



# Northwest Network News

Spring 2015



## Message from the Network Director

There continues to be so much written, and to be read, about the VA. From our headquarters in Washington we receive frequent and reassuring messages which, at the same time, challenge us to do better. In the media, repeats of negative stories and revelations of new missteps are aired or printed on a daily basis. At times like this, it's hard to imagine there is anything new to add to the mix. So, I am here instead to thank you. For hanging in there – for our Veterans and for each other, and for not letting others define you. For rising to each challenge, while staying true to our mission, and for delivering great care. I see evidence of that everywhere I go, every single day. Be proud of yourselves as I am proud of you.

Sincerely,

Lawrence H. Carroll  
Network Director, VISN 20



**VA**  
HEALTH CARE  
Defining  
**EXCELLENCE**  
in the 21st Century

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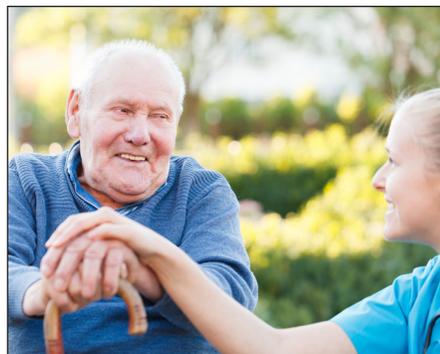
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*NW Network News is published for Veterans, employees, volunteers and the many other supporters of our VISN 20 health care system. To submit articles, editorials, letters, or story ideas, please contact Megan Crowley via email at [megan.crowley@va.gov](mailto:megan.crowley@va.gov).*



## Message from the Chief Medical Officer



Dear friends and colleagues, tomorrow I “clear station.” I am not sure how long this will take, but relatively soon I will go off the official VA air ways. Consequently, I want to take this opportunity to express my gratitude for a wonderful professional and personal experience. Your dedication, professionalism and collegueship has been an inspiration to me. Through working with you I have learned a lot and grown as a person.

### *We have faced challenges together and shared some success.*

For example, though we have not made the progress we would like in primary care we have made some and it shows. Our emergency department utilization has dropped from the highest in the VA, 490/1000 to below the VA average.

We are at 320/1000 or approximately 40,000 fewer ED visits per year than in years past. The same is true of our inpatient utilization, 140/1000 to

110/1000 or about 7,000 fewer inpatient admissions per year. Last year we served more than 100,000 Veterans through some virtual care modality. These new modalities did not exist in the VA when I joined the VA team.

### *There are many other improvements that could be cited.*

The most important to me is this, we no longer have the highest suicide rate in the nation. There is nothing more heart wrenching than to see yet another sad story in an issue brief. Through your work our completed suicide rate has dropped 20%. Many said this could not be done. But you did it.

All of this adds up to a lot of human suffering avoided. You have much to be proud of. Hold your heads up high! This is an important thought to keep in mind and in front of our colleagues. There has been so much criticism in the press and so much uncertainty in the organization that it is easy for us to be downcast and lose confidence.

One thing I have learned in the VA - in a very visceral way - is that making war and preparing for war shatters many lives. Someone must be there to help them put the pieces back together. You are the best ones to do that. You are needed.

Keep your eyes on the prize. Ignore the negative press and the political wrangling. Persevere in what you do so well, for you do make a difference in the lives of Veterans.

My work here is done but I am confident in your continued success. God speed!

A handwritten signature in black ink that reads "Frank Marre". The signature is written in a cursive, slightly slanted style.

Frank Marre  
Chief Medical Officer



## Project Healing Waters Catching On With Veterans

*Contributed by Bret Bowers,  
Public Affairs Officer, Mann-Grandstaff VAMC*

Project Healing Waters (PHW) is dedicated to providing therapeutic recreation to Veterans with physical and emotional disabilities. With more than 100 Veterans served in 2014, Project Healing Waters Spokane Chapter is a thriving resource for Veterans in our communities.

