



2011

VISN20

Annual Report



Message from the Network Director

20



Our work in 2011 was best defined by a single acronym – PACT – one small word with huge potential to improve lives. The goal of PACT, which stands for Patient Aligned Care Team, is to engage Veterans to work with VA providers to plan for whole-person care and life-long health and wellness. On a broader scale, through PACT, the Veterans Health Administration is attempting to transform our health care delivery system to one that provides more patient-centric care.

Under this system, Veterans work together with health care professionals to plan for life-long health and wellness. Care teams, comprised of Veterans, family members, care givers and health care professionals consider all aspects of health, with an emphasis on prevention and health promotion. Care is coordinated through collaboration and PACT uses a team-based approach with the patient at the center. When other services are needed to meet patient goals and needs, PACT oversees and coordinates that care. This holistic approach is data-driven and evidence-based. Technology is utilized to collect, analyze and appraise data to find the best clinical practices, disease prevention methods and wellness initiatives. The focus is on optimal patient care, with ongoing tracking, monitoring and measurement of patient performance and continuing analysis and design of treatment.

In the pages of this year's annual report, you'll see how PACT principles guided our decision-making and our accomplishments. We focused on expanding virtual medicine, improving women's health and women Veteran's access to care. We launched an extensive cultural transformation initiative aimed at enhancing employee performance in the area of customer satisfaction, and continued to seek out ways to expand access to rural Veterans, eliminate homelessness, continually improve health care quality, invest in research and development and engage our academic partners. As in years past, this document is provided as a means to look back on what we did well, and provide a map for the future, for there remains much work to be done. Thank you for your support in 2011. 2012 is shaping up to be a very good year.

Susan Pendergrass, Dr. PH
Network Director, VISN 20



Susan Pendergrass, DrPH

Network Director since April 2009

Dr. Pendergrass directs the operations, finances and clinical programs for 6 medical centers, one independent outpatient clinic, one rehabilitation center, 39 Community Base Outpatient Clinics and/or Outreach Centers and 2 mobile clinics.



Michael Fisher

Deputy Network Director since March 2008

Mr. Fisher oversees operational aspects of VISN 20, including finance, logistics and capital assets.



Frank Marré, DO, MS, FAOCOPM

Chief Medical Officer since October 2007

Dr. Marre oversees all clinical programs as well as research.



MaryAnn Curl, MD, MS

Deputy Chief Medical Officer since June 2011

Dr. Curl assists the CMO in overseeing clinical operations. She is also tasked with a variety of special projects and works one week per month providing direct patient care to Veterans.



Todd Burnett, DrPH

Behavioral Health Director since November 2011

Dr. Burnett is responsible for the planning, organization, direction, supervision coordination and evaluation of the delivery of mental health services and systems throughout VISN 20.



Allen Bricker

Chief Financial Officer since March 2008

Mr. Bricker directs all financial management activities to ensure compliance with Federal financial policies.



Nancy Benton, PhD, RN, CPHQ

Quality Management Officer since July 2008

Dr. Benton oversees all quality and performance functions for the VISN as well as education and safety.



Operating Budget
\$2.075B (Medical Care: \$2.053B)



Employees
10,542 FTEE



Donations
\$3,569,423 total
(\$748,808 cash; \$2,784,615 all other)



CBOCs
27



Outreach Clinics
12



Outpatient Visits
3,073,297



Surgeries
19,949



Research Funding
\$53,380,946



Volunteer Hours
621,809



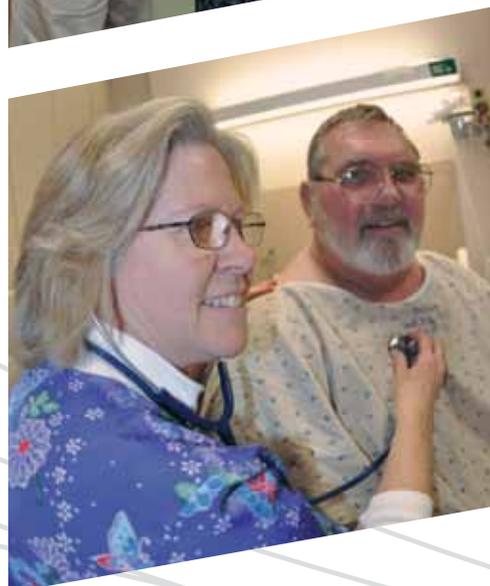
Research Projects
Portland: 470
Puget Sound: 615
Boise: 58
Total: 1,143



