IN CHARLOTTE, Make-Believe Imitates LIFE DURING EXERCISE

Department of Veterans Affairs staff from Salisbury and Durham VA medical centers and the Mid-Atlantic Health Care Network (VISN 6) participated in the Triennial Part 139 Disaster Exercise at the Charlotte Douglas International Airport Oct. 8.

VA staff actively train on a regular basis to fulfill VA’s fourth mission of disaster response and relief. Staff from top leadership positions down is trained in every aspect of crisis and emergency management, to ensure that

COVER PHOTO // Kasey Boyd-Smith, from Salisbury VA, simulates triage activities with exercise victims during Triennial Part 139 Disaster Exercise in Charlotte, Oct. 8. (Photo by Steve Wilkins)

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Dear Veterans:

The VA is moving faster than ever before as we follow our bold new Secretary to create a health care system that masters efficiency, timeliness, availability of care, collaboration with community partners, and suicide prevention. In VISN 6, VA’s fastest growing Veteran market, things are changing quickly for our Veterans. We are moving ahead on newly appropriated plans to build three expansive health care centers in Raleigh, N.C., Fredericksburg, Va., and Virginia’s Chesapeake region. New construction also includes parking garages in Salisbury and Richmond to help with patient parking.

Secretary Shulkin has asked us to focus on our foundational services: Primary Care, Mental Health, Geriatric and extended care services, Prosthetics, and Care Coordination. One of the ways we are doing this is through market analyses of our health care systems with Price Waterhouse Cooper. We started with the Southeast North Carolina market. This area stretches east and south from Raleigh/Durham to Brunswick County. The study looked comprehensively at the provision of health care throughout the region, including existing VA facilities, and it made some recommendations on the findings.

The proposal included enhancing partnerships with community health care providers like Duke, UNC and Cape Fear, and Womack Army Medical Center at Fort Bragg. It represents a shift in coordination of care for our Veteran. To be very clear, we are not privatizing VA, in fact we are expanding VA’s presence with more partnerships and more options for our Veterans. Our goal with modernization and focus on foundational services is simple: meeting the Veteran where they are. Which means providing high-quality care closer to their home, with better access, while enhancing and our relationships with community providers.

My first 90 days has been very busy with meeting so many Veterans, our staff and our stakeholders as we move the VA forward. The future of VA is modernization, transformation, and integration of these changes. This is a VA energized by change and dedicated to service. Honestly, I can say that there has been no better time to be a Veteran with regard to health care. Our affiliations and research have advanced the cause of health and well-being for all, especially our Veterans. Our operations and access points have been expanded and continue to grow. The organization’s agility is better, literally, than ever. Our commitment to serve has never been higher. I look forward to sharing more about this with you as we move ahead.

Sincerely,
DeAnne Seekins
VISN 6 Network Director

In Charlotte, Make-believe Imitates Life During Exercise

Veterans are well cared for despite potentially hazardous circumstances. Recent adverse weather and other recent critical events have demonstrated the need to continually train volunteers to be ready for a variety of disastrous crises with mass casualties.

With these types of situations in mind, VA staff coordinated and participated with community partners in an exercise simulating two scenarios—one in which a plane crashed on landing, and another involving transport of an overflow of victims from a disaster site by plane to a federally identified medical treatment hub where they would receive treatment.

“This type of exercise ensures community partners — including VA, DoD, State level and local responding organizations — become familiar with personnel and resources required to respond to real-world events, through an all-hazards approach,” says VISN 6 Emergency Management Coordinator Joseph Jenkins El. He contends that it is important that those organizations train, as they will collectively respond in disasters and emergencies. He adds that training together increases resiliency during disasters, while reducing vulnerabilities from missing foreseeable hazards.

The exercise brought together more than 100 volunteers from community partner organizations to practice rescue maneuvers for recovery and to transport survivors of the crash, and to rehearse the triage, assignment and transport of disaster survivors who had been airlifted into the area. The exercise used two phases that gave first responders an opportunity to simulate extinguishing fire and offering first aid, and subsequent transport via emergency medical ground crews, and the loading and unloading of aircraft to Medevac survivors.

VA staff was on hand to assure proper accounting of patients as they moved from various stations to hospitals and to evaluate and monitor transport operations.

