The 10th Secretary of Veterans Affairs, the Honorable Robert Wilkie, received the nomination and confidence of President Trump, as well as the confirmation of the U.S. Senate on July 23.

Secretary Wilkie’s Message to Employees

It is an overwhelming honor to serve alongside you as Secretary.

I’m deeply grateful to President Trump for the opportunity to serve for him and for America’s Veterans. I am also grateful to members of the United States Senate for their vote of confidence.

Above all, I want to thank you, the staff of the VA, whether you are at a health care facility, on the benefits team, serving at our cemeteries, or part of our staff at headquarters. You may not hear it enough, but I want you to hear it from me — thank you for your tireless work and devotion to our Veterans, and thank you for all you do to help them and their families every day.

This is our VA. We are here to care for all of our nation’s heroes whose service and sacrifice inspire us all. That is our important and non-negotiable mission.

The president and congress support us, and I’m honored and excited to lead this organization.

I look forward to meeting you, listening to you and serving alongside you. I value your thoughts and insights as we improve our department for the challenges in the years ahead.

Thank you and God bless,

Robert L. Wilkie
Today’s VA is vastly different than the VA in which I started more than 34 years ago. Let’s think about the late ‘80s. America experienced an age of peace after Vietnam, when our men and women were rarely called to fight opposition or aggression. The Cold War was winding down and Desert Storm came with a fury and ended just as quickly.

VA offered health care to eligible Veterans, mostly from the World Wars and Korean conflict, and our Vietnam Veteran population was increasing. The quantity of patients we cared for was considered stable. Health care was more long-term. Hospitals sometimes kept patients for months while they recovered from illness or surgery.

Fast-forward to today, when we serve five generations of Veterans — mostly Vietnam Veterans. All of the Veterans we serve have a variety of needs based on their military history, and all deserve better and quicker access to health care that is closer to their home.

There is no better time to be in VA than today. We are equipped with the latest technology, with more than 300,000 professionals nationwide — many of whom are Veterans themselves. Our clinicians are often leaders in their field, and practice both with VA and with either a private hospital or teach at a major university. We have more access to top-level treatment and care plans than we ever have had.

In fact, in this VISN, we’ve opened 33 sites of care since 2003. That has made VA care more convenient for so many of our Veterans. And this is just the beginning. In 2014, we offered Veterans care in their communities — mostly Vietnam Veterans. All of the Veterans we serve have a variety of needs based on their military history, and all deserve better and quicker access to health care that is closer to their home.

There is no better time to be in VA than today. We are equipped with the latest technology, with more than 300,000 professionals nationwide — many of whom are Veterans themselves. Our clinicians are often leaders in their field, and practice both with VA and with either a private hospital or teach at a major university. We have more access to top-level treatment and care plans than we ever have had.

In fact, in this VISN, we’ve opened 33 sites of care since 2003. That has made VA care more convenient for so many of our Veterans. And this is just the beginning. In 2014, we offered Veterans care in their communities — closer to their homes. It has been a tough road as we ventured into uncharted territory for this, the largest government agency — but we are getting there, and we are successful. In 2017 we successfully completed 168,600 authorized community appointments and boast 22,471 community partners.

Moving into the second half of 2018, I look forward to implementation and expansion of our community care program, and other access options for our Veterans. We will focus our attention on Telehealth expansion, especially around the sites of care that need it the most. We will look to improve care coordination from the time the patient is eligible for VA and throughout their wellness.

SALISBURY, N.C. — Salisbury VA Health Care System celebrated its brand new clinical laboratory and expanded Intensive Care Unit with a ribbon-cutting ceremony Aug. 8.

The clinical laboratory provides significantly more space for the diagnostic lab services, including chemistry, hematology, urinalysis, blood banking, microbiology and anatomic pathology, that previously were housed in the original 1953 main building on the second floor. The new ICU doubles the old ICU’s capacity for a total of 10 beds, all in private rooms, with two specialized isolation rooms for added clinical safety.

Salisbury VAHCS Director Joseph Vaughn declared that, “Not only do these projects address each of VA’s top five priorities, involving greater access to medical care and allowing Veterans to choose where they receive that care, timeliness, modernization, focused resources and suicide prevention, they do it in ways that protect Veterans and make their experiences very personal. Their awareness of facilities like this will encourage them to continue to choose VA.

