



"Excellent Care – Earned by Veterans – Delivered Here"

# Voices of VISN 6

Official news from around *your* VISN

Vol. 6, No. 11

August 31, 2016

## VISN 6 Acts Strategically To Enhance Veteran Health Care

For the last 20 years, VISN 6 staff has worked to meet Veterans' health needs in an ever-growing, ever-changing environment. At the center of this commitment is the VISN 6 Strategic Plan, which leadership and managers fully support and promote in order to meet the VHA's mission to honor America's Veterans by providing exceptional health care that improves their health and well-being.

"Excellent Care, Earned by Veterans, Delivered Here," is the VISN's motto and the

life-blood of VISN 6's plans and operations. We know that Veterans should always receive the quality care they need, when they need it, as close to home as possible. The Strategic Planning Council helps to ensure these ideas and best practices, as well as ensures perceptions of policies and directives are shared uniformly across the network.

It has been essential that VISN and medical center leadership strategically integrate and align

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**Sharonda Pearson**

*Two family members discuss their experiences with VA as caregivers for their Veterans, both who suffer from PTSD, during a session at the Durham VAMC Mental Health Summit Aug. 26.*

## Asheville VAMC Doubles MRI Capacity

By Scott Pittillo  
Asheville VAMC  
Public Affairs

On Aug. 15, many drivers traveling on Tunnel Road probably noticed a huge crane beside the entrance to the Asheville VAMC's Emergency Department.

The crane was there to install a new Magnetic Resonance Imaging (MRI) machine, doubling the MRI imaging capacity at the medical center.

Due to the new MRI's large size, workers were unable to fit the machine through existing doorways, so an access area was created through the roof of the medical center.



**Scott Pittillo**

*The new MRI machine is seen in the hospital after being lifted by crane through a temporary access area.*

A 400 ton crane was then used to carefully lower the new MRI machine in place in the Imaging suite.

While doubling the number of scans the facil-

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## From The Director

For more than 10 years, this network has built and expanded facilities that bring Veterans health care closer to home. As an integrated network, the VISN has leveraged equipment and services that optimize capabilities, transferring Veteran care to community based facilities or providers as appropriate.

This is important because more than 51 percent of Veterans here live in areas considered Rural or Highly Rural. We have strategically located community based outpatient clinics and home based primary care extensions where Veterans need them most. Now, with more than 40 network sites of care virtually no Veteran in the VISN lives more than an hour's drive from VA care. Having Care in the Community and Choice alternatives for care helps further our goal to serve Veterans in a timely manner, closer to home.

Our providers lead the nation in addressing spinal cord and traumatic brain injuries, geriatric care, polytrauma, epilepsy, oncology and cardiac care, among others. VISN 6 medical centers are affiliated with some of the best private sector medical institutions in the world, which helps to ensure that our Veterans receive the best care anywhere.

Key to our success is considering community based health care providers as collaborators in Veterans' health care. We empower VA staff and partners everywhere to make decisions that are best for Veterans; building a high-performance healthcare network; and using the best healthcare business practices, to earn Veterans' trust to be there when they need our care.

To help employees reach their full potential, VISN leaders are investing in robust training, so they understand exactly what is expected of them and feel confident they are serving Veterans best. Similarly, VISN 6 is developing business practices that streamline procedures that take care of community partners, so that they spend more time taking care of Veterans and less time figuring out the paperwork.

To assure that our leaders, managers, and staff are doing their best for Veterans, we've established programs to monitor continuous improvement through



regular meeting updates and analyses; Veteran feedback gathered through surveys available in facilities at kiosks and online at VA web sites; meticulous data collection and interpretation that uniformly addresses process operations and to ensure integrity and reliability when reading and reporting data outcomes. Triggers are set for VISN leadership to assess and address compliance with scheduling directives. Annual audits ensure continuity and consistency of practice.

We are providing the best care to more Veterans in less time than ever before, and they're getting it more conveniently. VA has turned a corner in its transition to becoming a high performing, Veteran-centric health care provider.

Throughout this edition of our newsletter you'll discover a myriad of examples that highlight the many different ways VISN 6 staff has found to bring quality VA health care closer to Veterans when they need it. In Salisbury, the prosthetics department has worked to greatly reduce wait times for orders. Another article explains how staff in the Durham VAMC are applying Lean management practices, and increasing the efficiency of what they do for Veterans. Many of our facilities, such as Fayetteville VAMC, are developing procedures which make it possible for Veterans to direct schedule appointments in Audiology and Optometry.

In the end, it is about the Veteran experience. Much of this work won't be obvious to the Veteran walking through the medical center doors. But, it is our hope that every Veteran feels the cumulative positive effects of these changes in their health care experience within the VA system every day.

