



...NEWS at 11SN...

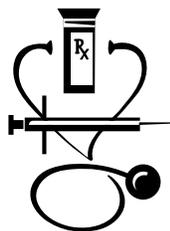
*A Quarterly Publication for VA Employees of VISN 11
This newsletter is also available on the VISN 11 HomePage*

VISN 11's Mission, Vision, and Values

It is important for any organization to regularly review its mission, vision, and values. The process is necessary when beginning a major planning cycle, such as the CARES process. The Strategic Planning Board and Corporate Ethics Committee recently completed this task. VISN 11's Executive Leadership Council has overall responsibility for the mission, vision, and values of the VISN and has approved major changes in these important statements.

The **Mission** of VISN 11 is to:

- Provide comprehensive high quality health care
- Train health care professionals
- Conduct research
- Provide DoD support



The **Vision** of VISN 11 is to

become a recognized health care leader by:

- Integrating health care delivery to veterans
- Providing a seamless continuum of care
- Supporting education, research, and emergency preparedness
- Becoming an employer of choice
- Promoting community health

The **Values** of VISN 11 are:

- **Trust** – having a high degree of confidence in the honesty, integrity, reliability, and sincere good intent of those with whom we work, the services we provide, and the system of which we are a part. Trust

is the basis for the caregiver-patient relationship and is fundamental to all we do in healthcare.

- **Respect** – honoring the dignity and worth of our patients, their families, our co-workers and our organization; relating to each other in a way that demonstrates understanding and sensitivity to each person's individuality and importance.

- **Compassion** – demonstrating empathy and caring in all we say and do; sharing in the emotions and feeling of co-workers, patients and all with whom we're involved.

- **Commitment** – demonstrating dedication and a promise to work hard to serve co-workers and patients with the highest principles and ethics; a pledge to assume personal responsibility for our individual and collective actions.

- **Excellence** – being exceptionally good and of the highest quality; continually improving what we do.

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News at 11 is published by VISN 11 for distribution to its employees and other interested stakeholders. Requests for further information on items to be covered or questions to be answered in future editions should be addressed to Edward Dornoff, 4646 John R., Detroit, MI, 48201.

VA Illiana - Making A Difference

Employee involvement in customer service training was the basis for VA Illiana Health Care System (VAIHCS) winning VISN 11's Employer of Choice Award. The nomination recognized the training efforts of a group of 26 staff members to improve customer service. These facilitators included housekeepers, dieticians, LPNs, physical therapists, secretaries, nurses, lab techs, psychologists, accounting techs, and an associate director. There were union members and supervisors, front line staff, and administrative support personnel.



Some of the "I Can Make A Difference" facilitators

The 26 employee facilitators presented "I Can Make A Difference" training to staff. Over a period of 14 weeks they held 66 two-hour sessions in the

medical center and the community based outpatient clinics. Ninety-six percent of VAIHCS staff attended this training. The critical element in the success of this training was the enthusiasm these 26 employees brought to the training. They strongly believe they can make a difference in the organization and assist other staff in making a difference as well.

Congratulations to VAIHCS and facilitators Nancy Allen, Olga Arvizu, Tye Auter, Adam Bange, Sally Brash, Jean Brooks, Lynn Brown, Denise Brownlow, Debra Bryant, Jan Filicsky, Gina George, Candi Gregg, Debra Hart, Judith Hile, Kim Kelley, Cynthia Klein, Bill Kyger, Jon LeGrant, Marc Magill, Tom Morse, Jerry Nelk, Ira Richmond, Kathy Rodgers, Wilfredo Rodriguez, Sharon Smith, and Dave Williams.

Customer Service Priorities in Northern Indiana

Improving customer service continues to be a priority at Northern Indiana Health Care System (NIHCS). The following represents ideas into reality:

New Patient Orientation – Last April, new patients from Ft. Wayne and Marion, Ind., were invited to attend a one-hour orientation session prior to their first appointment. The program was designed with input from all areas. Representatives of eligibility, nursing, and pharmacy services described available services and gave tips on working smoothly with "the system." Point of contact information was also provided. Comments from both patients and staff have been favorable. Denise Cayot, primary care R.N., states, "I can often tell if a new patient has been through the program. The veteran just seems better prepared." The program objectives of reducing patient anxiety and reducing the time that the clinical staff spends on non-clinical questions are being met.

