

Department of Veterans Affairs (VA)
Advisory Committee on Women Veterans Meeting Minutes
Site Visit to the Veterans Affairs North Texas Health Care System (VANTHCS)
Dallas, TX
June 8 – 12, 2009

VA Advisory Committee on Women Veterans Members Present:

COL Shirley Quarles, USAR, Chair	Marlene R. Kramel, USA
CDR René Campos, USN, Retired	Mary Antoinette Lawrie, USAF
CMSgt Helena R. Carapellatti, USAF, Retired	COL Gloria Maser, USAR
PO2 Davy Coke, USN, Retired	TSgt Barbara Pittman, USAF, Retired
Yanira Gomez, USA	Barbara Ward, USAF
Velma Hart, USAR	

Advisory Committee Members Excused:

Joanna Crosariol Truitt
Celia Szelwach, USA

Ex-Officio Members Present:

COL Emma Coulson, Military Director Defense Advisory Committee on Women in the Services (DACOWITS) Department of Defense (DoD)	Cheryl Rawls, Director, VA Regional Office (VARO) North Little Rock, Arkansas Department of Veteran Affairs
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Ex-Officio Members Excused:

Dr. Lawrence Deyton, Chief Officer Public Health and Environmental Hazard Veterans Health Administration (VHA) Department of Veteran Affairs	Denise Jefferson, Competitive Grants Specialist Veterans Employment and Training Service Department of Labor
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Advisors Excused

Captain Angela M. Martinelli Division of Treatment and Recovery Research National Institute on Alcohol Abuse & Alcoholism Department of Health and Human Services	Dr. Patricia Hayes, Chief Consultant Women Veterans Health Strategic Health Care Group (WWSHG), VHA Department of Veteran Affairs
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Jurita Barber, Public Affairs Officer
National Cemetery Administration
Department of Veteran Affairs

VA Staff Present:

Center for Women Veterans

Dr. Irene Trowell-Harris, Director	Dr. Betty Moseley Brown, Associate Director
Desiree Long, Senior Program Analyst	Michelle Terry, Program Support Assistant
Shannon Middleton, Program Analyst	Maria I. Weingardt, (Detailed)

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VHA

Connie LaRosa, Deputy Field Director
VHA WVHSHG

Guests

MaryAnn Woodward-Smith, RN, MSN, PMHCS, BC
Women Veterans Program Manager

The entire site visit package with attachments is located in the Center for Women Veterans, Washington, DC.

Sunday, June 7, 2009

Advisory Committee Planning Session

- Dr. Shirley Quarles, Chair of the Advisory Committee on Women Veterans (ACWV), met with Committee members and gave an overview of what to expect during the site visit

Monday, June 8, 2009

Welcome and Leadership Introduction

- Dr. Quarles opened the meeting with greetings and introductions
- Meeting minutes for the previous meeting were approved
- In addition, she thanked the VANTHCS leadership team for their time invested in preparation for the visit
- Dr. Irene Trowell-Harris provided the purpose for the Advisory Committee on Women Veterans site visit

Entrance Briefing/Welcome and Leadership Introduction, Mr. Joseph Dalpiaz, Director, VANTHCS

- Mr. Joseph Dalpiaz introduced the VANTHCS leadership team
 - Clark Gregg, M.D., Chief of Staff
 - Sandra Griffin, RN, AD for Patient Care Services
 - Shirley Bealer, RN, Associate Director
 - Eric Jacobsen, Assistant Director
 - Jennifer Purdy, Assistant Director for Outpatient Services
 - Stephen Holt, MD, Deputy Chief of Staff
 - Lisa Tinch, R.N., Deputy Director for Patient Care Services

VANTHCS Overview and Initiatives

- VANTHCS is the third largest out of six health care systems located within the Department of Veterans Affairs

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- VANTHCS is composed of the Dallas VA Medical Center, the Fort Worth Outpatient Clinic, the Sam Rayburn Memorial Veterans Center, the Tyler VA Primary Care Clinic as well as seven Contract Community Based Community Clinics (CBOC) sites. It also includes 38 counties in North Texas and two counties in South Oklahoma
- VANTHCS's fiscal year (FY) 2008 workload includes (see table)

Unique Patients (Average Age 60)	103,858
Outpatient Visits	1,097,475
Inpatient Bed Days of Care	250,959
Employees	4,437

- VANTHCS's operating budget for FY 08 totaled \$585 Million
- VANTHCS maintains major educational affiliations with the following institutions:
 - University of Texas Southwestern Medical School
 - 673 Resident Physicians and 396 Medical Students rotate through VANTHCS each year
 - Baylor College of Dentistry
 - University of North Texas Health Science Center (Allied Health)
 - Texas Woman's University (Nursing)
 - University of Texas at Arlington (Nursing)
 - Texas Tech University College of Pharmacy
- In addition, VANTHCS is actively engaged in research activities with a focus at improving Veterans' health:
 - Currently, \$18.8 Million in grants with 320 active projects
 - Over 400 VA personnel involved in research
 - Accredited by the Association for the Accreditation of Human Research Protection Programs, Inc. and Association for Assessment and Accreditation of Laboratory Animal Care International
- Some of the challenges that VANTHCS is experiencing include:
 - Physical space limitations
 - New Veteran population (Operation Enduring Freedom [OEF] and Operation Iraqi Freedom [OIF])
 - Academic affiliations
 - Recruitment and retention

Overview of VISN 17 Facilities, Programs Demographics, Judy Finley RN, MBA, CPHQ, Veterans Integrated Service Network (VISN) 17 Quality Management Officer

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- The Veteran population (EOFY 08), enrollment and market share is as follows (see table):

Veteran Population (Projected)	Enrollees (Actual)	Enrollment Based Market Share	Patients (Actual)
1,095,965	349,333	32%	222,231