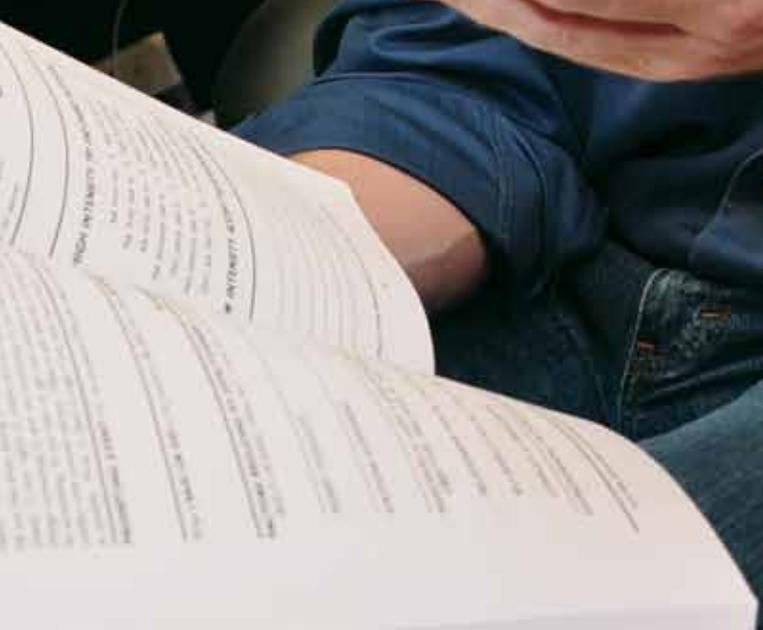
VISN 20 is committed to building a culture of ownership and expanding on existing skills as we progress on a journey of continuous improvement. This past year, we worked with industry experts to obtain real time feedback from Veterans and engage employees to “be the change you want to see.” To start, we conducted focus groups with 240 Veterans and family members and asked them how we could do better. Their responses were developed into a detailed report and provided to leadership for action. At the same time, we trained our own staff to conduct additional focus group sessions and keep the flow of communication going. Feedback was carefully considered as we progressed with PACT and other Patient Centered initiatives such as building an integrative health care model, partnering with labor and management, maximizing value and increasing efficiency.



Additional efforts centered around increasing employee and Veteran satisfaction included working with Joe Tye, a former hospital administrator, public health activist, and leadership skills training coach and contracting with Dartmouth College to train staff on continuous process improvement. The Dartmouth program, over 20 years in the making, emphasizes the identification and creation of clinical Microsystems, a crucial component in improving health care quality.



As you can see, there continues to be much going on in VISN 20. We are committed to our goal of fully engaging staff to improve Veteran satisfaction, and to communicating the tools, plans and progress reports that will help us get there.



Women's Health



Transformational Changes

VISN 20 received \$1.5M for women Veterans health initiatives. Obligations included:

- Environment of Care improvements focusing on privacy, dignity and safety
 - New equipment for women's health care
 - Education for PACTs, behavioral health, and other staff caring for women
- Outreach activities and programs honoring and recognizing women Veterans
 - Health education information purchased and distributed
 - Lab equipment for Point of Care testing

In 2011, women Veterans continued to enroll in VA health care in record numbers, with increases at all sites. New female enrollees are assigned to Women's Health (WH) PACTs, which offer comprehensive care (defined as the provision of complete primary care and care coordination by one primary care provider at one site). Care focuses on safety, dignity and sensitivity to gender-specific needs and uses state-of-the-art health care equipment and technology. Of note:

- 77% of VISN 20's female Veterans are assigned to a WH PACT. All sites are striving toward the goal of implementing comprehensive health. Boise increased from 16% of their female Veteran population enrolled in comprehensive care in FY 10 to 50%. Portland VAMC increased from 38% to 60%.
- The Women Veterans Health Site Assessment Visit (WATCH) completed by Booz/Allen/Hamilton at the Boise VAMC in June 2011, identified VISN 20 as a Best Practice for actively tracking implementation and progress of Comprehensive Primary Care with data driven targets showing continuous improvement.
- 23 primary care providers attended a mini-residency which specialized in women's health care in FY 2011.
- PACTs work to decrease gender disparity: Using a team approach, the gender gap between diabetic men and women with Hemoglobin A1C greater than 9 narrowed dramatically. Providers, nurse care managers, dieticians, clinical pharmacists and others accomplished a decrease in the gap from 11% to 2%. Many facilities used Shared Medical Appointments (SMAs) for Diabetics to help patients manage their disease. Anchorage held SMAs designed especially for women Veterans with diabetes. The national Women Veterans Health Strategic Health Care Group has designated VISN 20's efforts in this area as a Best Practice.

Research

VISN

Research in VISN 20 is conducted at VAMCs in Puget Sound, Boise and Portland. In FY 2011, investigators generated \$80.2M in total grant support. Grants were awarded from the Department of Veterans Affairs (\$43.9M), National Institutes of Health (\$29.6M), national foundations (\$2.1M), industry (\$1.6M) and other sources (\$3M).

Our investigators published 474 articles, 17 of which appeared in scientific journals with an "impact factor" of >15. Impact factor is a rating system to identify those journals that are most significant in advancing biomedical research. A value of >15 identifies those journals in the most elite tier.

Researchers in VISN 20 hold academic appointments at the University of Washington, Boise State University or Oregon Health & Science University. The rank of full professor identifies those with outstanding accomplishments in research, teaching or clinical care. In FY 2011, 33% of VA investigators held the rank of full professor. There were 19 trainees in VISN 20 with career development awards, grants identifying talented new faculty with projected research potential. There were 16 non-clinical Ph.D. scientists in VISN 20 holding VA Career Scientist awards. These awards identify a select group of scientists (approximately 130 nationwide) identified by the VA for sustained, career-long excellence in research.



Academic Affiliations

VISN 20 takes pride in educating future medical professionals. The Portland VAMC supports 248 academic affiliations for a diverse set of disciplines ranging from Audiology to Veterinary Technology. Portland has formed strong relationships with schools such as Oregon Health Sciences School of Medicine, Portland State University and the University of Oregon. The Boise VA Medical Center also supports 84 academic affiliations, and has developed several new affiliations in 2010 with diverse institutions and programs such as Brigham Young University Recreational Therapy and the College of Western Idaho Licensed Practical Nursing program. The VA Puget Sound Health Care System benefits from a strong partnership with the University of Washington School of Medicine, one of the leading medical schools and centers of biomedical research in the country.