“By having the new state of the art equipment lab, we can deliver test results more timely,” Vaughn continued. “Where it used to take a few days to get results back, we can now complete the process in about an hour and a half to get a diagnosis and start appropriate treatment.”

He went on to say that the enhanced efficiency is testament to VA’s efforts addressing modernization, timeliness and access. The Salisbury VA Health Care System treats more than 89,000 Veterans annually through more than 1.2 million health care encounters and more than 75,000 bed days of care.

Mid-Atlantic Health Care Network (VISN 6) Director DeAnne Seekins explained, “This new capability demonstrates the reasons we are all here: This is state of the art; not just because it improves our timeliness, but the accuracy of the equipment enables our staff to truly provide our Veterans with the best possible care, anywhere.”

For further information about VA services visit www.explore.va.gov or like us on Facebook at www.facebook.com/VASalisbury.
The Fayetteville VAMC Home Based Primary Care (HBPC) program marked its 10-year anniversary with a team building celebration to reflect, learn, grow and enjoy their accomplishments.

The celebration took place at the Wilmington VA Health Care Center, one of three HBPC team sites that also include teams in Fayetteville and Robeson County.

The staff adopted an ocean theme, adorning the venue with beach-themed décor, personalized flair, and tempting treats. “It was an incredible time for them to celebrate not only those they have had the privilege to serve, but also those they have had the supreme benefit to work alongside,” said Ryan Hylton, HBPC program director.

Home Based Primary Care provides health care services to Veterans in their own homes. HBPC was designed for Veterans who have complex health care needs and for whom routine clinic-based care is not effective.

Veterans qualifying for HBPC benefit from a robust care plan that includes primary care visits at home by the primary care provider; care management through a nurse practitioner, physician’s assistant, or nurse; coordination of services by a social worker; therapy visits including physical, occupational, speech and kinesiotherapy; mental health services; nutrition counseling from a dietitian; and help with medication management.

The occasion began with members of the HBPC team who had been there since the program’s inception sharing experiences of what it was like to be part of a new, exciting and unchartered program and how much the program has strengthened and developed over time, now serving more than 200 Veterans. Social Worker Chinita Fisher, kinesiotherapist Rosalind Greene-Price, registered nurse Beth Warner-Alford, and registered dietitian nutritionist Diane Yates were among those who spoke.

Members then transitioned into team bonding activities including a timeline. Members posted events on the timeline, transforming it into a vibrant tapestry as special life events from more than 30 team members were added. Events included things such as birth of a child, earning of a degree, engagement, buying a house, and much more! The timeline remained up throughout the day for members to read and reflect, as a reminder that members were more than just their job titles.

Wilmington HCC social worker William Lowry, a peer support specialist and Health Coach, spoke about VA’s Whole Health approach to health care. The Whole Health approach, Lowry said, empowers and equips people to take charge of their health and well-being, and to live their lives to the fullest.

After a break for lunch, licensed practical nurses — relatively new additions to the HBPC teams — delivered a presentation to the group. These LPNs function as extensions of the nurses, observing, identifying and responding to Veterans’ needs.

During their presentation, the LPNs demonstrated practical ways they help HBPC teams, such as completing monthly mediplanners, collecting specimens, performing wound care, furthering education, and promoting healthy lifestyles with Veterans and their families.

Next, to interject more merriment into the occasion, the group HBPC team members danced, clapped and sang, filling the room with their reworked version of the Sister Sledge song “We Are Family,” chanting, “We’re HBPC, right at home, it’s the place to be, We’re HBPC, Get up ev’rybody and sing!”

As the day ended, three lucky winners were awarded beach-themed gift baskets and the HBPC team looked forward to another 10 years of service to our Veterans.
By Jeff Melvin | FAYETTEVILLE VAMC PAO

About 30 local organizations, Friends of Fayetteville VAMC you might say, joined Medical Center Director James A. Laterza and staff July 28 for an event that was part meet-and-greet, part information fair and part recognition luncheon.