- The size and scope of VISN 17:
 - Sq. Miles: 132,000
 - States: 2
 - Senators: 4
 - Congressional Districts: 33
 - State Veterans Service Officers: 32
 - County Veterans Service Officers: 107
 - VBA Regional Offices: 3
 - VA Cemeteries: 2
 - State Veterans Cemeteries: 2
 - Specialized Programs: 1
- VISN 17 includes specialized programs, such as the Women Veteran’s Program, which will develop VA programs that are responsive to gender-specific needs of women Veterans, and ensure women Veteran’s are aware of and receive benefits and services specific to their needs
- In addition to the Women Veteran’s Program, VISN 17 includes an OEF/OIF program that supports returning OEF/OIF troops, making sure they receive health care and benefits they deserve, seamlessly
- Specialized programs include:
 - Blind Rehabilitation Program (Waco) (SMILE) (Waco)
 - Center of Excellence for Returning War Veterans (Waco)
 - Gulf War Illness Research (Dallas)
 - Geriatric Research, Education & Clinical Center (GRECC) (San Antonio)
 - Spinal Cord Injury Center (San Antonio & Dallas)
 - Substance Abuse Residential Rehabilitation Treatment Programs (Bonham, San Antonio)
 - Post Traumatic Residential Treatment Program (Waco)
 - Psychosocial Residential Rehabilitation Program (Waco, Temple, Dallas, Bonham, San Antonio)
 - Biomedical Research Foundation of South Texas (San Antonio)
 - Bone Marrow Transplant (San Antonio)
 - Center for the Intrepid (San Antonio)
 - Fisher House (Dallas)
 - General Clinical Research Center (San Antonio)
 - GeroPsychiatric Unit (Dallas)
 - Interventional Chronic Pain Procedures (Dallas)
 - Mexican American Medical Treatment Effectiveness Research Center (San Antonio)
 - San Antonio: Ground Breaking 2009
 - Veterans Evidence-Based Research Dissemination Implementation Center (San Antonio)
- Seriously Mentally Ill Life Enhancement

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- VISN 17 staff and budget for full-time employees, volunteers, academic affiliations/agreements and VA staff CBOCs include:
 - Staffing (as of May 2009):
 - Total number of full time employees -10,842
 - Total number of direct patient care staff - 5,642
 - Total number of support and administrative staff - 4,677
 - Total number of volunteers- 3,452
 - Total number of primary academic affiliations:
 - Residents -1103; fellows – 505; medical students – 1,296
 - Staff in facilities:
 - Staff in VISN – 141
 - Staff in facilities – 11,948
 - Staff in CBOCs– 881
 - Staff in outreach clinics – 16
 - Staff in Vet Centers – 50
 - Staff in Community Living Centers (CLC) – 303
 - VISN-17 budget:
 - VISN 17 FY '09 budget- \$1,821,184,370
 - Percent of FY '09 budget supporting the VISN- 0.82 percent
 - Percent of FY '09 budget supporting the facilities- 99.18 percent
- An overview of VISN 17 facilities, including health care systems (HCS), CBOCs, domiciliary and CLCs was presented
- With new construction, technological advancements, transformation to a Veterans-centered care culture, and mobile medical units, VISN 17 has improved access and reduced patient waiting times

Overview of VISN 17 Women Veterans Health Program, Jana O’Leary, LCSW, Lead WVPM)

- Outreach/In-reach Endeavors:
 - Full time coordinator in Austin: 3 days for outreach activities
 - Military Base: Ft. Hood Transition Briefings, Retirement Briefings
 - Health fairs sponsored yearly
 - Monthly ladies day outings
 - Pink Parties in collaboration with Komen Foundation
 - Local Pregnancy Centers
 - Workforce Commissions/Town Hall Meetings, various invites
 - New Employee Orientation
 - Educational booths within the medical center
 - Email’s to staff on women topics
 - Various other endeavors

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Overview of VISN 17 Women's Health Clinic, Leslie Jernigan, Facility Planner

- New construction underway for relocation of specialty care clinics women's clinic, diabetes clinic, and Moh's (dermatological) Surgery
- January 2010 --anticipated award date for clinic design
- January 2011 – anticipated construction funding
- Spring 2012 – anticipated construction completion and activation
- The goals established for the clinics:
 - Relocate Women's Clinic and Diabetes Clinic from 8th Floor Bldg. 2 and establish a Moh's (dermatological) Surgery Clinic
 - Space vacated by these outpatient functions will be converted back to a patient unit to meet current and projected bed needs
 - Project is a single story building (with vertical expansion capacity for at least 2 additional levels)
 - A future third level is envisioned that will provide space for relocated clinical education functions including the medical library, and conference center
 - Discussed the existing campus, current construction per five year plan, parking impacts, and a 5 year plan with specialty clinics

Briefing on Waco Regional Office, Carl Lowe, Director and Kimberly Palmer, Women Veterans Coordinator

- Mr. Lowe provided an update on Waco Regional Office activities
- Ms. Palmer briefed the Committee on the following topics:
 - Objectives for those handling claims resulting from personal trauma-related injury include :
 - Understanding the sensitive nature of post traumatic stress disorder (PTSD) claims based on personal trauma
 - Recognizing sources for development associated with these claims
 - Knowing the coordinator and her role in assistance with these claims
 - Development of the claim includes identifying possible sources of evidence to support the claim which may require asking the Veteran for information concerning the traumatic incident
 - Evidence of personal trauma can come from a variety of sources:
 - Service treatment records
 - Statement from Veteran
 - Development directed by PTSD Sexual Trauma Coordinator
 - Personnel record
 - Diagnosis of PTSD or VA exam

Briefing from Texas Veterans Commission (TVC), Timothy Kirwan, Office Supervisor

Mr. Kirwan relayed information provided by Delilah Washburn, Women Veterans

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Program Coordinator for the Texas Veterans Commission:

- Approximately 1.7 million Veterans live in Texas
- Women Veterans population has nearly doubled in the last 5 years, from 78,800 in 2003, to 148,960 in 2008
- Fastest growing group of Veterans in the country
- Texas Veterans Commission is the Veterans advocacy agency for the State
- Headquartered in Austin
- Mission is to provide superior service through agency programs of claims assistance, employment services and education to improve quality of life of TX Veterans through:
 - Claims representation and counseling
 - Veterans employment services
 - Veterans education program
 - TVC outreach to women Veterans