Each VISN 20 site made great strides in their efforts to enhance services to homeless or at-risk Veterans and support our Secretary's goal of eliminating homelessness by 2015. Emphasis was given to expand community collaborations, further promote our "no wrong door" philosophy and expanding services across the homeless programs continuum. A few of the highlights include:

- Hosted 17 homeless summits with over 400 community partners coming together for the common goal of finding new and innovative ways to end Veteran homelessness.
- In addition to storefront homeless programs operated in Spokane, WA, VISN 20 opened a stand-alone Community Housing and Outreach Services clinic in Renton, WA, and developed the Community Resource and Referral Center (CRRC) in Portland, OR. These efforts have provided great gains in our "no wrong door" approach, allowing us to bring more services to homeless or at-risk Veterans.
- Significantly enhanced programs throughout the continuum of services including establishing an additional six emergency transitional housing contracts. Five community partners were awarded VA's Homeless Prevention Supportive Services for Veterans and their Families (SSVF) grant at four sites.



Quality Improvements



VISN 20's Post-Discharge Call Center (PDCC) was formed in 2008 to meet a requirement that the VA contact at least 50% of patients discharged to home from an acute unit. In FY11, the five registered nurses assigned to the PDCC called over 20,000 patients and connected with approximately 16,000. Our nurses asked Veterans about their hospital experience and identified opportunities to improve. They routinely combined findings, returning them to facilities for review and action. Urgent issues were immediately passed to designated points of contact at each site.

One of our PACT performance measures requires that patients assigned to a primary care panel will be contacted within two business days after discharge. This year, we worked to refine medical record documentation and practices so that calls the PDCC were already making satisfied these requirements. We developed encounter forms and created new records templates. Algorithms were also developed to address communication between the PDCC and PACT personnel at the sites, to ensure that urgent issues are communicated timely for the Veteran's health and well-being.

Newly rechristened the Transition Nurse Team (TNT), the group now functions as part of the "extended PACT team" at a number of VISN 20 sites, linking recently discharged patients back into primary care and mental health settings while continuing to gather information about how we can improve inpatient processes.

Virtual Medicine

Improvements in technology and innovative programs allowed providers to better deliver “whole-person” care for Veterans. In order to increase timely, efficient access and improve clinical outcomes and patient satisfaction, we encourage the use of telehealth modalities for clinical care, consultations and coordination of care, where such use is deemed appropriate. Telehealth programs include: Teledermatology, Nutrition and Dietetics; MOVE; Pacemaker Clinic; Vascular Surgery Clinic; Neurosurgery Clinic; Rehab/Amputee Clinic; and Teleretinal Imaging. Achievements are as follows:

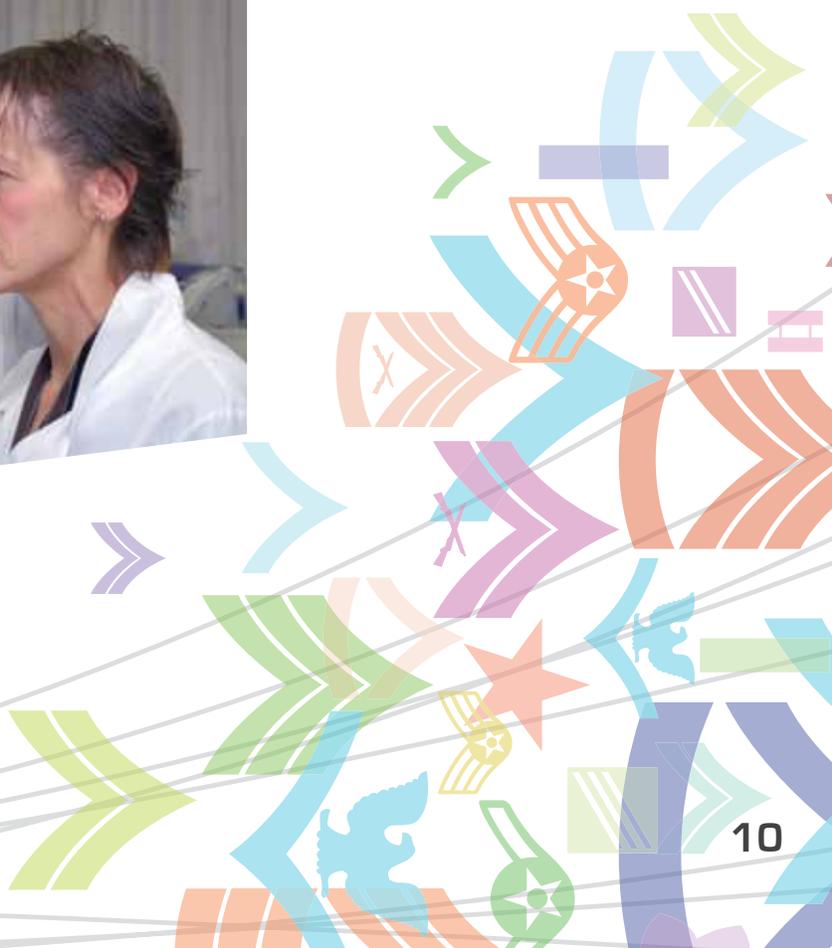
- Although VISN 20 has provided Veterans with telemental health services for approximately 10 years, 2011 moved us to the next stage by offering home based telemental health appointments.
- Approximately 3,100 patients received care coordination services through the Home Telehealth program.
- Lead the nation in secure messaging with over 14,000 patients using the service.
- All facilities hired Telehealth Coordinators to promote development of new programs and provide assistance and guidance during implementation.
- 3,700 unique patients received treatment through the teledermatology program and five mid-level primary care providers received dermatology certification allowing them to manage 80% of dermatology patients who present at clinics.
- VISN 20 purchased enough telehealth carts and peripherals so that each site of care would have two units available for use.



