# THE VISN VOICE

VA Capitol Health Care Network VISN 5

April 2008

## I THOUGHT YOU WOULD LIKE TO KNOW

Mr. Garfunkel

One of the big issues under discussion on several levels in the VA today is workload. This is a multifaceted issue. While we have some clinics and even inpatient units that are at full capacity or beyond, overall VA workload did not grow in FY 2007. As you may know from watching the media, the VA is also being scrutinized for not reaching out to enough OEF/OIF returning veterans. While the VA has put millions of dollars into additional mental health staff, suicides of veterans is also an issue.

There is, as you may know, some congressional interest in reopening enrollment for priority 8 veterans. VA recently conducted a study to assess the impact of this action. The study concluded that the earliest VA could build the staffing and infrastructure to adequately meet this new workload would be 2013. Even then, hiring the right mix of staff would be difficult in light of chronic health care workforce shortages.

In the meantime, a plan is underway at the national level to contact over a half million OEF/OIF veterans who have not utilized VA services, to make sure that they are aware that they are entitled to full VA benefits for five years. This is certainly expected to produce additional workload.

Meeting the demand of all veterans for VA health care is an important goal. Our Network is exploring ways to meet demand in various ways, including opening new Community Based Outpatient Clinics. I will try to keep all of you up-to-date on this important issue as time goes on.

**Editors Note:**

### How to contribute to

### THE VISN VOICE NEWSLETTER

The VISN Voice is a monthly Network publication, and a source of educational and informational articles for employees, volunteers, and veterans of the VA Capitol Health Care Network.

Submit your information via e-mail to VISN5 Employee Newsletter on Outlook by the end of the month for the following month's publication. Please do not send PowerPoint or Published documents—use Word. Please include the following information: name, title, service, facility, and reason for submission. Submissions should not exceed 350 words. The editor reserves the right to make edits to any submission chosen for publication, and not all submissions will be chosen for publication.

**Special points of interest:**

***News From Around the Network***

**Washington DC VAMC**

**VAMHCS**

**Martinsburg VAMC**

**VISN5 Service Area**

# WASHINGTON DC VAMC NEWS

## VA Medical Center Offers "ELECTRONIC HOUSE CALLS" for Veterans in the Care Coordination Home Telehealth Program

By Michelle Spivak

Washington, DC---From the comfort of his home in Gainesville, Virginia, Avery Brunson, a veteran of Operation Iraqi Freedom, takes his blood pressure, pulse, and other health measurements and sends them to the VA Medical Center in Washington, DC (DCVAMC).

And he is not the only one. Over four hundred military veterans enrolled in the Medical Center's Care Coordination Home Telehealth (CCHT) Program electronically transmit this vital health information to their assigned monitor nurse either daily or, at a minimum, three times a week.

Across the country, more than 30,000 veterans are connected to their providers through the use of home telehealth devices – saving them long commutes and saving appointment slots for other needy veterans. Plus, they get daily "electronic house calls" from their providers.

"It's a wonderful program," says Brunson. "I have to drive 2 ½ hours one-way to the hospital. Obviously, anything that can cut out the number of times I have to make this journey is beneficial."

The telehealth devices use modem technology to transmit data directly to the patient's electronic health records at the VA Medical Center. The information is checked frequently by a "monitor nurse." This nurse is dedicated to the patient's care, providing individualized case management.

Angela Fleming, RN, takes Avery Brunson's vital signs at the DCVA Medical Center. Brunson now makes fewer trips to the medical center since enrolling in

# WASHINGTON DC VAMC NEWS

## VA Medical Center Offers "ELECTRONIC HOUSE CALLS" (Continued)

Avery Brunson's blood pressure is electronically monitored as part of the CCHT Program. Brunson is one of 400 DCVAMC patients who have elected to have their vital signs monitored from the comfort of their home—saving themselves multiple visits to the medical center.

In addition to reviewing the health information, the nurse schedules appointments when needed, makes appropriate consults to Specialty Care Clinics, assists in getting medical supplies and medication, and provides education.

For Brunson, 47, and his fellow vets, who often find it confusing and time-consuming to manage their complex, chronic conditions, these "electronic house calls" are not just convenient, they can be lifesavers.