VANTHCS Women Veterans Program, Mary Sweeney, NP, Women Veterans Program Manager (WVPM)

- In-reach Services:
 - Women's Comprehensive Health Care Implementation Plan (W-CHIP) Committee
 - Women and Heart Disease Committee and Educational Conference
 - Women Veterans Advisory Committee
 - Employee Orientation
 - Staff Preventive Health Measures education and In services
 - Site Visits to North Texas Facilities
 - Homeless Veterans Facility inspection
 - Maternity Care Coordination/Referrals
 - Military Sexual Trauma (MST)/PTSD Committee
- Outreach Services:
 - Transition assistance program
 - Post deployment physicals
 - Dallas fire and police health fair
 - Local news Channel 5 Dallas health fair
 - Fort Worth Veterans benefits fair
 - Women and heart disease symposium
 - Quarterly leadership patient feedback Dallas VA patient education fair
 - VA wellness expo
 - Monthly women Veterans health initiatives
 - Women's clinic patient satisfaction surveys
- Conclusion:
 - The North Texas Women's Strategic Plan program will systematically expand and accomplish goal of comprehensive women's health care throughout the VANTHCS over next 3 years
 - This plan will ensure a methodically patient centered approach to implementation

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while providing the highest quality health care to all our women Veterans

**South Texas Veterans Health Care System (STVHCS) Women Veterans Program,
 Krista Culliver, RN, WVPM**

- Women Veteran Population:
 - Female population for Texas: 148,960
 - Female population for the South Texas catchment area: 15,346
- Outreach Initiatives:
 - Salute to women Veterans, held annually since 1991
 - Memorial Day Car Show
 - Texas Public Radio Interview in May
 - No Show Rates: the Call Center contacts each patient with a personal call prior to appt. If patient is a no show, the nurse calls the day of appointment and the nurse practitioner sends a personal letter
 - Conducted system-wide Women Veterans Satisfaction Survey
 - Shuttles for mammograms and gynecology appointments
 - Birthday and Christmas cards to women Veterans
 - Schedule women’s health (WH) exam on the same day as primary care (PC) exam 30 minutes before or after PC appointments
- Care Provision outline: site specific women’s health services exam 30 minutes before or after PC appointments
- Offers women’s health mini-residency

VISN 17 Women Veterans Health Program, Krista Culliver and Janeth Del Toro

- Introduction of the members of VISN 17’s WVPMs:
 - South: Krista Culliver, Acting WVPM
 - Janeth Del Toro, WVPM, Kerrville
 - Central: Jana O’Leary, Lead WVPM
 - Minerva Garcia, Austin Coordinator
 - North: Mary Sweeney, WVPM
 - Euna Wright, WVPM, Bonham
 -
- Projected enrollment of VISN 17 female Veterans is as follows:

FY 2012	28,184	7% increase
FY 2017	30,291	15% increase
FY 2022	32,183	22% increase

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FY 2027	33,727	28% increase
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- Outreach/In reach Endeavors include:
 - Military Bases: Ft. Hood, NAS JRB (Naval Air Station Joint Reserve Base)
 - Health Fairs, Symposiums
 - Local DHS/Pregnancy Centers
 - Workforce Commissions/Town Hall
 - New Employee Orientation
 - Educational booths in house
 - Email's to staff on women topics
 - Various other endeavors
 - Meetings, various invites

Tuesday, June 9, 2009

Women Veterans Clinic at Dallas, Dr. Cheryl Sampson, Physician Director

- Provided an overview of the clinic's history, and its services for women Veterans; its current status, workload, capacity, and ongoing process improvement
- Women Veterans clinic opened February 18, 2004:
 - Women Veterans clinic- one day per week in reserved room, in shared clinic
 - Gynecology (GYN) clinic – full or part time/ five days per week, exclusive room in shared clinic
- February 2004 through October 2006:
 - Model of care: multi-visit, multi-provider
 - Separate gender specific and /or gynecology clinic
 - PC provided in mixed gender primary care teams within the facility
- October 2006 through present:
 - Women Veterans clinic full time
 - October 2006 through December 2008: one provider
 - January 2009: expanded to two providers
- Model of care: 76 percent - 94 percent multi-visit, multi-provider
 - Six percent-20 percent comprehensive primary care
 - Separate women's health center with gender specific and primary care delivered
- July 2007 to present:
 - GYN clinic co-located full-time
 - One gynecologist-specialty care and GYN surgery
- Current configuration:
 - One M.D.
 - One nurse practitioner (NP)
 - Gender specific care (PaP, vaginitis, contraception, menopause,

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- menstrual disorders)
- Comprehensive primary care - limited number of patients
- One to two residents three one-half days per week
- GYN:
 - Specialty care, surgery, procedures
- Support staff: one RN, two Licensed Vocational Nurses (LVN), one Medical Administration Service (MAS) clerk
- Gynecology:
 - Vaginal Hysterectomy
 - Total Abdominal Hysterectomy
 - Endometrial sampling and ablation
 - Oophorectomy
 - Pelvic floor repair
 - Bilateral tubal ligation
 - Myomectomy
 - Cystocele / rectocele repair
 - Colposcopy
 - Loop electrosurgical excision procedure (LEEP)
- Consultations for specialty care include the following services:
 - General surgery breast clinic:
 - Breast biopsies
 - Mastectomy
 - Lumpectomy
 - Vascular surgery:
 - Uterine artery embolization
 - Plastic surgery:
 - Breast reconstruction
 - Urology:
 - Pelvic floor biofeedback
 - Pelvic floor repair
 - Intraurethral collagen injections
 - Intravesical botox
 - Neurostimulator implant
- Women's surgery specialty care outsourced services include the following:
 - Gynecology-oncology
 - Stereotactic breast biopsies
 - Breast magnetic resonance imaging (MRI)
- Mental health
 - Ambulatory care in-house psychiatry
 - Depression care management
 - Primary care psychology
- Dallas women's clinic workload (see table)

