Heather Hennessey, a certified peer support specialist from Fayetteville NC VA Coastal Health Care System, is the recipient of the inaugural VA National Peer Specialist of the Year Award.

“Heather’s dedication and outstanding work ethic, combined with her compassion for Veterans, service work in multiple Veterans organizations and volunteer work in the community among various organizations ... earned her this national recognition,” said Daniel O’Brien-Mazza, National Director, Peer Support Services, VHA Office of Mental Health and Suicide Prevention Services.

O’Brien-Mazza travelled to Fayetteville VA Medical Center Oct. 17 to present Hennessey, a U.S. Army veteran and military spouse, with the award, an engraved plaque, on Global Peer Support Celebration Day.

Hennessey, he said, distinguished herself from the field of 14 other network-level nominees by not conforming or staying in a narrow, rigid way of just doing what she is supposed to do.

TOP PHOTO: From left, Daniel O’Brien-Mazza, DeAnne Seekins, Heather Hennessey and Dan Dücker. Hennessey has earned the first Department of Veterans Affairs National Peer Specialist of the Year. O’Brien-Mazza, Seekins, and Dücker are National Director, Peer Support Services, VHA Office of Mental Health and Suicide Prevention Services; VA Mid-Atlantic Health Care Network (VISN 6) Director; and Fayetteville VA Coastal Health Care System Executive Director, respectively. (Photo: Brad Garner)
DVAHCS Receives MAKO Robotic Assistant

By Joshua D. Edson | DURHAM VAHCS PUBLIC AFFIARS

On Sept. 25, Durham VA Healthcare System (DVAHCS) became the first VA health care system in the nation to receive and install MAKO, a robotic-arm-assisted surgery technology. The robotic arm will be used for total knee, hip and joint replacement. For Veterans, this means a personalized surgical plan, faster recovery time, less time in the hospital, less trauma to the area of surgery, and more natural joint movement.

Known as RIO (Robotic Arm Interactive Orthopedic System), the system allows surgeons to make more precise cuts for knee and joint implants, as well as hip replacements. It allows for more accurate placement and lowered risk for soft tissue damage since surgeons aren’t working by “feel.” Because of the increased accuracy and efficiency, surgery time is reduced, and the veteran has a smaller chance of infection or other possible complications, goes home and heals more quickly.

“This is a promising new piece of equipment,” says Orlando Figuerres, Implant Coordinator and nurse at the DVAHCS. “It’s state-of-art, which is great for our Veterans. You can’t get much more advanced than this. Not to say we’re not doing a great job here, but this equipment will make our operations way more efficient.”

A CT scan of the affected joint is uploaded into the MAKO System software, which creates a 3D model of the joint. The surgeon uses the model to map a plan for the joint replacement. The relationship between the surgeon and the robotic mechanism is symbiotic, as they depend on one another to navigate the procedure. The surgeon relies on the map to manipulate the arm during surgery, and the MAKO System ensures that the surgeon works within the prescribed plan.

Presently, surgical staff are training to use the new equipment, with the first surgical procedures scheduled for the beginning of November. Veterans in need of hip, joint or knee replacement using the new apparatus will be qualified on a case-by-case basis. The majority of surgeries will continue using traditional surgical techniques, as staff incrementally increase proficiency.

“It’s a win-win for everyone,” says Orlando. “Our Veterans deserve our very best, and RIO helps us make a bigger impact on their care.”

Message from the Network Director

During the holidays when my kids were little, they could find joy in the most unassuming places. My husband and I spent time making sure the house was decorated, that it smelled like cookies and delicious food, and that the kids had a few presents that were just what they wanted. Then with much anticipation, the big moment came when the shiny box would reveal their most coveted toy.

With huge smiles, they hugged their new toys; then moments later we’d watch them building a fort with the same boxes and wrapping paper they just ripped open. Their new toy sat on the couch. Watching the kids play served as a gentle reminder to me that the holiday season; no matter what is celebrated or how much work is put into it, is always about being there for one another.

In my story, the kids really loved being with one another. We all looked forward to being there, to grow closer. Now I’ll ask you to take a look at your inner circle (especially family members and friends who seem to put on a strong front) and ask, ‘how can I be there for them during the next two months?’ This is an exciting time for most, but for many, the season concentrates grief and loneliness. VA has the “Be There” campaign that we’ve been running for a few years, and I think it’s a perfect mantra for this year’s holidays.

