

# 2013 VISN 20 Annual Report



[www.visn20.med.va.gov](http://www.visn20.med.va.gov)

## Message from the Network Director



Having now spent a full year, and then some, in the Director's chair at VISN 20, it gives me great pride to document our continued progress. The annual exercise of putting together our annual report allows time for reflection on an eventful and productive period. Being a small part of the accomplishments realized at each of our eight parent facilities and affiliated clinics is a humbling experience. The dedication our staff has to VA's mission of improving the lives of Veterans is evident everywhere you look, every single day.

The implementation of several new initiatives has resulted in OR, ICU, and Medical/Surgical capacity increases at various sites, areas we remained focused on in the current year. As you will read in these pages, we continue to make strides as a national leader in the provision of virtual medicine (Telehealth) saving over 90,000 Veterans 4,278,299 in travel miles in just one year.

Not known for resting on our laurels, in 2013 VISN 20 also identified a number of critical goals to meet in 2014 and beyond. Among them is improving access, enhancing our surgery program, and standardizing processes which will allow us to reduce the need and expense of purchased care.

I am looking forward to achieving these objectives, traveling to our state-of-the-art sites of care, and interacting with Veterans and employees alike. Here's to another wonderful year.

Sincerely,

Lawrence H. Carroll

Network Director, VISN 20

## Statistics

Operating Budget \$2.331B

Employees 10,938

CBOCS 28

Outreach Clinics 12

Outpatient Visits 3,324,852

Inpatients 4,593

Outpatients 13,471

Volunteers 5,012

Volunteer Hours 579,119

Volunteer Impact Value 12,821,695

Donations \$3,280,420

Research Funding \$71M

Research Projects 1,100

Research Publications 500

## Leadership

Lawrence H. Carroll

*Network Director since 2012*

Mr. Carroll directs the operations, finances and clinical programs for six medical centers, one independent outpatient clinic, one rehabilitation center, and 39 Community Based Outpatient Clinics and/or Outreach 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. Marré oversees clinical programs as well as research.



Allen Bricker

**Chief Financial Officer since March 2008**

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



## Quality

The VISN 20 Department of Quality, Safety, and Value (QSV) continued its journey toward excellence during 2013. Ongoing consultation with individual sites of care ensured successful accreditation of all eight facilities. QSV encompasses a broad range of programs and services including Patient Safety, Risk Management, Accreditation Management, Performance Management, Systems Redesign and Environmental Safety with ancillary responsibility for areas such as Sterile Processing Services, Reusable Medical Equipment and Credentialing and Privileging.

This year, we received over 60 inspections from external regulatory organizations, other government agencies, and VA Central Office. These oversight visits are conducted to evaluate the quality of care and services provided to our Veterans. In addition to these external surveys, internal site visits are performed by the VISN 20 QSV Team to ensure a constant state of readiness in the clinical, administrative and environment of care arenas.

In 2013, two of our facilities, Mann-Grandstaff and Portland Veterans Administration Medical Center (VAMC), were recognized by the Joint Commission as a “Top Performer on Key Quality Measures,” which represented the top 33% of all Joint Commission accredited hospitals that reported accountability measure performance data in 2012.

In addition, the Mann-Grandstaff VAMC (Spokane) received the Gold National Center for Patient Safety Cornerstone Recognition Award. Portland VAMC and the VA Southern Oregon Rehabilitation Center and Clinics both received Silver awards. Boise, Puget Sound, and Roseburg VAMC received Bronze awards.

Other recognitions of our facilities’ dedication to safe, quality, patient-centered care are the National Coalition for Homeless Veterans Award for Spokane’s Homeless Veterans Outreach Center, and First Place for VISN 20 Safety Performance Improvement. Boise VAMC is one of five centers of Excellence within the VA Healthcare System, and VA Alaska participated in the management of the hospital on the Joint Base Elmendorff-Richardson, which contributed to the 673rd Medical Group being named the Best Hospital in the Air Force for 2013.

QSV is also home to the Transitional Nurse Team (TNT). These highly skilled Registered Nurses provide telephone follow-up care to Veterans being discharged from the hospital setting. They facilitate the critical transition from hospital to home and ensure that Veterans and their families have the resources, supplies and follow up care needed to avoid confusion, answer questions and prevent re-hospitalization.



## **Rural Health**

VISN 20 is the largest VISN geographically, spanning six states, 135 counties and 817,417 square miles. We comprise 23% of the US land mass and 41% of the patients we serve 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 continued to be a priority for VISN 20 in 2013.