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	FY 2006	FY 2007	FY 2008	FY 2009 To Date (6 months)	FY 2009 Projected
Women's Clinic	1095	1707	1857	1512	3024
GYN	1084	728	814	436	872
GYN Comp/Pension	55	97	96	84	168
Totals	2234	2532	2767	2032	4064

- Ongoing process improvement:
 - Education-residents
- Performance improvement
 - Pap log/tracking
- Clinic team building-maintenance:
 - Monthly clinic staff meetings
- Team with Departments:
 - Surgery, radiology, mental health, nursing, MAS
- Provider/staff education women's health
- WCHIP implementation team project

VANTHCS Primary Care, Dr. Praveen Mehta, Service Chief and Brenda Boley, Administrative Officer

- Introduced the Committee to the overall mission, key drivers, and vision of the Ambulatory Services program. In addition, he provided information on the various facilities outpatient clinics' locations and the services provided
- VA outpatient clinics:
 - Dallas VA Outpatient Clinic
 - Fort Worth Outpatient Clinic
 - Tyler VA Primary Care Clinic
 - Sam Rayburn Memorial Veterans Center PC Clinic- in Bonham
- CBOCs:
 - Denton
 - Sherman
 - Paris

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- Fort Worth
- Bridgeport
- Granbury
- Greenville
- Ambulatory Care Service:
 - Active patients –VANTHCS - 89,808 (April 2009)
 - Clinic visits (by stop codes) ambulatory care service 281,215 (FY 08)
 - Primary care clinics visits 259,408 (FY 08)
- Clinics offered:
 - Primary care
 - Low vision clinic
 - Women Veterans program and clinic
 - Podiatry
 - Agent orange/Persian Gulf exams
 - Compensation and pension unit
 - Deployment health clinic
 - Allergy clinic
 - Visual impaired services team
- Screening services rendered in primary clinic:
 - Depression screening
 - PTSD screening
 - Suicide screen
 - Alcohol use assessment
 - Tobacco use assessment
 - Obesity screening
- Preventive medicine services :
 - Cancer screening:
 - Breast Cancer
 - Cervical Cancer
 - Colorectal Cancer
 - Immunization:
 - Pneumococcal
 - Influenza
 - Tetanus
 - Others
- Chronic disease management services:
 - Diabetes mellitus
 - Hypertension
 - Coronary artery disease
 - Congestive heart failure
 - Hyperlipidemia
- Ancillary outpatient services available include:

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- Laboratory and pathology
- Pharmacy
- Radiology- X-Rays, mammography, ultrasound, MRI
- Cardiac testing-EKGs, echocardiography, stress tests
- Pulmonary function tests
- Sleep lab
- Electromyography (EMG) / nerve conduction velocity (NCV) lab
- Nuclear medicine
- Care Integration include the following “integration themes:”
 - Returning combat Veterans
 - PC-Mental Health
 - Women’s health
 - Pain management
 - Geriatrics
 - Telehealth

VANTHCS Medical Service, Dr. Guna Raj, Staff Physician

- Provided an overview on the medical sub-specialties services available to include cardiology, dermatology, endocrine, diabetes, gastroenterology, general internal medicine, hematology/oncology, infectious diseases, nephrology, neurology, pulmonary and rheumatology
- General internal medicine:
 - All women enrolled in the primary care teaching clinic receive comprehensive medical care for all acute and chronic medical conditions
 - Breast and cervical cancer, and osteoporosis screening is offered to all eligible women patients in the primary clinic
 - Women patients have been actively enrolled and added to the residents’ patient panel during the last academic year to satisfy requirement of increasing residents’ educational experience in caring for women patient
 - Rotations through the Women’s Health Clinic under the supervision of Dr. Cheryl Sampson, Assistant Professor of Medicine, is built into the residents’ schedule
- Hematology/oncology:
 - Hematology/oncology section was integral in establishing a multidisciplinary breast cancer tumor board attended by Hematology/Oncology Section, Radiation Oncology Service, Surgical Service, Pathology & Laboratory Medicine Service, and Radiology Service. This board facilitates discussions of every new breast cancer case to determine the patient-specific course of treatment
 - Gynecologic malignancies are typically addressed by Gynecology Section under Surgical Service initially with subsequent referral to gynecologic

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oncologists at University of Texas Southwestern (generally for surgical evaluation) as needed

- Infectious diseases:
 - Infectious Disease Section offers specialty care to women with HIV disease with routine health issues addressed by Women's Health Clinic
 - Referrals are often made on the behalf of female Veterans to local women's support groups and to practitioners who specialize in reproductive issues associated with HIV-infected women
- Rheumatology:
 - Autoimmune rheumatologic diseases are more common in women than men in the population. Of the 500 rheumatoid arthritis patients at VANTHCS, 10 percent are female
 - Rheumatology section cares for patients with systemic lupus erythematosus, Sjogren's syndrome, and scleroderma--where females are over-represented
 - Women receive the full range of specialty care in rheumatology--including infusion services--as well as frequent referrals to physical therapy and orthotics. Rheumatology section actively screens for osteoporosis, since these female patients are at elevated risk due to gender, rheumatologic diagnosis, and medication use
- Gastroenterology:
 - Inflammatory bowel disease presents special challenges for women
 - Dr. Linda Feagins, a new faculty member with special interest and training in inflammatory bowel disease, has implemented outpatient specialty clinics for the treatment of patients with these disorders
 - Treatment with the most up to date biological agents is offered to women Veterans with inflammatory bowel diseases
 - Irritable bowel syndrome affects women twice as often as men
 - Women with irritable bowel syndrome are treated in the gastrointestinal (GI) clinic, often under the direction of Dr. William Harford, who has a special interest in irritable bowel syndrome
 - Dr. Byron Cryer is a nationally recognized researcher who is conducting research on the treatment of irritable bowel syndrome
 - Esophageal motility disorders may be especially common in women
 - Dr. Stuart Spechler, the GI Division Chief, is recognized as one of the nation's leading authorities on esophageal motility disorders
 - The Dallas VA has a state-of-the-art motility laboratory available for the treatment of women with esophageal motility disorders
 - Dr. Spechler personally oversees the management of numerous women Veterans with motility disorders
- Gastro/Hepatology
 - Hepatology services operate under the direction of Dr. Geri Brown

