



VA MID-ATLANTIC HEALTH CARE NETWORK • VISN SIX

Vol. 4, No. 9

“Excellent Care – Earned by Veterans – Delivered Here”

Voices of VISN 6

Official news from around *your* VISN

June 30, 2014

Salisbury Celebrates Ribbon Cutting For Mental Health Bldg.

By Michael Maddox
Salisbury VAMC
public affairs

VA, federal and local government officials ceremoniously opened the new Mental Health Center for Excellence on the Salisbury VAMC campus during a ribbon cutting ceremony June 11.

The room was packed as Veterans, Salisbury staff members and other officials attended the ceremony which was held in the welcome center of the new facility, Building 8.

Prior to the ribbon cut-

ting, speakers discussed the importance of the new mental health building and its role in the future of mental health care at Salisbury.

Salisbury VAMC Director Kaye Green took some time at the beginning of the ceremony to give special recognition to several groups, including the staff at the Salisbury VAMC.

“I want to recognize that you are the people who take care of Veterans on a day to day basis, and

Continued on Pg 5



Luke Thompson
Department of Veterans Affairs, federal and local government officials ceremoniously open the new Mental Health Center for Excellence on the Salisbury VAMC campus during a ribbon cutting ceremony June 11.

Acting VA Secretary Visits Fayetteville

By Kenita D. Gordon
VISN 6 public affairs

Acting VA Secretary Sloan D. Gibson met recently with VSOs, Congressional staff members, VISN 6 and hospital leadership. He then spoke with employees in a town hall meeting and concluded with a press conference at the Fayetteville VAMC.

During his June 12 visit, Gibson discussed the results of the recent wait-list audit of all VA facilities and sought feedback about how Fayetteville staff is working to decrease its wait times.

He asked Fayetteville employees what works well or needs improve-



Luke Thompson
Acting VA Secretary Sloan D. Gibson addresses Fayetteville VAMC employees during a town hall meeting.

ment at the facility.

“We expect to earn trust back. We don’t expect it to be given. We expect to earn it,” Gibson stated dur-

ing his press conference. “As has become painfully obvious, we have systemic

Continued on Pg 3

Inside in Brief

- Pg 3** Obama taps former P&G CEO for Secretary of Veterans Affairs.
- Pg 4** Funeral held for unclaimed Veterans, 15 honored.
- Pg 6** Salisbury VAMC now providing vascular surgery; VA’s 84th birthday.
- Pg 7** VISN 6 facilities exceed C&P standards; Recreational Therapy Week.
- Pg 8** Celebrating freedom; Remembering desegregation of VA hospitals.
- Pg 9** VA announces actions to accelerate access to care.
- Pg 11** Gibson initiates process to select new Under Secretary for Health.
- Pg 12** Index of VISN 6 Sites of Care and VA Vet Centers.

From The Director

“It’s not about wait lists. It’s about getting to see your doctor when you need to.”

Summer 2014 will certainly be a milestone in the history of this department. No previous event has garnered the amount of press that we have experienced since May.

In its simplest form, the issue is one of supply and demand. Getting Veterans off wait lists and providing appointments is a step forward, but the real measure of success is, and should be, how long it takes to be seen by a provider. This is driven by capacity.

People who follow this column know that for the past 10 years, VISN 6 has been the fastest growing VISN in all of VHA. This VISN has been successful on many fronts, working to build capacity throughout the region to meet the needs of our growing Veteran population.

We’ve built capacity by adding more than 30 new sites of care, leveraging technology, adding providers and staff. And, while the media may make it sound like paying for care outside VA is a new idea, we’ve spent hundreds of millions of dollars on non-VA health care. As a matter of fact, in Fiscal Year 2013, we spent more than \$300 million on care provided in the community to supplement our in-house capacity.

Today, along with non-VA care, help comes in the form of additional staff members, expanded hours, and sharing of resources between our facilities. And, by 2016, our Veterans will enjoy the added capacity provided by three Health Care Centers and two outpatient clinics currently under construction.

We are also focusing on making the best use of all resources currently available. Daily, my staff and I, along with medical center leadership throughout the VISN, are reviewing our needs and capacities. Together, we scrutinize our demand, by medical center and by specialty, and do our best to match those needs with our VISN wide supply.