The training seems timely, as many VISN staff have been deploying during this year’s hurricane season, in response to devastation in Houston following the devastation of Hurricane Harvey Aug. 25 and 26, and Puerto Rico by Hurricane Maria Sept. 20. VA volunteers have been traveling to and from the storm-ravaged territories since just days after each storm struck. VA volunteers will continue to help in Puerto Rico for some time to come.

Fire crews and first responders developed experience handling rescue and extinguish skills during a plane crash simulation during the Triennial Part 139 Disaster Exercise in Charlotte, Oct. 8. (Photo by Steve Wilkins)
At the Salem VA Medical Center, Veterans who are 65 and older are provided the opportunity to participate in Gerofit, a program designed to target the effects of aging and improve stamina, strength, and balance. Classes are held three times a week with routine assessments.

Gerofit is a geriatric-specific health promotion and fitness program, and has been identified as a best practice by the Veterans Health Administration’s (VHA) Office of Geriatrics and Extended Care.

“We are proud to offer Gerofit to Veterans at Salem VAMC and to our Veterans who receive their health care at our community clinics,” said Elaine Bryant, Gerofit Program Coordinator. “Our motto is ‘Healthy Aging for Veterans Through Exercise and Nutrition.’”

Gerofit was developed in 1987 at Durham VA Medical Center’s Geriatric Research Education and Clinical Center (GRECC) and expanded under the leadership of Dr. Miriam Morey, the national program director. Expansion of Gerofit to other VA medical centers began in October 2014 with support from VHA Office of Geriatrics and Extended Care’s Non-Institutional Long Term Care (NILTC) initiative.

Dr. Kris Ann Oursler, Gerofit Director at the Salem VA Medical Center, transferred to Salem from the Baltimore VA Medical Center’s GRECC, where she applied for a fiscal year 2015 NILTC grant to establish the Gerofit program in Salem. Since then, additional grant support has allowed for expansion of the program through Clinical Video Telehealth (CVT) to local VA community clinics.

Once Veterans are referred to Gerofit, specially trained exercise physiologists perform routine assessments and establish goals to ensure success. Participants in the program have shown marked improvements in blood pressure, diabetes management, symptom management, wellbeing, quality of life, physical function, overall fitness and longevity.

While participating in the program, Veterans express their happiness and amazement at their physical and mental improvements. “When a Veteran tells you they no longer need their cane to get around, that type of feedback speaks volumes,” says Bryant.

As one Veteran explained, “We encourage each other while exercising and there is some friendly competition and exchange of advice.” A second Veteran mentioned he enjoys the Gerofit program, as it has done wonders for his self-esteem.

Another Veteran says he enjoys the camaraderie and competition during workouts. “Our Veterans in the program are all 65 years of age and older, so they have had similar life experiences and face many of the same challenges when it comes to exercising. Gerofit is a great way for older Veterans to stay active,” Bryant says.

On July 21, 2017, Salem VA Medical Center celebrated its second anniversary of Gerofit with a luncheon for participants hosted by the local VFW Post 1264. Salem VA Medical Center has served 250 Veterans with more than 10,000 visits to the Gerofit program since July 2015.

“The Gerofit program has been a wonderful addition to the Salem VAMC and I am honored to stand here today to congratulate each Veteran that has worked so hard to improve their quality of life,” said Rebecca Stackhouse, Director for Salem VA Medical Center.
Volunteers donate their time at the VA for a thousand reasons. Many do so for a sense of duty. For others, it’s more personal. For VA Volunteer Rob Reuss the reason is personal — he owes his life to a Marine killed in the line of duty.

In 2015, Reuss was diagnosed with Bronchiolitis Obliterans, which is as bad as it sounds. It’s a terminal lung disease that gets progressively worse over time. Doctors gave Reuss a couple of years to live without a complete lung transplant.

So then it was a waiting game, and Reuss was added to the national transplant list. During that time, he became weaker and weaker, but passed on a couple of opportunities until the right fit came along.

“It’s very stressful,” said Reuss. “You have to be ready to go for the operation at any time and you have to make the decision about whether a particular donor is right for you, and if you are going to have time to wait.”

The right fit was a young Marine named Lance Corporal Matthew J. Determan, killed in a training accident in Southern California.