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- Treatment of chronic liver disease from Hepatitis C Virus with interferon/ribavirin based therapy
- Ten women Veterans have been successfully treated with a 40 percent sustained virological response rate
- Liver transplantation:
 - Two women Veterans have received liver transplants and one woman is on the VA waiting list. Complete pre- and post transplant care was performed at the Dallas VA
 - Post -transplant care includes screening for cancer
- Hepatocellular carcinoma – women Veterans are screened every six months
- Women Veterans with drug induced liver injury have been offered the chance to participate in a large research network designed to understand the environmental and genetic components of this disease
 - Dr. Geri Brown is the representative for VANTHCS for Drug Induced Liver Network
- Medical management of viral hepatitis, autoimmune hepatitis, and/or fatty liver disease has been optimized in the outpatient liver clinics

VANTHCS Surgical Services, Dr. Thomas Anthony, Chief, Surgical Service

- Provided an overview of the various types of surgical services offered at the Dallas, Ft. Worth and Bohnam campuses. Discussed gynecological, urology and general surgery breast clinic services
- Sections/departments within service:
 - General Surgery
 - Plastic Surgery
 - Vascular Surgery
 - ENT
 - Orthopedics
 - Neurosurgery
 - Urology
 - Cardiothoracic
 - Gynecologic Surgery
 - Ophthalmology
- Services provided per campus:
 - Dallas:
 - All services
 - Ft. Worth Outpatient Clinic:
 - Ophthalmology/Optomety
 - ENT
 - Minor General Surgery Procedures
 - Orthopedics

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- Bonham:
 - Optometry
- Operating room procedures provided for women Veterans:
 - Hysterectomy
 - Endometrial ablations
 - Tubal ligations
 - Biopsies
 - Diagnostic laparoscopic procedures
 - Oophorectomies
 - Myoectomies
 - Rectocele repairs
 - Cystocele repairs
- Gynecology:
 - Located in women's clinic
 - Works in partnership with woman's clinic staff to provide seamless care
 - Provides many procedures in outpatient clinic
 - Colposcopy
 - Loop electrosurgical excision procedures
 - Simple biopsies
 - Excisions
 - Diagnostic work-ups
- Urology
 - Provides outpatient procedures
 - Provides surgical procedures in operating room:
 - Pelvic floor repairs
 - Prolapse repairs
 - Assistive device implanted for incontinence control
 - Works with gynecology for select procedures
- General surgery breast clinic
 - Examines all patients with abnormal findings from mammograms and physical exams
 - Findings include: breast mass, calcification, pain, cysts, discharge
 - Provides all breast cancer treatments:
 - Chemotherapy
 - Radiation
 - Surgery
 - Supplies any breast surgery necessary
 - All genetic testing is referred to the medical school

Tour of VANTHCS Long Term Care/Hospice, Dr. David Hales, Service Chief

- Provided and overview of the long term care and hospice facilities

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- Long term care:
 - The Geriatrics & Extended Care (GEC) Service provides a range of health care services from institutional-based care and ambulatory care to community-based care for Veterans (especially the aging) with multiple, chronic health problems
 - GEC provides care in the Home of the Brave CLC. CLCs promote the highest possible level of patient independence and well being using a team approach to patient care ensuring the patient's dignity, quality of life, and care during their stay. CLC's goal is to place the patient in the appropriate environment based on the patient's needs. CLCs include:
 - Palliative/Hospice Care
 - Respite Care
 - Rehabilitation Care
 - Temporary Placement
 - Wound Care
 - Home and community based care (H&CBC) programs share the goal of providing compassionate care to Veterans at home and in the community, promoting maximal independence, and support of the caregiver. The H&CBC programs include:
 - Contract home care come
 - Based primary care
 - Contract adult day health care and contract nursing home care are extensions of GEC programs managed by social work service

VANTHCS Radiology Overview and Initiatives, Dr. Michael Ginsburg, Service Chief

- Discussed the current services offered at the clinic, to include an overview on screening mammograms, diagnostic mammograms and ultrasounds and needle localization. He also discussed some of the current limitations, future services and the Comprehensive Breast Health Clinic (CBHC)
- Current services:
 - Screening mammograms:
 - Routine yearly screening for 40+ year old
 - Diagnostic mammograms and ultrasounds
 - Imaging performed when there is an abnormality on a screening mammogram, or if there is a specific concern (e.g. lump, pain, nipple discharge)
 - Needle localization:
 - Wire placed through a breast mass immediately prior to surgery to localize the lesion
- Current limitations:
 - No imaging guided biopsy capabilities:

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- Ultrasound, stereotactic and MRI guided biopsies are significantly less invasive and expensive than surgical excisional biopsies
 - Currently must refer patients to outside facilities at an increased cost, reduced compliance and concern for failed follow up
- No MRI:
 - Particularly needed in the younger female population (20-40 years old) and for high risk patients
- Diagnostic mammography is performed in a traditional, nonclinical setting:
 - Integrated into the radiology department
 - Limited physician contact and counseling
- Fragmentation of services:
 - Screening mammogram, diagnostic mammogram and biopsy are performed at three separate appointments with the biopsy at an outside institution
- Future services:
 - Establishment of a Comprehensive Breast Health Clinic:
 - Staffed by a fellowship trained imager
 - Extensive patient counseling
 - Offer all standard imaging modalities and biopsy capabilities:
 - Ultrasound, stereotactic and MR biopsies
 - MR imaging
 - Wire localization
 - Reduced fragmentation of services:
 - Vast majority of diagnostic imaging and biopsies will be performed during the same visit
 - Biopsies will be performed “on the fly” as needed as well as being scheduled for a future visit if needed (e.g. patient preference, discontinuance of anticoagulants)
 - No need to refer to outside facilities
 - Reduced time to diagnosis of cancer and introduction of treatment
 - Link routine preventative health care services to be performed at a single visit. Yearly physical exam, Pap smear and screening mammogram to be performed on the same day
 - Reduce three yearly visits to a single visit
 - Increased compliance
 - Increased positive health outcomes
 - Increased patient satisfaction with services
 - Reduced cost
- Comprehensive breast health clinic (CBHC):
 - Serve as a model for other VA facilities
 - Establish a visiting fellow program to train other VA health care professionals:

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- Particularly needed to train individuals in imaging guided biopsy techniques
- Partnership with the University of Texas Southwestern at Dallas residency and fellowship programs:
 - Recruitment of future breast imagers

VANTHCS Mental Health Services, Dr. Catherine Orsak, Service Chief

- Provided an overview of the VA North Texas Health Care System, and described it as a “product line” staffed with 456 employees including a multidisciplinary team of physicians, psychologists, physician assistants, nurse practitioners, nurses, etc
- She also described the services provided at specific locations, to include inpatient and outpatient services, the comprehensive homeless center (CHC) and concluded with an overview of performance measures
- Mental health locations:
 - Dallas, Texas
 - Fort Worth, Texas
 - Bonham, Texas
 - CBOC Tyler, Texas
 - CBOC Denton, Texas
 - CBOC Sherman, Texas
- Services provided in Dallas:
 - Outpatient
 - Inpatient
 - Substance abuse treatment
 - Psychosocial rehabilitation programs
 - Day treatment
 - Residential and substance abuse
 - Health maintenance domiciliary
 - PTSD treatment program
 - Intensive psychiatric community case management
 - Consult-liaison services
- Homeless services:
 - Outreach
 - Case management
 - Contract residential treatment
 - Supportive housing
 - Domiciliary care
 - Vocational rehabilitation
 - Homeless women Veterans services
 - Dental services and transitional housing

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- Services provided in Bohnam:
 - Outpatient clinic
 - Domiciliary based substance abuse treatment program
 - Health maintenance domiciliary care
 - Homeless rehabilitation domiciliary care
 - Compensated work therapy program
 - Homeless Veterans outreach, and
 - Transitional residence program
- Services Provided at Ft. Worth:
 - Outpatient services provided at the Ft Worth OPC
 - Homeless services based at the Presbyterian Night Shelter
 - Include:
 - Compensated work therapy
 - Outreach
 - Contract residential services
 - Grant and per diem services
 - Homeless women Veterans program
 - Homeless dental services program
 - Supportive housing programs, and
 - The LAMP Opioid Clinic
- CHC
 - Compensated work therapy
 - Transitional residence
 - Domiciliary residential rehabilitation and treatment Program
 - Health Care for Homeless Veterans Program
 - Department of Housing and Urban Development/VA Supported Housing Program
 - Ft Worth Homeless Veterans Housing and Outreach Program

VANTHCS OEF/OIF Services: Seamless Transition for Veterans of Operation Enduring Freedom & Operation Iraqi Freedom, Veronica Piper, Service Chief

- Provided an overview of health care services and benefits provided to seriously injured or ill service members, returning from theaters of combat operations, as they transition from DoD to VA Health Care System
- Some of the quality outcomes expected from case management includes the promotion of patient self advocacy; promotion of health-seeking/self care in the patient; facilitation of compliance issues in both the patient and in the facility/provider; and collaboration among various services and staff
- Number of OEF/OIF Veterans enrolled and demographics:
 - Veterans enrolled: 10, 408
 - Female Veterans enrolled: 1751
 - Females severely injured or severely ill: six

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- OEF/OIF staff/team composition:
 - Program manager
 - Program assistant
 - Four social work case managers
 - Three nurse case managers (one full-time)
 - One transition patient advocate
 - One poly-trauma social work case manager
- Case management services:
 - Assessments
 - Develop a plan of care with patient
 - Coordination of care
 - VA benefit assistance
 - Educate and link to community benefits
 - Link to VA and community resources
- Periodicity of case management services:
 - Intensive: daily to bi-weekly contact
 - Progressive: monthly contact
 - Supportive: quarterly contact
 - Relationship: bi-annual, or annual contact
- Transition patient advocate:
 - Assists with transition from military treatment facility to VA
 - Facilitates problem resolution and patient advocacy
 - Provides information and assistance regarding benefits
 - Coordinates community outreach

Visit to the Dallas-Fort worth National Cemetery, Ron Pemberton, Director and Doug Towers, Budget Analyst

- Provided an overview of the services provided to Veterans and their families at the Dallas-Fort Worth National Cemetery:
 - Cemetery dedicated and opened for burials on May 12, 2000
 - Dallas-Fort Worth National Cemetery is the sixth national cemetery in Texas and the 118th in the national cemetery system
 - The cemetery is situated on a 638.5-acre parcel of land
 - The first phase of construction encompassed 110 acres of the 638-acre cemetery for 12,000 projected gravesites, 2,000 lawn crypts and 2,200 columbaria/garden niches for cremated remains
 - Fully developed, Dallas-Fort Worth National Cemetery will provide burial space for 280,000 eligible Veterans and dependents
 - Dallas-Ft. Worth National Cemetery features a memorial walkway lined with a variety of memorials that honor America's Veterans, donated by various organizations
- As of 2008, there were 54 memorials at Dallas-Ft. Worth National

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Cemetery—most commemorating events and troops of the 20th century wars

