THE FAYETTEVILLE VAMC HONORS HOSPITALIZED VETERANS

(Left to Right) Tar Heel Quilters Guild members Judith Fipps and Cindy Clifton present a quilt to Veteran Cleo May during Salute to Veteran Patients festivities at the Fayetteville VAMC in February.

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Continue reading the Network Director letter for more information regarding women Veteran Program Managers ON PAGE 2
During Women’s History Month, we at VA honor our Women Veterans for their service to our great nation. We celebrate their brilliance and fearlessness as they continue to break through barriers and pave new ways for women around the world. Today, as I write this, there are nearly 2 million women Veterans, 214,000 women serving on active duty, 118,000 in the reserves, and 470,000 in the National Guard—all serving in a time of need right next to their male counterparts, while taking on the challenges of transitioning into civilian life.

America knows the great stories of our military women, stories like the one of Mrs. Millie Dunn Veasey. She turned 100 this year. She is one of our WWII Veterans and her life is one of honor and advocacy for doing the right thing—all of the time. She joined as an enlisted soldier and left as a staff sergeant, which was very rare in WWII. If you ever get the pleasure of meeting Mrs. Veasey, she will tell you that she worked hard to stay busy and always do something for somebody. She believes in family, church, and being a Veteran. Being an advocate for women has been one of the greatest joys of her life. Veteran women like Mrs. Veasey are whom we honor this month.

The hard part for our women Veterans today is recognizing that they, too, are Veterans and that they deserve all the benefits that they have earned. According to our statistics, only one in five women Veterans takes advantage of her benefits. We as a community need to change that. We need to help and encourage our women Veterans to sign up for VA health care, access their GI bill and home loan. Together, we can help make transitioning from the military to civilian life easier for our women Veterans.

In today’s publication you will see a list of all our women’s health coordinators below. If you have a question about health care or benefits, we want you to call and talk to them—they are there to help. And that’s how we honor the service of our women Veterans.

Sincerely,
DeAnne M. Seekins
VISN 6 Network Director

New VA Medical Center Leadership Announced in North Carolina

The Department of Veterans Affairs is pleased to announce the appointment of Paul Crews as the new director of the Durham VA Health Care System and Joseph Vaughn as director of the Salisbury VA Medical Center. They are expected to begin their duties March 19.

Joseph Vaughn has been appointed to direct the Center, one of the fastest-growing VAMCs over the 2000s. The Salisbury VAMC is located in the Central Piedmont region of North Carolina. With responsibility for two major health care centers and two community-based outpatient clinics, it also serves as the Tele-retinal reading hub for VISN 6 and PTSD tele-mental health hub for VISN 6. Prior to his arrival in VISN 6, he served as Assistant Director and then Associate Director of the G.V. (Sonny) Montgomery VA Medical Center.

Mr. Vaughn served in the United States Navy from 1983-1993, completing four Mediterranean cruises and was awarded the Navy Commendation Medal. Prior to joining the medical center in Jackson, Mr. Vaughn served as the Chief Logistics Officer for the South Central VA Health Care Network, an integrated system of 10 VA medical centers providing a full range of specialty, tertiary, mental health and long-term care in an eight-state region, where he managed all aspects of the supply chain and vehicle fleet programs within the network. Mr. Vaughn is a native of Durant, Miss., and received his Bachelor of Science degree from the University of Phoenix in Information Technology, and has a Master’s degree in Business Administration from Mississippi State University. He is a 2012 graduate of the Veterans Health Administration (VHA) Health Care Leadership Development Program and a 2013 graduate of the Federal Executive Institute.

Mr. Vaughn holds the Senior Level Federal Acquisition Certification for Program and Project Managers, and is an American Hospital Association Certified Material and Resources Professional, and is also a member of the American College of Health Care Executives. He will assume leadership duties in Salisbury March 18.