Sincerely,  
Dan Hoffmann



*Deputy Under Secretary for Health for Operations and Management Steve Young greets a medical support assistant during his visit to the Fayetteville Health Care Center Aug. 31, a stop on his trip that also took him to the Durham VAMC Sept. 1.*

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



**Questions or comments about the newsletter, e-mail [stephen.wilkins2@va.gov](mailto:stephen.wilkins2@va.gov) or call 919-956-5541.**

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# Fayetteville Debuts Direct Audiology, Optometry Scheduling

By Johan Thatil

Administrative Officer, Audiology/Speech & Pharmacy  
Fayetteville VAMC

Veterans at Fayetteville VAMC can now make Audiology and Optometry appointments without seeing their VA primary care physician. The Direct Scheduling initiative is a result of employee recommendations. The process change saves time for Veterans and increases primary care appointments.

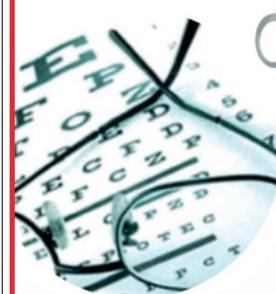
This change is part of a nationwide VA rollout of Direct Scheduling to Audiology and Optometry clinics, which VA expects to complete by the end of 2016.

Fayetteville VAMC Director Elizabeth Goolsby said the change promises two immediate returns: improving the Veteran experience and increasing access to care when the Veteran needs the care. It also frees up primary care appointments because Veterans will no longer need to schedule consult or referral appointments to receive these services.

“The direct scheduling program affirms the medical center’s commitment to fostering a Veteran-centric culture of care which honors Veterans’ service and empowers Veterans to achieve optimum health and well-being,” she added.

For more information on Audiology and Optometry Direct Scheduling at Fayetteville VAMC Health Care Center, Veterans should call 910-475-6026.

**NEED A ROUTINE EYE OR HEARING EXAM?**



**NO MORE RED TAPE!**

**Stop in or call your Primary Care Provider, Optometry, or Audiology clinic to schedule your routine eye or hearing exam (recommended every two years)**

**Fayetteville VA Health Care Center  
7300 South Raeford Rd  
Fayetteville, NC. 28304**

Audiology: 910-475-6026      Optometry: 910-475-6026

## Access continued from Pg 1

services, according to geographically-based Veteran needs and health trends. VISN 6 staff optimize capabilities by scope, complexity, referral care coordination processes and resource allocation, maximizing timeliness for areas with the most significant need.

For more than 10 years, VISN 6 has built facilities for Veterans to receive primary care closer to home, especially targeting rural areas. As an integrated network, the VISN has been able to leverage equipment and services that optimize usage, transferring their care to appropriate facilities or providers when needed. This is important, because more than 51 percent of Veterans here live in areas considered rural or highly rural. So, the VISN has placed dozens of community based outpatient clinics and home based primary care extensions in the areas of greatest need. With more than 40 sites of care, no Veteran in the VISN lives more than an hour’s drive from VA care.

Since 2009 VISN 6 has run a Rural Health program. Funding from the program helped bring services and educational programming to Veterans where they lived. Additionally, these funds supported health education;

women’s health; staffing for mobile clinics; telehealth and mental telehealth programs; programs for mental health community outreach, and hearing aid repair.

VISN 6 management is continuously pursuing concepts for improving health care to Veterans that use least complex settings of care, consider value-added partnerships, and are VISN-wide solutions.

“At the center of their care is staff, which engages Veterans in their care decisions through a personalized, proactive, patient-driven health care environment,” said VISN 6 Director Dan Hoffmann. “We also believe that to increase the quality and value of Veteran health care, it is essential the workplace enhances the employees’ morale and well-being.”

Key to this is considering health care providers outside the system as collaborators in Veterans’ health care. VISN 6 and medical center leaders want to empower staff and partners everywhere to make decisions that are the best decisions for Veterans; building a high-performance healthcare network; using the best healthcare business practices, so Veterans will trust VA to be there when they need care.

### Asheville VA Canteen Named Outstanding 3rd Year In Row

The Charles George VAMC Canteen received the “Outstanding Canteen of the Year” award for the third year in a row during a ceremony held Aug. 18.

“We are always proud of the work our hospital employees do day in and day out on behalf of Veterans,” said CGVAMC Director Cynthia Breyfogle, as she congratulated the staff during the ceremony. “The smiles and courteous service our canteen staff provide are a crucial part of what makes this medical center a great place for Veterans to receive health care.”

The award is presented annually to canteen food and retail services at VA medical centers which exceed customer service expectations, reflect outstanding operating results and meet or exceed standards for year-end-inventory management.

Canteen is an old military reference to cafeterias or areas where troops could dine, socialize, or purchase items for personal use.



**Scott Pittillo**

*Employees of the Charles George VAMC's Canteen Service with their third Outstanding Canteen award.*

### Asheville MRI continued from Pg 1

ity is able to perform, the new MRI machine is larger and will enhance access for patients who might be claustrophobic or larger than allowed by the existing MRI machine. Previously, patients who were claustrophobic often had to have imaging done in the community.