Wednesday, June 10, 2009

Visit to Sam Rayburn Memorial Veterans Center (SRMVC) in Bonham

- The SRMVC site manager and senior leadership were introduced.
- SRMVC leadership:
 - Deloris Clemons, Administrative Service Manager
 - Dr. Carolyn Danner, Nursing
 - Carol Amlin, Geriatrics and Extended Care
 - Decca Hodge, Domiciliary
 - Kathy Simpson, NP, Mental Health Clinic (MHC) Supervisor
 - Dennoe Rattan, MAS Supervisor
 - Elizabeth Dannel, CBOC Coordinator
- Primary/specialty care:
 - Primary care in Bonham consists of three teams with a total of 12 providers
 - There are four female providers available
 - GYN care is available in Bonham in the specialty clinic
 - Contract mammography services are available through a contract with the local hospital one block south of the facility
 - Other specialty clinics available to female patients are: dermatology, optometry, pacemaker, audiology, SCI, podiatry, and foot care
 - Daily shuttle services are available to and from the Dallas VA for patients
- Mental health services:
 - Offers male and female providers for patient preference
 - Women's group offered in mental health clinic
 - MST group 9-12 sessions
 - Women support group (wellness group)
 - Women seeking safety group (PTSD and alcohol and substance use)
 - Women PTSD group
 - Spouse PTSD group
- Domiciliary:
 - The Bonham Domiciliary is 224 beds; with eight beds female only beds
 - SRMVC domiciliary program provides the following to all Veterans:
 - Biopsychosocial Rehabilitation
 - Substance Abuse Program
 - Health Maintenance Program
 - Compensated Work Therapy
 - Veteran's Industries Vocational Rehab
 - Women Veteran advisory group
 - There are private rooms with shared semi-private bath for females only
 - Security cameras installed in hallways to ensure women's safety

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- There are locks on each bedroom door
- MST treatment is available to all domiciliary residences
- Women support group available
- Currently undergoing a transition to the mental health residential rehabilitation treatment model with a focus on recovery
- Working with the WVPM during transition into the new model, to ensure that the needs of the female Veterans are met
- Female counselors are available to work with the female Veteran; female case manager assigned, if requested
- Designated a meeting room for the female Veterans to meet with their families in the domiciliary in a private setting
- Established female only sessions for physical workouts, to include cardio and strength training
- CLC
 - All residents are assessed and care plans and activities are adapted to fit each resident
 - Women Veterans are assigned to a private room and bath
 - Special requests from women residents are handled on an individual basis
 - Arrangements for transportation to VANTHCS in Dallas arranged for Veterans participating programs, like the women's support group
 - Currently, two women Veterans reside at the facility.
 - The CLC strives to be a homelike environment for all Veterans and continually addresses cultural transformation to ensure the highest quality of care possible
- CBOCs :
 - Approximately 12,000 patients are enrolled in contract CBOCs; approximately three percent are women Veterans
 - Seven contract clinics – two see VA patients only and five see both private and VA patient
 - Two “VA only” clinics have women's health exam rooms
 - Offer comprehensive women services at all sites
 - Women Veterans at these sites also have the option of being seen in Dallas or Bonham
 - Female CBOC patients can access care at any of the contract mammogram sites

Travel to Clyde W. Cospers Texas State Veterans Home, 1300 Seven Oaks, Rd., Bonham, TX, Kevin Miller, Administrator, Clyde W. Cospers State Veterans Home

- Committee members were given a tour of the facility and provided highlights of the services provided by the facility:
 - Women Veterans as well as the spouse or mother of eligible Veterans are admitted at Texas state Veterans homes

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- Women patients are assessed and care plans and activities are adapted according to the desires of the women patients
- Many recreational activities are held specifically for women patients
- There are seven women Veterans currently residing in the Cosper Texas State Veterans Home
- The State of Texas Veterans Land Board has planned a new Texas state Veteran's home in Tyler, Texas which will provide a complete homelike environment in a 100 bed facility that will include 10 cottages with 10 private rooms in each cottage for both male and female Veterans.

Thursday, June 11, 2009

Readjustment Counseling Service: South Central Region, 3B, Louann Fellers Engle, Regional Manager

- Provided an overview of the readjustment counseling services offered by the Vet Center Program within the South Central Region. Highlighted the purpose, history, goals, services offered, as well as women Veterans demographics. Provided information on services and latest outreach activities.
- Services:
 - Individual, group, military sexual trauma counseling
 - Marital/family counseling
 - Bereavement counseling
 - Substance abuse assessment and referral
 - Liaison with VA and community resources
 - Demobilization outreach services
 - Employment; referrals to the Veterans Health Administration and the Veterans Benefits Administration
 - Veterans community outreach and education
- Demographics: Vet Centers services to women Veterans:
 - Women seen FY 08 by Region 3B: 916
 - Women seen FY 08 by Region 3B for MST: 310
 - Military Services included: Air Force, Air Force Reserve, Air National Guard, Army, Army National Guard, Army Reserve, Coast Guard, Marine Corps Reserve, Marines, Navy, Navy Reserve
- Outreach Initiatives
 - Fifty mobile vet centers will be utilized to provide access to returning Veterans via outreach to demobilization activities on military bases, National Guard, and Reserve locations nationally
 - The vehicles will additionally support Vet Center services to rural areas geographically distant from VA services
 - All 50 Mobile Vet Centers will be deployed across the country by early 2009

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- Establishment of a national call in service where combat Veterans or family members can call at anytime to talk to another combat Veteran regarding any readjustment issues related to their military service
- The person on the other end of the call will be a Veteran who understands and values the military experience of serving in a combat zone, is trained as a Vet Center counselor, and has knowledge of VA and other resources that may assist Veterans or their families in obtaining needed services

Readjustment Counseling Service: Dallas Vet Center, Terri Adams, LMSW Team Leader

- Provided an overview of the Dallas Vet Center to include outreach efforts, services, demographics and future goals as follows:
- Background: Outreach Efforts
 - 1980's: outreach efforts not gender specific; did not seek out women Veterans
 - Women Veterans did present for treatment for PTSD and related symptoms; mostly due to their military occupational specialty-related exposure (medical, casualty affairs or morgue duty)
 - 1995: MST positions created; resulted in increased numbers of women Veterans seen.
 - MST counseling and outreach efforts centered around increased awareness of services offered a
 - Vet center attendance at post deployment health reassessment programs significantly increased visibility; women Veterans specifically targeted during outreach.
- Demographics: Vet Centers services to women Veterans
 - All women seen FY 08 by Dallas Vet Center: 24
 - All women seen FY 08 by Dallas Vet Center for MST: 02
 - Demographics: Vet Centers services to women Veterans
- Future goals/initiatives:
 - Create a more family-centric environment.
 - Proactively address common issues encountered by women Veterans:
 - Child care; marital; family of origin issues
 - Guilt surrounding deployment
 - Substance abuse and/or dependence
 - Financial instability
 - PTSD, depression, anxiety