This year, we received approximately \$17M in funding to support the following focus areas:

### **Partnerships**

- Participated in a pilot project to provide contracted mental health services to OEF/OIF/OND Veterans who reside in rural areas of ID, OR and WA
- Established a contract to provide consistent, board certified Emergency Department physician coverage at the Roseburg VA
- A contract speech and language pathologist provided much needed services to Roseburg patients
- Conducted outreach and education programs in Tribal communities in Alaska so they can better identify and enroll Veterans in VA health care

### **Bringing Care to Patients' Homes**

- Home Based Primary Care programs increased enrollment in rural areas in and around Boise, ID
- Rural outpatient clinics in northeastern Washington were supplied with Holter monitors for home heart monitoring so patients did not have to travel long distances to acquire and return the devices

## Increasing Access to Primary and Specialty Care through Telehealth Technologies

- The Portland VAMC developed a Rural Sleep Program for virtual fittings of CPAP equipment
- Veterans needing prosthetic evaluation and fitting could consult with Portland physiatrists via a Telehealth clinic in Roseburg
- Patients received individual mental health services in the privacy of their homes through real-time Telehealth connections with VA providers in Portland
- Primary Care Telehealth Outreach Clinics in Enterprise and Boardman, OR increased enrollment
- Veterans' spiritual needs were better met through a Tele-Chaplaincy program in Roseburg

## Establishing Non-Traditional Treatment Programs

- Horses Helping Heroes, an equine therapy program for OEF/OID/OND Veterans living in southern Oregon
- Promoted health and wellness through a cycling and fitness program in Roseburg

## Miscellaneous

- Educated rural providers through a Geriatric Scholars program and collaborative training in the management of dementia
- Provided operational support for rural Outpatient Clinics in Warrenton, OR; Mountain Home and Salmon, ID; and Chehalis, WA



## Women's Health in VISN 20

Women Veterans continue to sign on for VA Health Care in record numbers, and VISN 20 has experienced a 22% increase in female enrollees over the last five years. New Veterans are assigned to Women's Health (WH) Patient Assigned Care Teams (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, using state-of-the-art health care equipment and technology. Of note:

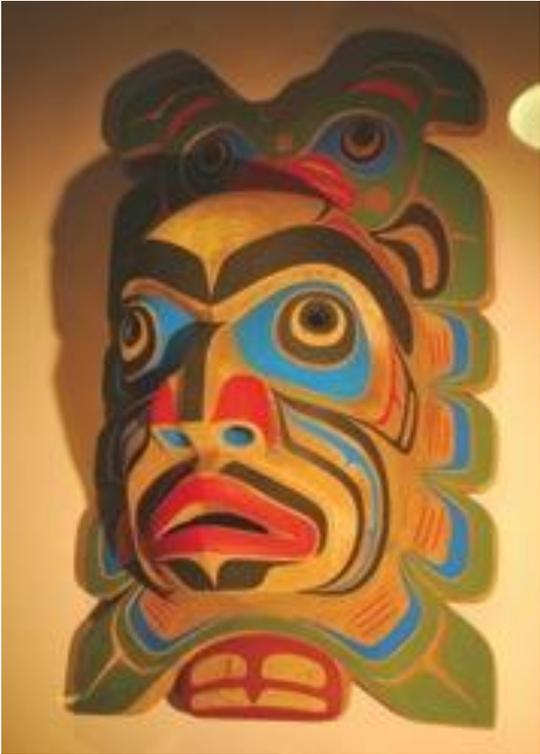
- As of February 2014, more than 82% of Women Veterans in VISN 20 are now receiving Comprehensive Primary Care from a Designated Women's Health Provider. This is one of the highest rates in the nation. Three of our facilities - Puget Sound, Roseburg, and White City, currently provide comprehensive primary care to over 90% of their female patients.
- Stand-alone Women's Comprehensive Primary Care clinics are available at Boise, Portland and Puget Sound. The number of women receiving care in this setting has increased by 33% over the past five years.
- In 2013, over 3,300 women were treated for Post-Traumatic Stress Disorder in VISN 20 and another 2,900 women received care for depression.
- In 2013, VISN 20 purchased maternity care for over 460 women Veterans, an increase of 53% over the past five years.



## **Tribal Relations – Building Relationships in Tribal Communities**

The states which comprise the Pacific Northwest and Alaska are rich in their native cultures and are home to 273 American Indian/Alaska Native (AI/AN) tribes, nearly half of all federally recognized tribes in the US. Consistent with their Warrior culture, AI/AN Veterans have a long and proud history of military service, and currently serve in greater proportions relative to their population numbers than other ethnic groups. VISN 20 is strongly committed to providing outreach to and partnering with this important constituency to ensure all receive the VA benefits to which they are entitled. Efforts to build and sustain these relationships in 2013 included the following:

- Entered into reimbursement agreements with four Tribal Health Programs in Idaho and Oregon who provide direct care services to Native Veterans
- Continued discussions with six additional Tribal Health Programs in Oregon and Washington, anticipating reimbursement agreement completion in 2014
- Attended quarterly meetings of the Northwest Portland Area Indian Health Board
- Sponsored 60 staff members from VISN 20 facilities to attend Camp Chaparral, an experiential training hosted by the Yakama Nation on their sacred tribal grounds in central Washington State, to learn about traditional healing methods in the treatment of PTSD
- Met with leadership from the Portland Area Office of the Indian Health Service (IHS) and CEOs of IHS Service Units to facilitate implementation of the national direct care services reimbursement agreement between VA and IHS
- VA Puget Sound and VISN staff attended quarterly meetings of the Joint American Indian Veterans Advisory Council to share information and listen to concerns of Tribal Veteran Representatives
- VA Puget Sound's Mobile Medical Unit traveled to the Quinault, Nooksack, Swinomish, Jamestown S'Klallum and Lower Elwha Klallum Indian Tribes to provide primary care, mental health and blind rehabilitation services and enroll Veterans for VA health care
- The Alaska VA conducted training for approximately 75 Tribal Veteran Representatives



# Homelessness

## Outreach

In FY 13, VISN 20 VAMCs were able to substantially increase their outreach efforts to homeless Veterans.

- VA Puget Sound Health Care System was able to secure a space for a Community Resource and Referral Center (CRRC) in downtown Seattle, hire staff, and is now in the program development phase. This will give VISN 20 two CRRCs with the other center previously established in Portland, OR. VA Secretary Shinseki visited Portland's CRRC this year as one of the only CRRCs to be co-located with a Homeless Patient Aligned Care Teams (H-PACT) team. In addition to the CRRC's work with outreach to homeless Veterans, 16 new Health Care for Homeless Veterans (HCHV) outreach positions were added across the VISN, with each VAMC receiving at least one of these new positions. VISN 20 also provided outreach to 3,996 Veterans through the Homeless Hotline which was an increase from 2,770 calls in FY 12.
- Permanent Housing — VISN 20 had a 106% increase in exits to permanent housing since the start of the 5-Year Initiative to End Veteran Homelessness (from FY 10 until FY 13). This is a total of 6,931 total Veterans placed in permanent housing through our VA-funded programs over this time period (does not account for non-VA funded permanent housing placements).
- H-PACT: Puget Sound and Portland VAMC H-PACT teams continue to be models of excellence, recognized nationally, and combined have saved more than an estimated \$761K from deferred Emergency Department visits and inpatient stays and have enhanced (Group 5) Veterans Equitable Resource Allocation (VERA) reimbursements by more than an estimated \$4.5M. Dr. Malinda Trujillo and Cathy Spofford, LCSW, members of the Portland CRRC and H-PACT staff, presented "Patient Centered, Interdisciplinary, Primary Care/Mental Health Treatment for Homeless Veterans: An Integrated Approach to Patient Care and Treatment Planning" at the national virtual homeless conference.

- Supportive Services for Veteran Families (SSVF) - The original five SSVF grantees in VISN 20 exceeded the number of proposed households to be provided services by 144, serving a total of 739. The SSVF Program served a total of 1,370 individuals, including 366 children under the age of 18. Additionally, 107 female Veterans were served and 94 OIF/OEF Veterans were served. There are now a total of 16 SSVF grantees across the VISN, an increase from 13 in FY 12. The overall success rate for housing Veterans in VISN 20 through the SSVF programs was 92%, with a 95% success rate in homeless prevention and a 90% success rate in rapid rehousing, surpassing national averages on all three measures.



## Academic Affiliations

- Clinician-Educators in VISN 20 are a highly talented and productive group of individuals. Among the physicians who have time protected for education of student and residents, 146 of 152 (96%) are rated in the top 20% by learners for their teaching abilities. Annually, VISN 20 Clinician-Educators present 1,848 scheduled didactics, 560 formal presentations, and participate in 1,731 interviews for candidates for medical school, residency, fellowship, or faculty positions. Committee membership is an important part of this service, with 76 clinician-educators sitting on VA committees and 11 chairing these committees. More than 100 clinician-educators sit on educational committees at our affiliates and 28 VA Clinician-Educators serve as Chair. Over 700 scholarly works have been produced by this group in FY 13, and as a testament to their skill at teaching, they have received 55 teaching awards. There are 55 clinician-educators serving as educational leaders as program or clerkship directors. Recognition has been earned by our affiliates with faculty members achieving promotion. We currently have five instructors, 70 assistant professors, 55 associate professors, and 28 professors.
- Oregon VA Nursing Academic Partnership (VANAP), a cooperative endeavor including Portland VAMC, Roseburg VAMC, Southern Oregon Rehabilitation Center & Clinics (White City), and Oregon Health & Science University (OHSU) School of Nursing is funded by a VA grant providing financial support for five years. It enrolled its first cohort of nursing students with 24 enrollees (16 on the Portland campus and eight on the Ashland campus) this year. This program endeavors to innovate and transform education and practice in ways that will foster the sustainability of the partnership at the end of the grant. This grant funds the salaries of 6 VA and 4 OHSU faculty members who work together, learn together, and teach students about best practices in caring using evidence-based educational methodologies. The grant also funds the salaries of two half-time Program Directors – one from VA and one from OHSU. The Oregon VANAP is truly innovative due to its geographic spread over nearly 300 miles down the I-5 corridor.