“We are really excited to get the new MRI installed.

It’s nice to be able to have a greater in house capability, allowing us to get patients the scans they need very quickly,” said Imaging Service Chief Dr. Keith Kohatsu.

The new MRI machine is expected to be online sometime in mid-September. At the Asheville VAMC we are honored to serve America’s Veterans and pleased to add another quality healthcare service to them.

### VA Secretary Bob McDonald Visits Hampton Roads

By Daniel Henry  
Hampton VAMC Public Affairs

Hampton VAMC Director Mike Dunfee joined Secretary of Veterans Affairs Bob McDonald when he stopped through Hampton Roads on Wednesday, Aug. 9, to serve as keynote speaker at the Military Order of the Purple Heart’s national convention.

The secretary spoke to a group of several hundred recipients of the Purple Heart and their guests about the current state of the VA and it’s ongoing commitment to Veterans.

While in town he also took the opportunity to talk to Dunfee about the significant progress the facility has made in bringing down wait times and increasing access for Veterans throughout the region - noting a series of positive news stories that highlighted the wide ranging investment in construction on the campus and the ever-growing Veteran population utilizing services at the Durham VAMC.



**Dan Henry**

*VA Secretary Bob McDonald poses for a photo with OEF/OIF/OND era Purple Heart recipients. McDonald was in Norfolk, Va., to attend the Military Order of the Purple Heart’s national convention.*

# Durham Goes Lean With Veterans Experience Based Projects

By Sharonda Pearson  
Durham VAMC Public Affairs

Approximately 100 mid- and senior-level Durham VAMC staff participated in a Leading Organizational Improvement course Aug. 15-16. The course is part of an organization-wide initiative to transition to a high reliability culture through integration of Lean methods and tools. The two-day training was just one of many current initiatives to help the Durham VA Health Care System improve access, quality of care, and customer experience by streamlining its processes.

“Our vision is to be the benchmark of excellence and value in healthcare by providing Veteran-centered care based on our core values: ICARE. The only way to achieve our vision is through continuous improvement at every level of the organization and focusing on our six key priorities – People, Access, Quality, Safety, Innovation, and Stewardship,” said Medical Center Director DeAnne Seekins.

Medical center staff is participating in a variety of projects that will contribute to an enhanced Veteran health care experience, including Clinical Reminders and Pre Visit Calls to improve customer relations and access, by implementing a system to call Veterans prior to scheduled appointments to set expectations, performing clinical reminders, and gather clinical information.



**Sharonda Pearson**

*Durham VAMC managers gathered for a two-day organizational improvement course. Leadership hope the session leads to a higher reliability culture in the facility.*

The process improvement resulted in a 73 percent decrease in late arrivals, 60 percent decrease in no shows, and a 50 percent increase in on time appointment arrivals.

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# McGuire VAMC Offers An All-Female Therapy Program

By David Hodge  
Richmond VAMC Public Affairs

Women are the fastest growing geographic contingent among Veterans. The steady influx of women back into the private sector, after their military service to the nation, has provided VA fresh opportunities to evolve into an organization that celebrates their service.

To meet the ever-changing needs of the Veteran population, the recreation therapy section of the Physical Medicine and Rehabilitation Department at Richmond VAMC offers female Veterans the chance to participate in leisure activities known to them and/or acquire and develop new leisure interest and skills. In addition to receiving therapy, the members of this all-female group also enjoy camaraderie and support from one another.

While participating in the recreation therapy program at the Richmond VAMC, female Veterans begin to understand they are not alone. Shari Hicks, Veteran and Chief of Recreational Therapy speaks on the benefits of an all-female group, “They develop a sense of community as they meet together to share experiences, ideas



**Mary Betty-Brooks**

*Female Veterans participate in a painting class to learn more about themselves and build interpersonal relationships in a positive and welcoming environment.*

and provide emotional support for one another. They

[Continued on Pg 7](#)

# Fishing For Healing

By David Hodge  
Richmond VAMC Public Affairs

For more than 10 years, volunteers from Project Healing Waters Fly Fishing (PHWFF) have joined the recreation therapy department at Richmond VAMC to teach Veterans the joys of fly fishing. This relationship has evolved to PHWFF sponsoring multiple fly fishing trips in the community. In addition, the participants are nominated and selected to attend all-expense-paid fishing trips around the country with other service members and Veterans.

“It is such a valuable program and I have seen so many successes, and it allows people to heal themselves through healing each other, which is a neat thing,” said Paulette Beasley, recreation therapist, at Richmond VAMC. She has been with the program from the beginning. According to Beasley, the first interaction between PHWFF and her patients was an introductory fly fishing class which taught Veterans to tie flies and cast. Originally established to meet the physical and emotional needs of wounded service members recovering at Walter Reed Army Medical Center, PHWFF has partnered with VA hospitals and military treatment facilities across the nation.

Their efforts are primarily volunteer driven and financially supported by charitable donations from private and corporate sponsors.

