

IN THE

News



A monthly newsletter for employees of the Portland VA Medical Center

January to April 2003 Edition

Deadline for HIPAA Training is April 11

As of April 4, 91 percent of PVAMC employees had taken the mandatory HIPAA Privacy Policy training. VHA requires that all our staff, volunteers, residents and students complete this VA training by April 11, even those who have taken the OHSU version. Employees on active duty have 30 days to complete the training after returning to their positions. PVAMC Privacy Officer Jerry Nelson says it's important to remember that new HIPAA (Health Insurance Portability and Accountability Act) rules don't replace the 1974 Privacy Act and other laws that protect privacy of our patients.

"HIPAA is just another layer, another piece of armor to protect patients' privacy, dignity and control of their medical information," he says. The critical thing to take away from HIPAA training is a heightened awareness of patient confidentiality rights, he adds, "and our office is the 911 for privacy questions. When in doubt about whether to release patient information, check with us."

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CARES Plan Proposes New CBOCs for Portland *Planning Committee Seeks Employee Input*

The draft VISN 20 CARES Market Plan proposes new community based outpatient clinics in Portland to deal with a large projected growth in future demand for PVAMC outpatient primary and specialty care services.

In June, 2002, VA launched the national CARES planning process to ensure that VA is prepared to meet health care needs of veterans in the future. VISN 20's South Cascades (Portland, Roseburg, White City) Market Planning Committee analyzed data and projections, consulted with stakeholders, considered alternatives and developed recommended planning initiatives, solutions to the gaps between services we have now and what will be needed in 2012 and 2022.

In addition to new CBOCs, the draft plan calls for Portland to maintain all current services in specialized programs such as blind rehabilitation and to carry out construction projects to resolve seismic issues.

PVAMC will also pursue enhanced-use opportunities such as the Clark County/VA collaboration for a new building on the Vancouver campus and possible nursing home and/or assisted living projects for

Portland/Vancouver.

The plan proposes improving access to acute hospital care in the South Cascades Market through expanded contracting with community hospitals.

You can see a summary of the South Cascades Market Plan on the PVAMC intranet "Hot Topics," and a detailed slide show of the entire plan for VISN 20 is at <http://vhav20web1/visn20/cares> (or call Ext. 52975 for hard copies). Your questions, comments and suggestions are welcome. Input from our employees, veterans and other stakeholders will be presented to the VISN 20 Executive Leadership Council before the draft plan is finalized and forwarded to the National CARES Program Office. You can use the e-mail feedback option on the web site, or call VISN 20 CARES Planning Committee Chair A.J. Allen (Ext. 31380) or CARES Communications Coordinator Pat Forsyth (Ext. 52975). Time is short (the plan must be submitted by April 15), so please let us hear from you soon!

**** We're Back! ****

In The News resumes publication with this issue. Please submit stories or ideas to Pat Forsyth, Public Affairs Officer (e-mail or Ext. 52975).

PVAMC Forming Smallpox Response Team

In response to President Bush's call for precautions against biological terrorism, PVAMC is participating in a nationwide program to form volunteer Smallpox Response Teams. Health and Human Services is working with state and local health departments to form the teams. Employees who volunteer will receive the first smallpox vaccinations so they could provide care to others in a smallpox attack. Boise VAMC and Puget Sound HCS also are among the 90 VA medical centers recently named by VA to participate. Among volunteers so far is VISN 20 Director Les Burger, M.D., who was among the first VA employees vaccinated in our Network.

PVAMC is asking for about 100 volunteers in key positions for a smallpox response, such as sub-specialist physicians, ECU/urgent care/primary care/ICU/acute care doctors and nurses, infection control staff, respiratory therapists and radiology technicians. Staff who have previously been vaccinated (over age 35) are preferred, since they are less likely to experience adverse reactions to the vaccine. For more information, call Rita Tjoelker, R.N. (Ext. 57143), or Sherri Atherton, R.N. (Ext. 57144).

Vancouver Building Dedicated

On February 7, PVAMC celebrated the opening of the new Vancouver Primary Care Support Building. Festivities included events such as a winter mystery contest at the Vancouver library, with prizes awarded for solving the mystery and for completing a short test about the library intranet page.

Common Questions About Smallpox

What is smallpox and why could it be used as a weapon?

Smallpox is a serious, contagious and sometimes fatal infectious disease marked by a scar-forming rash on the face and body. There is no specific treatment for smallpox, although supportive care in modern hospitals could be expected to play a key role in helping smallpox patients recover. Vaccination prevents the disease.

Smallpox outbreaks afflicted humankind for thousands of years, but the disease was eradicated after a successful worldwide vaccination program launched in 1966. Routine vaccination among the American public was discontinued in 1972. In the aftermath of events in autumn of 2001, however, concerns have arisen that terrorists might obtain the smallpox virus and use it as a weapon. Stocks of the virus still exist in research laboratories. For this reason, the U.S. government is taking precautions to deal with any possible attack.

How is smallpox transmitted from one person to another?