## Facility Specific News

- VA Anchorage HCS supports programs in Radiology, Laboratory, Pharmacy, Psychology, and Social Work.
- Boise VAMC successfully increased stipends and training experiences in multiple associated health programs including Pharmacy, Psychology, Social Work, Audiology, and advanced Nursing. The facility continues to emphasize the use of stipends to support trainees providing care in rural and highly rural Community Based Outpatient Clinics, training in the use of innovative Telehealth modalities, and inter-professional curriculum and practice.
- Portland VAMC expanded its Clinical Pastoral Education program by two additional slots.
- Roseburg VAMC named Dr. Philo Calhoun as the Designated Education Officer and is planning to host family medicine residents and physician assistant students from Oregon Health & Science University.
- Spokane VAMC named Dr. Kimberly Morris as the Designated Education Officer and is working with Providence Medical Centers to create a new Psychiatry residency program and expand opportunities for family medicine and internal medicine residents to rotate at VA.
- SORCC added two new Psychology Resident positions to their existing educational programs in Nursing, Clinical Nurse Leadership, Clinical Nurse Specialists, Pharmacy, Optometry, and Social Work.
- VA Puget Sound HCS is a Primary Care Center of Excellence and has had great success getting learners more integrally involved in quality improvement projects in clinics. They also have novel curricula in team-based care, patient engagement, and panel management. This year they received funding for a position for the Chief Resident in Quality and Patient Safety initiative, designed to train physicians in leadership in patient safety and quality improvement.
- Walla Walla VAMC supports programs in Laboratory, Optometry, Pharmacy, Physician Assistant, Psychology, and Social Work.



# Telehealth

VISN 20 boasts the largest US land mass of any of the 21 Health Care Networks in the Veterans Health Administration, and one of the largest percentages of designated rural or highly rural areas. Our Telehealth program has been at the forefront of developing and implementing innovative clinical service in the spirit of reaching Veterans who experience challenges with access to care. Our stated goal for the past 10+ years has been to bring health care closer to the Veteran, when and where they need it.

- Currently, there are 60 different clinical services available via Telehealth modalities in VISN 20. Some of these programs are leading the way for VHA, such as Tele-Neurology, Tele-Sleep, Tele-Dermatology, Tele-Pace Maker, Tele-Retinal, Tele-Amputee and Home-Based Telemental Health. Not only do we lead the way, we go to great lengths to reach Veterans. Our Tele-Justice program has been serving incarcerated Veterans via Telehealth in the Veterans Justice Outreach program since 2012, and there here are currently additional plans that would make Compensation and Pension mental health examinations available to incarcerated Veterans and help ease their transition back into the community.
- The Veteran's Voice is an integral part of Telehealth. In the Home-Based Telemental health program, a volunteer Veteran peer provides one-on-one support via telephone to those experiencing technical issues. This dedicated volunteer has logged over 2,000 hours in the past few years, and helped countless Veterans maintain quality connections with their providers. By the end of FY 13, 33.33% of our enrolled Veteran population received care via at least one of the virtual modalities. That's almost 90,000 Veterans saving 4,278,299 miles through the use of **Telehealth.**



## Research

VISN 20 is home to world class research programs, conducted at VAMCs in Puget Sound, Boise and Portland. Our researchers hold academic appointments at the University of Washington, Boise State University or Oregon Health & Science University.

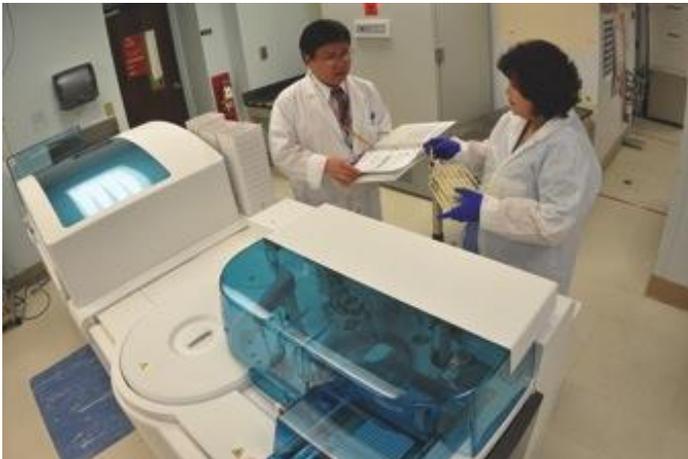
At VA Puget Sound, there are over 600 active research projects, representing virtually every major clinical department. In addition, the following VA Centers of Excellence and special emphasis programs are located there:

- Geriatric Research, Education and Clinical Center (GRECC)
- Northwest Center for Outcomes Research in Older Adults
- Mental Illness Research, Education and Clinical Center (MIRECC)
- Multiple Sclerosis Center of Excellence
- Primary Care Center of Excellence
- Center of Excellence for Limb Loss Prevention and Prosthetics Engineering
- Epidemiologic Research & Information Center (ERIC)
- Center of Excellence for Substance Abuse Treatment & Education (CESATE)
- Alzheimer's Research Center
- Diabetes/Endocrinology Research Center