According to their mission statement, “Project Healing Waters Fly Fishing, Inc. is dedicated to the physical and emotional rehabilitation of disabled active military service personnel and disabled veterans through fly fishing and associated activities including education and outings.”

Steve Lewis, program manager for PHWFF in Virginia over sees the nine programs running in the state. Lewis explained the broad scale of the sport and how it can accommodate an angler at any level.

Lewis stated that fly fishing is suitable for both fresh water and salt water. He said depending on the lure, a fly can catch a small sunny fish or a 300-pound marlin. Participants and coordinators alike feel the success of PHWFF lies in the comradery and fellowship between Veterans and service members. Also, many of the participants go on to teach and mentor newcomers.

Nicky Dayton, a former Army engineer with the 82nd Airborne has been a part of PHWFF for two years. Dayton, an Iraqi Veteran suffered a mild traumatic brain injury while on active duty. When she returned home she said she suffered from depression and a suicidal episode. In expressing her appreciation for being a part of PHWFF, Dayton said, “Healing Waters saved my life.



**Tomeka Graham**  
*Andre Holcomb and a volunteer fisherman celebrate the catch of a sunfish during a recent Project Healing Waters Fly Fishing (PHWFF) trip.*

They have showed me through fishing and relationships that there is hope for people like me. Now I want to get up every day and fish and live!”

Currently, Dayton is a mentor to many participants in the program. She helps them check their equipment, tie their flies, cast their lines, and catch their fish. She also stands by as a listening ear for anyone who wants to share their story or struggles.

Andre Holcomb has participated in the PHWFF program for five years. During that time, he has gone on various fishing trips around the county and Canada. From the beginning, Holcomb said he was excited to work with PHWFF because it was an opportunity to do something he had never done before. Although enjoyable, learning to fly fish is a challenge. “There are several steps,” said Holcomb. “This is the opposite of fishing. It took me one year to learn to cast out. You can’t just wake up and do this. It is a long and tedious avenue. You have to have patience.” Since being in the program Mr. Holcomb can tie his own flies and has passed on this skill to his grandchildren. He also helps mentor and teach newcomers.

Beasley said she is excited about the future of the relationship between her therapy program and PHWFF and feels the program is invaluable and beneficial to Veterans. She has watched it grow and feels it can only get bigger and better.



# Salisbury VA Improves Prosthetic Device Access

Six months ago, a group of Salisbury VA employees sat down with a common goal: improve the timeliness of Veterans' access to prosthetic devices. Since then, the group has reduced the number of days Veterans in primary care typically wait for the most common prosthetic items from 48 days down to one day.

In years past, if a Veteran saw their primary care doctor and needed a prosthetic item – even one as simple as a cane – the process often took multiple weeks and involved the Veteran returning to the facility.

Melissa Yost, the Patient Aligned Care Team coordinator at Salisbury VAMC, said the inter-service project team she helped lead first identified the 20 most commonly issued prosthetic items to primary care patients. Using this list, the project team created a process for ac-

cess points in primary care for Salisbury, the Charlotte HCC and the Kernersville HCC for these items.

Now, Veterans in primary care can receive ankle braces, back braces, blood-pressure cuffs/monitor, canes, compression hose, crutches, diabetic socks and other items at the time of their primary care appointment.

“Veterans are sometimes shocked they are able to leave with the equipment they need that day,” said Yost.

The Chief of Prosthetics, Army Veteran Andre Judkins, credits Primary Care nurses and the nursing team for this breakthrough access project. Nurses do measurements, fitting and education with Veterans, which

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## Durham continued from Pg 5

In keeping with the new VA cultural transition MyVA, the facility has also created a new Veterans Experience Coordinator Service Line. This position will develop a scheduler service line to identify and resolve systemic issues that are barriers to providing an ideal customer experience. Like many other VA medical centers, the Durham VAMC is adopting Audiology & Optometry Direct Scheduling. This will enable Veterans to arrange direct scheduling for routine audiology and optometry appointments. They will no longer have to see their Primary Care physicians prior to scheduling non-emergent ear and eye appointments!

Also, Own the Moment/No Pass Zone is an empowering program that creates a call to action for all employees to take ownership in providing the ideal cus-

tommer experience for every Veteran, every time. Hire Right, Hire Fast is a VA-wide initiative for every facility to hire the right number of Medical Support Assistants with the right skills and customer service expertise to provide the ideal customer experience for Veterans.

During the training, leadership also unveiled the way forward for the organization. Seekins also issued a call to action for staff to think of ways to improve their respective work areas. She asked them, “Are there processes that need to be eliminated or streamlined, do you have an idea to help the organization provide our patients with the ideal customer experience? She implored staff to engage their service leaders “about how you can become involved in leading the change you want to see.”

## McGuire continued from Pg 5

are also able to learn more about themselves and build interpersonal relationships in a positive and welcoming environment.” This can be difficult to accomplish when men are present. According to Hicks, “Women are more comfortable around other women.”