Paul S. Crews, MPH, CPHQ, FACHE, was just selected director of the Durham VA Health Care System. Crews will oversee delivery of health care to nearly 70,000 Veterans with an operating budget of $618.7 million. The Durham VA Health Care System serves nearly 70,000 Veterans at 10 sites of care within a 27-county catchment of central and eastern North Carolina. He comes to the Durham VAHCS after serving as interim director for the Buffalo, NY VAMC and his most recent permanent assignment with the San Francisco VA Health Care System, where he was the Deputy Director overseeing non-clinical operations since January 2016. He previously served as the Associate Director of the Tennessee Valley VA Health Care System (TVHS) in Nashville, Tenn. Before that, he served as the Chief of Quality, Safety, and Value at TVHS for more than four years. Prior to joining the VHA, Mr. Crews was Associate Administrator for the Riverside Health System’s Tappahannock Hospital in Virginia, Vice President of the Virginia Rural Health Association, and served as the Chair of the State’s Rural Health Workgroup on Quality. Mr. Crews has more than 28 years of healthcare experience, including rural emergency medical services, hospital emergency medicine, military medicine with both the Navy and Army, rural community health planning, rural health policy analysis, healthcare quality and patient safety, and healthcare administration.

Crews earned his Bachelor of Healthcare Administration degree from Texas...
Stephanie A. Youn stepped into the lead role as the new director of Asheville’s Charles George VA Medical Center Feb. 20. As the medical center’s chief executive officer, Young now oversees a staff exceeding 1,700, is responsible for an operating budget of more than $365 million, and delivering health care to nearly 48,000 Veterans.

“We are excited to welcome Stephanie Young to our team as the new director of the Asheville VA Medical Center,” said DeAnne Seekins, Veterans Integrated Service Network (VISN) 6 Director. “She has been with the VA for more than 25 years and comes to us with extensive experience and a proven history of making sound decisions for staff and our Veterans. She will be a valuable asset for the facility, our employees and volunteers, and most importantly, for the Veterans we are honored to serve.”

Young comes to the position with more than 12 years of VA Leadership experience, through a variety of positions at facilities in Saginaw, Mich., and the Iliana Health Care System in Danville, Ill. She has served in the capacity as director of the VA Iliana HCS since December 2015, responsible for operations and services for more than 40,000 enrolled Veterans in the 239-bed hospital, including a 156-bed Community Living Center and four outpatient clinics, with oversight of a budget exceeding $176 million and a workforce of 1,500.

The Charles George VAMC is a Joint Commission accredited, tertiary referral, 1C facility offering a full spectrum of health services to Veterans residing in a 23-county area of Western North Carolina.

The medical center has 119 authorized acute care beds (including a 16-bed inpatient psychiatric unit), two state-of-the-art Intensive Care Units, 120 authorized Community Living Center (CLC) beds, and 18 authorized Substance Abuse Residential Rehabilitation Treatment Program beds. The medical center also operates community-based outpatient clinics (CBOCs) in Franklin, Rutherford County, and Hickory, N.C.

New VA Medical Center Paul S. Crews (Cont’d)

State University, and received his Master of Public Health in Management and Policy from the School of Public Health at Texas A&M University. Mr. Crews served seven years in the United States Navy. He is active in his community as a past member of the Board of Examiners for the Tennessee Center for Performance Excellence. He is a member of the National Association for Healthcare Quality and a Fellow of the American College of Healthcare Executives.
Fayetteville Honors Hospitalized Veterans

By Norma Fraser | FAYETTEVILLE VAMC VOLUNTEER SERVICES

Every year during the week of Valentine’s Day, the Department of Veterans Affairs (VA) observes National Salute to Veteran Patients. This salute is a way for our community to honor and express its gratitude and appreciation to our inpatient and outpatient Veterans. In Fayetteville, our community partners and service organizations are so supportive that we hold a variety of activities throughout the month of February. From the thousands of Valentine’s Day cards to the special visits (Fayetteville Marksmen, Re-Creation stage show, Tar Heel Quilters Guild), luncheons, bingos and gift bags, our community partners outdid themselves showing their support, admiration and respect to our Veterans. Thank you to all those who participated in this year’s National Salute to Veteran Patients.