The Portland VAMC has approximately 150 funded investigators and supports programs in basic science, clinical research, health services, cooperative studies, epidemiology and outcomes research. Programs of special note include:

- Portland Alcohol Research Center (PARC)
- National Center for Rehabilitative Auditory Research (NCRAR)
- Mental Illness Research Education and Clinical Center (MIRECC)
- Parkinson's Disease Research Education and Clinical Center (PADRECC)
- Multiple Sclerosis Center of Excellence
- Hepatitis C Virus (HCV) Resource Center
- Methamphetamine Abuse Research Center (MARC)

The research program at the Boise VAMC includes studies in biomedical research, health services, clinical and cooperative studies and rehabilitation. The Boise VAMC is one of five facilities in the nation chosen to participate in the VA Centers of Excellence in Primary Care Education. The goal of this program is to foster transformation of clinical education by preparing graduates of professional health programs to work in and lead patient-centered inter-professional teams that provide coordinated longitudinal care.



# Facility Highlight

## Alaska

Medical Care Budget \$203,532,129

Veterans Served 17,357

Total Beds 74

Employees 549

Outpatient Visits 171,533

CBOCS 3

Volunteer Hours 29,795

Surgeries 514

Inpatient Bed Days 17,799

**The Alaska VA Healthcare System (AVAHS), through the VA Rural Health Program, helped 16 families in Kake, Alaska** find closure with the placement of headstones to mark their Veterans' final resting places and honor their sacrifice. Families traveled to Grave Island by boat to personally place the markers. A flag was raised to fly at half mast, a prayer was spoken, and the Honor Guard bugler played taps in the distance.

**AVAHS, in collaboration with the State of Alaska, Department of Health and Social Services Rural Veterans Health Access Program (RVHAP),** hosted a one day training seminar on how to do business with the Veterans Administration. This training was specifically for rural non-tribal Critical Access Hospitals (CAH), Community Health Centers (CHC) and Community Mental Health Centers (CMHC) to increase awareness and opportunities to partner with AVAHS.

**AVAHS held a Veterans Stand Down (VSD) in Dillingham, Alaska,** August 9–10, 2013. Military Veterans and their families were invited to attend. Over 370 people came, including 137 Veterans. VA Staff and volunteers completed 100 new 1010EZs. Service providers were also on hand, offering assistance, including information about employment, housing, VA benefits, social security, and other programs. Representatives from the Alaska Territorial Guard, Department of Labor and the Alaska National Guard also attended, as did Bristol Bay Area Health Corporation and the Bristol Bay Native Association.

**Cindy Sauro, AVAHS Voluntary Service Assistant,** was selected to be placed in the National Hall of Fame for the FEDS Feed Family Program. Cindy donated 340 pounds of rice to the program. This is the second year in a row she was selected for this prestigious honor.

**The Tribal Veteran Representative (TVR) Program** is a shared program between VBA, VHA and Memorial Affairs; the goal of which is to develop a volunteer network to organize a dependable means of outreach to rural Alaska communities. Individuals appointed by Village Leaders, Native Tribal Health Programs, and Native Corporations act as a liaison between Alaska Native and Non-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 bi-annual trainings since 2007. Currently over 170 individuals from 33 communities have been trained. A teleconference is held each month to provide updates and answer questions.

**The VA/DOD Joint Venture Hospital at the 673rd Medical Group Joint Base Elmendorf-Richardson, Pacific Air Forces (PACAF)**, was named 2013 USAF Surgeon General Award for Best Hospital of the Year. The Air Force Surgeon General Award for Best Hospital is presented annually to the active-duty hospital or clinic that has accomplished or made significant contributions in the areas of mission support and customer service during the course of a year.



## **Boise**

Medical Care Budget \$196,127,528

Veterans Served 26,372

Total Beds 81

Employees 1,027

Outpatient Visits 318,117

CBOCS 2

Volunteer Hours 62,245

Surgeries 1,812

Inpatient Bed Days 23,419

**Expanded existing Oncology program, and moved into a beautifully redesigned and remodeled suite.** This project, which cost approximately \$653,000, increased the program space to approximately 2,400 square feet, and capacity from four to eight stations. It also provided three dedicated exam rooms, two offices, a reception office, a dedicated patient bathroom and staff break room and bathroom. Along with moving into the new space, the Oncology program was enhanced with the support of VISN 20 and the Cancer Care Platform effort to add a Cancer Care Navigator team. The Boise Team consists of three FTEs: a Nurse, a Social Worker and an Administrator, all of whom help guide Veterans successfully through the cancer care continuum from diagnosis to survivorship.