Working as an integrated network, we are finding ways to overcome challenges. As an example, we are leveraging telemedicine, using the extra capacity for dermatology that exists in Hampton to perform consults for Veterans in Salem. We are making use of the additional capacity for orthopedic patients at Asheville and Salem medical centers to treat patients from Salisbury and Fayetteville.



Luke Thompson
Network Director Dan Hoffmann and Fayetteville VAMC Director Betty Goolsby greet Acting VA Secretary Sloan D. Gibson.

I would like to make the point that most Veterans are very pleased with the care we provide. I know this because they are voting in the most tangible way I know of – when offered the choice of getting care in the community, or opting for a VA appointment, they are choosing VA care by more than a two to one ratio.

This is a pivotal time, so where do we go from here?

The answer is that we will continue to build sustainable capacity. We will continue to seek additional space, recruit additional providers, and put forth greater effort to ensure we are making the best possible use of all of the resources we have.

In closing, I’d like to thank so many of you for your kind words and support. My employees also appreciate your positive comments and work hard every day to warrant them. Caring for America’s Veterans is a team effort and we truly appreciate the great support you provide.

Rest assured that we do not take your support lightly. We will continue to push forward, using every means possible, to provide all eligible Veterans access to the high-quality health care they’ve earned.

Sincerely,

Dan Hoffmann

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



Daniel F. Hoffmann, Network Director
Augustin Davila, Deputy Network Director
Mark Shelhorse M.D., Chief Medical Officer
Bruce Sprecher, Director, Public Affairs
Steve Wilkins, Network Public Affairs
Kenita Gordon, Network Public Affairs
Patrick W. Schuetz, Newsletter Layout

Questions or comments about the newsletter, e-mail Bruce. Sprecher@va.gov or call 919-956-5541.



Obama Taps Former P&G CEO For VA Secretary Post

President Obama announced June 30 his intention to nominate former Proctor & Gamble chief executive Robert A. McDonald to be the next Secretary of Veterans Affairs.

McDonald ascended to leadership of Proctor and Gamble, a Fortune 500 company with more than 120,000 employees.

He is a West Point graduate, who served five years in the U.S. Army, and was a captain in the 82nd Airborne Division. He is a life member of the U.S. Army

Ranger Association and the 75th Ranger Regiment Association.

Of McDonald's devotion to Veterans, Gibson declared, "His commitment to Veterans is deeply personal. His father served in the Army Air Corps just after World War II.

"His wife's father was shot down over Europe during World War II and ended the war as a prisoner of war. Her uncle was exposed to Agent Orange in Vietnam and still receives treatment from VA," he said.

Fayetteville continued from Pg 1

issues around scheduling, and we also have instances of very serious allegations of improper behavior, breeches of integrity violations of our core values. I will use whatever authority I have at my disposal to hold people accountable."

Adding, "Far too many Veterans in Fayetteville – and across this country – are being told they have to wait in line," Gibson said, "I'm here today to say that no Veteran should ever have to wait for the care they have earned through their service and sacrifice. The data we released this week shows the extent of the problems we face. As the President has said, we must work together to fix the unacceptable, systemic problems in accessing quality healthcare. And that starts by addressing and solving the problems right here in Fayetteville."

Gibson said that VA is taking major steps to improve overall productivity at Fayetteville and all other VA medical facilities. Among the improvements are strengthened training for appointment schedulers and a mandate for VA directors to visit clinics once a month for face-to-face encounters to "personally engage with those who are involved with scheduling, assessing that individuals' ability to do the job and do it right."

In addition, the Acting Secretary noted that some of the biggest issues in Fayetteville are space and physician retention. He believes the majority of VA employees are working harder for less money than their similarly qualified counterparts in the private sector.

Gibson also announced that the Fayetteville VAMC will receive \$7.4 million to help with decreasing wait times, extend clinic hours, and fund short-term leases for medical office space in the local community.

In addition, Fayetteville VA:

- Is reaching out to all Veterans identified as waiting longer than 30 days for care to discuss individual medical needs and schedule appointments – more than 2,000 Veterans have been contacted.
- Has expanded hours – adding mornings, evenings and weekends – and deployed a mobile care unit.
- Is using temporary alternative staffing measures



Luke Thompson
VSOs and Congressional staff members meet with Acting VA Secretary Sloan D. Gibson during his visit to the Fayetteville VAMC.

to ensure Veterans receive the care they have earned through their service.

- Is increasing established contracts with community partners to schedule Veterans waiting to be seen by a doctor.