Durham Technician Awarded for Devotion to Animals

By Durham | VAHCS STAFF

Durham VA Health Care System Animal Care Technician Stephanie Cox was recently recognized with the organization’s Great American Award. She received the award because of her dedication and sense of responsibility for the facility’s research animals during the 2018 winter storm.

Due to the extreme weather, the Animal Research Facility (ARF) experienced a catastrophic failure of the main medical center’s HVAC system. Temperatures reached the low 20s during the day, with single-digit lows expected overnight. Space heaters were placed in the animal holding room to moderate the temperatures, but needed to be monitored periodically. During the day, this was done by ARF staff. However, overnight checks were necessary to ensure the wellbeing of the animals.

Stephanie came to work at 1:00am to check the space heaters and make sure the temperatures in the animal holding rooms were within allowable limits. Due to her vigilance, DVAHCS ensured that the animals were cared for and safe. Had she not done so and the space heaters failed, the loss in animals and wasted research would have been well over a million dollars.

As the week progressed, problems with the ability to control the temperatures in building 14 continued. Stephanie volunteered to come in, day or night, to assist with making sure that space heaters were running, doors were open or closed as needed and that the animals were safe.
Hope Gives Female Veterans a Reason to Celebrate

A group of Veterans gathered to celebrate hope and healing at the Hampton VA Women’s Center, Feb. 13.

The celebration recognized the one-year anniversary of the newly formed group known as Veteran ‘Hope,’ which is an inspirational group for female Veterans. The group is affiliated with Veteran ‘X,’ an inter-gendered group.

Both groups are designed to help empower Veterans in recovery, for mental illness and substance abuse addictions, to live independently in the community of their choosing.

“I feel safe here,” said group member Lisa Sweeney.

“I originally came for treatment for my Post Traumatic Stress Disorder (PTSD) and that is when I met my mentor Jill.”

“The VA played an important role in my own personal recovery from alcohol more than 20 years ago,” said Jill Lindsay, Hampton VA Medical Center Peer Support Counselor and facilitator for both groups. “I have seen first-hand how Veteran ‘Hope’ and Veteran ‘X’ provide the support and camaraderie so many Veterans need when attending these programs.”

During the two-hour session, Veterans meet and are given a scenario about a fictitious Veteran facing any number of issues from medical, anxiety, domestic violence, and childcare to name a few.

“The group comes together as a team and we decide how to help the fictitious Veteran,” said Sweeney. “The problem we try to solve may actually be what someone in the group is dealing with. This provides a safe way for problems to be discussed without disclosing all the details and provides answers and solutions or resources to help ‘them’ which helps them overcome personal barriers.”

Sweeney is a 20-year Army Reserve Veteran who has battled substance abuse throughout the years, which she attributes to a traumatic sexual experience in boot camp.

“I would encourage Veterans to get help and not to wait,” said Sweeney. “Take control now — don’t sit on it. There are better services available and opportunities to get the help you need.”

There are currently eight Veteran ‘Hope’ Programs ongoing at eight VA Medical Centers nationally, said Lindsay.

Currently, there are 10 female Veterans who attend Veteran ‘Hope’ on a regular basis at the Hampton VAMC. “My goal is to bring in as many Veterans as possible,” said Lindsay. “The larger the group, the better the input and the dynamic of the group.”

“I used to feel judged by my past,” said Sweeney. “Sometimes you can feel like you are alone but I don’t feel that way anymore. This is a good group. I just have to stay connected.”

Fayetteville VA Celebrates Black History Month

Fayetteville VA Interim Director Dr. Mark Shelhorse and Chief of Surgery William Weaver presented a certificate of appreciation to E. E. Smith High School Air Force Junior ROTC instructor Chief Master Sgt. James Mitchell for the AFJROTC Color Guard’s support of Black History Month celebration at the FVAMC Main Campus.

In 2010, after attending several Veteran X sessions, two female Veterans wanted to start an all-female session to help encourage women who felt uncomfortable sharing their issues in an inter-gendered group. These Veterans were instrumental in establishing the group but sadly one suddenly passed away during that same year. Her sister took up the project and the first group session was conducted in 2011.