“Matthew saved me and four other people that day,” said Reuss. When Reuss finally received the transplant at University of California at San Francisco he had less than six months to live and was down to 14 percent lung capacity.

“The first breath after (the operation) was like being born again,” said Reuss, explaining the first thing he remembers after waking up from the operation.

He was out of the hospital after 10 days, and he says that he now has about 130 percent lung capacity because the new lungs are a little larger than his original. Other than taking medication to prevent rejection and being on constant lookout for infections, Reuss says he feels great.

Transplant recipients have the option of reaching out to the family to ask if they want to share the donor’s story. The decision is then left up to the family whether they want to reply.

“I waited a year before I decided to write a letter to Matthew’s family,” said Reuss. “I wasn’t sure how I would feel about it, but it was a tremendous gift to know who the donor was and be in contact with his family.”

The family replied.

Matthew’s father was gracious and happy to tell Reuss about his son. After learning that his donor was a Marine, Reuss wanted to do something to give back to all Veterans for his lifesaving gift.

After moving to North Carolina, he found out that he could volunteer at the local VA with his small dog, Digit, in Animal Therapy and Mental Health.

Reuss spends as much time as he can just sharing his story with hospitalized Veterans and listening to their stories. He and Digit just try to be there for people who need companionship and an open ear. Digit is about the best-behaved little dog that you could imagine, and his partnership with Reuss seems like a match made in heaven. Digit is patient and ready for a soft scratch behind the ears from all comers.

Reuss says that the transplant wasn’t a permanent solution, but his time is now numbered in years and not days anymore.

“I use that knowledge as a reminder to live fully, so it’s a gift to know that my days are limited,” said Reuss.

In the meantime, to live fully for Reuss means giving back when he can, hoping that his good feelings can filter down to the Veterans he visits and to help them find peace as well.
September was suicide prevention awareness month. On Sept. 20, 2017, Salisbury VA HCS employees wore purple or teal to show their support for suicide prevention. We believe that suicide is preventable and we are dedicated to #BeThere for our Veterans. Throughout the month, Salisbury hosted various events to keep suicide prevention at the forefront of everyone’s awareness. We remind everyone that suicide prevention must be a community effort year-round. Learn the signs. Ask questions. Reach out for help.

Be there for someone in your life.
A national program group met at the VISN 6 office in October to help advance VA's commitment to continuous improvement and development of VA as an efficient, high-performing, high reliability organization.

VISN 6 Headquarters recently moved to a new location in Durham, NC, featuring technology-forward conference space that has already become attractive for VA training encounters beyond the scope of the VISN.

Last spring, the VHA Office of Systems Redesign and Improvement initiated the FY17 VHA Improvement Advisory Academy. Slated to hone the advising skills of 40 improvement professionals from around VHA, through face to face encounters and virtual experience, the IAA learning sessions occur quarterly, in different locations for a year. The VISN office seemed an appealing destination, with its state of the art design and technical amenities. Other locations include Kansas City, MO and Vancouver, Wash.

Program director Kay Calloway said the course should develop “change agents,” improvement specialists who can work with others in their organizations, to share a variety of improvement methods.

Calloway is Acting Associate Director, VHA Systems Improvement & Consultation. She says each participant will work on three improvement projects during the course period where they learn to use and implement as improvement program professionals to influence others. One student affirmed the course purpose by adding that, “I've already begun to encourage others to apply to be a part of the next session because of the value IAA has added to my work environment.”

The program's goal is that participants will be viewed by their senior leadership as strategically vital assets to the organization, based on their enhanced advising skills to help others improve their professional output. Faculty come from within and outside VA, to offer students broad, cutting edge thought on the topics covered.

Upon completion, IAA students will offer their leadership improvement processes and methods that support collaboration, facilitation, and coaching of improvement teams. Successes of the program, which was also offered in 2009 – 2011 will be measured by student project completion, surveys, and career tracking.

Calloway contends that their acquisition of concepts in project management, improvement processes, Lean principles, data and statistical analysis, and variability concepts should affect improvement and sustainment of positive change in their home locations.