The meeting coincided with the wrap up of a two-day visit to the medical center by the eight-member Advance Care Planning Via Group Visits (ACP-GV) national implementation team, led by VA National Director of Social Work Laura Taylor. Fayetteville VA is leading the program’s national rollout. It involves using a group approach to facilitate conversations about planning for health care decisions. Groups can be held at VA or in the community.

Taylor and Laterza used the occasion to address the group, dubbed Partners Advocacy Coalition, about advanced care planning and VA’s top priority, suicide prevention.

“To make sure our nation’s heroes get the very best, VA needs community partners across many sectors to join us in delivering support to all Veterans,” said Taylor. As the daughter of a severely injured Vietnam combat Veteran, granddaughter of World War II Veterans, and spouse of a Desert Storm Veteran, she shared that VA’s mission of providing exceptional care to our nation’s heroes “is a personal calling for me — as it is for many other VA employees.”

Laterza thanked service organizations and community partners for their years of dedicated service and unwavering support to Veterans in general. He also used the occasion to acknowledge Fayetteville VAMC Community Living Center residents, and two Veterans who, despite professional and personal challenges, had overcome adversity.

As commemorative keepsakes, each honoree was presented a brick from one of the original hospital buildings, constructed nearly 80 years ago. A brass plate that reads, “In honor of your service and sacrifice on behalf of our nation” is affixed to each brick.

Army Veteran Luis Martinez-Rivera served in the Army for six years as a logistics warehouse clerk. He was stationed at Fort Bliss, Texas, deploying to Saudi Arabia twice. His second Saudi deployment was extended and his unit ended up in Nasiriya, Iraq, shortly after the 507th Maintenance Company was ambushed there in 2003.

And although Martinez-Rivera had a college degree and work experience in management and retail, he had a tough time finding work, when he and his family moved to the Wilmington, N.C., area two years ago.

Homeless for a short time, Martinez-Rivera turned to VA for help and was able to get permanent housing through the HUD/VASH Program. Since October he has been living his lifelong dream of being a business owner. He now operates a thrift shop in downtown Wilmington.

Michael Jones served in the Army too, joining the military at a youthful age. But he was forced to separate after serving only four years, when he was injured in an accident.

Jones thought he was not entitled to the wide range of VA services available to him, because his injury was non-combat related. He didn’t come to VA for a long time, before his wife convinced him to give VA another chance. In recent years, he said he received the help he needed and feels like his voice is heard.

After the special recognition to the Veteran honorees, Laterza presented certificates of appreciation to the PAC attendees. According to Voluntary Service Chief Norma Fraser, the PAC donated more than $157,000 in monetary and in-kind donations to Fayetteville VA in FY17.

Fraser said in addition to the Partners Advocacy Coalition representatives attending the event, “Fayetteville VA also thanks the hundreds of members of those organizations who work tirelessly on our behalf.”

Lunch, courtesy the Veterans Canteen Service, and fellowship, rounded out the event. For information about advance care planning, visit https://www.va.gov/GERIATRICS/Guide/LongTermCare/Advance_Care_Planning.aspx.

Fayetteville VAMC Suicide Prevention Coordinator Patti Glenn (seated, right) discusses suicide prevention with participants of the Partners Advocacy Coalition meeting at Fayetteville VA, which also coincided with a meeting of the Advance Care Planning Via Group Visits (ACP-GV) national implementation team. Fayetteville VAMC is leading the national rollout of the Advance Care Planning program, using a group approach to facilitate conversations about planning for health care decisions.

Partners Advocacy Coalition Members Include:

- American Legion
- American Legion Auxiliary
- American Red Cross
- AMVETS
- AMVETS Auxiliary
- Benevolent & Protective Order of Elks
- Bragg Pope USBC Bowling Association
- Combat Veterans Motorcycle Association (Fayetteville)
- Disabled American Veterans
- Disabled American Veterans Auxiliary
- Gold Star Wives of America
- Hollands Chapel Church (Roseboro)
- Knights of Columbus
- Marine Corps League
- Military Order of the Cootie Auxiliary
- National Society Daughters of the American Revolution
- Paralyzed Veterans of America
- Tarheel Quilters Guild
- The National Society of the Colonial Dames of America
- The Salvation Army
- United Daughters of the Confederacy
- United Steelworkers Local 999 (Fayetteville)
- Veterans of Foreign Wars
- Veterans of Foreign Wars Auxiliary
- and Veterans Motorcycle Club Hope Mills, NC