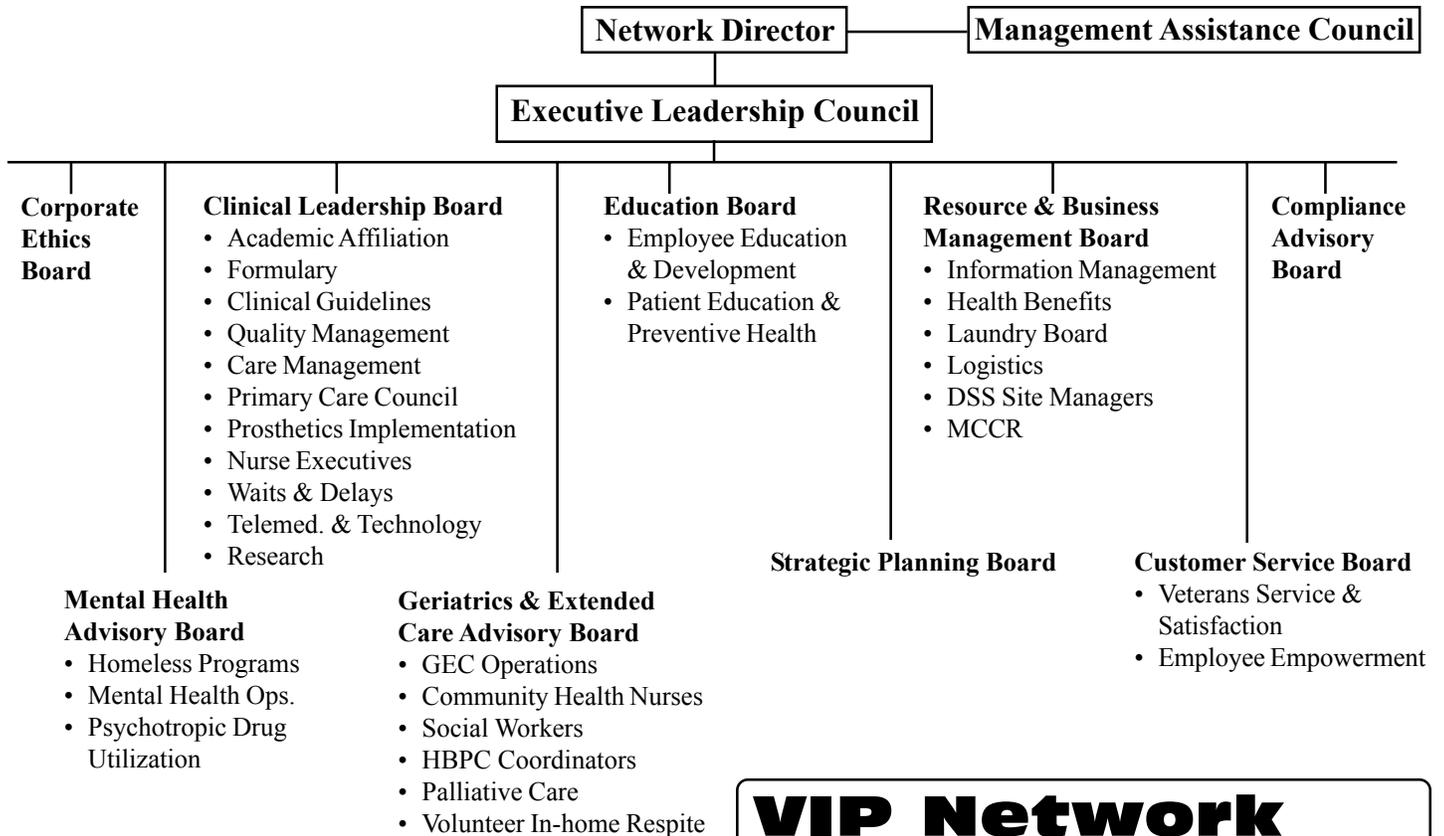
Service Champs – Every month two NIHCS

employees, one from Marion and one from Ft. Wayne, are recognized as Service Champs for providing excellent customer service. Nominations are made from patients and co-workers. Recipients receive a cash or time-off award and have their pictures displayed in the patient waiting areas.