Clinical outcomes indicate patients using telehealth technology maintain their blood pressures and weights in a healthy range and keep their blood sugar levels in check. Generally, patients in the CCHT Program are healthier and better educated than others with similar chronic health conditions. And, they are empowered to take charge of their health.

The program also reduces emergency room visits, unscheduled clinic appointments and inpatient stays – saving valuable hospital resources.

In September 2002, the Washington DC VAMC piloted telehealth research with a small group of patients. Based upon its success and that of three other hospitals in the system that joined the testing, the program was rolled out to VA Medical Centers nationwide in 2004.

Not all patients are eligible for this program. Patients with congestive heart failure, chronic obstructive pulmonary disease, uncontrolled diabetes, or hypertension are among the best candidates for this program – as they need frequent monitoring.

The monitoring equipment is set up in patient homes by trained technicians and transmits information about each patient over standard telephone lines. When changes suggesting potential health risks, such as significant weight gain or increase in blood pressure or blood sugars are recorded, the nurses immediately take action to provide appropriate treatment. Often, this can be done without an office visit. Nurses coordinate with doctors who can make changes in prescriptions and order corrective action through electronic health records.

"Anytime there's a potential health problem, indicated by the equipment, my care team – Donna Y. King and Angie Fleming – call to find out what's wrong," reports Mr. Brunson.

Susan Jackson, CCHT Program director, says "Patients rave about the program, especially the personal attention they get from their monitor nurses. Patient satisfaction rates for the program are about 90 percent".

Veterans enrolled at the VA Medical Center who have an interest in participating in the program should contact Susan Jackson at 202-745-2250, to determine if they are eligible and suitable to participate in this program.

# VA MARYLAND HEALTH CARE SYSTEM (VAMHCS) NEWS

## Actor Salutes Hospitalized Veterans

**By Michael Dukes**

Actor Mike Vogel - who played Jason Hawkins in the recent, big-screen thriller "Cloverfield" - visited veteran patients at the Baltimore VA Medical Center on March 5, 2008, as part of the National Salute to Hospitalized Veterans Program. This year, Vogel is the national spokesperson for more than 90,000 volunteers serving veterans at VA facilities across the nation. National Salute to Hospitalized Veterans is the VA's annual patient recognition program inviting the public to visit and honor hospitalized veterans.

The youngest celebrity to lead the National Salute, Vogel brings youthful energy to the program at a time when the number of young combat veterans under VA care is growing, and VA is looking to younger generations of American's to replenish an aging volunteer force.

"My generation has been focused on the wars in Iraq and Afghanistan, but sometimes we forget about the veterans who are receiving care in VA Medical Centers," Vogel said. "I think it is important to thank these hospitalized veterans for what they've done and to give them a handshake."

Vogel became personally involved in supporting veterans after his cousin's husband was killed during military duty in Iraq in 2007. Both of his grandfathers fought in World War II. One was a tank commander and veteran of the Battle of the Bulge; the other a Seabee in the Navy.

Vogel began his acting career in 2001 on the Fox Network television series "Grounded for Life." He has appeared in a variety of movies since, including "The Sisterhood of the Traveling Pants," "Rumor has It," and "Poseidon," the 2006 remake of the "Poseidon Adventure." Currently, Vogel has a starring role in the new feature film "Cloverfield," released in January 2008.

Actor and National Salute to Hospitalized Veterans Chairman Mike Vogel stops to pose for a picture with Kimberly Breen, a female veteran patient, during his visit to the Baltimore VA Medical Center.

Charles W. Anderson, Jr., a Vietnam Era veteran, proudly displays the beaded artwork that he entered in the applied arts competition

## Perry Point VA Medical Center Hosts Veterans Creative Arts Festival

**By Margaret Hornberger**

The Perry Point VA Medical Center recently hosted a day-long Veterans Creative Arts Festival. This annual event showcases the talents of veterans through artistic expression. An afternoon visual arts program featured the entries of 42 hospitalized veterans and outpatients in the categories of applied arts, fine arts, and craft kits. Following the visual arts program, an evening performing arts program was held that featured the talents of veterans in music, creative writing, and drama.