VISN 6 students selected for the program are Jan Johnson (VISN 6 Office); Jennifer Johnson (Fayetteville VAMC); Veeon Wilson (Richmond VAMC); April Short (Richmond VAMC); and Laurie Guin (Fayetteville VAMC). Student Jan Johnson confided that, “Enterprise wide we are seeing a significant amount of change, both small and large. Being a participant in IAA is sharpening my statistical, analytical and improvement skills.” She added, “IAA increases the capability to perform improvement work which is essential for lasting organizational change.”
Ever since the Interventional Radiology (IR) ribbon-cutting last November, the IR team has made great strides to ensure Veterans receive cutting-edge procedures at McGuire VA Medical Center. Some of these interventions include advanced procedures to treat liver cancer and aortic aneurysms.

“I have worked in Radiology at McGuire for two-and-a-half years, and I have seen significant changes in what we are able to offer our Veterans,” said Jennifer Farrell, Nurse Clinical Coordinator for Radiology and Nuclear Medicine. “Interventional Radiology has developed tremendously, with two dedicated fellowship-trained interventionalists and a new state-of-the-art lab. Dr. Jonathan Ha and Dr. Mack Hendrix are extremely innovative and always in-tune with the latest medical practice.”

Many of these minimally-invasive procedures are considered by the medical community to be a safer alternative than surgery, have less recovery time and provide targeted treatment options where there were once few options.

In July, McGuire successfully completed its first radioembolization procedure to treat liver cancer. Radioembolization is referred to as Y-90 because of the radioactive isotope Yttrium-90, which is used in the procedure. In order to bring this procedure to the facility, it required a complex approval process spearheaded by Hendrix, Director of Interventional Oncology, and a special permit through the National Health Physics Program.

The Joint Commission, which oversees the accreditation process for hospitals in the U.S., was present at this first procedure. According to Jinsy Babu, Health Physicist and Radiation Safety Officer, The Joint Commission was impressed and said they would ask other IR labs to emulate the processes at McGuire for Y-90 procedures.

“Our dedicated staff providers are excellent,” said Babu. “If I was a patient, I would come here for Y-90.”

Dr. Ha, Director of Interventional Radiology, working in conjunction with Dr. Gundars Katlaps, Chief of Cardiothoracic Surgery, performed the hospital’s first Percutaneous Thoracic Endovascular Aneurysm Repair (TEVAR) in September.

TEVAR keeps a thoracic aortic aneurysm, or dissection, from rupturing by inserting a self-expanding stent graft across the area of injury. Different from traditional TEVARs, this procedure was done all through small skin incisions, allowing the patient to be on their feet the next day.

“It’s a minimally invasive therapy for potentially life threatening aortic disease,” said Hendrix. “It was a great collaboration between Cardio Thoracic Surgery and IR. Everything went really smooth.”

The IR team constantly works together between the procedure room and adjoining control room to ensure valuable information is exchanged before, during and after each procedure.

According to Babu, McGuire’s interventionalists are among the highest-trained individuals in healthcare, and the IR labs are some of the best he has ever seen.

Durham Researcher Recognized for Study on Smoking, PTSD

By Yanitz Irizarry
RICHMOND VAMC PUBLIC AFFAIRS

(Photo by Jinsy Babu)

By John Fairbank, M.D.

DURHAM VAHCS

Jean C. Beckham, Ph.D., is the 2017 recipient of the International Society for Traumatic Stress Studies’ (ISTSS) prestigious Robert S. Laufer Award for Outstanding Scientific Achievement. Dr. Beckham is Vice-Chair of the Durham VAMC R&D Committee, a VA Senior Research Career Scientist, and Co-Associate Director for Research at the VISN 6 Mental Illness Research, Education and Clinical Center (MIRECC).

She will receive the award in November at the ISTSS annual meeting in Chicago. The Laufer Award is ISTSS’s highest honor annually awarded to an individual whose scientific achievements have advanced knowledge on the nature, assessment and treatment of traumatic stress. Dr. Beckham’s pioneering program of research on post-traumatic stress disorder (PTSD) and smoking addiction has greatly improved the health and quality of life for many of our nation’s veterans. Congratulations, Dr. Beckham!
McGuire VA, Project Hero host training program

To spread cycling programs to other VA hospitals

By David Hodge | PUBLIC AFFAIRS SPECIALIST

In early October, the McGuire VA Medical Center welcomed a specialized training team from Project Hero to help spread the sport of cycling to other VA facilities.