Like the kids’ toys, gifts and party invites come and go. Each of us seeks an authentic connection. I try and remind myself to stop and be present. Trust me, with work, family, and my grandkids; the cooking, shopping and cleaning, I can get overwhelmed. It’s so important to take a few moments and reach out. Maybe it’s a call or text, or a quick note in the mail; anything to say, ‘I am available,’ if they want to talk. Invite them to coffee or lunch. You, too, could benefit from briefly escaping the holiday chaos...being there has a small price tag, but can mean so much.

But remember, it’s hard to be there for others if we haven’t taken a few moments for ourselves, to center and summon balance. Before the holidays really start, think about setting a pattern of mindfulness. Don’t go overboard; think in small, manageable bits. Take a morning walk before starting your day; or give your mind a break: put down the phone and pick up a fun read (maybe a magazine article, not a whole book!) – it might be enough to find moments to breathe a bit more throughout the day. Mindfulness is intentional. It doesn’t just happen. Now is the perfect time to get into a mindful habit, so you have enough energy to take on the next few months.

Take care of yourself, so you can be there for others this holiday season.

– DeAnne M. Seekins
VISN 6 Network Director
Fayetteville VA Employee Earns VA’s First National Peer Support Specialist Award

Coastal Health Care System Executive Director Dan Dücker told Hennessey that in addition to her honor being “a celebration for you today and good news for Fayetteville,” he added, “it’s also an opportunity for us here in Fayetteville to springboard this into peer support not only from a mental health perspective, but for other programs where peers serve as well.”

VISN 6’s Chief Mental Health Officer Dr. David Buycck called in to add congratulatory sentiment, saying, “Your work and the way you do it demonstrates every day how peers are essential in identifying, connecting and motivating Veterans and families in their continual journey to recovery.”

Ever humble, Hennessey explained, when her supervisor told her she had been selected Fayetteville VA’s Peer Specialist of the Year and she wanted to submit her for the VISN 6 nomination, she thought to herself, “I don’t think I have a chance, but I’ll do it because I know peers around this VA are doing amazing things.”

In addition to thanking her fellow peers, she thanked supervisors, facility leadership, family and the veterans she helps every day.

“Whenever I meet with them and they say I help them, I tell them how much they help me, too. We’re on that road to recovery together,” Hennessey said.

She urged everyone attending the ceremony or listening in, to put the word out about peer specialists. She commented that it had been a long journey from that point in 2007 when she attempted suicide to today’s event where she was being named Peer Specialist of the Year.

Hennessey ended with a message to peer specialists, sharing four things she had learned over the past year:

• Self-care — we can’t help others if we don’t take care of ourselves
• Find a mentor — she said she had two
• Don’t pass by an opportunity to share the good about VA — you don’t know who you’re talking to and how that might impact their recovery
• Use your story as your gift. “Our recovery story is a gift — share it with others.”

VISN 6 Director DeAnne Seekins, who also attended the ceremony, said, “Peer support is such an important part of what VA does. When you’re a Veteran and you’re going through our mental healthcare system, you’re not always comfortable, right? There’s a lot of anxiety. You’re wondering, ‘Are they giving me the right information? Where do I go? What do I do?’ So, by VA embracing peer support, it’s Veterans helping Veterans. The comfort level, the quality of the healthcare our Veterans receive is second to none. Heather is a great example of what we do and why we do it.”

Fayetteville VA Employee Earns VA’s First National Peer Support Specialist Award

By Amanda Reilly | Salisbury VA Health Care System: First VA Facility Awarded American Society of Clinical Oncology/Quality Oncology Practice Initiative (ASCO/QOPI) Certification

On Oct. 9, Salisbury VA Medical Center Oncology leaders received notification of the service’s official Quality Oncology Practice Initiative (QOPI) Certification. QOPI certification “reflects a commitment to quality of care that lead to fundamental changes in the clinical practice of oncology,” as the certification letter boasts.

Salisbury’s Oncology Service achieved this certification by meeting core standards in all areas of treatment, including treatment planning, staff training and education, chemotherapy orders and drug preparation, patient consent and education, safe chemotherapy administration, monitoring and assessment of patient wellbeing.

The Salisbury VA is the first VA Medical Center to achieve this extraordinary and rigorous distinction, allowing for the provision of state-of-the-art Veteran cancer treatments.

The program certifies an organization for three-years, recognizing superior care for outpatient hematology-oncology practices. QOPI is intended for practices wishing to promote a culture of self-analysis and improvement. More than 170 quality measures and individual performance scores by practice, site and provider are considered. Practices utilize this data when identifying, developing and implementing quality improvement initiatives and ultimately achieving better results for patients.