**On July 29, 2013, the Boise VAMC received approval to accept a donation from the non-profit organization Preservation Idaho from the Secretary of the Department of Veterans Affairs.**

Preservation Idaho has offered to help restore historic Building #4 on the Boise VA campus. The small building has been unused for a number of years, and is believed to have been constructed in 1864. Building 4 was used as the Quartermaster's building when it was part of Fort Boise, the Army outpost dedicated to protecting settlers on the Oregon Trail. Preservation Idaho intends to use donated funds, materials and labor to help restore the historic building.

**Partnered with the Mountain Home Air Force Base (AFB) and together developed a successful proposal for a jointly funded Sleep Laboratory.** The Joint Incentive Fund (JIF) program is a VA/DoD program designed to fund projects that benefit both Veterans and active duty troops. The Boise VA normally spends over \$700,000 a year to purchase sleep studies in the community because of the high volume of need. In March, the facility was awarded additional funding used to hire six polysomnographers and a Sleep Laboratory Manager, ultimately opening a 2,800 square foot laboratory.



## **Portland**

Medical Care Budget \$671,231,142

Veterans Served 78,413

Total Beds 275

Employees 3,205

Outpatient Visits 879,143

CBOCS 6

Volunteer Hours 116,426

Surgeries 7,082

Inpatient Bed Days 88,454

**For the second year in a row, PVAMC was named a Top Performer by the Joint Commission**

Key Quality Measures in heart attack, heart failure, pneumonia, and surgical care performance measures.

**The national database Hospital Compare reported that PVAMC was among the**

**lowest in three national categories:** mortality rates for acute myocardial infarction, congestive heart failure, and pneumonia.

**The facility received the VA Secretary's Robert W. Carey Performance Excellence**

**Award in December 2013**, following a site visit in October 2013. The facility also received the California Award for Performance Excellence (CAPE), Silver Award, the state/regional Baldrige-Based Program, following a site visit in November 2013. This is the second year that PVAMC was recognized by both the Carey and CAPE programs.

**The PVAMC is currently seeking to expand its clinic in Salem, OR** (slated for completion in FY 14) to offer more specialty care services (i.e. Mental Health, Eye Service, Audiology, Dermatology, Plastics, and Orthopedics). PVAMC has also proposed expansion at the East Portland Clinic in 2014-2015. Recently completed expansions include Primary Care and Mental Health services at the West Linn CBOC (September 2011); Bend, Oregon (December 2012); and The Dalles, Oregon (April 2012).

**The Northwest Innovation Center (NWIC) was created in January 2013.** Since then, NWIC has created various clinical tools to assist PVAMC with performance improvement initiatives and reports on the consults within the medical center.



## **Puget Sound**

Medical Care Budget \$687,802,443

Veterans Served 89,721

Total Beds 421

Employees 3,362

Outpatient Visits 961,572

CBOCS 6

Volunteer Hours 168,062

Surgeries 4,558

Inpatient Bed Days 104,722

**On October 7, 2013, nurses in the Medical Intensive Care Unit and Critical Care Units at VA Puget Sound Health Care System were awarded the Silver Beacon Award for Critical Care Excellence** from the American Association of Critical Care Nurses. This award goes to intensive care nursing units that have met rigid criteria for excellence, exhibit high-quality standards and provide exceptional care to Veterans and their families. Silver-level recipients demonstrate continuous learning and effective systems to achieve optimal patient care.

**Renewed FY 14 funding allowed VA Puget Sound Health Care System's "VA Loves Kids" Child Care Center,** (one of four pilot projects in the nation) to become fully operational. The program served 1,855 children from its opening in 2012 through December 2013. The program is presently funded through September 2014.

**Stephen Kahn, MD, at VA Puget Sound Health Care System, received the John Blair Barnwell Award** for his significant contributions to the field of endocrinology. This award is for outstanding achievement in clinical science. It is the Clinical Science Research and Development's (CSR&D) highest honor for scientific achievement.

**Edward J. Boyko, MD, MPH, from VA Puget Sound Health Care System received the Kelly West Award** at the American Diabetes Association Annual Meeting on June 14, 2013, in Chicago. This award, given in memory of Kelly M. West, who was widely regarded as the "Father of Diabetes Epidemiology," is presented to an individual who has made significant contributions to this field.

In July 2013, VA Puget Sound Health Care System was one of five organizations named in Washington State by the Human Rights Campaign Foundation as a “Leader in LGBT (Lesbian, Gay, Bisexual, and Transgender) by Healthcare Equality.” The organizations were recognized in the Healthcare Equality Index 2013 report published annually by the Foundation, which gives the awards based on policies and practices related to LGBT patients and their families.



## **Roseburg**

Medical Care Budget \$166,697,615

Veterans Served 26,189

Total Beds 121

Employees 841

Outpatient Visits 257,617

CBOCS 3

Volunteer Hours 56,748

Surgeries 1,479

Inpatient Bed Days 25,902

**VA Roseburg Healthcare System (VARHS) implemented extended clinic hours for Primary Care and Mental Health appointments** during FY 13, with great success. Surveys were conducted among Veterans to identify optimum hours which the facility then selected. Response to date has been extremely positive. Times have been consistently well utilized, and Veterans appreciate the added convenience in accommodating their varied schedules.