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Continuous Improvement (CI) Boards have been recognized as a VISN 6 Best Practice. The CI Boards provide leaders with an easy employee engagement tool that promotes collaboration and ownership. CI Boards allow staff to suggest improvement ideas focused on reducing waste and improving efficiencies, recommend solutions, receive timely feedback and track outcomes related to actions taken.

On Jan. 10, 2017, Salisbury Health Care System CI Boards were presented at VISN 6 Executive Leadership Council (ELC) as a Best Practice. VISN 6 facilities are utilizing a version of Salisbury’s CI Boards. Salisbury has provided the Board vendor information, Idea Slip Template, Board Tutorial, specifics for supplies needed, held coaching calls, provided a rollout plan, and has been available to assist as needed. Additionally, information has been requested and provided to VA facilities and program offices.

Currently 101 CI boards are being used throughout the Salisbury Health Care System. Since their inception in 2015, 1,838 ideas have been received and 836 ideas have been implemented. In addition, the virtual Telephone CI Board has been employed, mirroring the Team Board methodologies and SharePoint technologies to display and follow ideas submitted in real time. The virtual Board utilizes an Improvement Idea Slip (InfoPath Form) designed for staff to quickly report any telephone issues to a central location for resolution.

Salisbury’s Continuous Improvement Program is aligned with VA/VHA Priorities and impacts SAIL and AES Scores. AES impact questions tracked since 2012 include: “My Ideas and opinions count,” “New practices and ways of doing business are encouraged in my workgroup,” “It is safe to try something new in this work group,” “Psychological safety” and “Engaged profile.”

As recently mentioned in the Salisbury Post, “Hospital representatives said they have been working diligently to improve their star rating over the past five years, raising it from two to four in the past five years. The work includes improving the telephone answering and response rates and implementing measures suggested by clients and staff, such as a walking track known as The Blue Loop.” The Blue Loop idea was suggested and implemented in the Mental Health department, where a walking path was created by placing blue tape on the floor. Veterans and staff enjoy walking throughout the day to music, which has resulted in healthy lifestyle choices, social interaction, positive coping skills, and therapeutic relationships.

CI Boards have made a positive impact throughout the Salisbury Health Care System, VISN 6 facilities, and VHA.

Stay Current With Camp Lejeune Updates

In a new video, VA Secretary Dr. David Shulkin describes disability compensation and health care benefits available for Veterans — and in some cases, family members — stationed at Camp Lejeune. This video is available on YouTube at https://www.youtube.com/watch?v=OfiINMMTof4.

SAMHSA and VA Announce Cities Participating in the Mayor’s Challenge

The goal of the Mayor’s Challenge is to reduce suicides among service members, Veterans and their families using a public health approach to suicide prevention. The eight city teams will meet in Washington March 14-16, 2018, to develop strategic action plans for their communities. The teams will contain members from community groups, local government, military and others. SAMHSA’s Service Members, Veterans and their Families Technical Assistance Center will provide technical assistance to the teams.

SAMHSA and VA are committed to working with communities to bring this support to service members, Veterans and their families. Along with the eight cities participating in this year’s Mayor’s Challenge, VA has committed resources to support technical assistance for an additional 20 locales.

Others interested in learning more about the Mayor’s Challenge can submit a request for information form at http://bit.do/mayorschallenge (link is external). For more information on VAs suicide prevention campaign, visit http://www.Veteranscrisisline.net/bethere (link is external). For information on SAMHSAs suicide prevention efforts, visit https://www.ssamhsa.gov/suicide-prevention/samhsas-efforts.

Veterans who are in crisis or having thoughts of suicide — and those who know a Veteran in crisis — can call the Veterans Crisis Line for confidential support 24 hours a day, seven days a week, 365 days a year. Call 800-273-8255 or press 1, or chat online at www.VeteransCrisisLine.net/Chat (link is external), or text to 838255.