Salisbury VA Medical Center’s Oncology Outpatient Suite opened in July 2011, with only three providers. Two had just completed fellowship programs. Dr. Jimmy Ruiz, fresh from his fellowship, accepted the Chief of Oncology position, the role in which he continues today. He had visions of making the Salisbury VA Oncology clinic the best in the

(Left to right): Dr. Michael Goodman; Dr. Richard Williams; Hope Schenk, PharmD; Amy Franklin, PA; Lisa Robbins, RN Nurse Manager (Photo: Amanda Reilly)
A national Dept. of Veterans Affairs program is helping to fulfill one doctor's purpose of delivering compassionate and effective care to Veterans at Central Virginia VA Health Care System. Dr. Jarrod Reisweber and colleagues created Transcending Self Therapy to improve substance abuse treatment for Veterans.

His grandfather served as a bomber pilot who survived World War II and lived with an internal battle affecting his family for years to come. Despite suffering from Alcohol Use Disorder, his grandfather was a proud patriot who doted on his wife and provided for his family. Reisweber is a clinical psychologist and author of Transcending Self Therapy (TST). TST is an addition to Cognitive Behavioral Therapy (CBT). While CBT is a psychotherapy focused on improving a person's thought and behavior patterns to boost emotions, TST identifies what a person's higher moral standard is and helps them to reach that standard.

"I believe my grandfather's drinking was influenced by his time in combat and may have gotten worse when his son, my uncle, died by suicide," Reisweber said.

Reisweber remembers his uncle was a great athlete, popular and very likeable, yet he struggled with substance abuse. His suicide came as a shock to the family. For Reisweber, it influenced his career choice. Reisweber was drawn to psychology after years of noticing himself offering compassion for others, who struggled with suicide, mental health issues and substance abuse. He proudly serves Veterans now.

Reisweber says he is proud of his grandfather's service and thought about serving at one point in his life. After seeing what his grandfather went through, he was encouraged to take a different path.

"I would love to have my uncle alive," Reisweber said fondly of his uncle.

Reisweber's mission is to dramatically improve the quality of life for Veterans by helping them reach their highest potential. He understands the toll and struggles Veterans face, no matter how many programs and services are offered.

"I truly believe the VA system is..."
VA Realines Police Operations to Promote Oversight and Standardization

WASHINGTON — The U.S. Department of Veterans Affairs (VA) approved plans recently to realign the structure of its police force.

The move follows several months of comprehensive analysis of the department’s law enforcement procedures and serves as a critical step forward in implementing the recommendations made by the Office of Inspector General and Government Accountability Office.

“The realignment will be the most extensive since the creation of the police force and will fundamentally change standardization and oversight across the enterprise,” said VA Secretary Robert Wilkie. “This highlights my commitment to the high standards of professionalism and transparency across the department.”

The changes will include:

- Implementing a police national governance body that will incorporate all department stakeholders to effectively manage and oversee policy issues.
- Creating a police modernization office specifically charted to develop and implement uniformed standards and address staffing challenges.
- Dividing the VA police force into four multi-state regions under the head of a regional law enforcement director. The regional director will serve as the gateway official providing strategic direction from the VA Office of Operations, Security and Preparedness to the field operating offices.
- Placing a police chief in each of the 18 Veterans Integrated Service Networks who will be under the oversight of the Office of Operations, Security and Preparedness and will provide direct guidance of law enforcement operations and compliance.

The district and regional law enforcement directors will be department assets placed in the field for greater accountability and oversight of the police program. These changes reaffirm that safety and security are paramount to the Department. VA will continually implement solutions that assure a safe environment for Veterans, staff, and visitors.

CONTINUED FROM PAGE 4

If clinicians across the VA and the country were to start using this treatment now, we’d have a good chance to influence the SUD crisis immediately, —Reisweber said.

The program that helped spread Reisweber’s idea is the Veteran Health Administration’s Innovation Network. This network offers connections by which innovations can be funneled and vetted to bring improvements to patient care. The VHA Innovation network helps test ideas to improve access, increase quality, drive down costs and drive up Veteran satisfaction. On-site personnel called innovation specialists guide clinicians and others to design, develop and implement their products.

“In Research and Development, traditional research takes an average of 17 years to go from a concept to a patient’s bedside,” said Suzanne Shirley, innovation specialist at the Central Virginia VA HCS. “When innovative solutions like TST are developed using human centered design and VA funding, the impacts are felt in real time.”

