urban Commuting Areas (RUCA) system, developed by the departments of Agriculture and Health and Human Services’ Health Resources and Services Administration, has become more accepted because of its sound social science basis and its adaptability for special programs.

“VHA strives to provide high-quality, accessible

health care to all enrolled Veterans,” said Interim Under Secretary for Health, Dr. Carolyn Clancy. “However, we must know where rural Veterans live in order to provide adequate access to care. This requires the best possible definition of ‘rural’ land areas. With this change, VHA will be able to better serve this important Veteran population.”

Improving VHA’s method for identifying urban, rural and highly rural Veterans will result in more accurate identification of rural Veterans, improved reporting of the number and location of rural Veterans and of statistics on their geographic access to sites of care along with improved allocation of resources and improved research on rural Veterans’ needs.

Currently, 3.2 million rural Veterans are enrolled in the VA system, which represents 36 percent of the total enrolled Veteran population.

For a more detailed explanation of the change, visit www.ruralhealth.va.gov/.

VISN 6 Sites Of Care & VA Vet Centers

MEDICAL CENTERS

Asheville VAMC
1100 Tunnel Road
Asheville, NC 28805
828-298-7911, 800-932-6408
www.asheville.va.gov/

Beckley VAMC
200 Veterans Avenue
Beckley, WV 25801
304-255-2121, 877-902-5142
www.beckley.va.gov/

Durham VAMC
508 Fulton St.
Durham, NC 27705
919-286-0411, 888-878-6890
www.durham.va.gov/

Fayetteville VAMC
2300 Ramsey St.
Fayetteville, NC 28301
910-488-2120, 800-771-6106
www.fayettevillenc.va.gov

Hampton VAMC
100 Emancipation Dr.
Hampton, VA 23667
757-722-9961, 866-544-9961
www.hampton.va.gov/

Richmond VAMC
1201 Broad Rock Blvd.
Richmond, VA 23249
804-675-5000, 800-784-8381
www.richmond.va.gov/

Salem VAMC
1970 Roanoke Blvd.
Salem, VA 24153
540-982-2463, 888-982-2463
www.salem.va.gov/

Salisbury VAMC
1601 Brenner Ave.
Salisbury, NC 28144
704-638-9000, 800-469-8262
www.salisbury.va.gov/

OUTPATIENT CLINICS

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

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

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

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

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

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

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

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

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

Greenbrier County CBOC
804 Industrial Park Rd.
Maxwelton, WV 24957
304-497-3900

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

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

Hickory CBOC
2440 Century Place, SE
Hickory, NC 28602
828-431-5600

Hillandale Rd. Annex
1824 Hillandale Road
Durham, North Carolina 27705
919-383-6107

Jacksonville CBOC
241 Freedom Way, Suite 1
Midway Park, NC 28544
910-353-6406

Lynchburg CBOC
1600 Lakeside Drive
Lynchburg, VA 24501
434-316-5000

Morehead City CBOC
5420 U.S. 70
Morehead City, NC 28557
252-240-2349

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

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

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

Rutherford County CBOC
374 Charlotte Rd.
Rutherfordton, NC 28139
828-288-2780

Staunton CBOC
102 Business Way
Staunton, VA 24401
540-886-5777

Tazewell CBOC
123 Ben Bolt Ave.
Tazewell, VA 24651
276-988-2526

Village Green Annex
1991 Fordham Drive
Fayetteville, NC 28304
910-488-2120 ext. 4020,

Virginia Beach CBOC
244 Clearfield Avenue
Virginia Beach, VA
757-722-9961, ext. 1900

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

Winston-Salem CBOC
190 Kimel Park Drive
Winston-Salem, NC 27103
336-768-3296

Winston-Salem Annex
2101 Peters Creek Parkway
Winston-Salem, NC 27127
336-761-5300

Wytheville CBOC
165 Peppers Ferry Rd.
Wytheville, VA 24382-2363
276-223-5400

DIALYSIS CENTERS

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

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

VET CENTERS

Beckley Vet Center
1000 Johnstown Road
Beckley, WV 25801
304-252-8220

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

Fayetteville Vet Center
4140 Ramsey St.
Fayetteville, NC 28311
910-488-6252

Greensboro Vet Center
2009 S. Elm-Eugene St.
Greensboro, NC 27406
336-333-5366

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

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

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

Princeton Vet Center
905 Mercer Street
Princeton, WV 24740
304-425-5653

Raleigh Vet Center
1649 Old Louisburg Rd.
Raleigh, NC 27604
919-856-4616

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

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