When questioned by a reporter about whether bonuses for VA employees should be taken back and reallocated due to the recent report findings, Gibson stood up for VA employees.

"This idea that 'let's fire everybody, let's pull everybody's bonus away' that's a bunch of crap," Gibson responded. "The fact of the matter is we've got 341,000 people and the vast majority of them work really hard to do the right thing, and that's why we've got Veterans who are well-served the vast majority of the time."

Overall Gibson says he was pleased with the work being done in Fayetteville and commended the Fayetteville VAMC's partnerships with the Naval Hospital at Camp Lejeune and Womack Army Medical Center.

Gibson said VA will continue to provide wait time information on a regular basis to provide transparency.

Funeral Held For Unclaimed Veterans

Hundreds attended a ceremony June 14 at the Salisbury National Cemetery to inter the cremains of 15 unclaimed Veterans.

The event was sponsored by the Missing in America Project (MIA Project), an organization whose purpose “is to locate, identify and inter the unclaimed cremated remains of



Carol Waters
Soldiers carry the remains of a Veteran during the interment ceremony.

through the joint efforts of private, state and federal organizations.”

Recently the MIA Project identified 23 unclaimed Veteran cremains, from World War II to Korea and Vietnam, in Greenville, N.C. – eight of which were claimed by family members. The remaining 15 went unclaimed and were transferred from Greenville in a casket, draped in

the American Flag and interred in Salisbury.

“They never got the funeral that they deserve. They are deserving of what we have to offer and that is they kept us free, for you and myself to be able to go out and



Carol Waters
Members of the Rolling Thunder, Veterans and attendees pay their respects during the interment ceremony.

do what we need to do,” said Bill Sirginson of the North Carolina chapter for the MIA Project.

Salisbury National Cemetery Director Donald Owens said of the 15 men and women interred, “None of them served for glory, though they did serve for the freedom that makes us who we are.”

National Cemetery Administration Under Secretary

for Memorial Affairs Steve L. Muro said, “These Veterans never thought that one day their remains would be unclaimed. The first National Cemeteries were opened 150 years ago, and now they will be here forever. Every headstone tells a story. Please take time to thank those in uniform whenever you see them. And remember, we are borrowing this land from our future generations.”

To date, the remains of more than 2,000 Veterans have been identified by the MIA Project and given proper funerals. For more information on the Missing in America Project visit www.miap.us/.



Carol Waters
Under Secretary of Memorial Affairs Steve Muro addresses the crowd.

Veterans Interred on June 14

- TEC5 James Robert Liverman Jr., 1919-1996, US Army, World War II
- Y2 Donald William Newman, 1921-2012, US Navy, World War II
- MOMM2C Frederick William Tims, Jr., 1922-2012 US Navy World War II
- SP4 Terry Wayne Oaks, 1958-2010, US Army
- SP4 Fars Ruble Strickland, 1938-2010, US Army
- CPL. Lonnie Cecil Wilborn, 1929-2012, US Army, Korea
- PFC Harry Lee Battle, Jr., 1948-2008, US Army, Vietnam
- PFC James D. Boone, Jr., 1927-2011, US Army World War II
- PFC Leroy Lightfoot, 1924-2005, US Army, World War II
- PFC Emanuel Dion Robertson, 1960-2009, US Army
- SA Walter Eugene Visage, 1938-2008, US Navy
- PV1 and SA Phillip Diaz, 1956-2012, US Army and US Navy
- PVT Valerie Jean Nobles, 1954-1999, US Marine Corps
- PVT William Tony Plemmons, 1923-2007, US Army, WWII
- AB Michael Jay Zimmerman, 1954-2004, US Air Force, Vietnam



Courtesy Photo



Courtesy Photo

Work progresses on Kernersville and Fayetteville Health Care Centers

Mental Health Center continued from Pg 1

without you, we wouldn't be here - just like without our Veterans who we serve, we would not be here," she said. "I appreciate the work each of you does each and every day, and I thank you for that."

Green went on to share how the new facility will impact mental health care and provide a milestone in the history of Salisbury VAMC.

"This new building will help promote a healing environment for our Veterans," she said. "Many Veterans come back from conflicts with visible wounds. Mental health wounds are often not visible from the outside, but that doesn't make them any less hurtful. We have to treat the entire person."