The data collected during the implementation phase far surpasses the results of typical treatment. Sixty-eight patients participated in the 20-day residential treatment program. Results show that one month after treatment, those who received TST were less likely to relapse than those who did not receive TST. Reisweber is scheduled to present his TST program findings at VHA’s Innovation Experience (iEx) in Washington, D.C.

Through the Innovation Network, projects go through three phases: spark, seed and spread. Spark refines the idea. The seed phase seeks to improve the designs based on feedback and marketing strategies. The spread phase scales the innovation to multiple sites across the country. Selectees receive $10,000, $30,000 and up to $200,000 respectively.

“It’s a great example of how something sparks as a small concept by a front-line provider and builds into a refined product spreading to 50 different medical centers across the country,” Shirley said, adding that VA serves approximately nine million Veterans.

Shawn Davenport, an Army Veteran participated in TST.

“I had situations where I would usually handle it incorrectly,” said Davenport. “But being that I’m thinking on my thought patterns and I’m seeing what’s motivating my actions, I can stop them before they become negative.”

Reisweber says patients in the intensive outpatient and residential substance abuse programs at the Richmond VA are seeing significantly greater reductions in substance abuse and depression compared to what was done before and the treatment is garnering national attention.

“I am so grateful for the opportunity to develop this approach with colleagues and provide this care; care that I wish had been given to people like my uncle and grandfather,” Reisweber said.
On Oct. 25, Asheville’s Charles George VAMC Community Living Center (CLC) became the first CLC in the country to be recognized as an Honorary Military Unit. With the assistance of the 14th Weather Squadron, staff, volunteers, CLC residents and the community joined together to celebrate, recognize, and honor our Veterans during this ceremony. The idea for recognizing the CLC in this regard was formed in our Story Art Class, which has been meeting for several months.

CLC residents have shared their love of our arts program and point to their ability to write, draw, paint, sing or play a musical instrument as a means of reminiscing about their time in service. This often leads to positive feelings of self-worth and contribution. The art program has also been a way for our Veterans to create more fellowship.

While attending the Story Art Class, Veterans reflected on their combined years of services, the wide variety of ranks and the broad representation of all the military branches. Realizing this broad scope of diversity amongst them, the idea was born to build an identity that captures this and mirrors their time in service. Each Veteran agreed that their time at the CLC is like a deployment, and thus began the process of our Veterans to create a patch, like the one you receive when deploying, and recognition of the CLC as an Honorary Activation.

Our Veterans set out to design the patch that will be affixed to hats, shirts and wheelchairs. During our Story Art Class, Veterans worked to make their designs and held a competition in which fellow Veterans voted. The chosen design was that of Mr. William “Bill” Thomas, an 87-year-old Navy Veteran.

Mr. Thomas has been a resident of the CLC for the last 7 years. He served as active duty during the Korean War, and is well loved by his family, CLC Peers and VA staff. Mr. Thomas has also frequently noted his love of the arts and his appreciation of being able to draw while residing at the CLC.

All our CLC residents started out in a military unit and it is fitting that these Veterans have chosen to honor the CLC as their last unit. The patches with the winning design were given out to attendees during the ceremony. The flag, which will be flown outside of our CLC like a base flag, was presented by the local 14th Weather Squadron, an Active Duty Air Force unit, to Mr. Thomas.

Kristie King (MSN, RN-BC, CRRN), Chief Nurse of Geriatrics and Extended Care, shared “The residents of the CLC have served in all branches of service, have served in every conflict and battle since World War II, have held all varieties of jobs and duties, and with all of this the commonality is their support of one another. The CLC is thrilled to be part of this wonderful project.”

The Western North Carolina VA Healthcare System is hopeful to begin a new tradition in honoring our CLC residents and recognizing not only their time in service while in the military, but also at the CLC. We are privileged to serve our Veterans and are excited to be learning new ways to show how much we value them.
The Bank of Southside Virginia (BSV) and its customers banded together and raised nearly $6,000 to help renovate the Central Virginia VA Health Care System’s hospice family room and purchase a new flagpole for its Avenue of Flags.

All 15 branch locations from Chester to Smithfield collected monetary donations at their branches for this universal cause.

“We pride ourselves in being fully vested in the community,” said Brody Rotzoll, brand manager for BSV. “Because of the wide reach of Central Virginia VA Health Care System, we felt we could do the most good with our donation dollars. Also, considering the hospital has helped friends and family members of our employees, we had a vested interest in helping out as much as we could.”