Construction Shuttle – The main entrance to NIHCS' Marion facility is currently closed for extensive remodeling. The temporary entrance is a farther walk from many areas and the summer hot weather made the trek even more uncomfortable. A customer service-originated process action team and Engineering signed on to help. The happy solution was five rest benches and a golf cart shuttle service, with John Boxell as the shuttle's designated driver. His tally shows that over 200 veterans and family members are transported each day. John states, "Rainy days are no fun, but the shuttle is needed then more than ever." John may be the only person not looking forward to the front entrance's grand reopening.

VISN 11 Committee Structure

Ever wonder how VISN 11's **Mission, Vision, and Value** statements become reality?
The following committee structure is in place to help meet our goals.



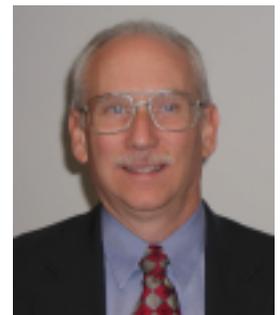
Service Line Update

VISN 11's Geriatrics & Extended Care Service Line continues to direct its efforts toward making sure that older, frail veterans can expect to be able to access the same continuum of services and programs, and can expect them to be of the same high quality everywhere in the Network.

One program that has received particular emphasis in the last year has been Palliative Care – services devoted to optimizing comfort and quality of life for people with incurable illness. The VISN's Executive Leadership Council has supported an effort to establish, within the year, a minimal level of service in palliative care at every VISN 11 medical center including an inpatient consult team and outpatient clinic, both staffed by an M.D., R.N., a social worker, and a professional with counseling skills.

VIP Network Leadership Moves

Welcome to Robert J. Stevens who was recently appointed as the associate medical center director at the Battle Creek VA Medical Center. He previously served as the administrative coordinator for external services at the VA San Diego Healthcare System.



Stevens

Stevens is a native of Kansas and graduated from Emporia State University, Emporia, Kansas, with a Bachelor of Science degree in Business Administration. He received his Masters degree in Health Care Administration from Central Michigan University.

CARES in Full Swing

Preparation for the Capital Asset Realignment for Enhanced Services (CARES) program within VISN 11 has really taken off. The CARES process will assist our Network in planning for the future in providing the “right care, at the right time, at the right place, and at the right cost” for the 1.4 million veterans in our four-state catchment area. The CARES kickoff for this Network effort began on June 6, and since that time we have accomplished the following in VISN 11:

- Completed/updated the space and functional assessments for all buildings and property
- Completed/updated the facility condition assessment for all building systems
- Determined/completed the three market/two sub-market demographic assessment
- Completed the new clinical inventory
- Initiated the new CARES Web site
- Communicated the CARES goals, objectives, and process to over 2,000 stakeholders through letters and a wide variety of presentations (not including newsletters or Web sites) at all Network facilities.



Over the next four months, our Network will be developing its CARES Marketing Plan for the future.

We will be working at both the care site and Network levels to ensure our resources are directed to where they are most needed, and at the same time provide the best care possible to more veterans. During this Network planning process, we will work with all our external and internal stake-

holders to ensure they are heard. CARES contact liaisons have been assigned at each care site:

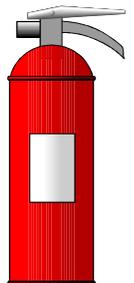
- Tom Kerr, VA Ann Arbor Healthcare System
- Deanne Seekins, Battle Creek VAMC
- John Paglione, Detroit VAMC
- Bill Ray, VA Illiana Health Care System
- Julie Jackson, Indianapolis VAMC
- Michael Breeden, VA Northern Indiana Health Care System
- Patricia Dennis, Saginaw VAMC
- Craig Anderson, CARES coordinator, VISN 11
- Ted Deakin, asst. CARES coordinator, VISN 11

Safety

Fire Extinguisher Use

Fire extinguishers are extremely effective in putting out small fires if they are used correctly and at the right time. In a fire emergency, saving lives is the first priority; fire fighting is second. The time to use an extinguisher is when:

- Someone has activated the fire alarm system and called the fire department.
- All employees have started leaving the fire area. The fire is small and contained, confined to a small area like a wastebasket, not when the fire is spreading rapidly.
- The fire is not in a smoke filled place.
- The user knows what materials are burning and which type of fire extinguisher is the right one.
- The user can fight the fire with his or her back to an exit from the area.
- Reusable extinguishers must be recharged after every use, according to the code.
- The extinguisher is in working order, and the user knows how to use it properly.
- The user must get out of the area quickly if the effort is failing and the fire starts to spread.