"We believe in a recovery model here and are strongly committed to getting every Veteran to their highest level of functioning and comfort. I'm proud that we can, and do, help people get their lives back on track," Green added.

The keynote speaker for the event, Ted Thomas, a Veteran and Certified Peer Support Specialist at the Salisbury VAMC, shared his enthusiasm for the improvements in mental health care for Veterans, to include the peer support program.

"Sometimes a Veteran has been ill for so long that it becomes their identity, and the role of the peer support specialist is to model and mentor a new identity," he said. "That identity is one of wellness, an identity of high-quality living and being able to go back to work -

having a life of meaning and purpose. We will continue to have a learning environment here - learning between the peer specialists, the Veterans, the clinicians - and the outcomes will be absolutely wonderful."

Dr. Mark Shelhorse, chief medical officer for VISN 6, said he considers the new mental health facility as more than walls, floors and treatment rooms.

"For those who seek out help, it will provide an environment that will create the opportunity for them to get back on course, or for some to set a new or entirely different course for their lives," he said.

"Our goal here at Salisbury, and throughout the VISN, is to help Veterans move beyond their injuries with a goal of successful and satisfying lives within their communities and with their families. During the course of inpatient visits, Veterans will be wrapped in comfort, safety and dignity," he said.

"I'm confident that many, many Veterans will benefit from the care provided here and that all of that care will be the absolutely best it can be," added Shelhorse.

After the official ceremony, guests toured the building - giving them a opportunity to see what treatment and living areas are like for Specialized Inpatient Post-Traumatic Stress Disorder Unit patients.

The facility, which cost \$16 million, has a total of 79,000 square feet of space. This includes treatment areas, rooms for patients, as well as recreational areas like a television room and exercise rooms.

Salisbury VAMC Now Providing Vascular Surgery

By Michael Maddox
Salisbury VAMC public affairs

In an effort to expand available services, the Salisbury VAMC has recently begun offering vascular services at the facility.

Vascular surgery involves all of the blood vessels outside of the heart and the brain.

Dr. Randolph Geary, a vascular surgeon at the Salisbury VAMC and professor of surgery at Wake Forest University, said five major vascular disease conditions



Dr. Randolph Geary

surgeons tend to see at any medical center, include Carotid Disease, Peripheral Artery Disease (PAD), aneurisms and venous disease.

“Carotid Disease affects the arteries in your neck that provide blood flow to the brain,” said Geary. “That’s a common place for people to see hardening of the arteries as we age, and it can put you at risk for a stroke.”

Peripheral Artery Disease, another major area of vascular disease, refers to blocked arteries in the extremities and is generally seen in the legs, according to Geary.

“With PAD, a patient can’t walk as far as they want because of pain. This is because their muscles have run out of blood flow and oxygen causing them to hurt,” he explained. “This is common with diabetes, kidney failure, and hardening of the arteries.”

“We see a lot of patients who have dilated arteries – that’s what an aneurysm is. The majority of them occur in the abdomen in the biggest artery in the body, called the aorta,” Geary continued. “It’s a common problem for people as they age, particularly in smokers.”

A lot of Veterans are screened for aneurysms with ultrasound, and they typically don’t know they have one until it shows up on a screening. “We try to find and repair the aneurysms before they get too large,” added Geary. “We are able to repair aneurysms in other [parts of the body] at Salisbury, including aneurysms of the artery behind the knee.”

The fourth common vascular problem, according to Geary, is venous disease. “It’s very common for people to have veins in their legs that don’t work – varicose veins or blood clots in their legs and can develop ulcers at the ankle. Some of these patients can be helped with a procedure to laser shut a leaky vein and we will be doing these procedures at some point,” he said.

Geary added a fifth procedure. “We are seeing dialysis patients that need access for treatment. It’s a surgical procedure to typically create a fistula for a patient on dialysis by connecting to an artery in their arm,” he said. “We’re doing access surgeries for dialysis now; we’ve also done surgeries to bypass blocked arteries in a leg to help the patient heal a wound on the foot that wasn’t healing.

“We have also treated aneurysms in the leg, and soon we will be performing balloon angioplasty procedures and placing stents that go along with by-pass surgeries as well,” he added.

Kaye Green, director of the Salisbury VAMC, said she is proud to be able to provide new programs to the Veterans Salisbury VAMC serves.