Fayetteville VAMC Director James Laterza (behind podium on left) addresses the Partners Advocacy Coalition audience about Advance Care Planning and Suicide Prevention. Fayetteville VAMC is leading the national rollout of the Advance Care Planning program, using a group approach to facilitate conversations about planning for health care decisions.
When VISN 6 Network Director DeAnne Seekins conducted a Town Hall meeting July 13 at the Salem VA Medical Center, she used the event to share news with employees about VISN 6, but to learn as well.

Seekins discussed how VHA and VISN 6 health care systems continue to move forward, offering Veterans greater choice, modernized systems, efficiency and improved timeliness in delivering health care to our nation’s heroes.

She also toured the Salem VAMC campus. She was impressed by the recently built Labyrinth, used to promote whole health among veterans. A Labyrinth is a place constructed of or full of intricate passageways, often separated by hedges. Salem’s labyrinth is a modified Chartres pattern of four quadrants, with paths that double back on one another. It has east, west, north and south points, and sits inside the new garden space under construction at Salem, designed by Jack Carman from Design for Generations in Blacksburg.

“I like action, and using this labyrinth as a means to refocus and rebalance to improve the wellbeing of our Veterans is what we should continue to promote,” said Seekins.

Dr. Mark Detweiler and Sandy Lane, retired horticulturist, worked for more than 8 years to fund the project.

According to Kay Montgomery, Labyrinth facilitator and builder, anything that happens when walking a labyrinth can be used symbolically as a metaphor for life. Symbolically it is a walking meditation and leads to the center of something on your journey. The blessing of a labyrinth is that it welcomes you right where you are, as you are. There is only your walk, your way, your pace, your movement, your silence, your voice. It is a place to give and to receive.

During the town hall meeting, Seekins congratulated all the employees of Salem VA Medical Center for remaining a 5-STAR rated facility and for ranking 8th in the nation among other VA health care systems.

Seekins also stopped to visit staff and Veterans at the Danville VA Clinic, where she toured the recently expanded clinic and presented three Veterans with the 50th Anniversary of the Vietnam War lapel pin and Presidential proclamation.
Durham VA Oncologists Reach Out to Rural Veterans Via Telehealth

By Joshua D. Edson | DURHAM VAHCS PUBLIC AFFAIRS

Despite a shortage of cancer doctors in the Ozarks, Veterans enrolled at the Veterans Healthcare System in the Ozarks (VHSO) now have convenient access to some of the world’s best cancer physicians.

Recently, the VHSO lost its on-staff Oncologist. Responsible for 23 counties in northwest Arkansas, southwest Missouri and eastern Oklahoma, the VHSO was faced with a hard decision: to push cancer-stricken Veterans to private Oncologists, who are under-represented in the area that the VHSO serves, or to find an acceptable alternative until a suitable replacement can be found.

“The VHSO reached out to other VA facilities in hopes of finding Oncology expertise,” says Dr. Sandy Shah, Assistant Chief of Oncology at the Durham VA Health Care System. “We’ve been trying to expand our Oncology Telehealth services, and this seemed to be the perfect opportunity to do so. Plus, we get to help a fellow VA Healthcare System in need.”

Now, when a Veteran suffering from cancer comes to the VHSO seeking treatment or consultation services, they connect to a DVAHCS provider to discuss possible treatment options and perspectives, all on a secure link via video. If the Veteran requires further care, Nurse Practitioners at the VHSO are there to assist with follow-up and additional consultations. This helps with continuity of care, since many Veterans prefer to stay within the VA system for their healthcare needs.

U.S. Marine Corps and World War II Veteran Thomas Cubbins says he was thankful for the opportunity to have a tele-oncology appointment with Durham VA’s Chief of Hematology and Oncology Dr. Michael Kelley. “I’ve had a great experience with the program. Dr. Kelly was very thorough in his answers to my questions, and he was knowledgeable about my condition. The fact that he was a time-zone away didn’t really seem to matter.”