According to Marian Jones, Recreation Therapy Festival Coordinator, "The Creative Arts Festival recognizes and encourages veterans to express their artistic achievements through competition in the divisions of arts and crafts, creative writing, dance, drama, and music."

Winning entries from this local competition will be submitted to a national panel of judges comprised of recreation and creative arts therapists from other VA facilities. Winners of the local competition will go on to join veterans from across the country in a National Veterans Creative Arts Festival that will be held in Loma Linda, Calif., during October 2008. The National Creative Arts Festival is sponsored annually by the Department of Veterans Affairs, the American Legion Auxiliary, and Help Hospitalized Veterans.

# VA MARYLAND HEALTH CARE SYSTEM (VAMHCS) NEWS

## Future Looking Brighter for Veteran

**By Margaret Hornberger**

The future is looking brighter these days for Earl H. Latson, a Vietnam Era veteran. During the past eight months, Latson has worked as a mail clerk in the mailroom of the Perry Point VA Medical Center under the direction of the VA's Vocational Rehabilitation Transition Work Experience Program. He was recently hired as a full-time VA employee in this same position when a vacancy occurred in the mailroom.

The oldest of eight children, Latson grew up in Savannah, Georgia, and joined the U.S. Marines at the age of 18. After serving two years as a U.S. Fleet Marine, he was honorably discharged and returned to his hometown. Since his father died at a young age, Latson felt a responsibility to his mother and siblings and worked various jobs to help support the family income.

During his early twenties, Latson's life began to change, and he developed associations with individuals who led him to believe that he could make a fast buck without having to work for it. Latson's behavior eventually resulted in some periods of incarceration. His personal life also began to unravel, resulting in a divorce and the loss of connection with his child.

"I grew up in a period when the world was angry and people were protesting the Vietnam War and fighting for civil rights," said Latson. "Looking back, I think I carried inside me a lot of hostility while trying to find my identity."

While incarcerated, Latson had the opportunity to attend electrician training classes that were offered by a local college. Upon his release from prison, Latson continued to build on the skills he had learned during his incarceration. He worked as an electrician helper for several contractors and eventually made his way to Wilmington, Delaware, where he found a seasonal job installing commercial wiring.

After moving to Wilmington, Latson's life became more settled with a marriage and another child. He was also able to move to a steady paying job in the skills trade at an automobile manufacturing plant. It was during this time that Latson's life once again began to unravel.

"I was working long 12-hour days," said Latson. "I had everything I thought I wanted -- a great job, prestige, and a happy family life, but other factors took over my life."

Latson eventually lost his family and his job at the automobile manufacturing plant. He continued to hold various contractor jobs, relying on his electrician skills to keep him afloat, but he could not maintain them.

After living a roller coaster existence for some time, Latson became homeless. He spent his days in and out of missions, public libraries, and men's shelters. Through interactions with other veterans, he learned of counseling and therapy offered by the Department of Veterans Affairs.

"I participated in a program at the Wilmington VA Medical Center and respected the advice of my caseworker, but at the time I didn't take it seriously," said Latson. "I thought I could handle my problems on my own, and I never returned for follow-up group meetings."

It was only when Latson suffered a heart attack and underwent triple bypass surgery at the Washington DC VAMC, with follow-up care at the Perry Point VAMC that his attitude began to change.

"When your life is at stake, you begin to realize that you cannot make it on your own, and you need to accept the help of others," said Latson.

While at the Perry Point VA Medical Center, Latson was referred to the Domiciliary Residential Rehabilitation Treatment Program. His life issues and medical concerns were addressed, and as a result of his positive attitude and strong desire to lead a better life, he has been able to turn his life around and begin a new chapter.

Earl H. Latson, Vietnam Era veteran, wears a proud smile as he sorts mail in his new position as a full-time VA employee.

"Through the grace of God and the support of VA social workers and counselors, I have reconnected with my children," comments Lawson. "I have made restitution for my mistakes and have learned to confront, rather than run from life's problems."

Latson never misses the opportunity to talk frankly with fellow veterans about his life experiences. He freely shares what he has learned from his life experiences and encourages his comrades to be open to change, set goals, and listen to constructive advice from their therapists.