VISN 20 is the largest geographic VISN in VHA, spanning 6 states, 135 counties and 805,126 square miles. We comprise 23% of the US land mass. 46% of patients served live in areas that are classified as rural or highly rural. Improving access to high quality, patient-centric care for those who live at great distances from our major health care facilities was a continued focus in 2011.

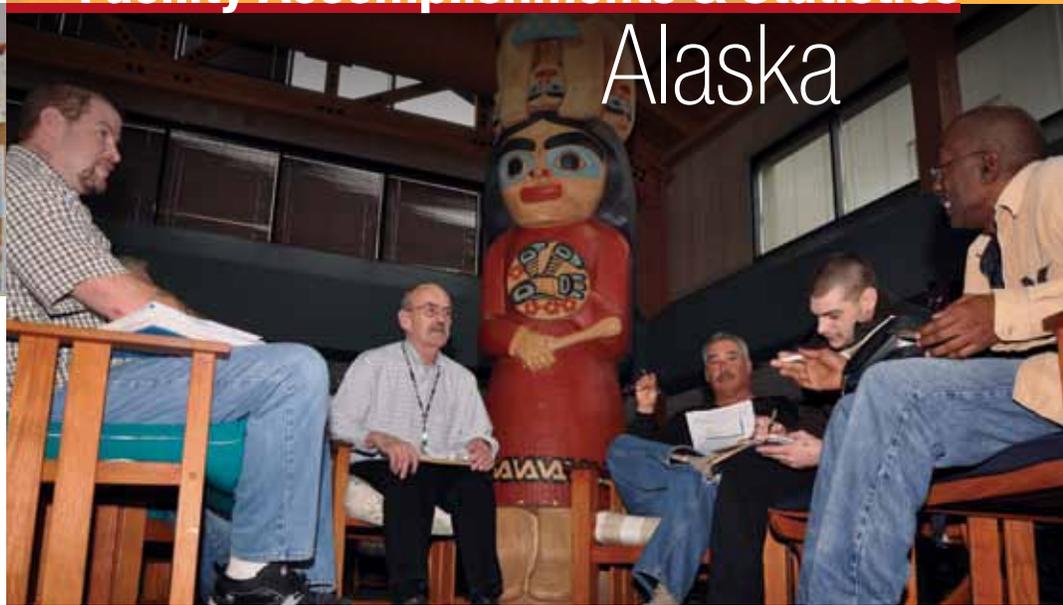
This year, we received approximately \$23M in funding to expand services to rural Veterans, including the following:

- The Boise VA opened an Outreach Clinic in Mountain Home, ID and is expanding the Salmon, ID Outreach Clinic to provide primary care and mental health services.
- The Walla Walla VA opened Primary Care Telehealth Outreach Clinics in Enterprise and Boardman, OR.
- The Alaska VA hired a Rural Health Coordinator who is providing outreach to and collaborating with Tribal Health Organizations in an effort to better serve Native Veterans.
- Local primary care provider partnerships in Sandpoint and Grangeville, ID and Republic, Colville and Tonasket, WA continued to expand their services to Veterans in their communities.
- Participated in a pilot project to provide contracted mental health services to returning Veterans who reside in rural areas of ID, OR and WA.
- Rural Home Based Primary Care programs increased enrollment in the following areas: Newport, Warrenton and LaGrande, OR; Mountain Home, ID; the Confederated Tribes of Warm Springs; and the Confederated Tribes of Grand Ronde.