JCAHO Ready (or Not)

Joint Commission on Accreditation of Healthcare Organizations (JCAHO) surveys for the Network are a little over a year away. Are we ready?

While preparations must be continuous, mock surveys are planned for the beginning of 2003 to see how well we are doing. Mock surveys enable healthcare facilities to take a “pre-test” and establish overall assessment of their programs, resulting in a great opportunity for growth and learning.

Test Your JCAHO Knowledge

Pain Management Quiz

- True or False* 1. Patients tend to ask for more medications than they actually need.
- True or False* 2. It's not safe to keep giving pain medication for a long time.
- True to False* 3. Physical dependence of a drug is the same as addiction.
- True or False* 4. Older people don't feel pain as intensely as other adults.
- True or False* 5. Exercise may help the body produce a natural painkiller – endorphins.

Prevention and Management of Violence in a Healthcare Setting Quiz

- True or False* 6. Talk loudly when you confront a person who appears out of control to distract him/her.
- True or False* 7. It is easy to tell if a person is a threat.
- True or False* 8. Even if a minor incident/altercation doesn't result in violence, it still should be reported.
- True or False* 9. Try to handle an escalating situation yourself first and then consider if notification of VA police is necessary.
- True or False* 10. It's your responsibility to question a person who isn't wearing a required ID.

Answers on page 6

Education - Hitting the Mark

The National Employee Education System (EES) provides education and training programs that keep pace with the changes affecting the Veterans Health Administration



(VHA). Therefore, products and services are continually updated to provide the best possible training and learning experience for VHA staff. Services include on-line learning, consultation, event planning, interactive and multimedia, information technology, and promotional materials. From these services come a number of useful products such as Learning Maps®, tool kits, pocket cards, video and satellite broadcasts, the VA Knowledge Network (VAKN), Web sites, and more.

Two initiatives that will enhance VA education and training are:

- VA Learning Online (VALO) and
- Learning Management System (LMS)

VALO is an online campus that offers more than 1,100 courses for all VA employees to take from work or home. These courses range from basic math, grammar and communications to business law and management skills. Refer to Web site vaww.ees.lrn.va.gov.

The LMS will soon be implemented which will provide a structure for managing all learning activities for VA employees. The LMS will include tracking completed courses, updating employee records, and offering courses that have been pre-approved by management.

If you would like more information about these programs, contact your local Education Service for assistance.

Research...

Improving Health Care Decisions

The Program for Improving Health Care Decisions (PIHCD) is an interdisciplinary program jointly sponsored by the Center for Practice Management and Outcomes Research at the VA Ann Arbor Healthcare System and the University of Michigan. The program's mission is to understand and improve health care decision making, including decisions made by patients, clinicians, and policy-makers. For example, investigators at PIHCD are exploring ways to develop better decision aids, which will help patients understand their treatment options and incorporate their personal values into treatment decisions. Like traditional patient education materials, decision aids help patients understand complex medical information. Unlike these traditional materials, decision aids typically focus on presenting probabilistic information in ways that are tailored specifically to match patients' circumstances and needs.

Clinicians must also make difficult decisions when providing health care. For example, primary care physicians who serve as "gatekeepers" must consider the cost-effectiveness of their clinical decisions. That is, they must consider the financial cost of these decisions as well as their medical benefit. PIHCD investigators are studying primary care physicians' attitudes toward cost-quality trade-offs in the screening, diagnosis, and treatment of cancer. Specifically, they are exploring which factors influence physicians' perceptions of the appropriateness of clinical decision that involve these trade-offs.

Overall, the research being done at PIHCD will provide insight into the decision-making processes of patients and clinicians and will offer ways to improve health care decision making. Check out their Web site at www.med.umich.edu/pihcd/ for more information.