Cutson said the state-of-the-art technology was unlike any he had seen. “You can get an expert on a screen in a matter of minutes. It doesn’t matter where he is — he’s on the screen discussing your problems one-on-one,” says Mr. Cubbins. “It’s amazing what they can do [in healthcare] these days.”

The National Rural Health Association estimates that by 2020, rural areas could suffer a shortage of some 45,000 doctors. In cases such as this, telehealth helps “bridge the gap” by bringing the doctor to the patient, without the doctor’s office. As the VHSO works to eliminate the doctor shortage, telehealth appointments through other VA facilities like the Durham VA Health Care System can be quite helpful in addressing Veteran patient needs.

“This really helps patients and providers in areas where there is a shortage in Oncology staff,” explains Dr. Shah. “Without Telehealth services, we would be forced to send Veterans outside the VA for care when we are able to offer world-class Oncology care within the VA. It’s great opportunity for the VA to offer highly specialized care in places that are otherwise underserved.”

For more information on the VLER “Connect the Docs” program, please visit https://www.va.gov/VLER/vler-health-exchange-registration-guide.asp.

Patio Garden Goes From Drab to Fab

By Yanitz Irizarry | RICHMOND VAMC PUBLIC AFFAIRS

The inpatient mental health unit patio at McGuire VA Medical Center received a makeover from volunteers of BB&T’s Lighthouse Project. The spruced-up space provides Veterans a sanctuary to exercise, relax and to conduct therapy groups.

The Lighthouse Project focuses on improving the quality of life for community members. Lead project manager Jeff Pond decided to make his contribution Veteran-centric.

“It was a pleasure to work with everyone [at McGuire],” Pond said. “Everyone was receptive and open to our ideas. It was really something, working on a project for our Veterans. I couldn’t imagine a better place to work.”

The project took nearly four months to plan. Consuela Gregory, treatment program coordinator and recreation therapist at McGuire, worked meticulously to meet the strict safety standards required at the hospital. According to Gregory, every detail mattered. The plants had to be nontoxic, the mulch needed to be cut extra fine, and the patio furniture needed to be coated in a special plastic to regulate surface temperature.

“This space will help with the healing process,” Gregory said. “When patients first come through, they are struggling to cope. As they attend more classes, they begin to heal.”

Pond and volunteers cleaned the patio, removed weeds and filled the central tree feature with fresh mulch. The team also planted two flowerbeds and created a raised bed with fruits and vegetables to allow gardening access to all Veterans.

“This was such a wonderful experience,” Pond said. “Hopefully, we will have a great future working with [McGuire VA] again.”

What was once a drab patio is now a rejuvenated therapy space that Veterans can enjoy.
Excellent Care – Earned by Veterans – Delivered Here  | JULY/AUGUST 2018

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**McGuire VA Hepatology Focuses on Widespread, Serious Liver Disease**

By David Hodge | RICHMOND VAMC PUBLIC AFFAIRS

The Liver Disease Program at McGuire VA Medical Center recently shifted its focus after treating more than 1,100 Veterans with Hepatitis C, to address an emerging public health issue.

This widespread, serious and poorly understood disease is nonalcoholic fatty liver disease (NAFLD).

An estimated 100 million people in the U.S. have NAFLD, and in the past 10 years its prevalence among Veterans has tripled, according to Dr. Michael Fuchs, chief of hepatology and liver transplantation at McGuire. Of these, about 15 million are at risk to progress to liver cirrhosis.

According to Fuchs, NAFLD is a chronic, yet silent disease, and many public health agencies are not adequately anticipating the financial and medical burdens this could put onto society and healthcare systems around the world.

Fuchs is working to create a paradigm shift in the way NAFLD is diagnosed and treated. Ideally, there would be routine checks for NAFLD, like how diabetes and obesity are monitored. The statistics show NAFLD, and its most severe form called nonalcoholic steatohepatitis (NASH), are closely linked to both diabetes and obesity. When left untreated, NASH can result in liver scarring, cirrhosis, cancer and death.