Facility Accomplishments & Statistics

Alaska

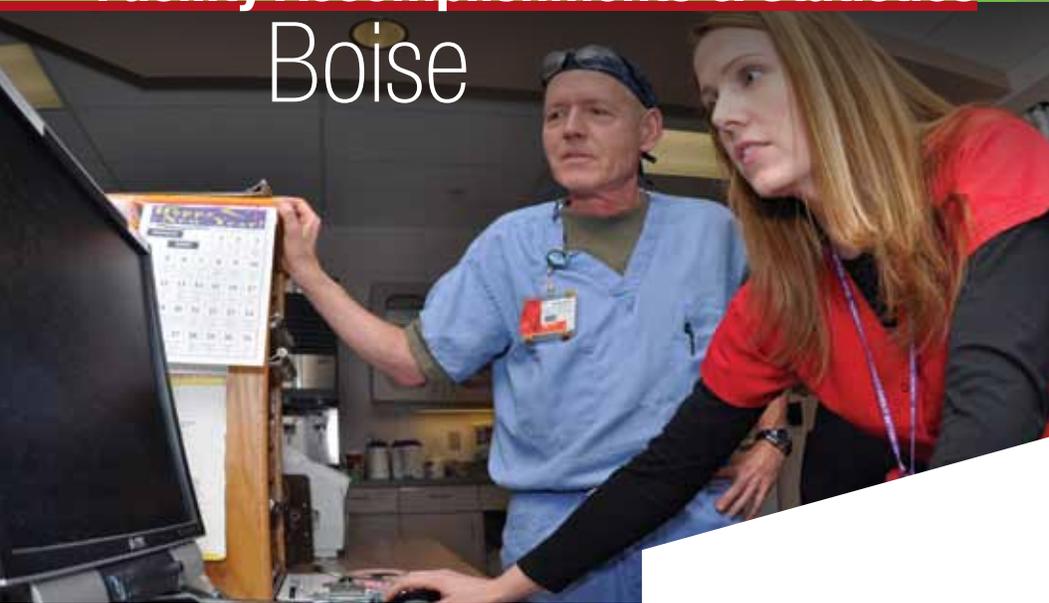


-  **\$159,502,063** Medical Care Budget
-  **17,714** Veterans Served
-  **653** Surgeries
-  **74** Total Beds
-  **170,281** Outpatient Visits
-  **3** CBOCs
-  **18,410** Inpatient Bed Days
-  **579** Employees
-  **33,096** Volunteer Hours

- **Eliminating Veteran Homelessness.** An event to raise awareness of services for homeless Veterans and Veterans At Risk of Homelessness was held on October 12, 2011. U.S. Department of Veterans Affairs Assistant Secretary for Operations, Security and Preparedness, Jose D. Riojas, traveled to Alaska to speak at the event. The program highlighted Alaska services for Veterans through VA programs and community partners. Efforts to end homelessness among Alaska Veterans have resulted in a 49% reduction since 2009.
- **Rural Veterans Outreach.** Hired a full-time Rural Health Program Coordinator in March 2011, to serve as the primary point of contact for coordinating and facilitating ongoing Rural Health efforts. Focus areas for the program and outreach have been to use the VA Tribal consultation process in working with Alaska Native Tribal Health Organizations to establish sharing agreements to enroll and serve Veterans in the rural areas. She has coordinated several successful team visits to include the northern community of Barrow, AK (725 air miles from Anchorage) to the southeast community of Metlakatla, AK (more than 700 air miles from Anchorage) to the western community of Bethel, AK (400 air miles from Anchorage). Travels to these Alaska communities have included major airlines, a 10-seat small commuter plane, ferry, and all terrain vehicles. The first MOU was signed with Ketchikan Indian Community in September 2011.
- **Tribal Veteran Representative Program.** The Tribal Veteran Representative (TVR) Program is shared between VBA and VHA, the goal of which is to organize a dependable means of outreach to rural Alaska communities. Individuals appointed by villages, Native health organizations and Native corporations act as a liaison between Alaska Native Veterans and the VA. TVRs are volunteers, not employees, or certified service officers. The VA provides training on program eligibility requirements, assistance in initiating applications for services and coordination of placement for services. The AVHAS has held annual trainings since 2007. The most recent training occurred the first week of May 2011 with more than 30 appointed individuals from locations throughout Alaska. Total number trained to date is approximately 45. Monthly teleconferences are held to provide updates, answer questions and provide networking opportunities. The next training is being planned for the third week of March 2012. This has been a successful program assisting the VA in getting information about Veterans benefits to an increased number of rural communities throughout Alaska.

Facility Accomplishments & Statistics

Boise



- Collaborated with Mountain Home Air Force Base to secure \$4.3M in Joint Incentive Funding for additional Orthopedic Surgical care at the Boise VA Medical Center for Veterans and Mountain Home Air Force personnel.
- 1 of 20 VA medical centers to be recognized as a "Top Performer on Key Quality Measures for 2010" by the Joint Commission. The recognition list acknowledges facilities that are top performers in using evidence-based care processes closely linked to positive patient outcomes.
- 1 of 6 VA Medical Centers to take part in a pilot marketing project to help promote suicide prevention. Boise partnered with Reingold Inc. to conduct an outreach campaign designed to promote and educate area businesses, colleges, organizations, hospitals and non-profits on the available VA resources responsible for helping suicidal Veterans. The 5-month campaign reached over 250 Boise/Ontario entities, with 104 accepting promotional materials, a 41% success rate.
- A new, two-story, 18,000 square foot research building has been completed at the Boise VA Medical Center. The \$6.2M building will be home to Dr. Dennis Stevens, Chief of Research at the Boise VA, and up to 40 employees whose primary focus of research is in infectious diseases.
- Winner of the Department of Veterans Affairs 2011 Green Routine Award. This program recognizes VA employees who have contributed to a greener workplace by creating effective grassroots programs. The Boise VA Medical Center created a partnership with a local recycler to pick up and recycle blue wrap. Blue wrap is the material surgical equipment comes packaged in to keep it sterile until use. The partnership saves the Medical Center over \$2,000 annually and prevents 650 30-gallon trash bags of waste from entering the waste stream every year.