**In addition to managing 280 HUD/VASH Section 8 vouchers in six counties, the VA Roseburg also contributed significant resources to the successful completion of Eagle Landing**, which opened in November 2013. This enhanced use lease project provides permanent housing for 54 homeless or potentially homeless Veterans and their families in a beautiful new apartment complex on the VA Roseburg grounds. In addition to providing the acreage and \$1M toward the building of the housing development, staff also provided technical expertise on the construction and leasing documents. The project supports Secretary of Veterans Affairs' Eric Shinseki's goal to end homelessness and the facility is a wonderful addition. The building is beautiful inside and out, and our Veterans have a home they can be proud of.

**During FY 13, an Optimizing Value Improvement Team (OVIT)** was chartered to determine how best to assist the Call Center team in providing outstanding customer service, as well as meet assigned performance measures. As a result, five staff members were added. A revised call tree was implemented, streamlining the process and allowing for more calls to be routed directly to the appropriate location, thereby reducing overall volume.

**The Veteran's Housing Project**, a collaboration of private and public efforts (including VA Roseburg Healthcare System staff) in Eugene was one of four case studies mentioned in the Journal of Defense Communities, Volume II (2013) edition, related to housing issues confronting returning OEF/OIF Veterans.

**FY 13 was a wonderful year for the use of Telehealth in Roseburg.** A national goal was set that 30% of active patients would utilize virtual care modalities. At VARHS, this was far exceeded with a rate of 42.88%! This was accomplished by adding several new Clinical Video Telehealth (CVT) clinics including Primary Care, seizure, multiple sclerosis, genomic testing with Salt Lake City, TeleAudiology, and an Introduction Clinic. In addition, several other clinics were expanded to include Endocrinology, Post-operative Care, Speech Pathology, and TeleMental Health.

- 2,500 diabetic patients were screened and imaged for retinopathy and 750 patients with dermatology issues were imaged with many skin lesions diagnosed and treated to avert skin cancer.
- Telehealth allowed for direct patient care while reducing patient travel by more than 500,000 miles.

**Several accomplishments in the homeless program** at VARHS provided significant value to Veterans and their families. Facility staff, in conjunction with four community providers, was instrumental in the opening of a cooperative drop-in site in Eugene, the Hope Center. The Center provides basic needs services including food, assessments for transitional and permanent housing, job referrals, miscellaneous community services and art and recreation activities.





Senator Merkley, (center) and Kelli Emery, VA Management Analyst, and Carol Bogedain, VARHS Director, (left of the Senator) raise pieces of the ribbon in celebration of the official opening of Eagle Landing.

## **Southern Oregon Rehabilitation Center and Clinics (SORCC)**

Medical Care Budget \$100,794,051

Veterans Served 16,106

Total Beds 441

Employees 577

Outpatient Visits 210,651

CBOCS 2

Volunteer Hours 134,524

Inpatient Bed Days 134,524

**The SORCC proudly announced their latest expansion of health care services for Veterans with a ribbon cutting ceremony on September 27, 2013.** The Ambulatory Care building expansion provides even more health care services for Veterans. The expansion consolidated outpatient care to a more centralized area and affords geographic proximity of Mental Health and Primary Care to better meet Veterans' health care goals and improved efficiencies.

**Expanded Women's health care and developed a Gynecology Care Clinic** by an on-site Gynecology-certified MD. Increased the number of gender specific women's health treatment groups for residential women.

**VA SORCC's Homeless Program partnered with Habitat for Humanity and the first "Habitat for Heroes"** home in the State of Oregon was dedicated to an OEF/OIF/OND Veteran family in January 2012. Another Veteran Habitat for Heroes home was completed in November 2013 and was awarded to a VA SORCC Veteran employee.



Habitat for Heroes - Tyrone Polk, a six year Army Veteran, holds keys to his new home

**OEF/OIF/OND and Post Deployment Clinic Staff screened 100% of all Iraq/Afghanistan Combat Veterans** for case management services who attended their initial Primary Care appointment in FY 13.

**The VA Southern Oregon Rehabilitation Center & Clinics has a mobile clinic that will serve the Klamath and Lake counties.** The clinic was funded by the VA Office of Patient Centered Care funds to expand care using technology. The clinic is 28 feet long and includes an exam room complete with exam table and clinical peripherals. There is also a blood drawing station and centrifuge. Since the grant focused on using the vehicle for linking our rural Veterans to primary and specialty care clinicians, we were able to obtain a satellite unit and have equipped the clinic with a Telehealth clinical cart and medical peripherals (stethoscope, otoscope, etc.). This has allowed us to link our Veterans to primary and specialty care clinicians without them having to travel the distance to the CBOC or further.