Recently, the Dept. of Veterans Affairs and the California-based non-profit announced a partnership to bring official Project Hero hubs to VA medical centers across the U.S. Project Hero’s mission is to bring therapeutic cycling programs to Veterans and first responders affected by injury, post-traumatic stress disorder, military sexual trauma and traumatic brain injury.

“I believe my Veterans will benefit from Project Hero,” said Shannon O’Rawe, recreation therapist at the Tennessee Valley Healthcare System in Nashville. “This nonprofit complements the Recreation-al Therapy Program at VA in Nashville as we are focused on adaptive sports and overall Veteran health and wellness.”

Army Veteran Mike Kanney has taken part in several Project Hero rides in the past. To him, and other Veterans he has spoken with, cycling can be an alternative therapy to combat the effects of PTSD.

“This is in addition to all the therapies offered here at McGuire,” Kanney said. “It’s not a showboat program. The sole purpose is to help Veterans.” For more information on these resources visit: www.Richmond.VA.Gov, www.ProjectHero.Org, and www.VirginiaCapitalTrail.Org.

VA employees from several medical centers throughout the US attended Project Hero’s first VA-specific Hub training program to teach both new and experienced cyclists how to start a similar program at their respective facilities. VA clinicians from North Carolina, Virginia, West Virginia, Arizona, and Tennessee attended the event.

Specifically, my Veterans who compete in the Golden Age Games will benefit the most.”

“Cycling is not only an enjoyable sport, but it is also a competitive sport that a lot of my Veterans have taken interest in competing,” O’Rawe added.

Memorial Message from the Secretary

It is with great sadness that I share the news of the passing of Robert L. Jesse, M.D., Ph.D.

Dr. Jesse served as Department of Veterans Affairs’ (VA), Chief Academic Affiliations Officer, Veterans Health Administration (VHA), VA Central Office, where he was responsible for the largest health professions education program in the United States, including more than 120,000 trainees annually in more than 40 different health professions.

Dr. Jesse was a remarkable leader in the development of clinical policies and programs in VHA. Prior to becoming the Chief Academic Affiliations Officer, Dr. Jesse served in a myriad of roles in VHA including Acting Under Secretary for Health, Principal Deputy Under Secretary for Health, Chief Consultant for Medical Surgical Service in Office of Patient Care Services, National Program Director for Cardiology, Chief of Cardiology at the Richmond VA Medical Center, and Director of the Acute Cardiac Care program at Virginia Commonwealth University Health System. He also practiced at the Richmond VA Medical Center.

Dr. Jesse was a Fellow on various Boards and a recipient of many awards for his contributions to improving Veterans’ health care.

Dr. Jesse will be missed by his many friends and supporters at VA. Arrangements are pending and we will share that information once available.

David J. Shulkin, M.D.
Please welcome Dr. Carolyn Clancy, who is detailed as the Executive in Charge for the Veterans Health Administration, with the authority to perform the functions and duties of the Under Secretary for Health, effective Oct. 7, 2017. She is a highly experienced and nationally recognized physician executive, with strong management skills and an exceptional ability to successfully function in the face of significant changes and challenges.

Dr. Clancy previously served as the Deputy Under Secretary for Health for Organizational Excellence overseeing VHA’s performance, quality, safety, risk management, systems engineering, auditing, oversight, ethics and accreditation programs, as well as 10 years as the Director, Agency for Healthcare Research and Quality. Dr. Clancy also held the role of Interim Under Secretary for Health from 2014-2015. In 2015, Dr. Clancy was selected as the Outstanding Federal Executive of the Year by Disabled American Veterans.

Dr. Clancy, a general internist and health services researcher, is a graduate of Boston College and the University of Massachusetts Medical School. She holds an academic appointment at George Washington University School of Medicine and serves as Senior Associate Editor, Health Services Research. Dr. Clancy has contributed to eight academic textbooks and authored, co-authored and provided invited commentary in more than 25 scholarly journal articles. She served as member of the National Quality Forum, Board of Directors, as the Chair of the AQA Alliance and served on the Board of Governors, Patient-Centered Outcomes Research Institute. An elected member of the National Academy of Medicine, Dr. Clancy was most recently presented with the 2014 Quality Champion Award, National Committee for Quality Assurance and was also named as Honorary Fellow, American Academy of Nursing.