When asked about the group and what it means to her, Army Veteran, Debra Austin, became emotional. “I deal with a lot of different things...this group plays a major part in my recovery. God bless whoever thought of it.”

Michaun Harrison, an Army Veteran who says she is legally blind, has PTSD, and travels with a guide dog, said she refrained from social gatherings because of her disabilities. However, after attending several outings with the group, Harrison had an epiphany, “You don’t have to stop living because of your disability.”

A popular get-together among the ladies is the monthly “Ladies Night Out.” These gatherings feature

a variety of activities which reinforce or introduce new leisure activities. A recent “Ladies Night Out” featured a Paint Night led by local artist, Amiri Richardson-Keys. During this activity, the group is shown a completed piece of art, which is used as a guide. Then, the group is collectively led in an introductory painting lesson. The result was a collection of fine art whose diversity reflected the women in the room.

Recreational Therapy reinforces the notion that leisure is an important aspect of life. Ample amounts of research suggest there is a strong correlation between leisure and quality of life. According to Hicks, the female Veterans recreational therapy program at Richmond VAMC provides not only therapeutic benefits, but it fosters sisterhood.

Any Veteran interested in being a part of this up-and-coming and coming group of women, should consult their primary care or mental health provider.

# Wytheville CBOC Vets Find Easier Access To Physical Therapy

By Ann Benois  
Salem VAMC Public Affairs

“It’s wonderful not to have to go up I-81 twice a week to the Salem PT Clinic. I live just 20 minutes away from the Wytheville Clinic vs. a 1-1/2 hour trip to Salem. It’s great to have Jessie (Edwards) provide the same services at the Wytheville Clinic that I had been getting in Salem!”

“Having Physical Therapy in Wytheville is great. It saves me both time and money. The staff is wonderful.”

These glowing Veteran comments are all about a new Telerehabilitation program offered at the Wytheville CBOC. Veterans living in rural areas often find it challenging to drive the 50-plus miles to Salem VAMC to obtain a Physical Therapy assessment and treatment. This program is aimed at improving their access to physical therapy by providing it closer to their home and reducing the expense of travel and inconvenience for the Veteran.

The program began in 2014 through a grant provided by the Office of Rural Health. It was implemented in phases. Phase 1 included a one-time evaluation conducted at Salem VAMC with follow up treatments provided at the Wytheville CBOC. Phase 2 included re-evaluations being conducted at Wytheville through the use of Clinical Video Technology (CVT). In this phase, the physical therapist at Salem VAMC was connected by video to the Physical Therapy Assistant at the Wytheville CBOC.

Since the implementation of the program in February 2016, Wytheville CBOC has provided approximately 267 consultations and 616 follow up treatments. Between 40-65 Veterans are seen per week through the program. This equates in the neighborhood of 5,600 to 9,100 miles a week of travel time and expense that Veterans would have had to make to Salem to obtain their evaluations and treatment. Often this would mean more than one trip per week depending on the treatment plan. The majority of the referrals are for musculoskeletal conditions.

Dr. William Adkins, PT, DPT, OCS and Dr. Anthony Caruso, PT, DPT said that the collaboration and ability to have direct contact with the Physical Therapy Assistant, Ms. Jessica Edwards, LPTA is one of the greatest benefits of the program. “We huddle at least twice a day and go over each Veteran’s case. The program uses evidence based practice guidelines such as the McKenzie method of Mechanical Diagnosis and Therapy (MDT) and the Selective Functional Movement Assessment (SFMA). We have a great support team in the background to help us with the CVT support and IT portion should we have any problems,” said Dr. Adkins.



**Ann Benois**

*Physical Therapy Specialist Jessica Edwards (on-screen) is being directed to manipulate a patient position by therapist Dr. William Adkins, who interacts with both the therapy specialist and their patient during a telehealth Physical Therapy session.*

“I think one of the greatest benefits to our program is that a Veteran is provided with one on one service. They get to know us and know that they have continuity by seeing the same provider for all of their treatments,” added Jessica Edwards, LPTA Licensed Physical Therapy Assistant. During the visit, Ms. Edwards works with Dr. Adkins using clinical video technology. Dr. Adkins evaluates the individual patient and writes a plan of care. Ms. Edwards then provides face to face treatment with the patient at the clinic. Dr. Adkins supervises the plan of care for all patients. If evaluations or re-evaluations are performed via CVT, Dr. Adkins joins remotely from Salem and directs Ms. Edwards to perform any necessary physical evaluation techniques including: range of motion measurements, manual muscle testing, reflexes, special testing, etc.

“Patient education is important in providing Physical Therapy. I am able to pull up x-rays and MRI results and review them with the patient on the screen. Helping them understand exactly what we are trying to achieve with Physical Therapy goes a long way in patients making the most of their therapy. We review their home exercise plan and Ms. Edwards helps them perform the exercises correctly and guides follow up treatment,” continued Dr. Adkins.