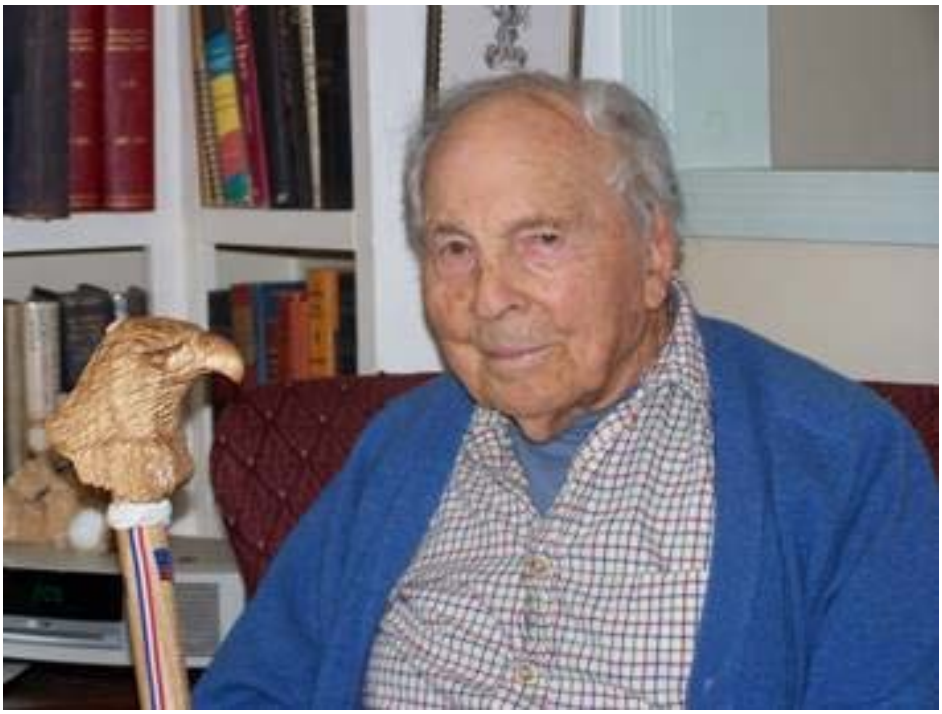
"The Department of Veterans Affairs has always been there for me during important milestones in my life," comments Latson. "My education was supported by the G.I. Bill, my home was purchased through a VA loan, my medical and behavioral health needs continue to be supported by the VA, and I now have the privilege of serving my fellow veterans as a VA employee."

# MARTINSBURG VAMC NEWS

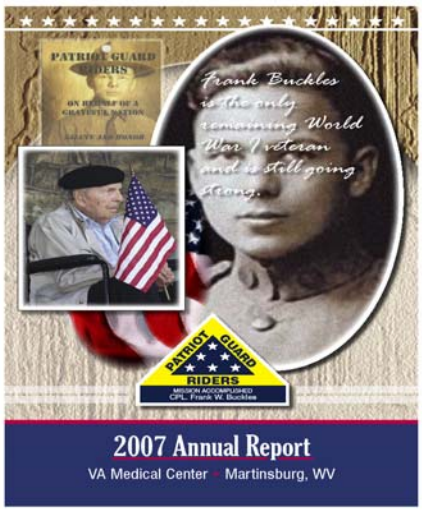
## VAMC JOINS COMMUNITY IN RECOGNIZING BUCKLES

On April 12th, Martinsburg VAMC Public Affairs staff joined members of The Patriot Guard Riders (PGR) to honor Frank Buckles, the last known living American WWI veteran. Gary Gaskins, PGR's West Virginia Ride Captain, along with Ann and Ted Nettles, Maryland PGR HelpOnTheHomefront (HOTH) members, visited Buckles to present him with a beautiful Eagle Head Cane. The cane was hand carved by Larry Nowell, member of the Smokey Mountain Woodcarvers Association in Tennessee.

The PGR is a nonprofit organization with an unwavering respect for those who risk their lives for America's freedom and security. Their main mission is to attend funeral services of fallen American heroes as invited guests of the family. PGR also operates the HelpOnTheHomefront (HOTH) Program, which provides support to soldiers and families who have served or are serving in the military. The Nettles currently visit Walter Reed Army Medical Center on a regular basis to support needs of the OEF/OIF veterans. In September 2007 hundreds of PGR from across the country escorted The Liberty Bell to the Buckles' farm to honor him.