Central Virginia VA Health Care System’s customer service team planned a week’s worth of festivities to celebrate and encourage world-class customer service for our Veterans. Patient advocates from the Patient Experience Center recognized their peers and service-level patient advocates.
The U.S. Department of Veterans Affairs' (VA) and Department of Health and Human Services’ Centers for Medicare and Medicaid Services (CMS) recently announced the two agencies will compare information on questionable Veteran health care providers both in VA treatment facilities and through purchased care programs in their communities.

VA and CMS expect the first Medicare Sanction data exchange to occur by the end of the year and continue at recurring intervals.

“CMS is an industry leader when it comes to identifying questionable providers and nefarious medical practices,” said VA Secretary Robert Wilkie. “Their willingness to partner with VA puts Veterans first by allowing us to identify providers who do not meet our quality standards.”

“CMS is proud to work with VA and share our innovative data analytics and best practices for detecting and preventing potential fraud, waste and abuse across other federal healthcare programs to improve care to our nation’s Veterans,” said CMS Administrator Seema Verma.

Medicare Sanctions include abusive billing practices, felony convictions or improper prescribing practices. Employing CMS protocols provides VA with a proven tool to use data to address potential problems earlier and more systematically. VA will carefully review matches to determine employees’ continued suitability for VA employment and providers’ continuing participation in community care programs and will take swift action to protect Veterans.

This data match for provider enrollment information is one of many efforts planned as part of the VA and CMS partnership first announced in January 2018. The agencies are actively exploring additional data sharing focused on identifying fraud, waste, and abuse in health care payments.

Rattlers Honor Hampton Vets

By John Rogers | HAMPTON VAMC PUBLIC AFFAIRS

On Sept. 27th, Hampton VA Medical Center was honored to host Florida A&M University’s Rattlers Football players and personnel. Members of the team and coaches spoke with Veterans and staff. Special thanks to the FAMU Rattlers Football Team for visiting our facility, and for spending time with our Veterans and staff.

When asked why this visit was important for the players, Coach Willie Simmons said, “We try to expose these guys to new things as much as we can. A lot of our guys have family members who have served in this area. Any chance we get to give back to a group of people who have done so much for us, we want to take advantage of it. It’s a great experience and I’m glad we were able to do this. This is our first time coming to an actual hospital. I think our guys got much more out of coming to see what goes on in an actual VA hospital.”

“This was a huge trip for us to have the opportunity to visit the Hampton VA Medical Center,” FAMU linebacker Elijah Richardson said. “Veterans are great people for this country and what they did. Just to see the way they look at life — there is a lot you can learn from this experience. For me, I am just taking it in and never take things for granted. It’s a huge experience for us as a team.”

The Rattlers were given a tour of the facility, greeting Veterans along the way. They also handed out several gift bags containing team memorabilia. As they journeyed into our Spinal Cord Unit and Community Living Center, players posed several questions to staff members and Veterans about their experiences in the military. All the players took time to shake hands, take photos and share how grateful they were for their service. The Rattlers wrapped up their trip to the area by defeating Norfolk State 30-28.
VA is conducting a study of transfusion procedures for Veterans at high cardiac risk and undergoing surgery, and surgeons at Asheville’s Charles George VA Medical Center are the only VISN 6 participants.

The Charles George VA is one of 15 VA Medical Centers in the TOP Trial: Transfusion Trigger after Operations in High Cardiac Risk Patients. The study will help determine if Veteran patients who have a high cardiac risk, or history of ischemic heart disease, peripheral artery disease or ischemic stroke, need a transfusion after they’ve had a vascular or general surgery operation.

While there is no clear threshold for when patients should be transfused after surgery, the current VA study is based on the belief that providing transfusions earlier could result in more positive recovery outcomes.

The principal Asheville investigators for the study are Dr. Mark Kadowaki, General Surgeon and Dr. Jeff Nienaber, Vascular Surgeon; Whitney Sprinkle, ANP, is the research coordinator in Asheville.

Charles George VA Associate Chief of Staff for Academic Affiliation Dr. Douglas Huntley, who also chairs Research and Development, states, “Something that has worried surgeons for years is that we have an innate sense that we have waited too long to transfuse people who have bad coronary artery disease. This study is questioning [the national standard].”

An estimated 5 million patients receive transfusions every year. Roughly 60-70 percent occur in surgical settings. Adverse outcomes, such as acute renal failure or death, have been associated with low blood levels following surgery, and are more likely with high cardiac risks.