Readjustment Counseling Service: Fort Worth Vet Center, Kathy Finch, MST Counselor

- Provided an overview of the Fort Worth Vet Center to include a description of its environment and physical locations, services, outreach efforts, demographics

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- and challenges
- Environment
 - A Safe Environment:
 - MST assessment and counseling provided by a woman clinician
 - Vet centers are located in a community setting; have close-in and plentiful parking
 - Bereavement counseling is provided to family members of male and female Veterans who were killed while on active duty
 - Counseling services provided for spouses of Veterans
 - Demographics: Vet Centers Services to Women Veterans
 - All women seen FY 08 by Fort Worth Vet Center: 36
 - All women seen FY 08 by Fort Worth Vet Center for MST: 22
 - Services:
 - MST Counselor:
 - Represents the Dallas/Fort Worth Metroplex Vet Centers at the quarterly North Texas Women Veterans Advisory Group
 - Participates in the monthly Dallas VA's women stress disorders and MST liaison meeting
 - Refers Vet Center clients to VA for medication management issues, and other medical concerns
 - Women Veterans referral resources:
 - Veterans service officers from our 53-county service area
 - Dallas and Tarrant County's mental health associations
 - Challenges:
 - Females are typically the primary caregivers for children; are more likely to cancel appointments because of child care issues.
 - Women often bring their child(ren) to appointments.
 - Older clients may be responsible for the care of their young grandchildren.
 - Outreach Goals:
 - Establish and maintain relationships and foster communication with VA medical and mental health providers and social workers:
 - Increase coordination of services with other VISN women Veteran service coordinators.
 - Develop collaborative relationships with active duty providers.
 - Develop and distribute gender-specific marketing materials.

Readjustment Counseling Service: Fort Worth Vet Center, Dr. Danny Vandergriff, Team Leader

- Discussed in-house and outreach services; specific Veterans services for women Veterans; and marketing/outreach strategy referred to as "Tripwire Networking."
- In-house and outreach services:

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- Individual, family, marital and group counseling:
 - Family members experiencing bereavement
 - Benefits assistance and referral (copies of DD214, etc.)
 - Most counseling services provided at counseling outposts in rural areas
- Specific services offered for female Veterans:
 - Readjustment counseling for women who served in combat zones
 - MST and trauma counseling
- Marketing/Outreach Strategy: “Tripwire Networking”:
 - Networking strategy; educating individuals likely to observe PTSD or MST symptoms; encouraging referral to treatment
 - Developing a pre-existing network in settings where Veterans’ problems are likely to activate
 - Encourages referrals not dependent on self-reporting:
 - Marital problems, unemployment
 - Poor college grades, legal issues, spirituality issues
 - Psychological and psychiatric problems
 - Once categories are developed, community members likely involved with addressing the conditions are targeted for training and biannual contact via email or regular mail.
 - As new contacts are made, they are added to the condition categories for future mail outs, invitations for training and periodic face to face visits.
 - The network is periodically examined in ensure it is still activated.

Women’s Stress Disorder and Military Sexual Trauma Program (WSD & MST), Dr. Heidi Koehler, MST Coordinator

- Provided an overview of MST; its definition; background history (important events); consequences of MST; important factors associated with MST; eligibility requirements; as well as applying for MST treatment. Discussed the specific evaluation process for MST from all appropriate referrals to the clinical. Concluded with an overview of the women’s stress disorder and the MST programs.
- Eligibility requirements for the treatment of MST:
 - Any honorably discharged Veteran who reports he/she experienced MST
 - No service connection required
 - No required reporting while on active duty
 - Clinician must determine if presenting problems are related to MST (verification of MST not required)
- Apply for MST treatment at:
 - Any VA medical facility
 - Readjustment counseling service – Vet Center
 - Veterans benefit office/regional office

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- If MST services are not available at site, federal law requires VA to pay for service in community
- Treatment is free (counseling, medication, related procedures)
- Background on women's stress disorder and MST programs:
 - Request for proposal composed by Dr. Alina Suris
 - Program began on February 22, 2006
 - Funded positions included a psychologist, master-level social worker and nurse practitioner
 - Program is monitored by the Northeast Program Evaluation Center as a specialty PTSD program.
- Referrals to the program:
 - Access clinic – when the Veteran is enrolled for MH services at the Dallas VA
 - MH treatment teams – other MH treatment teams may refer their patients to the program for specific treatment of MST (male and female Veterans) or war zone exposure, non-combat related traumas, non-military sexual assaults (female Veterans only)
 - Other providers within the VANTHCS may also refer Veterans for MST treatment

Friday, June 12, 2009

Town Hall Meeting

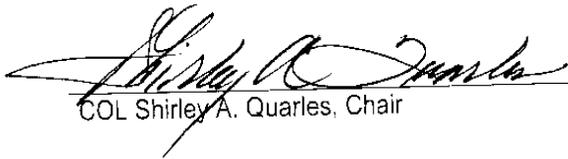
The Advisory Committee on Women Veterans hosted a town hall meeting at the Hilton Anatole in Dallas for women Veterans included in VANTHCS' catchment area. Staff from VANTHCS and other subject matter experts were on hand to answer questions and discuss individual issues brought forth from the meeting.

Exit Interview with Key Leadership of VA's North Texas Health Care System (VANTHCS)

The Advisory Committee on Women Veterans held an exit briefing with VANTHCS key leadership to brief them on areas of strength and opportunities for improvement observed during the site visit. The Chair noted that VANTHCS staff demonstrated

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flexibility in accommodating the requests of the Advisory Committee on Women Veterans during the tours. There appears to be a collaborative planning process, that has resulted in several contingency plans for achieving the goal of full implementation of a comprehensive primary care model for women, and excellent collaboration on outreach efforts among the VISN 17 women Veterans program managers, resulting in a dedicated team that utilizes individual creativity to reach and target women Veterans.


COL Shirley A. Quarles, Chair


Irene Trowell-Harris, RN, EdD, Designated Federal Official