“We have been working diligently over the past two years to increase our clinical capabilities and offer more complex care, which is what our significant Veteran population deserves,” she said. “I am very pleased with Dr. Geary’s leadership in getting our vascular surgery program up and running. I’m equally pleased with our plans to start providing orthopedic joint replacements in the very near future with Dr. Christopher Nagy, who joined VA from the community.”

“We are committed to the continued expansion of our clinical capability into the future to provide the best care possible to Salisbury-area Veterans.”

**Happy 84th Birthday
Department Of Veterans Affairs
July 21, 1930**



VISN 6 Facilities Recognized For Exceeding C&P Standards

Several VISN 6 C&P units were recognized by the VA Office of Disability and Medical Assessment for their processing of Compensation and Pension examinations.

Winston-Salem VBA Regional Office Director Cheryl Rawls presented coins in June to Durham VAMC C&P Exam Unit staff for their processing of C&P exams.

C&P exams are used to determine levels of disability and compensation due Veterans for medical conditions associated with their military service.

When a Veteran files a disability claim with the Veterans Benefits Administration a specialist reviews the claim and determines the necessity of an exam. The exam could involve just an office visit, or it could require a series of diagnostic tests, labs, or x-rays, etc., depending on the types of conditions that need to be evaluated. Results of the tests provide necessary medical evidence for a VBA rater to make a decision on a claim for disability.

Beckley VAMC received a Gold Foundation Award – presented to individual VHA C&P facilities meeting the average processing days benchmark of 25 days or less for every month of the fiscal year.

Salem VAMC was recognized with the Silver Foundation Award – presented to the individual VHA C&P facilities meeting the average processing days bench-



Linnie Skidmore
Winston Salem VBARO Director Cheryl Rawls (2nd from left) with Durham C&P Exam Unit Medical Support Assistants (left to right) Tracey Ridgeway, Adrian Gates and Charmanee Simmons.

mark of 28 days or less for 11 months of the fiscal year.

Durham, Fayetteville, Asheville and the Winston-Salem Annex were presented the Bronze Foundation Award - presented to the individual VHA C&P facilities meeting the average processing days benchmark of 30 days or less for 10 months of the fiscal year.

Recreational Therapy Week July 6-12

VA joins the nation in recognizing the contributions of recreational therapists during National Therapeutic Recreation Week, July 6-12.

National Therapeutic Recreation Week is dedicated to enhancing public awareness of therapeutic recreation programs and services and to expanding recreation and leisure opportunities for individuals with disabilities.

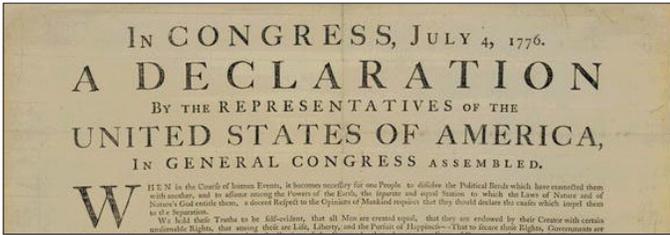
According to Larry Long, director, VHA Recreation Therapy Program, "recreation therapists provide treatment services and recreation activities to Veterans with disabilities, illnesses or other disabling conditions. They treat and maintain the physical, mental and emotional well-being of the patient using a variety of techniques, including arts and crafts, sports, games, dance, music and community integration activities."

Thousands of Veterans receive recreational therapy from VA. For America's Veterans, therapeutic recreation promotes health and wellness along with reducing or eliminating activity limitations and restrictions caused by an illness or disabling condition.

(Right) Durham Veteran Glenn McClary bowls as part of his recreational therapy.

(Courtesy Photo)





A Celebration Of Freedom

On July 4, 1776, the Second Continental Congress unanimously adopted the Declaration of Independence, announcing the colonies' separation from Great Britain.

Philadelphians marked the first anniversary of American independence with a spontaneous celebration. However, observing Independence Day only became commonplace after the War of 1812.

Soon, events such as groundbreaking ceremonies for the Erie Canal and the Baltimore and Ohio Railroad were scheduled to coincide with July 4th festivities.

By the 1870s, the Fourth of July was the most important secular holiday on the calendar and on June 28, 1870 Congress passed a law making Independence Day a federal holiday.

This July Fourth, VA joins the nation in commemorating the United States independence from Great Britain by continuing to honorably serve those men and women who fought to protect the nation.