-  **\$180,134,290** Medical Care Budget
-  **25,684** Veterans Served
-  **1,844** Surgeries
-  **79** Total Beds
-  **332,938** Outpatient Visits
-  **2** CBOCs
-  **20,522** Inpatient Bed Days
-  **1,007** Employees
-  **71,254** Volunteer Hours

Facility Accomplishments & Statistics

Portland



-  **\$586,408,690** Medical Care Budget
-  **76,770** Veterans Served
-  **7,365** Surgeries
-  **285** Total Beds
-  **748,476** Outpatient Visits
-  **8** CBOCs
-  **80,703** Inpatient Bed Days
-  **3,063** Employees
-  **120,153** Volunteer Hours

- Portland opened the Vancouver Campus Dental Clinic that features 12 state-of-the-art operatories in 20,000+ sq. feet. The Dental Clinic began seeing patients in September, and by the Grand Opening in November, had seen an additional 900 patients. Staff in the department also increased by four Dentists and three Hygienists. The Dental Clinic is housed in a new building that will soon feature an Eye Clinic, Specialty Care, Prosthetics, and Enrollment Offices to better serve Veterans.
- Eight vehicles were donated to Portland for the purpose of Veteran transportation at a dedication ceremony in November 2011. In partnership with Oregon Department of Transportation, Oregon Department of Veterans Affairs, Ride Connections, Inc., and the Portland VAMC, used vehicles were donated to serve the unique transportation needs of injured Veterans who need assistance getting to the VA for appointments.
- Leveraging a building that previously housed the Temporary Living Unit (TLU) on the Vancouver campus, in February, Portland VAMC opened its Residential Rehabilitation and Treatment Program (RRTP). This program serves homeless and at-risk Veterans by providing substance abuse and mental health counseling in a residential setting. The facility has living quarters for 36 patients (including a 4-bed section for female patients), and both Mental Health and Primary Care treatment space.



Facility Accomplishments & Statistics

Puget Sound



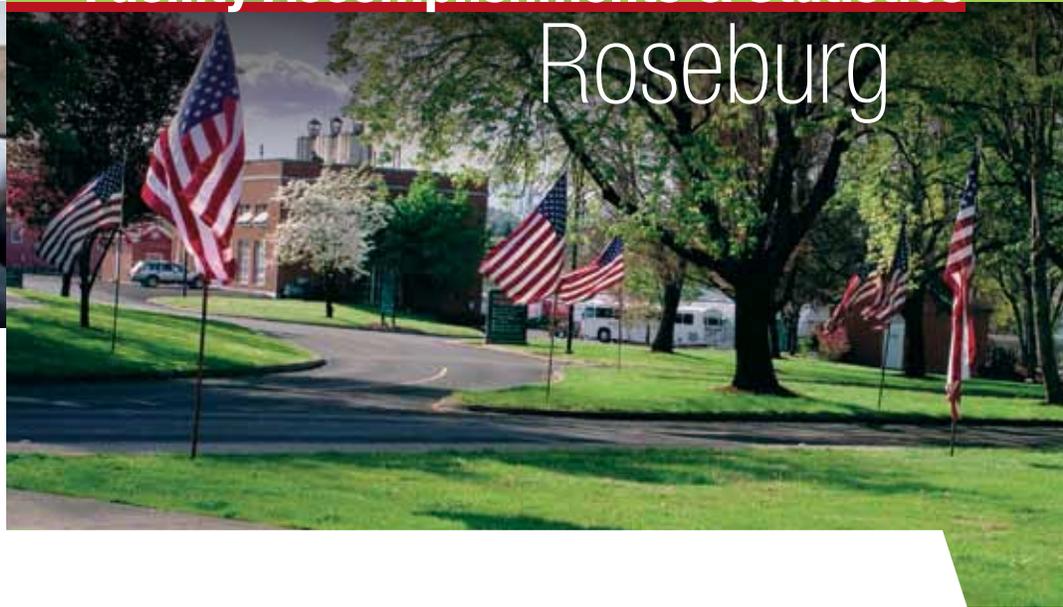
- Puget Sound physician, Kristina M. Utzschneider, was named by President Obama as a recipient of the Presidential Early Career Award for Scientists and Engineers (PECASE). The PECASE is the highest honor conferred by the U.S. government upon young professionals in the early stages of their independent research careers. Dr. Utzschneider is being honored for her novel work on type 2 diabetes and its relationship to obesity and liver disease.
- American Lake Community Living Center was awarded the “Silver” by the Leadership in Energy and Environmental Design (LEED) rating system. LEED was designed by the US Green Building Council to encourage and facilitate the development of more sustainable buildings. The green building movement offers an unprecedented opportunity to respond to important challenges, including global climate change, and dependence on non-sustainable and expensive sources of energy. The work of innovative building professionals is a fundamental driving force in the green building movement.
- Awarded PBRN: VA Site Lead: Karin Nelson, MD, MSHS, VA Women’s Health Practice-Based Research Network Member Site: The Practice-Based Research Network (PBRN) is a network of partnered VA facilities which provides research infrastructure in support of multi-site women’s health research. This initiative is particularly timely given the rapidly growing number of women Veterans, and VA’s emphasis on women Veterans’ health.
- The Office of the Inspector General (OIG) visited 8 times, praising the facility for high quality care, treatment, and services provided. OIG also used Puget Sound as a test bed for developing survey program guides for upcoming surveys in Mental Health, Finance, Centralized Scheduling, Regional Amputee Center, Homeless Program, and Cataract Surgery program.