For more information, contact the SAMHSA Press Office at (240) 276-2130.
VA Police Officers Further Serve Veterans and Their Families

The Salem VA Medical Center is not only served by health care providers delivering quality health care to our Nation’s Heroes, it is also served by a team of police officers and dispatchers who make up the Salem VA Medical Center’s Police Department and is tasked with administering all law enforcement and security related issues involving all VA controlled property assigned to the Salem VA Medical Center.

Administering law enforcement and security is not all that Salem VA Medical Center’s Police Officers perform, they are also trained to administer Naloxone, also known as NARCAN which is used to treat opioid overdoses in an emergent situation. Naloxone safely blocks the effects and reverse the overdose.

“Our police officers are now trained to carrying Naloxone. This allows the facility a way to rapidly respond throughout our 223-acre campus to a suspected opioid overdose. This is one of our many ways of helping Salem VA Medical Center ensure a safe and secure environment,” Dale Hendley, Chief of Police for Salem VA Medical Center explained.

According to the Center for Disease Control’s 2016 Fact & Figures, drug overdose is the leading cause of accidental death in the United States, with 52,404 lethal drug overdoses in 2015. Opioid addiction is driving this epidemic, with 20,101 overdose deaths related to prescription pain relievers, and 12,990 overdose deaths related to heroin in 2015.

“We need to ensure that our Veterans, Employees, Students and Visitors are taken care of and is protected in the safest way possible,” Hendley said.

The CDC explained in their report, there are 20.5 million Americans 12 or older that had a substance use disorder in 2015, 2 million had a substance use disorder involving prescription pain relievers and 591,000 had a substance use disorder involving heroin.

Salem VA Medical Center’s Deputy Chief Stan Malek explained, “As a VA Police Officer, our methods of law enforcement are often unique because most of our work is conducted in and around a health care setting. Our training includes advanced interpersonal communication, conflict resolution, and problem-solving skills, are required by our officers to be successful; as in addition to the full range of incidents and calls for assistance.”

Not only the primary role of VA Police is to serve as a uniformed police force to deter and prevent crime, maintain order, and investigate crimes, it is also to assist and provide support to Veterans when they are in need and that need may be the one need where a Veteran is struggling.

“We understand that some Veterans do things because of their illnesses, which may be beyond their personal control. We also understand that their behavior may be because of their health care status. Therefore, we are always enforcing situational law enforcement techniques,” said Stanley Chatfield, a police officer for Salem VA Medical Center.

VA police officers work in an environment which includes an extremely high percentage of Veterans who are returning combat veterans. VA police officers must strive to enforce the laws while also using situational law enforcement in performing their assigned duties. VA Police work with other VA staff to maintain an equitable balance, ensuring that the health care needs of Veterans are being met while at the same time continuing to operate as a full federal law enforcement agency.

According to Hendley, this makes the department specialized because each police officer must take into account the combat history of the people they are working with and that each generation of war Veterans has different characteristics, concerns, and challenges.

The department does deal with Veterans’ criminal cases, arrests, and issues violation notices, however, a majority of the what the officers’ do is build interpersonal relationships and perform customer service with Veterans, visitors and staff. This helps promote psychological safety at Salem VA Medical Center.

“Day-to-day we could do anything from walking with Veterans, assisting them with directions, handling an assault incident, responding to a disorderly person, dealing with a theft, to responding to a motor vehicle accident,” Malek said.

When asked what his favorite thing to do on the job is? Hendley explained, “being able to share and listen to military stories with our Nation’s Heroes. It doesn’t matter if it’s while pushing them in a wheelchair or over a cup of coffee. We work daily to meet our motto which is to "Protect Those Who Served."

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Fayetteville Staff Develops Innovative Suicide Prevention Tool

Supporting VAs campaign to develop innovative ways to spread awareness about the Veterans Crisis Line and spread the word about the greater availability and accessibility of mental health services, the Fayetteville VAMC Suicide Prevention team has added a new or possibly overlooked audience to their outreach efforts.

A Suicide Prevention team member came up with the idea to provide coasters containing the VCL 1 (800) 273-8255 telephone number to Fayetteville area bar patrons and staff. “The idea is to have the VCL information readily available for support during potential vulnerable or crisis moments,” said Patricia Glenn, FVAMC Suicide Prevention/Reach Vet Coordinator. “Or the coaster can be passed on or shared with a friend or loved one of a Veteran.”