Remembering Desegregation Of VA Hospitals 60 Years Ago

Sixty years ago, on July 29, 1954, racial segregation in VA hospitals officially ended. The first Veterans hospitals established by VHA's predecessor, the National Homes for Disabled Volunteer Soldiers, were racially integrated from the very beginning (1865); however, after the 1896 Plessy v. Ferguson Supreme Court case decision, a "separate, but equal" culture evolved in American society, particularly in the South.

Many Veterans hospitals established for World War I Veterans during the "Jim Crow" era in our history were racially segregated. In 1903, the new National Home in Johnson City, Tenn., (known as Mountain Home) had segregated barracks and on Feb. 12, 1923, a separate hospital exclusively for African American Veterans was dedicated by the Veterans Bureau (VA & VHA predecessor) in Tuskegee, Ala.

Two additional segregated hospitals were proposed for African American Veterans during the 1940s and early 1950s, but failed to pass Congress.

On July 26, 1948, President Harry Truman issued Executive Order 9981 to integrate the U.S. military and later ended a quota system that limited the number of African Americans in the military. Five years later changes were still needed. President Dwight D. Eisenhower stated in his State of the Union address, on Feb.

2, 1953, that, "To be true to one's own freedom is, in essence, to honor and respect the freedom of all others. A cardinal ideal in this heritage we cherish is the equality of rights of all citizens of every race and color and creed ... I propose to use whatever authority exists in the office of the President to end segregation in the District of Columbia, including the Federal Government, and any segregation in the Armed Forces."

Two weeks later, on Feb. 17, 1953, Congressman Adam Clayton Powell called for an inquiry into racial segregation at the Memphis and Nashville VA hospitals and set the wheels of change into motion at VA.

On May 4, 1953, VA Administrator Carl Gray, Jr., stated that racial segregation at the hospitals was "in accordance with local customs," bringing further scrutiny of VA from Congress and the President. On Sept. 23-25, 1953, new VA Administrator Harvey Higley informed VA hospital directors that racial segregation had to end and that an accelerated process to do so would be implemented.

Two months after the May 17, 1954 Supreme Court case decision on Brown v. Board of Education of Topeka officially ended segregation of public schools, VA announced that racial integration of its hospitals was complete.

VA Announces Personnel Actions To Accelerate Access To Care

VA announced several personnel actions aimed at accelerating Veterans' access to quality health care and rebuilding the trust of America's Veterans.

At the VHA Leadership Summit in Washington, Acting VA Secretary Sloan D. Gibson announced that, effective July 2, Dr. Carolyn Clancy will be named VA's interim Under Secretary for Health. Dr. Clancy will spearhead the Department's immediate efforts to increase Veterans' access to care.

"Dr. Carolyn Clancy is a leader and a real innovator when it comes to Veterans' health care quality and safety. As we conduct our search for an Under Secretary for Health, there's no one better to take on the issues we face," said Gibson. "Dr. Clancy will be charged with the Department's top priority – getting Veterans off of

wait lists and in to see their doctors. She will also lead our efforts on immediate, national reforms to accelerate access to care and restore trust among our Veterans."

Dr. Clancy has been at VA since August 2013, serving as the Assistant Deputy Under Secretary for Health for Quality, Safety and Value. Prior to her appointment at VA, Dr. Clancy, a general internist, served as Director of the Agency for Healthcare Research and Quality.

Dr. Robert L. Jesse, current Acting Under Secretary for Health, will complete his four-year term as Principal Deputy Under Secretary for Health on July 2. A commission of health care experts and industry leaders is currently assessing candidates for recommendation

[Continued on Pg 11](#)

VA Releases Latest Nationwide Data On Access To Healthcare

VA posted the second in a series of bi-monthly data updates showing progress on its efforts to accelerate access to quality health care for Veterans who have been waiting for appointments.

Acting VA Secretary Sloan D. Gibson announced that VA has now contacted approximately 70,000 Veterans across the country to get them off of wait lists and into clinics for medical appointments.

Gibson also announced the release of the latest updated, facility-level patient access data, which demonstrates that the number of appointments has increased by almost 200,000 from May 15 to June 1.

"In many communities across the country, Veterans wait too long for the high quality care they've earned and deserve," said Gibson. "As of today, we've reached out to 70,000 Veterans to get them off wait lists and into clinics, but there is still much more work to be done.