Providers agree that the program is working well. “Working in the CBOCs, I have noticed that making physical therapy as an integral part of service has been

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# Office Of Connected Care At 117th VFW Convention

By Dr. Mary Foster  
VISN 6 Office of Connected Care

VISN 6 My HealtheVet and Telehealth Program staff represented VA's Office of Connected Care at the 117th National Veterans of Foreign Wars Convention June 23-26 in Charlotte, N.C. VFW staff reported that over 2,000 Veterans registered for this event, not including family members and guests.

VISN 6 Telehealth Program Manager Dr. Mary C. Foster and Junius Lewis, National Telehealth Services led the effort showcasing the Office of Connected Care's exhibits for convention attendees. The exhibits included presentations of My HealtheVet and three forms of telehealth.

VISN 6 My HealtheVet Coordinators shared their time and expertise to meet with approximately 550 Veterans and family members from across the nation. While there, visitors could register on My HealtheVet and those who were already enrolled in VA could complete the one-time authentication process. Local host Robin Powell, from Salisbury VAMC, with Fayetteville VAMC's Tom McCaffery and Richmond VAMC's Gwen McMillian took the opportunity to help some Veterans retrieve their My HealtheVet User ID and/or password, allowing them to re-engage back their My HealtheVet personal health record. It was a true "One Stop, My HealtheVet Shop."

As Veteran Bernard B. Dickens (Durham, N.C.) professed, "It's hard to believe, it is great to have it. Thank you [VA] for providing such a wonderful idea for the Veterans."

Anthony Gardner from Tampa, Fla. stated, "My HealtheVet is easy to use and Secure Messaging puts me in touch with my provider much faster than using my phone." Gardner uses My HealtheVet for medication refills, and also likes to review his lab work after appointments.

The VISN 6 Telehealth Program supported the MHV booth with exhibitions of technology showcasing the three Telehealth modalities (Home Telehealth, Store and Forward Telehealth and Clinical Video Telehealth), demonstrating how the program is in line with the provision of highest quality Veteran-Centric care and services. The Home Telehealth for Chronic Disease management messaging and monitoring devices also demonstrated that Telehealth delivers care at the right place, at the right time to the right Veteran.

Veterans, with their spouses and caregivers explored demonstrations of disease management protocols and better self-care management techniques by specially trained Home Telehealth Registered Nurses Linda Anderson, Jennifer Terndrup, Marcia Watkins,



**Luke Thompson**

*VISN 6 Connected Care Coordinator Dr. Mary Foster demonstrates a variety of telehealth apparatus for VA Under Secretary for Health Dr. David Shulkin during the 117th VFW National Convention.*

and Felicia Stanback.

The problems associated with chronic disease management are more profound in remote, rural and small urban areas. One way of improving access to care is through home telehealth. Referring to the care he received, Robert Hendrickson of Louisville, KY related a story of his problems with diabetes, he claimed, "They are wonderful!" Hendrickson connected with Home Telehealth at the Robby Rex Hospital for his diabetes through the Home Telehealth Connection (Care Coordinator), and not only did they handle his diabetes but many of his other health concerns. Another passionate Veteran exclaimed, "I have a scale (attached to the in-home monitoring device), and it's like going to a the doctor without leaving my home."

The display included a demonstration of Store and Forward Telehealth (SFT) technology for Diabetic Retinopathy by Telehealth staff Joseph Ferrand, Jeffrey Medlin, Christine Borden-Pickett, Arlene Imes, Vickie Stepanian and Teresa Stiles. VISN 6 implemented its first SFT Diabetic Retinopathy Screening in 2005 piloting only 4 sites. Now over 40 TRI clinics are operational, enabling more than 16,000 Veteran encounters, utilizing a same day access, and a walk-in screening clinic serving Type II Diabetics.

Staff utilized Clinical Video Telehealth (CVT) through the PTSD Hub at the Charlotte HCC live feeds with clinical psychologists at the convention center. According to Foster, "Our Mental Health com-

**Continued on Pg 10**

### POW/MIA Day Is Sept. 16

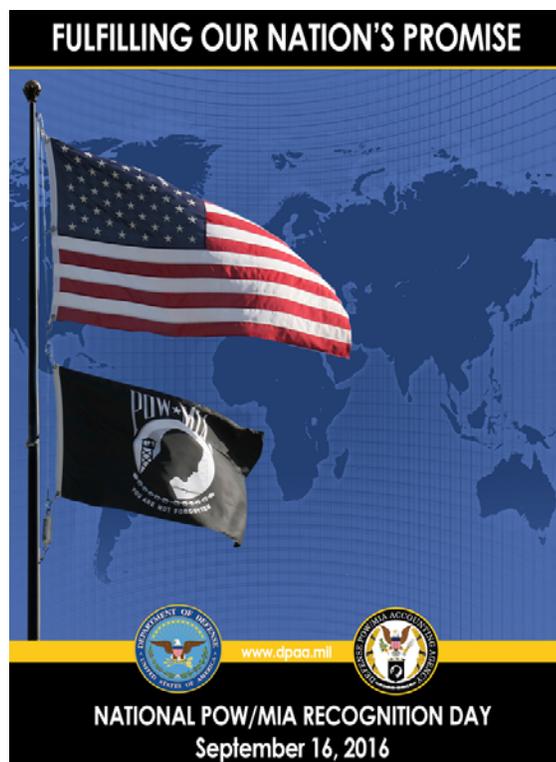


The President annually issues a proclamation commemorating POW/MIA Recognition Day, to remind the nation of those who have sacrificed so much for their country.