Humans are the only natural hosts for the smallpox virus. Animals or insects are not known to transmit it. Generally, direct and fairly prolonged face-to-face contact is needed to spread the virus, although it also can be spread through direct contact with infected bodily fluids or contaminated objects such as bedding. Rarely, the disease has been spread by virus carried in the air in enclosed settings such as buildings. The virus is fragile and dies within about 24 hours outside a human body. Smallpox starts with an incubation period (about 12-14 days) in which the infected person still feels well and cannot spread the virus.

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For more information on smallpox, visit <http://www.cdc.gov/smallpox> or call the CDC public response hotline at 888-246-2675 or 866-874-2646 (TTY).

HIPAA Training

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In addition, a new privacy-guidelines handbook will soon be available and distributed to employees.

The federal Web-based HIPAA training includes a survey but no quiz and can be accessed from VA computers or from a home computer if more convenient. Because of some difficulties with the Web site, PVAMC Education has also made a printed training option available as outlined on our HIPAA training page. To view options and access the Web training, go to the PVAMC intranet home page (<http://vaww/>) and click on Education.

To complete the Web training from outside PVAMC, go to <http://www.vhprivacytraining.net/frame.htm>. If you have questions or need assistance, call Wiley Campbell (Ext. 54437) or Jerry Nelson (Ext. 51023).

More Common Questions About Smallpox

What are the symptoms?

The first symptoms are high fever, aches and malaise, followed by a rash that forms scabs as it heals. Smallpox is sometimes contagious with onset of fever and becomes highly contagious when the rash appears. At this stage, a person is usually very sick and unable to move about the community. Smallpox remains contagious until the last scabs fall off.

In addition to the response teams, what other medical precautions are being taken?

Medical personnel throughout the United States are receiving training so they can quickly recognize a case of smallpox, and enough vaccine is now available to vaccinate every American if necessary.

Why isn't the government recommending that everyone be vaccinated now?

The major reason is that some people have adverse reactions to the vaccine. The vaccine does not contain smallpox virus and cannot cause smallpox. Instead, it uses a smallpox relative called vaccinia, which causes cowpox in cattle and is generally harmless to humans. Most reactions to vaccination prove mild and limited to the area (usually upper arm) of vaccination. Occasionally someone will develop a serious reaction, however, such as spread of the vaccinia virus to other parts of the body. Severe side effects are more common in people who have certain other health problems, such as chronic skin diseases or a weakened immune system. Researchers are working to develop new vaccine options and drugs that can kill the smallpox virus.

For more information on smallpox, visit <http://www.cdc.gov/smallpox> or call the CDC public response hotline at 888-246-2675 or 866-874-2646 (TTY).

Toy Drive a Great Success



Many thanks to all who donated toys (about 200 collected!) for the PVAMC Police Toy Drive. The gifts helped bring Christmas cheer to many foster children, says Linda Huddleston of the Oregon Foster Parents Association holiday committee. Linda is pictured here with PVAMC Police Captain Ron McLaughlin and Officer Jeff Fletcher, toy-drive coordinator.

Congratulations

PVAMC employee Marlene Jamieson is among 15 VHA credentialers who recently learned that they had passed the examination for Certified Provider Credentialing Specialist through the National Association Medical Staff Services. These professionals have the important job of verifying qualifications of providers who join our patient care team. Four VISN 20 credentialers sat for the exam and all four passed.

New MS Center

VA recently launched a new PVAMC/VA Puget Sound center devoted to the battle against multiple sclerosis. The new MS Center of Excellence West is one of two being established by VA to coordinate and expand MS programs across the country in clinical care, research and education.

“This is a great opportunity to improve care for 50,000 veterans in the U.S. who have multiple sclerosis,” said Center Co-Director Dennis Bourdette, M.D. “There’s no cure for MS yet, but we are making progress. I’m excited about the many advances we’re seeing in research to develop new treatments and targeted therapies.”

Research Day Set for April 25

Anti-inflammatory drugs and other new approaches against Alzheimer’s disease. Studies of speech processing that could yield revolutionary advances in hearing aids and hearing rehabilitation. Battling osteoporosis, the “brittle bones” that afflict millions of older Americans, by finding and understanding genes that influence bone strength. Mark your calendar to learn about these projects and other exciting PVAMC research advances at the 2003 Research Day on April 25, from 10 to 11:15 a.m. in the Portland Auditorium. Refreshments will be served, and employees will receive an hour of tempo credit.

American Legion Commander Visits Portland



American Legion National Commander Ronald Conley visited PVAMC on January 7, 2003. In addition to meeting with executives, the Commander and other Legion officers toured the Medical Center, talking informally with patients and staff. Commander Conley, pictured with PVAMC Director Jim Tuchschildt, M.D., M.M., said that a major priority for him in the coming year will be the Veterans Service Organizations’ drive to obtain mandatory funding for VA health care.

Chaplain Duke Quoted in Oregonian War Coverage

A March 25 Oregonian story about early Oregon losses in Iraq quoted PVAMC Chaplain Horace Duke: “I hope we will honor these young people’s suffering and death by focusing on their dedication and their valor and their honor. Whether you or I think we should be in Iraq, these young people said, ‘I’ll do what I have to do.’”