Veterans at McGuire receive a comprehensive assessment of their liver disease by a team of specialists. Information is then analyzed to offer the Veteran a personalized intervention to meet their special needs. Additionally, Veterans are offered early access to NAFLD-specific medications through the largest clinical trials program offered by a VA facility. As of June 2018, there were no FDA-approved medicines available.

Fuchs said he estimates five million patients with NASH will require a liver transplant by 2025. This requirement for increased transplants would be placed on the nation’s public and private healthcare systems, which are already at capacity.

Fuchs advises that Veterans ask their primary care providers about their potential for liver disease because it often only shows symptoms when it has progressed.

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Members from the McGuire VA Medical Center’s Liver Disease Program help diagnose and treat Veterans with nonalcoholic fatty liver disease. Pictured from left: Amy Blakely, nurse practitioner; Dr. Michael Fuchs, chief of hepatology and liver transplantation; Hochong Gilles, nurse practitioner; Dr. Puneet Puri, attending physician; and Veda Forte, nurse practitioner. (Photo by Jason Miller)
Raleigh, N.C. — Secretary Larry Hall of the NC Department of Military and Veterans Affairs (DMVA) recently announced the release of the new 2018 DMVA Resource Guide at the North Carolina National Guard Joint Force Headquarters in Raleigh.

Hall stated, “My staff and I are dedicated to providing the highest level of service and enriching the lives of veterans and their families. We produced this guide as one way to help connect them with the resources and assistance they need.”

The new Resource Guide offers 176 pages of information and frequently requested resources for Veterans, active military, and their family members in the areas of Employment, Healthcare, VA Benefits, Housing, Personal Services, Entrepreneurship, Education and Women’s Services.

No less than 55,000 copies of the 2018 DMVA Resource Guide are located at key sites throughout the state. An electronic version can be found by clicking here for quick, online access to information. Funding for the Resource Guide was provided by Workforce Solutions of the NC Department of Commerce.

To learn more about the guide or the NC DMVA, contact Director of Communications, Angella Dunston, at angella.dunston@milvets.nc.gov or (984) 204-8336.

About DMVA

The Department of Military and Veterans Affairs focuses on protecting North Carolina’s military installations, working with the communities around military bases, helping military families and veterans get the support and services they need and helping connect veterans with employment opportunities.
HAMPTON ROADS, Va. — Veterans Kitchen, a Hampton Roads nonprofit organization that aims to provide homeless and vulnerable Veterans with the tools they need to live healthy and stable lives, is now preparing to place its 500th Veteran into new housing within the next week.

“For the past several years, ending Veteran homelessness has been a priority for both the VA and the state of Virginia,” said Marti Chick-Ebey, the homeless coordinator for the U.S. Department of Veterans Affairs. “Virginia now has the lowest number of homeless Veterans per capita of any state. Our community partners are crucial to our success as they provide the items our Veterans need so they don’t just get housed, but feel at home.”

With support from Walmart, the Department of Veterans Affairs and others, Veterans Kitchen provides homeless Veterans with basic necessities to help them settle into a home. Veterans Kitchen raises funds by selling items outside various Walmart locations. In addition, Walmart has awarded the non-profit store grants, donated gift cards and merchandise.

The grants and donations enable Veterans Kitchen to assist Veterans when they move into their new homes by providing kitchen items needed to prepare healthy meals, including pots, pans, utensils, storage and cutlery, along with household items such as shower curtains and hooks, trash bags, waste baskets, paper towels, toilet tissue and more. When financially possible, Veterans also receive microwaves, slow cookers, coffee pots, toaster ovens and gift cards.

“With the help of community supporters, Veterans Kitchen can continue to bring hope to the men and women who served in our military,” said Richard Fraser, director of Veterans Kitchen.

Salisbury Medical Center Director Joseph Vaughn knows that employee morale is vitally important. “Motivating employees to give their best is a top priority for me,” said Vaughn. “As a Veteran who receives my care at the Salisbury VA, I expect all Veterans to receive the same level of care that I receive. I have been very impressed with the passion and dedication of Salisbury employees. Our dedicated employees look at their job as an opportunity to serve our nation’s heroes, and not just a paycheck. That is why the All Employee Survey (AES) is so important for employees to provide feedback and to have the confidence that I will listen to their concerns and take appropriate action based on their feedback. This year, I promised to host an ice cream social if we met our goal of 65 percent AES participation, which our employees far exceeded.”