An additional outreach aim will include providing gun locks to local gun ranges, gun shops and police departments to encourage gun safety and means restriction. “The Fayetteville Suicide Prevention Team is working diligently to communicate the national message, ‘Suicide prevention is everyone’s business!’” Glenn said.

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Coasters with the Veteran’s Crisis Line telephone number are a newly developed innovation that the Fayetteville VAMC Suicide Prevention team is employing to spread the word about the availability of mental health services.
WHO IS A WOMAN VETERAN?

A woman is a Veteran if she served in the active military, naval or air service and separated under any conditions other than dishonorable. There are more than 2 million women Veterans living in the U.S. today. Women are the fastest growing group in the Veteran population. In 2000, women were only 4% of the Veteran population. By 2040, women will be 18% of the Veteran population. Today’s women Veterans are the best-educated and most diverse generation. They are generally younger than male Veterans and will have many opportunities to receive VA care.

WHY DO WOMEN CHOOSE VA?

VA understands women Veterans. VA’s approach to care is unique for women Veterans. Women Veterans are assigned one Designated Women’s Health Provider to coordinate your care, and provide primary care and gender specific care. A woman Veteran isn’t limited to just one hospital or clinic to receive care. She has access to the entire VA health system, which is 144 hospitals, 1,221 outpatient clinics, and over 300 Vet Centers across the US.

WHAT SERVICES DOES VA OFFER?

VA provides comprehensive primary care that includes services for acute and chronic illnesses, preventive services, and genderspecific care, and other services. VA’s medical staff are experts in providing medical care and services beyond primary care, including:

- Mammography
- Gynecology
- Military sexual trauma-related care
- Counseling
- Military and environmental exposure

Women Veterans can apply for VA health care enrollment and other Veterans benefits by completing VA Form 10-10EZ. To complete the form: Apply online at www.1010ez.med.va.gov. Visit, call, or write to any VA health care facility or Veterans’ benefits office or call the VA Health Benefits Call Center toll free at (877) 222-VETS (8387)

Get more information online about VA benefits (www.vba.va.gov) and eligibility at www.va.gov/healtheligibility/

Women Veterans Call Center (885-VA-WOMEN) Offers Chat Function

The Women Veterans Call Center (885-VA-WOMEN) is expanding its outreach to women Veterans with a new online, one-to-one Chat Function. The new service enables women Veterans to go online and anonymously chat via real-time text messaging with a trained WVCC representative.

The new feature provides women Veterans with another avenue to ask general questions about benefits, eligibility and services specifically for women Veterans. WVCC chat is available by visiting the Women Veterans Health Care webpage at www.womenshealth.va.gov and clicking the “Chat with the Women Veterans Call Center” icon. As the Chat Function is anonymous; please do not use personally identifiable information such as social security numbers.

WVCC Chat is available Monday through Friday 8:00am-10:00pm ET, and on Saturdays from 8:00am-6:30pm ET. All the representatives at the Women Veterans Call Center are women, and many are Veterans themselves. In addition to linking women Veterans to information, the Women Veterans Call Center makes direct referrals to Women Veteran Program Managers (WVPM) located at every VA medical center. The Women Veteran Program Manager helps the woman Veteran coordinate services.
VA Innovators Gather at McGuire

By Patrick Gordon | Public Affairs Specialist

Innovation specialists from around the country gathered at the McGuire VA Medical Center in January to share ideas about how to improve quality of life for Veterans. The quarterly meeting brought together more than 60 VA innovation specialists from 33 VA Medical Centers to deep dive into skills around human-centered design, developing a business model, marketing and how to develop and track innovation through metrics.

Melissa Oliver, an innovation specialist at McGuire, hosted the event, which ran from Jan. 23-25. Featured speakers included Jeff Gallagher, CEO of Virginia Bio, and David Chen, from the University of Virginia’s Department of Biomedical Engineering.