"As we continue to address systemic challenges in accessing care, these regular data updates will enhance transparency and provide the most immediate information to Veterans and the public on Veterans' access to quality health care," said Gibson. "Trust is the foundation for everything we do. VA must be an organization built on transparency and accountability, and we will do everything we can to earn that trust, one Veteran at a time."

VA announced the following actions in response to the previous nationwide Access Audit findings and data:

- **Establishing New Patient Satisfaction Measurement Program**

Gibson has directed VHA to begin developing a new patient satisfaction measurement program to provide real-time, robust, location-by-location information on patient satisfaction, to include satisfaction data of those Veterans attempting to access VA healthcare for the first time.

- **Holding Senior Leaders Accountable**

Where audited sites identify concerns within the parent facility or its affiliated clinics, VA will trigger administrative procedures to ascertain the appropriate follow-on personnel actions for specific individuals.

- **VHA Central Office and VISN Office Hiring Freeze**

Gibson has ordered an immediate hiring freeze at the Veterans Health Administration central office in Washington D.C. and the 21 VHA Veterans Integrated Service Network regional offices, except for critical positions to be approved by the Secretary on a case-by-case basis.

- **Removing 14-Day Scheduling Goal**

This action will eliminate incentives to engage in inappropriate scheduling practices or behaviors.

- **Posting Data Twice-Monthly**

VHA will increase transparency by posting regular updates to the access data released today at the middle and end of each month at www.va.gov/health.

- **Initiating an Independent, External Audit of Scheduling Practices**

Gibson has also directed that an independent, external audit of system-wide VHA scheduling practices be performed.

- **Utilizing High Performing Facilities to Help Those That Need Improvement**

VA will formalize a process in which high performing facilities provide direct assistance and share best practices with facilities that require improvement on particular medical center quality and efficiency, also known as SAIL, performance measures.

- **Suspending Performance Awards**

VA has suspended all VHA senior executive performance awards for FY2014.

Monthly Site Inspections To Restore Integrity To Scheduling

Acting VA Secretary Sloan D. Gibson directed all VA Medical Center and Health Care System Directors to conduct monthly in-person reviews of scheduling practices in every clinic within their jurisdiction. Site inspections will include observing daily scheduling processes and interacting with scheduling staff to ensure all policies are being followed to deliver Veterans the timely care they have earned.

“Our top priority is getting Veterans off of wait lists and into clinics,” said Gibson. “We need our folks in the facilities to work directly with staff, answer all questions, and ensure our Veterans receive the timely

care they have earned. Veterans must trust their health care system, and these reviews are an important step towards restoring integrity in all our scheduling activities.”

In addition to monthly reviews of over 900 VHA facilities nationwide, VISN directors will also conduct similar visits to at least one medical center within their area of responsibility every 30 days, completing visits to all medical centers in their network every 90 days.

This action follows the VA’s release of results from its nationwide Access Audit, along with facility-level patient access data.

Gibson Meets With MSOs, VSOs After Release Of Access Data

Acting VA Secretary Sloan D. Gibson met with the leadership of 27 Military and Veterans Service Organizations (MSOs and VSOs) following the VA release of results from its Nationwide Access Audit, and other facility level access data.

In the meeting, Gibson thanked MSOs and VSOs for being VA’s valuable partners in serving Veterans and continuing to improve the department. He told MSO and VSO leaders that he looks forward to working with

them to better serve Veterans and address the unacceptable, systemic problems in accessing VA healthcare.

Gibson outlined the actions announced in response to the audit findings, and how the data shows the extent of the systemic problems VA faces. He reemphasized his commitment to earn the trust of Veterans who VA is privileged to serve, and told the MSO and VSO leaders that VA has contacted 50,000 Veterans across the country to get them off of wait lists and into clinics.

VA Moves To Secure New Scheduling System At Industry Day

VA announced it is continuing the process to replace its medical appointment scheduling system through an acquisition process. Recently VA hosted pre-solicitation “Industry Day” meetings with technology vendors to discuss the Department’s upcoming scheduling system acquisition.

“Our top priority is getting Veterans off waitlists and in to see their doctors,” said Acting VA Secretary Sloan D. Gibson. “We’re taking a series of immediate actions to ensure our Veterans receive the timely access to quality health care they have earned and deserve. We need lasting, long-term reforms, including a complete overhaul to replace the outdated technology for our scheduling system.