At 6:00am on July 17, Vaughn made good on his promise. Vaughn and his management team delivered ice cream to the third shift followed with a drop-in for the first and second shifts later that afternoon. The ice cream was cool and refreshing on a very hot summer day. Judging by the smiles on everyone’s faces, the ice cream was very good!
Dr. Webster (Carl) Bazemore has been appointed the new VISN 6 Medicine Service Line Manager, effective Monday, July 23, 2018. In this role, he serves as the primary clinical leader for the organization and for delivery of health care services for the Medicine service line within the VISN. His span of oversight encompasses care provided in the clinical discipline at all seven VAMCs and the system of community-based clinics in VISN 6.

Bazemore joins us from the Charles George VA Health Care System, where he served as the Chief of Staff from 2014 to 2018. Beginning in 2008, he served as a staff pulmonary/critical care intensivist and Medical Director of the Medical Intensive Care Unit (MICU), after being in private practice since 1989.

He received his bachelor's degree from Duke University, Durham, N.C.; and his M.D. from Emory University in Atlanta. He is a retired captain from the U.S. Navy. While on active duty, Dr. Bazemore completed his internship, residency and fellowship at the Naval Hospitals in Portsmouth, Va., and San Diego, Calif.

Dr. Brian Hayes has been appointed the new VISN 6 Primary Care Service Line Manager, effective Monday, July 9, 2018. In this role, he serves as the primary clinical leader for the organization and delivery of health care services for the Primary Care service line within the VISN. His span of oversight encompasses care provided in the clinical discipline at all seven VAMCs and the system of community-based clinics in VISN 6.

Dr. Hayes joins the VISN staff from the Durham VA Health Care System, where he served as the Associate Chief of Staff for Ambulatory Care from 2014 to 2018. He is a retired Colonel from the U.S. Air Force where he served as the Commander of David Grant Medical Center, United States Air Mobility Command. He served more than 22 years as an Air Force Flight Surgeon, with more than 1,400 flying hours.

He graduated with honors from the University of Miami and was commissioned as a second lieutenant through Air Force ROTC. He attended the University of Miami School of Medicine and received his medical degree in 1990. Dr. Hayes also earned a Master of Public Health Degree from Harvard University and a Master of Strategic Studies from the Air Force’s Air University.

In addition to his academic work, he completed residencies in Aerospace Medicine and General Preventive Medicine & Public Health and has been board certified in both specialties by the American Board of Preventive Medicine. He concurrently holds an academic appointment as an Assistant Professor at Duke University.

WASHINGTON — Today the U.S. Department of Veterans Affairs (VA) announced that President Donald J. Trump has selected former VA White House Senior Advisor Thomas “Jake” Leinenkugel to lead a key commission focused on the department’s mental health care programs.

The Creating Options for Veterans’ Expedited Recovery (COVER) commission will examine VA’s evidence-based therapy model for treating mental health conditions, as well as the department’s complementary and integrated mental health approaches. “Jake has been an ambassador for change at VA, working to implement President Trump’s policies throughout the department over the past year and a half,” said Acting VA Secretary Peter O’Rourke. “As leader of this important new commission, Jake will continue to advocate for better care and services for his fellow Veterans.”

A former captain in the U.S. Marine Corps, Leinenkugel joined VA in January 2017 after retiring in 2014 from his family-operated business, Jacob Leinenkugel Brewing Co., where he had served as president for 26 years.

At VA, Leinenkugel has been instrumental in the creation of the department’s “ChooseVA” branding campaign and the implementation of November’s National Veterans and Military Families Month. He has also worked to promote VA’s efforts to reduce Veteran suicides.

The COVER commission held its first meeting July 24 and 25 in Washington, D.C.