Observances of National POW/MIA Recognition Day are held across the country on military installations, ships at sea, in state capitol buildings, schools and Veterans facilities. It is traditionally observed on the third Friday in September each year.

This observance is one of six days throughout the year that Congress has mandated the flying of the National League of Families' POW/MIA flag. The others are Armed Forces Day, Memorial Day, Flag Day, Independence Day and Veterans Day.

The flag is to be flown at major military installations, national cemeteries, all post offices, VA medical facilities, the World War II Memorial, Korean War Veterans Memorial, the Vietnam Veterans Memorial, the official offices of the Secretaries of State, Defense and Veterans Affairs, the director of the Selective Service system and the White House.



### Salisbury continued from Pg 7

has freed up availability of Kinesiotherapists, Occupational Therapists and Physical Therapists to spend more time assisting Veterans with rehabilitation.

Surgery, podiatry and chiropractic services have also created access points, and others are being reviewed.

Kaye Green, Salisbury VAMC director, said "This

is only one of many examples of continuous improvement projects we have in the Salisbury system, many which directly improve access to care for Veterans. We are excited to see such a tremendous impact on the Veterans we see every day." For further information about VA services visit [www.explore.va.gov](http://www.explore.va.gov) or like us on Facebook at [www.facebook.com/VASalisbury](http://www.facebook.com/VASalisbury).

### Wyethville continued from Pg 8

very beneficial," stated Primary Care provider, Dr. Frank Kuitems.

Another Primary Care provider, Dr. Russell Hendershot agrees. "The treatments provided have been beneficial to our patients' overall health and may help prevent the use of unnecessary medication by shortening recovery times and improving musculoskeletal health," he added.

What's next? Dr. Adkins indicated, "We will con-

tinue to adapt musculoskeletal assessments to the CVT medium to ensure access for rural Veterans".

Veterans sum it up in their comments. "I greatly appreciate Physical Therapy provided by Salem VAMC and Wytheville CBOC. It's the best PT I have received and I have had PT at other VA and civilian facilities. It has had tremendous value, eliminated the need for pain meds, and the therapist is extremely competent and works diligently."

### Telehealth continued from Pg 9

munity of practice is by far our largest and strongest consumers of Telehealth, which serves as a conduit for high quality Veteran care.

After all was said and done, Veterans from across the nation came to realize tremendous benefits from Office of Connected Care programs July 22-26.

Through their combined skills, talents and energy, VA staff create greater opportunities to expand and meet the growing needs of our national heroes, especially in remote areas. According to Robin Robillard-Smallwood, "Virtual Care and access are synonymous, it is a no-brainer."

### VA Addresses Suicide Prevention Month

September is Suicide Prevention Month. Suicide is an issue that affects all Americans. Recent Centers for Disease Control and Prevention data reported in April 2016 show that from 1999 through 2014 (the most recent year available from CDC), suicide rates increased 24 percent in the general population for both males and females. The American Foundation for Suicide Prevention reports on average there are 117 suicides per day, making suicide a nationwide public health issue.

Previously, it was reported that 22 Veterans die by suicide per day. A new VA study released Aug. 3 representing the most comprehensive analysis of Veteran suicide rates in the United States, examining more than 55 million Veterans' records from 1979 to 2014 from every state in the nation, shows an average of 20 Veterans a day died from suicide. Approximately 65 percent of all Veterans who died from suicide in 2014 were 50 years of age or older. Veterans accounted for 18 percent of all deaths from suicide among U.S. adults. This is a decrease from 22 percent in 2010.

Since 2001, U.S. adult civilian suicides increased 23 percent, while Veteran suicides increased 32 percent in the same time period. After controlling for age and gender, this makes the risk of suicide 21 percent greater for Veterans. Since 2001, the rate of suicide among U.S. Veterans who use VA services increased by 8.8 percent, while the rate of suicide among Veterans who do not use VA services increased by 38.6 percent. In the same time period, the rate of suicide among male Veterans who use VA services increased 11 percent, while the rate of suicide increased 35 percent among male Veterans who do not use VA services. In the same time period, the rate of suicide among female Veterans who use VA services increased 4.6 percent while the rate of suicide increased 98 percent among female Veterans who do not use VA services.