## Spokane

Medical Care Budget \$168,100,931

Veterans Served 29,362

Total Beds 70

Employees 877

Outpatient Visits 330,595

CBOCS 2

Volunteer Hours 51,336

Surgeries 1,521

Inpatient Bed Days 18,467

On August 21, 2013, the Spokane VA Medical Center celebrated being renamed the Mann-Grandstaff VA Medical Center in honor of two local Medal of Honor Recipients, Army Private First Class Joe E. Mann of Reardan, WA, US Army, and WWII and Platoon Sergeant Bruce A. Grandstaff, Spokane, WA, US Army, Vietnam War. The event was highlighted by a keynote speech from the Honorable Eric K. Shinseki, VA Secretary, and moving speeches from a family representative for each Veteran.



Secretary Shinseki speaks at renaming ceremony.

**Community partnerships enhanced the care we provided to Veterans.** At our first annual Mental Health Summit in September, we were successful in working with community partners to identify and increase mental health services. The Medical Center also actively engaged with Fairchild Air Force Base in a joint-use commission that identified operational and training agreements for medical staff. Tribal partnerships were also strengthened as we established an independent agreement with the Coeur d'Alene Tribe and their Benewah Medical Center in Plummer, Idaho.

**The Mann-Grandstaff VA Medical Center was proud to be awarded The Joint Commission Top Performer Award** for a second consecutive year for excellence in pneumonia care and other quality indicators. This recognition acknowledged facilities that were top performers in using evidence-base care processes closely linked to positive patient outcomes. Other quality achievements included receiving the National Center for Patient Safety Gold Award for Excellence in Patient Safety.

**Our Medical Center served many Veterans in rural areas** making outreach efforts an important element of care provided. Our most vital outreach events were the Stand Downs, hosted in collaboration with community partners throughout the Inland Northwest area. Seven events throughout 2013 provided 8,135 Veterans and families with assistance that included enrollment opportunities, medical exams, dental care, clothing and toiletry items.



## **Walla Walla:**

Medical Care Budget \$90,387,884

Veterans Served 17,951

Total Beds 36

Employees 451

Outpatient Visits 195,624

CBOCS 4

Volunteer Hours 17,950

Inpatient Bed Days 8,409

**Successfully launched a Psychology Internship Program, operated jointly with the Mann-Grandstaff VA (Spokane).** Two interns rotate through training for six months in Spokane and six months in Walla Walla, with emphasis on training in rural psychology. The program was funded through VA's Office of Academic Affiliations as a result of a highly competitive application process, and is the first of its kind within the VA system.

**Expanded Walla Walla VA's successful tobacco cessation program** via Telehealth technology in order to disseminate this program to the community based outpatient clinics to increase the accessibility of the programming to as many Veterans as possible.

**The VISN 20 Virtual PACT Contact Center Pilot expanded its program to the Walla Walla VAMC campus,** with 15 additional agents being added in May, and after training, began taking calls for the Portland PACT teams in August. Work on a permanent Contact Center with call representative appropriate modules continues with completion estimated in February 2014, built to house up to 30 agents. With the addition of these agents, the VISN 20 PACT Contact Center continues to move forward and prepare to add more sites into the pilot.

**Walla Walla VAMC closed out its second consecutive year working with Veterans to manage an on-site horticultural garden, named The Healing Ground.** The Healing Ground is part of the recently established Complementary and Alternative Medicine program. A total of 3,075 pounds of fruits and vegetables were donated to local food banks, with 80 Veterans participating during the months of March through October. Walla Walla VAMC was recognized in November for its contribution to the community, and presented a certificate as "Donor of the Year" by the AmeriCorps VISTA Gleaning Coordinator at Blue Mountain Action Council.

**Walla Walla VAMC signed Direct Care Services Reimbursement Agreements** with the Confederated Tribes of the Umatilla Indian Reservation, the Nez Perce Tribe, and the Yakama Indian Health Center and the Yakama Indian Health Center-White Swan Dental Clinic. The agreements allow Native American Veterans to receive services at the Tribal Clinic, and the VA to reimburse the clinic.

**In August, Walla Walla VAMC's Veteran Justice Outreach Program** participated in the successful launch of the second Judicial District Veterans Treatment Court located in Lewiston, Idaho, the first regional Veterans Treatment Court encompassing five rural counties in the VISN.

**Two construction projects were completed in 2013** – the first (a major one) being the Outpatient Clinic. The new building is a 66,000 square foot, two-story, state-of-the-art outpatient clinic housing primary, specialty, and mental health care services. The second, a minor project, was the Residential Rehabilitation Unit. The 22,000 square foot single story building is now housing a 28-bed substance abuse rehabilitation program and an additional 8 beds for psychosocial rehabilitation. 36 private rooms with private baths offer a homelike environment to recovering Veterans.



Outpatient clinic in Walla Walla, Washington





[www.visn20.med.va.gov](http://www.visn20.med.va.gov)

VA NW Health Network – VISN 20  
1601 E. 4th Plain Blvd., Building 17, Suite C402  
Vancouver, WA 98661  
Phone 360.619.5925