The VA study will either provide clear guidance that restrictive policies are inappropriate and then improve outcomes by making the needed change or, if the current strategy proves safe, create a generalized statement supporting these practices and providing this to patients.

The TOP Trial is funded by the VA Cooperative Study Program. It is unique because it examines a previously unstudied population of general and vascular surgery patients, and utilizes a wider transfusion threshold difference than previous trials. Additionally, it only includes patients at high risk for postoperative cardiac complications.

The study was recently featured on the front page of *General Surgery News*, and as summarized by Dr. Huntley, “How can we best take care of our Veterans and prevent them from having a heart attack or stroke? This research is vitally important in how we take care of our patients. A lot of our Veterans have heart disease, and a lot of our Veterans require Vascular or Major General surgery. ... A lot of the medical research that has changed the world comes out of the VA system, and we’re doing that right here in Asheville. This is information that will potentially be used internationally as it is that important to a growing population.”

The plan will enroll about 1,520 Veterans by the end of 2022. To date, about one-fifth of the enrollment goal has been achieved. Interested Veterans should contact their VA Provider about the study.

VA, DOD to Fund Up to $50 Million in New Research on Traumatic Brain Injury

WASHINGTON — The U.S. Department of Veterans Affairs (VA) and the Department of Defense (DOD) launched the Long-Term Impact of Military-related Brain Injury Consortium (LIMBIC) Oct. 1, for which the two organizations pledged to fund up to $50 million, to research mild traumatic brain injuries (TBI) or concussions.

The five-year effort will receive $25 million in funding from DOD and up to $25 million from VA, depending on availability of funds. “VA and DOD share an urgent, ongoing commitment to better understand the long-term impact of TBI,” said VA Secretary Robert Wilkie. “Through this overarching effort, we are harnessing the best work of our nation’s scientists and will lay the groundwork for meaningful progress in diagnosis and treatment.”

LIMBIC is composed of researchers and resources from more than 20 organizations, spanning VA, DOD, the National Institutes of Health, universities and nonprofit organizations. VA and DOD’s funding will support a consortium led by a team at Virginia Commonwealth University (VCU) and the Hunter Holmes McGuire VA Medical Center in Richmond, Va. The lead investigator, Dr. David X. Cifu, is a senior TBI specialist for VA and a professor at VCU.

The consortium extends the work of a previous collaborative effort known as the Chronic Effects of Neurotrauma Consortium, or CENC, also led by Dr. Cifu. The existing CENC cohort, consisting of more than 2 million Veterans and service members, started in 2012 and has become the world’s largest and best-characterized research cohort dedicated to the study of military TBI. It will expand the cohort; integrate with other government, academic and nonprofit research, and spur new public-private partnerships.

Researchers associated with CENC, and now with LIMBIC, have already documented links between combat concussions and dementia, Parkinson’s disease, chronic pain, opioid usage and suicide risk. They have also developed specialized diagnostic tests using questionnaires, physical exams, brain imaging, fluid biomarkers and electrophysiology to probe how the brain recovers from injury.
VA Secretary Recognizes Winner and Finalists of the
Under Secretary for Health
Robert L. Jesse Award for Excellence in Innovation

WASHINGTON — The U.S. Department of Veterans Affairs (VA) presented the inaugural Under Secretary for Health Robert L. Jesse Award for Excellence in Innovation to Dr. Thomas Osborne Dr. Thomas Osborne, director of the VA National Center for Collaborative Healthcare Innovation (NCCHI) and the Chief Medical Informatics Officer (CMIO) at VA Palo Alto Health Care System, at the Veterans Health Administration (VHA) Innovation Experience Oct. 23 at the National Press Club in Washington, D.C.

This award recognizes and honors VA employees who have demonstrated excellence and enabled the discovery and spread of health care innovation that exceeds expectations, restores hope and builds trust.

“Dr. Robert Jesse was an incredible innovator and leader and his innovations and reforms in VA emergency care led to significant improvements in the quality of care provided across the VA health care system,” said VA Secretary Robert Wilkie. “I would like to thank the Jesse family for their permission and support in using Dr. Jesse as the namesake for this award and congratulate Dr. Osborne for his contributions to VHAs role as a leader of health care innovation in the U.S. and the world.”