At the Mann-Grandstaff VAMC, the program is offered every Tuesday morning at 9:00 a.m. Additionally, PHW is offered at the Veterans Outreach Center in the Spokane Valley and many VA facilities throughout the Northwest Health Network (VISN 20).

The organization was founded in 2005, serving wounded military service members at Walter Reed Army Medical Center after they returned from combat in Iraq and Afghanistan. The program

has since expanded nationwide, to include many VAMCs, Department of Defense hospitals and Wounded Warrior transition units.

“Our program is unique in that our volunteers are teaching classes on an on-going, long-term basis,” explained Norm Scott, a retired Navy Captain who brought Project Healing Waters Fly Fishing to Spokane VAMC nearly three years ago. “It is much more than a one day fishing trip. For many participants, particularly disabled veterans, the socialization and camaraderie of the classes are just as important as the fishing outings, and provide them a new and exciting activity.”

“My personal satisfaction,” explained Scott, “is seeing these volunteers help my fellow Veteran overcome an adversity. I am fortunate that my disabilities are such that I can deal with them without the pain and burdensome grip that so often harbors the daily routine of many. It is rewarding to watch Veterans take pride in the flies they tie, or the rod they build and, especially exciting to watch them catch their first fish on a fly rod. It is very rewarding to





watch a Veteran who may have tremor lose it when they focus on tying or casting.”

Scott has brought Fred Timms, (USAF Veteran) on-board to help guide Project Healing Waters in Spokane. “Fred was the ideal candidate based on his expansive fishing knowledge. He’s bringing new ideas, contacts, and energy that will benefit all involved.” Timms will help PHW volunteers like Mike Fortney and Dan Wells (USAF Ret.) who have been building the program for the past three years.



“All fly fishing and tying equipment are provided to the participants at no cost,” explained Fortney. “Fishing trips, both one day and sometimes multi, are also provided free of charge to Veterans with service-connected disabilities.” In addition to his weekly fly-tying sessions, Fortney promotes the program at the Veterans Outreach Center in the Spokane Valley and at other events, including the annual American Indian Veterans Advisory Committee’s Memorial and Honoring Ceremony each September at the medical center.

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*“Project Healing Waters saved my life, I wouldn’t have met these guys without the VA.”*

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“Some of the things that I have heard from Veterans is how this program has given them a new outlook on life and something to look forward to each week. The main thing I have heard from them is, ‘when are we going fishing?’ I explain that timing is everything and they just look at me amused with a grin on their faces.”

“Project Healing Waters saved my life,” said Harold Watters, “I wouldn’t have met these guys without the VA. They’ve taken me from the Psych Unit to enjoying life again and believing in the power of therapy.”

“What it really did was take my focus off my dark space and put my attention on something I’ve grown to really enjoy. They’ve changed my life for the better. To other Veterans, I say, come on in, sit down with us, try it and then keep coming back. You’ll get hooked,” smiled Watters.

## Staffing Updates

**Don Burman**, Director at the Southern Oregon Rehabilitation Center and Clinics has accepted a position as the Director at the VAMC Omaha, effective March 8, 2015. Recruitment for a permanent replacement is underway. In the interim, Barbara Oemcke, Assistant Director, SORCC is serving as Acting Director.

**John Wilson**, VISN 20 Chief Logistics Officer, continues to serve as Acting Assistant Director at the VA Alaska HCS as the facility recruits for a permanent replacement.

**Douglas Paxton** continues to serve as Acting Director, VA Roseburg HCS. A nomination for a permanent Director has been submitted to VACO.