Frank Buckles, 107 year old WWI Veteran, receiving the Eagle Head Cane from the Patriot Guard Riders




More than 4.7 million Americans joined the military from 1917-18, but VA says Frank Woodruff Buckles is the nation's only surviving WWI veteran. Buckles turned 107 years old in February 2008. He is featured on the front page of Martinsburg's 2007 Annual Report.

# MARTINSBURG VAMC NEWS

## WELCOME HOME AMERICAN HERO

By Barbara Corbin

Martinsburg VA Medical Center hosted their first Welcome Home American Hero event on Saturday, April 5th. OEF/OIF Program Manager Katherine Smits, had fine-tuned the program of events, including the weather. It was a beautiful, sunny day and patriotism peaked when entering the medical center through the Avenue of Flags, more than 200 donated American veteran burial flags, which lined the roadway and blew in the breeze. For those who happened to be there when the Black Hawk medivac helicopter landed in the early afternoon, it was incredibly impressive.

Several hundred people gathered for the official afternoon ceremony, while many other veterans and family members toured the medical center, visited exhibits, and enjoyed the entertainment and family activities.

Sanford Garfunkel, Network Director, was guest speaker. He spoke about the importance of Guardsmen and women, American military, veterans, etc., knowing about VA and the benefits available to them. Representatives from the Congressional Offices of Senators Byrd, Rockefeller, Mikulski, and Cardin relayed remarks and well wishes from their respective Senators.

Ann Brown, Medical Center Director, praised the efforts of the West Virginia Air National Guard, 167 Airlift Wing, for partnering with the medical center to organize the Welcome Home event.

Welcome Home American Hero event on Saturday, April 5

Black Hawk Medivac Helicopter

Guardsmen from WV Air National Guard, 167 Airlift Wing, with Ann Brown, Medical Center Director (3rd from left), and Pedro Garcia, Associate Director (right)

# *SPRING INTO SAFETY*

Article by Vivian Mathews (Theme sponsored by Deb Rogers—Martinsburg VAMC

## *How were National Patient Safety Goals developed?*

The Joint Commission (JC) introduced the first set of national Patient Safety Goals (PSGs) in 2003. The impetus to develop patient safety goals derived from several sources. The 1999, Institute of Medicine (IOM) – "To Err is Human," was a major catalyst for the development of PSGs when they reported as many as 44,000 – 98,000 preventable deaths occurred in the hospital annually. The Agency for Healthcare Research and Quality (AHRQ) influenced the development of PSG through their research. AHRQ research identified the fiscal impact of patient safety. Medical errors are estimated to cost a large hospital more than $5 million dollars per year; preventable health care errors cost the economy from $8 - $15 billion dollars each year. The media sensationalized reports of medical errors had a severe impact on the malpractice insurers and the public at large. Medical errors is the eighth leading cause of death in this country, this is higher than motor vehicle accidents (43,458), breast cancer (42,297), or AIDS (16,516).

The JC had to respond to the national outrage of preventable medical errors in the health care industry. They commissioned the Sentinel Event Advisory Group, consisting of experienced physicians, nurses, pharmacists and other patient safety experts to identify problematic areas in the health care delivery system, establish patient safety goals, requirements, and implementation expectations.

The VA National Center for Patient Safety (NCPS) utilization of the Root Cause Analysis (RCA) process to trend health care system errors. Patient misidentification was cited in more than 100 individual RCA's from January 2000 to March 2003. RCA cases consisted of patients not accurately identify symptoms resulting in medication errors, transfusion errors, testing errors, wrong patient procedures, and wrong patient discharged. Because of the high incidents of patient misidentification, the JC cited improving the accuracy of patient identification as the first national PSG in 2003.

Subsequent VISN Patient Safety Articles will focus in detail on each of the PSGs, requirements, and implementation expectations. It is important to know that your facilities JC accreditation process weighs heavily on the organizations implementation and sustainability of the PSGs. Failure to effectively implement the goals to effect change in patient safety affects the organizations accreditation decision, which could ultimately lead to a loss of accreditation.