For more information about the COVER commission, email COVERCommission@va.gov
VA and IBM Watson Health Extend Partnership to Support Veterans With Cancer

WASHINGTON — The U.S. Department of Veterans Affairs (VA) and IBM Watson Health recently announced the extension of a public-private partnership to apply artificial intelligence (AI) to help interpret cancer data in the treatment of Veteran patients. First announced two years ago as part of the National Cancer Moonshot Initiative, VA oncologists have now used IBM Watson for Genomics technology to support precision oncology care for more than 2,700 Veterans with cancer.

Precision oncology is the practice of biologically directed cancer care. For example, the mutations in a cancer's genome (the cancer's DNA) can significantly impact the treatment options available to treat that cancer and the likely outcomes after treatment. By knowing the cancer genome, oncologists and patients are able to choose therapies that specifically target the patient's cancer.

VA's precision oncology program primarily supports stage 4 cancer patients who have exhausted other treatment options. The partnership extension with IBM will enable VA oncologists to continue using Watson for Genomics through at least June 2019.

“Our mission with VA's precision oncology program is to bring the most advanced treatment opportunities to Veterans, in hopes of giving our nation's heroes better treatments through these breakthroughs,” said Acting VA Secretary Peter O'Rourke. “We look forward to continuing this strategic partnership to assist VA in providing the best care for our Veterans.”

VA treats 3.5 percent of the nation's cancer patients — the largest group of cancer patients within any one health-care group. In order to bring precision oncology advances to this large group of patients, with equal access available anywhere in the country, VA established a central “hub” in Durham, N.C.

In this facility, a small group of oncologists and pathologists receive tumor samples from patients nationwide and sequence the tumor DNA. They then use AI — the ability of a computer program or a machine to think and learn — to help interpret the genomic data, identifying relevant mutations and potential therapeutic options that target those mutations.

More than one-third of the patients who have benefited from VA's precision oncology program are Veterans from rural areas where it has traditionally been difficult to deliver cutting-edge medical breakthroughs.

“VA is leading the nation to scale and spread the delivery of high-quality precision oncology care, one Veteran at a time,” said Dr. Kyu Rhee, chief health officer for IBM Watson Health. “It is incredibly challenging to read, understand and stay up-to-date with the breadth and depth of the medical literature, and link them to relevant mutations for personalized cancer treatments. This is where AI can play an important role in helping to scale precision oncology, as demonstrated in our work with VA, the largest integrated health system in the U.S.”


VA Establishes Office of Electronic Health Record Modernization to Support Transition From Legacy Patient Data System

WASHINGTON — Focused on ensuring a successful transition from a legacy patient data system, the U.S. Department of Veterans Affairs (VA) announced the recent establishment of the Office of Electronic Health Record Modernization (OEHRM).

Launched in late June, OEHRM will manage the preparation, deployment and maintenance of VA's new electronic health-care record system and the health information technology (IT) tools dependent upon it. "As technology and the needs of our Veterans evolve, we must also evolve our systems to support better care for our Veterans," said VA's Acting Secretary Peter O'Rourke. "This office is dedicated entirely to our electronic health record modernization, and will bring significant and diverse expertise to get VA to the end-state that will allow medical records to transition seamlessly for service members departing active duty into Veteran status."

OEHRM is staffed with knowledgeable, technical and functional subject matter experts and will be led by Genevieve Morris, who is currently detailed to VA from her position as the principal deputy national coordinator for the Department of Health and Human Services. Morris and OEHRM will work in close alignment with VA's Under Secretary of Health and Chief Information Officer.

As she implements the new health IT initiative, Morris said she will concentrate on what is best for the Veteran community. "OEHRM, the Veterans Health Administration and the Office of Information and Technology will continue to collaborate closely to ensure this important transition is as smooth as possible for our Veterans, clinicians and staff," Morris said. "We are working hard to configure and design a system focused on quality, safety and patient outcomes, which will allow health IT innovations within one VA facility to be used across the entire VA health-care system."

VA signed a contract with Cerner Corp. on May 17 to replace its decades-old Veterans Integrated System Technology Architecture (VistA) health-care records technology over the next 10 years with the new Cerner system, which is in the pilot phase at the Department of Defense (DoD). The modernized system will allow VA to have patient data shared seamlessly between VA and DoD.

For more information about OEHRM, to include contract information, employment opportunities and messages from OEHRM leadership go to www.ehrm.va.gov.