Also beginning Oct. 7th, Dr. Gerard Cox, will serve as Acting Deputy Under Secretary of Health for Organizational Excellence. Dr. Cox currently serves as the Assistant Deputy Under Secretary for Health for Integrity, and has extensive experience as a physician executive.

Caregiving is an Around the Clock Responsibility | October 10, 2017

This month, VA takes time to honor and thank the family caregivers who provide vital support and care to our Veterans. When caring for Veterans requires around-the-clock support, the Veterans Support Program is available to assist.

There are an estimated 5.5 million military caregivers in the United States improving care for 2.4 million Veterans. According to the AARP Public Policy Institute, the value of services provided by informal caregivers has steadily increased over the last decade reaching an estimated economic value of $470 billion in 2013. At $470 billion, the value of unpaid caregiving exceeded the value of paid home care and total Medicaid spending in the same year. The impact that caregivers provide nearly matched Wal-Mart’s $477 billion in sales.

That means that caregivers make contributions that are comparable to the world’s largest company by revenue.

A 2015 National Alliance for Caregiving and AARP study estimates family caregivers spend an average of 24.4 hours per week providing care; nearly 1 in 4 caregivers spends 41 hours or more per week providing care.*

Caregiving is hard work, and there are challenges unique to caring for Veterans. VA’s Caregiver Support Program offers education, resources, support, and services to ensure that family caregivers have the tools they need to effectively provide necessary care and help Veterans remain safely in their homes.

Caregiver Support Coordinators are available at each VA medical center to assist caregivers with accessing these resources. Some of these services include the Caregiver Support Line (1-855-260-3274), monthly education calls, the Building Better Caregivers™ online workshop, and the Peer Support Mentoring Program.

The VA Caregiver Support website offers information about all of these services and can connect caregivers to additional tools and resources. Visit https://www.caregiver.va.gov/ for more information.

VA’s Caregiver Support Program is proud to celebrate National Family Caregivers Month and honor the sacrifices of caregivers. Please join us in honoring these exceptional individuals in November — and throughout the year!

VA Mental Health Resources

Make the Connection

Make the Connection is an online resource designed to connect Veterans, their family members and friends, and other supporters with information and solutions to issues affecting their lives. On the website, visitors can watch hundreds of Veterans share their stories of strength and recovery, read about a variety of life events and mental health topics, and locate nearby resources.

www.MakeTheConnection.net

Veterans Crisis Line

The Veterans Crisis Line connects Veterans in crisis and their families and friends with qualified, caring VA responders through a confidential toll-free hotline, online chat, and text-messaging service. Veterans and their loved ones can call 1-800-273-8255 and Press 1, chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year.

www.VeteransCrisisLine.net

Coaching into Care

Coaching into Care is a national telephone service of the VA that aims to educate, support, and empower family members and friends who are seeking care or services for a Veteran. Our goal is to help Veterans and their family members, and other loved ones find the appropriate services at their local VA facility and/or in their community. Coaching is provided by licensed psychologists or social workers, free of charge.

www.mirecc.va.gov/coaching

Veteran Training

The Veteran Training online self-help portal provides tools for overcoming everyday challenges. The Portal has tools to help Veterans work on problem-solving skills, manage anger, develop parenting skills, and more. All tools are free, their use is entirely anonymous, and they are based on mental health practices that have proven successful with Veterans and their families.

www.veterantraining.va.gov

AboutFace

AboutFace features the real stories of Veterans who have experienced PTSD, their family members, and VA clinicians. By watching the videos on AboutFace, you can learn about PTSD, explore treatment options, and get advice from others who have been there.

www ptsd.va.gov/apps/AboutFace

Community Provider Toolkit

The Community Provider Toolkit supports the behavioral health and wellness of Veterans receiving services outside the VA health care system. Community providers play an essential role in providing America’s Veterans with the support they have earned. Resources available in the toolkit include information on screening for military service, handouts and trainings to increase understanding of military culture, and mini-clinics focused on relevant aspects of behavioral health and wellness.

www.mentalhealth.va.gov/communityproviders

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