The two award finalists, recognized for their tireless pursuit of excellence in innovation, were Kathleen Frisbee, executive director of Connected Health under VHA’s Office of Connected Care and Dr. Beth Ripley who also holds a doctorate in neuroscience and serves as a senior innovation fellow and radiologist from VA Puget Sound Health Care System.

The winner and finalists were selected by a committee composed of leadership from across VHA. The committee selected participants on a variety of criteria, including vision, community involvement/service, interpersonal effectiveness and Veteran-centric outcomes.

VA and the VHA Innovation Ecosystem (VHA IE) are the catalysts for the advancement of care delivery and service through mission-driven innovation. VHA IE includes the VHA Innovators Network, Diffusion of Excellence, Care and Transformational Initiatives, and the VHA Innovation Community. These programs aim to identify and scale innovation and promising practices across VA by empowering and enabling employees.

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Healthy Teaching Class Equips, Empowers Veterans in the Kitchen

By LaCrystal Matlock | FAYETTEVILLE NC VA COASTAL HCS NUTRITION & FOOD SERVICE

Studies show that Americans buy or eat 80 percent of their food within a 5-mile radius of home. The studies also say that we are three times more likely to eat the first thing we see in the kitchen, versus the fifth thing.

With that in mind, the Fayetteville NC VA HCS launched a new 4-star Healthy Teaching Kitchen (HTK) to equip and empower Veterans to make better nutritional decisions in the kitchen.

The driving factor to the 4-star rating for the HTK is that Veterans and their significant others who take the class will have a hands-on experience while cooking in the weekly class.

Twenty lucky Veterans currently enrolled in the MOVE! Weight Management Program are in the first group of HTK participants. The 6-week series meets Thursdays at 9:00am and 1:30pm.

Veterans were introduced to a nutrient-packed Chicken Tortellini Soup with nutrition powerhouse kale during the first week! They were pleasantly surprised by the robust-but-salt-free flavor of the Healthy Garden Salad, with edamame (raw soybeans) and black beans — using the flavorful ingredient red wine vinegar. Finally, Veterans experimented with a sampling of different fresh apple varieties, topped with sugar-free, fat-free vanilla-flavored Greek yogurt, dusted with ground cinnamon to finish the course.

In the weeks to come, participants will learn proper knife-handling skills, and then slice and dice ingredients for themselves. Each one is encouraged to return the following week with their own recipes to discuss together during the class.

Our mission is to teach Veterans (and their partners) healthier food preparation strategies for better health outcomes and improved quality of life, in line with the Whole Health concept.

Fayetteville VA MOVE! Coordinator Tammy Peterson leads the classes and customizes the recipe offerings. She tailors class content to special dietary considerations, and often encourages class members to try foods that they may not have ordinarily chosen. For example, class members sampled a black beansweet potato chili prepared two ways — with ground beef and tofu.

On any given Wednesday, Ms. Peterson can be found inventorying, shopping and prepping for the class, wearing a smile, and maybe offering a sample to try!
VISN 6 Sites Of Care & VA Vet Centers

MEDICAL CENTERS

Asheville VAMC
1700 Tunnel Road
Asheville, NC 28803
828-256-7001 or 1-800-932-6408
www.asheville.va.gov

Durham VAMC
501 Fulton Street
Durham, NC 27705
919-796-0411 or 1-888-787-6890
www.durham.va.gov

Fayetteville VAMC
2100 Ramsey Street
Fayetteville, NC 28305
910-483-9727

Hampton VAMC
100 Eisenhower Dr.
Hampton, VA 23667
757-722-9961 or 1-866-544-9961
www.hampton.va.gov

Richmond VAMC
1720 Broad Rock Blvd.
Richmond, VA 23290
804-675-5000 or 1-800-784-8381
www.richmond.va.gov

Salen VAMC
1070 Roanoke Blvd.
Salen, VA 24585
540-987-9403 or 1-888-987-2463
www.saline.va.gov

Salisbury VAMC
901 Brevard Ave.
Salisbury, NC 28144
704-638-6000 or 1-888-406-8861
www.salisbury.va.gov

OUTPATIENT CLINICS

Albemarle CB0C
1945 W City Drive
Elizabeth City, NC 27909
919-231-2781

Brunswick County CB0C
15 Doctors Dr., Suite 2 & 3
Stumpy, NC 28461 or 1-870-754-6140