*LET'S SPRING INTO SAFETY VISN STYLE – "TOGETHER"*

# IN THE ALL EMPLOYEE SURVEY – EVERY VOICE IS HEARD – VHA EMPLOYEES ARE ENCOURAGED TO PARTICIPATE AND HELP TO CREATE A BETTER VHA

Each year, employees get the opportunity to share with Veterans Health Administration (VHA) leadership their unique perspectives on working within VHA. Employees in all areas of patient care, administration, and other support services can join in VHA's commitment to continuous assessment and improvement of our organizational health.

This valuable feedback helps VHA to address areas where positive improvements can make a real difference. The results are compared over time to demonstrate where new initiatives and programs have helped improve survey results and where additional consideration needs to be focused to ensuring a happier and healthier workforce. So please speak up and let your voice be heard; do it for yourself; do it for the veteran; and do it for a better VHA.

The survey can be taken through May 12. To access the survey via the web, enter the URL: https://survey.sirota.com/va/survey08. The All Employee Survey Coordinator for your facility or program office will provide instructions for completing the survey.

Listed below are answers to frequently asked questions:

**WHY SHOULD VHA EMPLOYEES TAKE THE VA ALL EMPLOYEE SURVEY?**

Organizational Health of the Department of Veterans Affairs is of utmost importance. Without a healthy workplace we are unable to provide the care our veterans deserve. The purpose of the All Employee Survey (AES) is to collect information on your perceptions of the workplace and your satisfaction at work. This survey is part of an ongoing effort to assess employees' satisfaction, to eliminate barriers to employees' effectiveness, and to make VA an employer of choice for our employees. Completing the survey is completely voluntary, but your help in responding to the survey is very important. By voicing your opinion, you can influence your work destiny and assist all of us in making changes where needed. The survey is completely confidential and anonymous.

**WHAT DOES THE VA ALL EMPLOYEE SURVEY INCLUDE?**

The AES includes three separate surveys:

Job Satisfaction Index (JSI) with13 items asking about how the employee adds to the organization.

Organizational Assessment Inventory (OAI) with 31 items asking the employee how the team they work with functions.

Facility Culture has 14 items assessing the organization where the employee works.

Six demographic items are asked making the combined survey 64 items.

**WHO SHOULD TAKE THE VA ALL EMPLOYEE SURVEY?**

All VA employees can take the survey. Many of you completed the 2004, 2006, and 2007 All Employee Surveys and assisted in creating Action Plans from the results. The 2008 All Employee Survey administration is an effort to measure that ongoing employee satisfaction, through the work place improvement strategies, are in place at your organization.

**WHAT WILL HAPPEN TO THE RESULTS OF THE ASSESSMENT?**

The aggregate results will be made available to all employees of VA via the intranet in a data cube through ProClarity. In order to maintain individual confidentiality, no data from groups smaller than ten (10) will be released. The results of the assessment will be used by local organizations within VA at the department level down to the individual work group level. The data will be reviewed, strategic plans updated, and Action Planning at the local level can be initiated addressing ways of improving job satisfaction of the employees.

The VA AES is Anonymous, Confidential,and Voluntary!


## VISN 5 Employee Newsletter

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# VISN 5 Service Area

## Facility Numbers

**Baltimore VAMC**

1-800-463-6295

VAMHCS Telephone Care Line

1-800-865-2441

Perry Point VAMC

1-800-949-1003

Prescription Refill & Clinic Appointment

1-800-463-6295, ext 7395

Baltimore Rehab & Extended Care Center

1-800-463-6295

**Martinsburg VAMC**

(304) 263-0811

Medical Advice Line

1-800-817-3807 or (304) 262-4855

Patient Eligibility

(304) 263-0811, ext 3758/3757

Monday—Friday, 8 a.m.-4:30 p.m.

Or ext. 3050 after 4:30 p.m.

Prescription Refill

(304) 263-0811, ext. 4870 (all hours)

**Washington DC VAMC**

(202) 745-8000

Patient Service Center

(202) 745-8247

VETS Information

(202) 745-4046

PTSD Clinic Number

(202) 745-8591

| | | | | |
|---|---|---|---|---|
| **Cambridge, MD** | **Fort Howard, MD** | **Hagerstown, MD** | **Alexandria, VA** | **Franklin, WV** |
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