Dollars & Sense

The Network has successfully completed FY 2002 through management efficiencies, consolidated contracts, increased collections and the ability to convert capital funding with other Networks. FY 2003 is uncertain at this point. Preliminary indications, though, are that FY 2003 will be another tight budget year because of the VERA allocation methodology. It is not expected that Congress will pass the Department of Veterans Affairs appropriation anytime soon. A continuing resolution is anticipated at least through the end of the calendar year.



Test Your JCAHO Knowledge

(Continued from page 5)

Pain Management Answers

1. *False.* Patients often do not ask even when in great pain.
2. *False.* Long-range use is acceptable if properly monitored and balanced.
3. *False.* Physical dependence means the body has learned to tolerate and must adjust when a drug is no longer needed. Addiction is a physiological need for a drug that leads to physical, emotional, and social harm.
4. *False.* Age has nothing to do with the level of pain a person feels.
5. *True.*

Prevention and Management of Violence in a Healthcare Setting Answers

6. *False.* Talking loudly can further excite a person already seemingly out of control.
7. *False.* Individuals do not always give pre-warning signs: physical or verbal. Even when individuals give what might be perceived as pre-warning signs does not mean they will become violent, but you need to be vigilant to the potential and initiate violence prevention/management interventions.
8. *True.*
9. *False.* You don't know where the situation will go, so involving VA police is a safety intervention that shouldn't be second-guessed.
10. *True.*



VA Ann Arbor Healthcare System

■ On September 11, the VA Ann Arbor Healthcare System recognized Patriot Day by observing a moment of silence at 8:46 a.m. A brief inspirational message by Chaplain **Roland Schaedig** immediately followed via the public address system. Medical center, CBOC, and HSR&D staff wearing red, white or blue were presented with small American flags. Veterans coming to the medical center and CBOCs in Flint, Michigan, and Toledo, Ohio, also received flags. More than 2,000 flags were distributed. A remembrance wall was on display in the clinical addition lobby and the chapel was available for private prayer.

■ At the Engineering Society of Detroit's 28th Annual Construction & Design Awards, VA Ann Arbor Healthcare System received its second "Owner's Recognition Award" for its clinical addition design.

Battle Creek VAMC

■ The Health Care for Homeless Veterans office in Grand Rapids assisted 71 veterans at their annual Stand Down held on August 9, 2002. In collaboration with local service organizations and agencies, homeless veterans were fed, received clothing, haircuts, legal advice, employment and housing assistance, medical screenings, and benefits information by VA staff and veterans service officers. Media coverage was present from Grand Rapids.

■ To commemorate September 11, the medical center hosted a memorial service for employees, patients, and the public. In collaboration with the Leila Arboretum Society, a living memorial perennial garden and tree was planted in the Bicentennial Park at the medical center. Also honored were **Kevin Grady**, **Todd Pushe**, and **Timothy Stoken**, who were called to serve in active duty, and the VA fire and police departments.

■ **Tim Liezert**, chief, facilities management service, has been appointed as the associate director at the VA medical center in Lebanon, Pennsylvania.

VA Illiana Health Care System, Danville

■ Patriot Day was observed with a variety of activities. A service of remembrance was held for patients, staff, and visitors. Everyone was encouraged to wear red, white, and blue. Flags were flown at half-mast and the Avenue of Flags was displayed. The Wall of Fame, which was initiated last year after September 11, was updated to include all active duty service members related to VA employees.

■ On August 1, a special first-of-its-kind meeting was held at the Peoria Community Based Outpatient Clinic. Approximately 40 VAIHCS service chiefs and key program coordinators met to discuss and clarify the operational and professional alignment between Danville and the CBOCs.

John D. Dingell VAMC, Detroit

■ September 5 was the last day of operation at the outpatient clinic located in the old Allen Park VA Medical Center. The shuttle service from the site was shifted to the Allen Park community center. The site will be transferred to the Ford Land Management Corporation.