Scott Bryant is a National Innovation Specialist at the Chillicothe VA Medical Center in Ohio. His facility has created significant value for both the medical center and the Veteran by using 3D printing to create under-the-counter jar openers for Veterans.

The facility used to purchase the devices for $80 each. 3-D printing reduced the cost to about $2. This project has saved the facility more than $20,000 per year. In addition to saving money, this “print in-house” concept often means the Veteran gets the item they need in a fraction of the time. The Innovators Network focuses on the Veteran experience, so getting them the items they need as quickly as possible is a priority.

Bryant said the VA Innovators Network has helped spur the spread of 3-D printing to VA facilities.

“Innovator Specialists work to teach others about tools available and give employees a clear pathway to spreading ideas across VA,” said Bryant.

In the past, VA innovation has resulted in significant medical technology breakthroughs.

Among others, VA has been involved in the creation of the artificial pancreas, nicotine patch, first electronic health record, and cardiac pacemaker.

“VA has always been innovative,” Bryant said. “We’ve always been leaders.

In the future, Bryant said he expects to see more projects help Veterans gain needed employment and job skills, as well as a rise in projects dealing with dementia and suicide prevention efforts.

Attendees toured the Rich mond VAMC Assistive Technology Design Lab, which features individualized rapid prototyping through electronics and 3D printing. The conference helps VA employees share ideas about how to integrate innovation into the culture of their local medical centers.

Oliver, the Assistive Technology Program Coordinator at McGuire, said the event gave her new perspectives and new ideas.

“Human Centered Design training with David Chen always challenges me to look at things differently when facing a problem,” Oliver said. “It was great to exchange innovative ideas and share what our VA employees are developing through innovation.”

Suzanne Shirley, Innovation Specialist at McGuire, speaks to a group of VA innovators in Richmond.

VA Launches Telehealth Program for Rural Vets With PTSD

WASHINGTON — With a focus on improving access to mental health care for Veterans living in rural areas, today the U.S. Department of Veterans Affairs (VA) announced it has launched a pilot telehealth program that will give rural Veterans with post-traumatic stress disorder (PTSD) remote access to psychotherapy and related services.

VA’s Office of Rural Health, in partnership with VA’s Quality Enhancement Research Initiative, is supporting the Telemedicine Outreach for PTSD (TOP) program to deliver therapy and other care through phone and interactive video contact.

“Our researchers have worked diligently in recent years to establish the safety and efficacy of PTSD psychotherapy delivered remotely, ensuring Veterans will get the same quality of PTSD care as if they were in a doctor’s office at a VA medical center,” said VA Secretary David Shulkin. “We are excited to see this program help greater numbers of Veterans living in rural areas and pleased that it will save them time and effort to get to a VA facility that is far from their homes.”

Dr. John Fortney, a research health scientist at the VA Puget Sound Health Care System in Seattle, Wash., is leading the project.

“Long travel distances to urban areas can be a major barrier to care for rural Veterans,” Fortney said. “In a prior trial, we were able to use telehealth technologies successfully to engage Veterans in evidence-based, trauma-focused therapy without their having to travel to a distant VA medical center.”

To date, more than 500 rural Veterans who are not receiving specialty PTSD care have enrolled in the study. The participants may choose between the two main forms of evidence-based, trauma-focused psychotherapy used in VA: cognitive processing therapy and prolonged exposure therapy.

Veterans participating in the program receive frequent phone calls from a care manager who helps them access services provided by off-site psychiatrists and psychologists. The psychotherapy is delivered via interactive video from a VA medical center to a community-based outpatient clinic (CBOC) or to the Veteran’s home. The telephone care manager also monitors the Veterans’ progress and helps them overcome barriers to care.

The program includes 12 CBOCs across the nation in Charleston, South Carolina; Iowa City, Iowa; Little Rock, Arkansas; Denver, Colorado; San Diego, California; and Seattle. The results, which will be available in 2020, will lay the groundwork for national implementation of the TOP program.

To learn more about VA research on PTSD, visit www.research.va.gov/topics/ptsd.cfm.