“Bringing an innovative scheduling product into our world-class electronic health record system is a crucial part of providing the scheduling staff in our facilities with the tools necessary to succeed,” he said. “Our Veterans deserve nothing less than our best, and that’s exactly what we intend to give them.”

This Industry Day presented a unique opportunity for VA to communicate directly with potential vendors on all aspects of the upcoming scheduling system acquisition. It also served as a face-to-face platform for exchanging information about business needs, industry

best practices and challenges specific to VA’s scheduling system.

VA officials met with industry leaders including Kaiser Permanente, Gartner and Mayo Clinic. Discussions focused on improving Veteran access to quality healthcare and innovating measurement approaches to gauge short- and long-term access to care. Topics also included recommended strategies and tools to help managers and providers’ best serve Veterans and provide a consistent patient experience.

VA’s scheduling technical requirements are complex and require clear, well-articulated communication to ensure comprehensive understanding by industry and potential vendors. During the event, VA conducted a live scheduling system architecture Q&A session to ensure potential solutions seamlessly interface with VA’s VistA electronic health record.

VA used the event to facilitate communication with vendors and reduce the risk of misinterpretation and miscommunication on technical requirements. The information shared during the Industry Day provided VA with a better understanding of what needs to be included in the upcoming scheduling system solicitation, with the ultimate goals of receiving solid proposals and reducing time to field new technologies.

Gibson Initiates Search For New Under Secretary For Health

Acting VA Secretary Sloan D. Gibson initiated the process of selecting the next head of the Veterans Health Administration (VHA).

“This is one of the most important jobs in government today,” said Gibson. “This is the largest integrated healthcare system in the country. We need a leader who will be a change agent and deliver necessary reforms to provide our Veterans timely access to the world-class healthcare they’ve earned and deserve. The expert panel we’ve assembled to recommend our new health chief understands the urgency and the seriousness of the task ahead, and I’m grateful for their efforts.”

On June 17, a commission comprised of nine healthcare experts and industry leaders began a series of meetings in Washington to assess candidates to serve as the next Under Secretary for Health for the Veterans Health Administration.

The commission includes:

- Nancy Adams, RN, Major General Retired, Amer-

ican Academy of Nursing Fellow

- Garry Augustine, Washington Headquarters Executive Director, Disabled American Veterans

- Delos Cosgrove, M.D., President and CEO, Cleveland Clinic

- Lt. General Patricia Horoho, Army Surgeon General and Commander, U.S Army Medical Command

- Kenneth W. Kizer, M.D., M.P.H., Distinguished Professor and Director, Institute for Population Health Improvement, University of California Davis Health System

- Jennifer Lee, M.D., Virginia Deputy Secretary of Health and Human Services

- John E. Prescott, M.D., Chief Academic Officer, Association of American Medical Colleges

- Jose D. Riojas, Chief of Staff, U.S. Department of Veterans Affairs

- Bob Wallace, Executive Director, Veterans of Foreign Wars

Personnel Actions continued from Pg 9

to the Secretary and President as permanent Under Secretary.

The Department also announced that Dr. Jonathan B. Perlin, Chief Medical Officer and President, Clinical Services for Hospital Corporation of America, will commence a short term assignment at VA as a Senior Advisor to the Acting Secretary. Dr. Perlin, who previously served as VA Under Secretary for Health, is also chair-elect of the American Hospital Association. Dr. Perlin will be taking a leave of absence from his current duties.

“We’re pleased to welcome this exceptional leader back to VA,” Gibson added. “I look forward to the contributions of Dr. Perlin who is recognized for his national healthcare leadership roles, as part of the VA team as we continue our work towards accelerating access to care and rebuilding trust with Veterans.”

Additionally, Gibson accepted the resignation of Will A. Gunn, General Counsel for the Department of Veterans Affairs, effective July 3. Principal Deputy General Counsel Tammy Kennedy will serve as Acting General Counsel.



Remembering The Forgotten War

The Korean War, which began on June 25, 1950, when the North Koreans invaded South Korea, officially ended on July 27, 1953. At 10 a.m. in Panmunjom, U.S. Army generals and delegates, along with Korean and Chinese dignitaries signed 18 official copies of the tri-language Korean Armistice Agreement. Often regarded as the “forgotten war,” approximately 5.7 million U.S. Veterans served in the Korean War and over two million are currently living.

(Left) General Mark W. Clark, Far East commander, signs the Korean armistice agreement on July 27, 1953, after two years of negotiation.

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