■ On September 11, the John D. Dingell VA Medical Center held a memorial ceremony titled "A Day of Hope and Healing." Employees in the Military Reserves and National Guard, as well as veterans of the armed services, were in uniform standing next to the dais in formation. Also invited were local police and fire fighters, and the Disaster Medical Assistance Team (DMAT) members. Several on the DMAT had gone to New York to help with the rescue and recovery efforts. The City of Detroit Police Department provided the color guard, a drummer and bugler. **Michael Carr**, chief, chaplain service was the keynote speaker. Chaplain Carr went to New York last year to provide counselling to the fire fighters.

Richard L. Roudebush VAMC, Indianapolis

■ Over the summer, 22 women from the Richard L. Roudebush VA Medical Center strapped on their tool belts and assisted in building a house for Habitat for Humanity. A good time was had by all, while making a difference in the community.

This & That

(continued from page 7)

■ On Patriot Day, a remembrance service was held including music by guitarist **Bill Zimmerman**; remarks from **Tom Mattice**, associate medical center director, and **Wayne Olson**, chaplain; candle lighting, bell ringing, and the dedication of four trees and a memorial stone donated by the American War Mothers, VA staff, and volunteers. Walk-in counselling by mental health staff was also available for veterans, visitors, volunteers, and staff.



Patriot Day

Aleda E. Lutz VAMC, Saginaw

■ On August 15, medical center employees were recognized at an appreciation picnic. As part of the festivities, the EEO Committee and the Employee Association sponsored a dunk tank. Dunkees included **Gabriel Perez**, medical center director; **Hugh Deery**, VISN 11 chief financial officer; **Dan Hendee**, executive management officer; **Edward Mason**, AFGE union president; and service chiefs.

■ Staff, veterans and volunteers participated in the medical center's Patriot Day program. Staff joined in fellowship to remember those who lost their lives and to honor the patriots of our great nation. In tribute, a tree planting ceremony was held in their memory.

VA Northern Indiana Health Care System

■ Congratulations to Customer Service Champ Award recipients **Julia Green** and **Ty Lloyd** (July) and **David Ring** and **Dr. Berle Jones** (August).

VISN 11 Network Office, Ann Arbor

■ Since VA's Tiger Team initiative began a little over a year ago, VISN 11 has received more than 110 requests for compensation and pension exams for those veterans over the age of 70 with claims over one year old. Our Network's Tiger Team points of contact are providing excellent support by working with their staff to schedule exams promptly, and making sure the results are rushed to the Cleveland VA Benefits Office to expedite the

claims process. Thanks to everyone for doing whatever it takes to get the job done!

■ Congratulations to the following "Employer of Choice Network Award" recipients:

1st place *VA Illiana Health Care System* - for their employee involvement in customer service training. Story on page 2.

2nd place *Battle Creek VAMC* - for their Nursing Assistant to LPN development program. Recipients are: **Rebecca Garcia, Elsie Griswold, Sharon James, JoAn Knox, and Ellie Pettee**.

3rd place *VA Ann Arbor Healthcare System* - for their VistA employee survey focusing on customer orientation and communication. Recipients are: **Deborah Amdur, Jack Blansett, Deborah Forgacs, Thomas Geloneck, Bonnie Johnson, Kelly Johnston, Beverly Leneski, Steve Kenczyk, David Maier, Paul Serefine, George Sprau, Sue Stamper, Dana Striplin, James Waller, and Kerry Weaver**.

■ **Calvin Marshall**, health system specialist from the Battle Creek VAMC, began a six-month detail at the VISN 11 office on August 12, 2002. Marshall will be working on several assignments in conjunction with his participation in VA's Executive Career Field Development Program.

■ Congratulations to the following VA Secretary's Hands and Heart Award recipients:

- **JoAn Knox**, R.N., nurse manager, patient care services, Battle Creek VAMC
- **Debbie Amdur**, L.C.S.W., chief, social work and community based service, VA Ann Arbor Healthcare System
- **John Deck**, Ph.D., speech pathologist, Indianapolis VAMC
- **Belinda Brown-Tezera**, N.P., ACNS for education and recruitment, Detroit VAMC
- **Brenda Larson**, R.N., associate chief nurse ECS/MH, VA Illiana Health Care System
- **Carol Hayden**, P.S.A. (Fort Wayne) and **Michael Hornbaker**, psychiatric nursing assistant (Marion), VA Northern Indiana Health Care System
- **Janis DePauw**, N.P., primary care, Saginaw VAMC