-  **\$642,118,285** Medical Care Budget
-  **85,989** Veterans Served
-  **7,186** Surgeries
-  **432** Total Beds
-  **903,522** Outpatient Visits
-  **7** CBOCs
-  **113,832** Inpatient Bed Days
-  **3,241** Employees
-  **181,805** Volunteer Hours



Facility Accomplishments & Statistics

Roseburg



-  **\$158,989,662** Medical Care Budget
-  **27,515** Veterans Served
-  **1,488** Surgeries
-  **121** Total Beds
-  **243,735** Outpatient Visits
-  **4** CBOCs
-  **27,020** Inpatient Bed Days
-  **825** Employees
-  **69,447** Volunteer Hours

- VARHS received Silver Cornerstone recognition from the National Center for Patient Safety for their great work with patient safety in meeting the Root Cause Analysis process milestones.
- A VA Police Officer at the Eugene Clinic received the Secretary's Award of Valor due to his heroic actions.
- The Sterile Processing Services (SPS) Department developed and implemented over 200 Standard Operating Procedures and Competencies related to the Reusable Medical Equipment (RME) at VARHS. The department has a robust training and certification program for all employees with 100% having successfully completed Level One training and 80% certified, in addition to an active tracer program. Expansion plans for the department include a current remodel of space to improve efficiency at the Roseburg campus and active participation in planning for the new Eugene Community Based Outpatient Clinic.
- Increased use of Telehealth netted 2,885 visits with services such as dermatology, mental health, pacemaker, chaplaincy and diabetes. Home Telehealth now has 324 Veterans enrolled in the program. Ninety-three percent of the Veterans enrolled avoided re-admission for congestive heart failure and diabetes.
- Women Veteran's Health Program received T-21 funds. As a result, equipment and furniture have been purchased to enhance care for our Veterans. Dermatology exam tables, blanket warmers, a DEXA Scanner and exam tables for primary care are just a few of the enhancements these funds were able to provide.

Facility Accomplishments & Statistics

Spokane



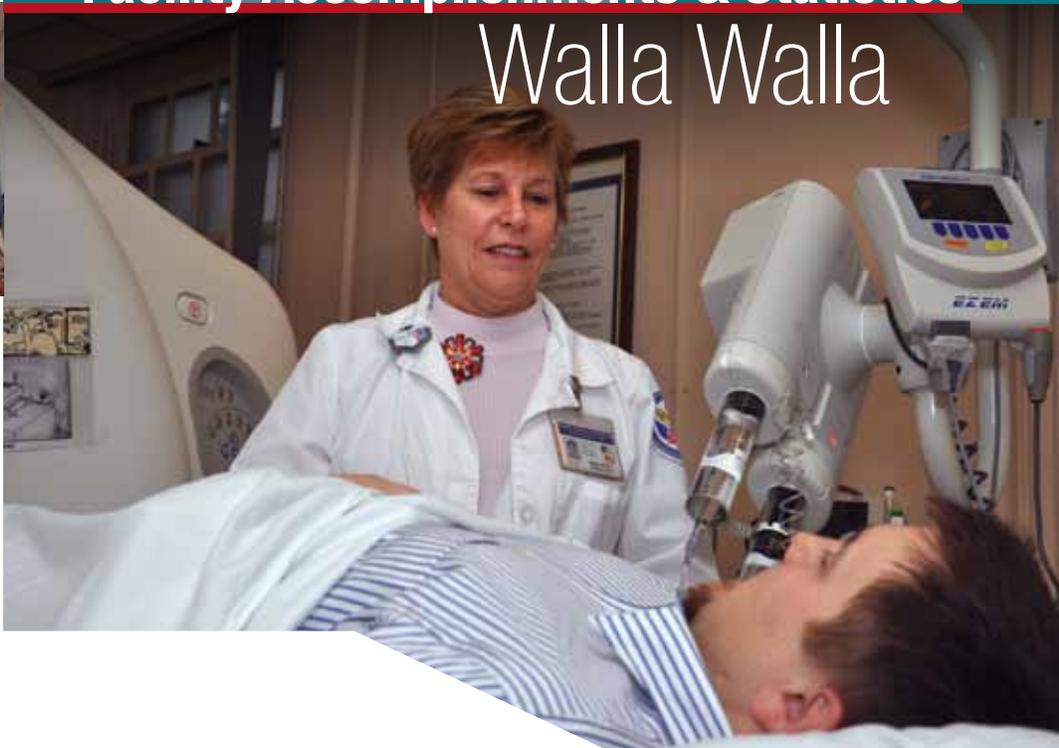
- Conducted six Stand Down events in rural and remote areas of Washington, Idaho, and Northwest Montana. During FY 2011, Spokane helped over 7,000 Veterans, family members and volunteers access health care, surplus clothing, OEF/OIF counseling from Vet Center partners and a variety of other services. In addition, the facility partnered with 3 VA Regional Offices to provide services at the events. The financial benefit to these communities was in excess of \$4.25M in goods, services, grants and “in-kind” donations.
- With the full implementation of Patient Aligned Care Teams (PACT), Primary Care has experienced a change of culture from that of accountability to one of ownership. Ownership encompasses improved patient care through same day access, utilization of Shared Medical Appointments, Telephone Appointments, My HealtheVet (MHV) and Secured Messaging (SM).
- Use of the Diabetic Registry in conjunction with Home Telehealth has improved patient outcomes and coordination of care. This was accomplished by increasing communication and training for staff by conducting daily service and individual teamlet huddles to deliver important information to teams.