VA is aggressively undertaking a number of new measures to prevent suicide, including: VA has implemented comprehensive, broad-ranging suicide prevention initiatives, including a toll-free Veterans Crisis Line, placement of Suicide Prevention Coordinators at all VA Medical Centers and large outpatient facilities and improvements in case management and tracking. In addition, VA recently announced the creation of a satellite Veterans Crisis Line site in Atlanta, Ga., for increased staffing capability and geographic redundancy; the satellite site is expected to be operational in October 2016 with 200 additional responders.

Ensuring same-day access for Veterans with urgent mental health needs at over 1,000 points of care by the end of calendar year 2016. In fiscal year 2015, more than 1.6 million Veterans received mental health treatment from VA, including at over 150 medical centers,

820 community-based outpatient clinics and 300 Vet Centers that provide readjustment counseling. Veterans also enter VA health care through the Veterans Crisis Line, VA staff on college and university campuses, or other outreach points.

VA is expanding telemental health care by establishing four new regional telemental health hubs across the VA healthcare system. VA is also hiring over 60 new crisis intervention responders for the Veterans Crisis Line. Each responder receives intensive training on a variety of topics in crisis intervention, substance use disorders, screening, brief intervention, and referral to treatment.

Building new collaborations between Veteran programs in VA and those working in community settings, such as Give an Hour, Psych Armor Institute, University of Michigan's Peer Advisors for Veterans Education Program (PAVE), and the Cohen Veterans Network. Creating stronger inter-agency (e.g. Substance Abuse and Mental Health Services Administration, Department of Defense, National Institutes of Health) and new public-private partnerships (e.g., Johnson & Johnson Healthcare System, Bristol Myers Squibb Foundation, Walgreen's, and many more) focused on preventing suicide among Veterans.

Other VA mental health information can be found on the VA Mental Health page at [www.mentalhealth.va.gov](http://www.mentalhealth.va.gov).

Information about the Crisis Line is available at [www.VeteransCrisisLine.net](http://www.VeteransCrisisLine.net); Veterans in crisis can call Crisis Line at 800-273-8255 (press 1) or texting 838255.

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# 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/](http://www.asheville.va.gov/)

**Durham VAMC**  
508 Fulton St.  
Durham, NC 27705  
919-286-0411, 888-878-6890  
[www.durham.va.gov/](http://www.durham.va.gov/)

**Fayetteville VAMC**  
2300 Ramsey St.  
Fayetteville, NC 28301  
910-488-2120, 800-771-6106  
[www.fayettevillenc.va.gov/](http://www.fayettevillenc.va.gov/)

**Hampton VAMC**  
100 Emancipation Dr.  
Hampton, VA 23667  
757-722-9961, 866-544-9961  
[www.hampton.va.gov/](http://www.hampton.va.gov/)

**Richmond VAMC**  
1201 Broad Rock Blvd.  
Richmond, VA 23249  
804-675-5000, 800-784-8381  
[www.richmond.va.gov/](http://www.richmond.va.gov/)

**Salem VAMC**  
1970 Roanoke Blvd.  
Salem, VA 24153  
540-982-2463, 888-982-2463  
[www.salem.va.gov/](http://www.salem.va.gov/)

**Salisbury VAMC**  
1601 Brenner Ave.  
Salisbury, NC 28144  
704-638-9000, 800-469-8262  
[www.salisbury.va.gov/](http://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

**Charlotte HCC**  
3506 W. Tyvola Rd.  
Charlotte, NC 28208  
704-329-1300

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

**Chesapeake CBOC**  
1987 S. Military Highway  
Chesapeake, Va 23320  
757-722-9961

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

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

**Fayetteville HCC**  
7300 So. Raeford Rd  
Fayetteville NC 28304  
910-488-2120  
800-771-6106

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

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

**Fredericksburg at Southpoint CBOC**  
10401 Spotsylvania Ave, Ste 300  
Fredericksburg, VA 22408  
540-370-4468

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

**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**  
4006 Henderson Drive  
Jacksonville, NC 28546  
910-353-6406

**Kernersville HCC**  
1695 Kernersville Medical Pkwy  
Kernersville, NC 27284  
336-515-5000

**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 Road  
Rutherfordton, NC 28139  
828-288-2780

**Sanford CBOC**  
3112 Tramway Road  
Sanford, NC 27332  
919-775-6160

**Staunton CBOC**  
102 Lacy B. King Way  
Staunton, VA 24401  
540-886-5777

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

**Virginia Beach CBOC**  
244 Clearfield Avenue  
Virginia Beach, VA  
757-722-9961

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

**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

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

**Fayetteville Vet Center**  
2301 Robeson Street  
Fayetteville, NC 28305  
910-488-6252

**Greensboro Vet Center**  
3515 W Market Street, Suite 120  
Greensboro, NC 27403  
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

**Raleigh Vet Center**  
8851 Ellstree Lane  
Raleigh, NC 27617  
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