Charlotte CB0C
800 University East Drive
Charlotte, NC 28213
704-507-2200

Charlotte VAMC CB0C
500 Peter Jefferson Pkwy
Charlotte, NC 28211
704-239-3800

Chesapeake CB0C
1600 S. Military Highway
Chesapeake, VA 23320
757-729-9860

Danville CB0C
750 Privy Forest Rd.
Danville, VA 24540
434-710-4710

Emporia CB0C
1740 East Atlantic Street
Emporia, VA 23927
434-346-1000

Fayetteville HCC
7200 Dr. Martin Luther King Jr. Blvd
Fayetteville, NC 28304
910-483-2723

Franklin CB0C
547 Mayaguez Street
Franklin, VA 23354-3200
828-268-1781

Fredericksburg CB0C
130 Executive Center Pkwy
Fredericksburg, VA 22401
540-370-4488

Fredericksburg at Southpoint CB0C
16040 Spotsylvania Ave, Suite 300
Fredericksburg, VA 22408
540-370-4488

Goldsboro CB0C
2910 Hospital Road
Goldsboro, NC 27530
919-731-4809

Greenville CB0C
400 Mayo Blvd.
Greenville, NC 27834
252-863-2140

Hamlet CB0C
100 Jefferson Street
Hamlet, NC 28345
910-581-2356

Hickory CB0C
3440 Century Plaza, 3e Hickory, NC 28601
828-451-5400

Jacksonville CB0C
4006 Henderson Dr.
Jacksonville, NC 28546
910-353-8408

Jacksonville 2 VA Clinic
306 Bynum Mill Rd.
Jacksonville, NC 28546
910-353-8408

Jacksonville 3 VA Clinic
4 Jordan Court
Jacksonville, NC 28546
910-353-8408

Kernersville CB0C
1085 Kernersville Medical Pkwy
Kernersville, NC 27284
336-315-5000

Lynchburg CB0C
1600 Lakeside Drive
Lynchburg, VA 24501
434-386-5400

Morehead City CB0C
5428 U.S. 70
Morehead City, NC 28557
252-340-2349

Raleigh CB0C
3305 Euclid Avenue
Raleigh, NC 27601
919-921-0126

Raleigh II Annex
3040 Hammond Business Place
Raleigh, NC 27603
919-889-0258

Raleigh III CB0C
1000 Atlantic Ave, Ste 300
Raleigh, NC 27604
919-755-4209

Robeson County CB0C
130 Three Hills Drive
Pembroke, NC 28372
910-777-2200

Rutherford County CB0C
374 Charlotte Road
Rutherfordton, NC 28139
828-598-3780

Sanford CB0C
3112 Tramway Road
Sanford, NC 27332
919-775-6100

Stauton CB0C
107 West Main St.
Stauton, VA 24401
540-890-3777

Tazewell CB0C
141 Ben Bell Ave.
Tazewell, VA 24651
774-806-8660

Virginia Beach CB0C
235 Charlotte Road
Virginia Beach, VA 23452
757-726-6500

Wilmington HCC
1700 Garfield Rd.
Wilmington, NC 28405
910-343-5300

Wytheville CB0C
165 Poplar Ferry Rd.
Wytheville, VA 24382-2300
540-235-1300

DIALYSIS CENTERS

VA Dialysis and Blind Rehabilitation Clinics at Brier Creek
6000 Arcadia Corporate Drive
Raleigh, NC 27617
919-590-5720

VA Dialysis Clinic Fayetteville
2301 Robinson Street, Ste. 101
Fayetteville, NC 28305, 910-483-1727

VET CENTERS

Charlotte Vet Center
2114 Ben Craig Dr.
Charlotte, NC 28265
704-549-0354

Fayetteville Vet Center
2218 Robinson Street
Fayetteville, NC 28305
910-480-8550

Greensboro Vet Center
3315 W Market Street, Suite 120
Greensboro, NC 27402
336-323-5386

Greenville Vet Center
1019 W. Smith Blvd.
Greensville, NC 27834
252-355-7910

Jacksonville, N.C. Vet Center
110 A Branchwood Drive
Jacksonville, NC 28546
910-517-1100

Norfolk Vet Center
1711 Church Street
Norfolk, VA 23504
757-603-2464

Raleigh Vet Center
8931 Electra Lane
Raleigh, NC 27617
(919) 361-6419

Roanoke Vet Center
1401 Franklin Rd SW
Roanoke, VA 24014
540-342-9765

Virginia Beach Vet Center
374 Southampton Circle, Suite 102
Virginia Beach, VA 23452
757-248-3685

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EXCELLENT CARE – EARNED BY VETERANS – DELIVERED HERE
OCTOBER/NOVEMBER 2019

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