-  **\$154,648,521** Medical Care Budget
-  **27,877** Veterans Served
-  **1,413** Surgeries
-  **70** Total Beds
-  **304,297** Outpatient Visits
-  **2** CBOCs
-  **18,717** Inpatient Bed Days
-  **786** Employees
-  **48,503** Volunteer Hours

Facility Accomplishments & Statistics

Walla Walla

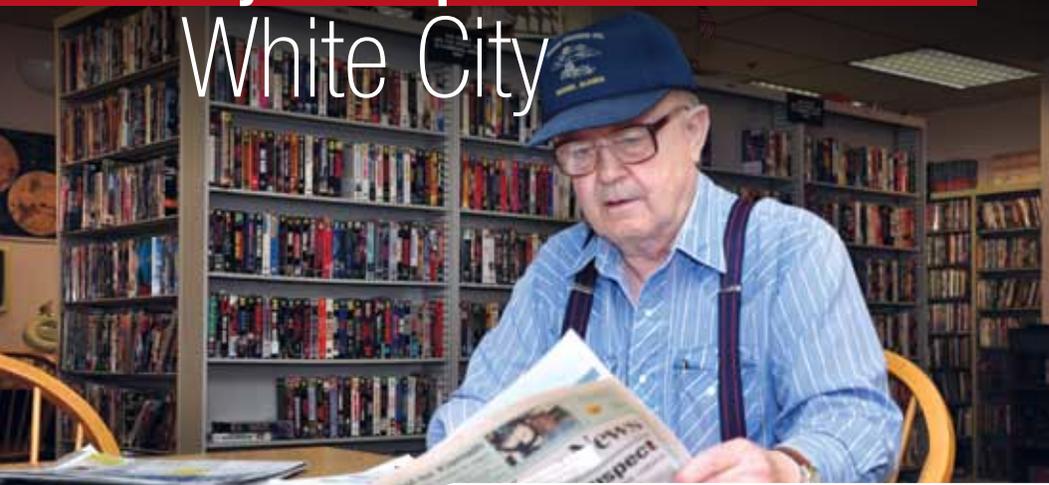


-  **\$82,855,803** Medical Care Budget
-  **18,222** Veterans Served
-  **28** Total Beds
-  **180,400** Outpatient Visits
-  **4** CBOCs
-  **8,484** Inpatient Bed Days
-  **403** Employees
-  **12,612** Volunteer Hours

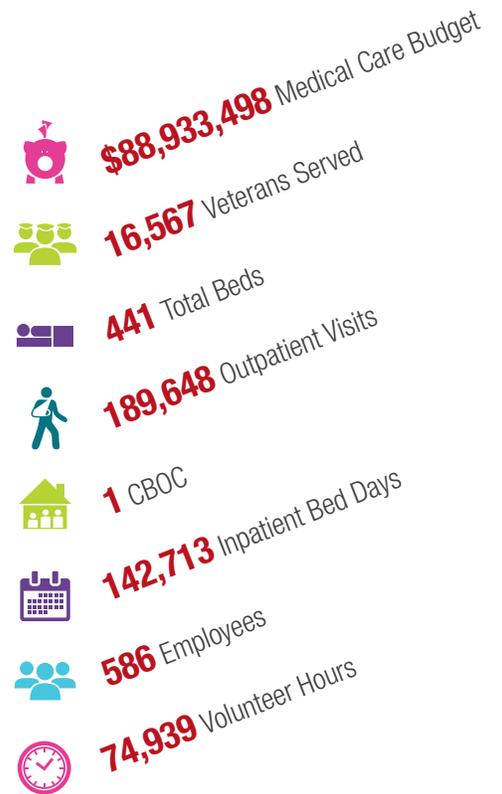
- Using rural health funding, the facility established two telehealth primary care outreach clinics in two rural Oregon counties.
- A BURR (Building Utilization Review & Repurposing) Enhanced Use Lease proposal was approved to reuse a four-acre parcel of underutilized land, including four former quarters buildings for housing of homeless Veterans/Veterans at risk of becoming homeless, expanding the HUD/VASH voucher program into eastern Oregon.
- Expanded support services to local Veterans by collaborating with the newly established Walla Walla Veterans Center.
- The Residential and Homeless Community Services Coordination Programs were reviewed and received high ratings for a full three-year CARF accreditation.
- Construction is progressing for the new residential rehabilitation unit (completion in Spring of 2012), new outpatient clinic (completion in Spring of 2013), and the new specialty clinic (completion in Spring of 2012).
- New WA State Nursing Home (to be placed on VA grounds) is in design, with projected completion in late 2013.

Facility Accomplishments & Statistics

White City



- Obtained a CT scanner which allows Veterans be tested locally versus traveling to Roseburg or Portland for a 5-10 minute procedure. VA SORCC currently provides 6-7 CT scans per day and the radiologist now gets the CT report to the doctors in 2-3 days versus 2-4 weeks.
- The Combat PTSD Outpatient Clinic opened in April 2011, and has seen over 202 outpatient Veterans. With the addition of two staff Psychologists, the SORCC can provide outpatient Veterans with more diverse treatment options.
- To ensure Veterans living in remote areas of Southern Oregon are getting the medical attention they need, 3 vans were purchased for the Rural Health Care Outreach Program to reach out to rural Veterans in Lakeview, Applegate and Cave Junction.





VA NW Health Network – VISN 20
1601 E. 4th Plain Blvd., Building 17, Suite C402 - Vancouver, WA 98661
Phone: 360-619-5925 www.VISN20.va.gov



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VISN 20 publishes an annual report for patients, employees, volunteers and all those interested in Veterans Health Care in Alaska, Idaho, Oregon and Washington. For questions, please contact Megan Streight at 360-619-5934 or at megan.streight@va.gov.