**Ms. Paula Roychaudhuri** was appointed Assistant Director for VA Puget Sound HCS, effective February 23, 2015. Prior to arriving in Puget Sound, Ms. Roychaudhuri worked as a Health Systems Specialist at the Hines VA Hospital overseeing administrative operations for Patient Care Services. She also served as Acting Assistant Director for both the Hines and Jesse Brown Medical Centers, and as a Systems Redesign Administrator at the Kansas City VAMC. Ms. Roychaudhuri began her VA career by pursuing a post-graduate administrative fellowship at the Washington DC VA in 2005. Ms. Roychaudhuri received her Master's in Health Services Administration from the University of Kansas. She is a certified Lean Six Sigma Greenbelt, and graduate of VHA's Health Care Leadership Development Program.

**Deanne Carlisle** continues as Portland's Acting Deputy Director until a permanent replacement is determined.

**Scott Nye** is serving as Acting Chief of Staff at the VAMC Spokane.

**David Donnelly** served as Acting Chief of Staff until he retired on March 31st. Recruitment is ongoing.

**Charles Beleny**, Chief of Staff, VAMC Walla Walla, retires on March 31st. Recruitment for a permanent replacement is underway.

## Good Press

*Contributed by Teresa Shepherd MSN, RN, Infection Prevention and Control, VA Portland HCS*

In late January 2015, the New York Times printed a story regarding the high quality of care received at Veterans Affairs Medical Centers, specifically our



low rates of hospital acquired infections. The article spoke of how the VA was leaving other leading hospital systems “in the dust” when it comes to reducing infections. Nationally, the VA saw a 68.6 percent reduction in MRSA infections, while non-VA hospitals reported a 30.8 percent drop. The drastic reduction at the VA is attributed to the nationwide implementation of the MRSA bundle in 2007.

After seeing this NY Times report, Portland's KGW news team contacted VA Portland Medical Center. They wanted to do a story on the positive outcomes at the VA, and more specifically, how VA Portland Health Care System (VAPORHCS) was doing. Reporter Wayne Havrelly spoke on camera with Dr. Christopher Pfeiffer, Hospital Epidemiologist, and Clinical Nurse Specialist Jennifer Holmquist MSN, RN, MDRO Coordinator. Jennifer highlighted the MRSA initiative, and spoke of how VAPORHCS MRSA infection rates have dropped 75% since 2007. “Clearly, the data shows it works” she stated, when speaking of our MRSA reduction interventions. Jennifer also highlighted the DAZO marking system,

which is used to provide education and feedback to housekeepers following room cleaning. Housekeeping has proven to be critically important in the fight against infections.

Dr. Pfeiffer spoke of how our focus is not just on MRSA infections, but also on identifying patients who are colonized, or carrying, the bacteria on their skin. As Dr. Pfeiffer puts it, “If you only focus on patients infected with MRSA, then that’s just the tip of the iceberg, you are missing patients who are colonized.” Patients are screened for MRSA colonization on admission, with all transfers, and on discharge. This proves important because healthcare workers are at risk of carrying MRSA on their hands and/or equipment after caring for colonized patients, and may then transmit the MRSA to other patients and/or the environment. Therefore, even patients who are colonized are placed on contact precautions just like the patients who have active infections. One of our Veterans, Mr. Robert Flemming, agreed to be filmed during this screening process. Nurse Sarah Koehler, completed the nasal swab, and did a fantastic job demonstrating the excellent care provided at the VA.

This visit proved timely for KGW, as just that morning a story broke concerning ongoing outbreaks across the country caused by the “superbug” CRE. Dr. Pfeiffer was the perfect person to answer these questions, as he is currently leading the State of Oregon in the fight against this new and frightening multi-drug resistant organism (MDRO). Through a collaborative effort with the Oregon Health Authority, he is setting the guidelines for all of Oregon so that hospitals and other healthcare facilities will ideally be as successful at fighting CRE as the VA has with MRSA.

This news story offered VA Portland a chance to highlight their successes and provide the community with a positive story concerning the care at the VA. VA Portland is very proud of Dr. Pfeiffer and nurses Jennifer Holmquist and Sarah Koehler for doing such a great job representing the VA.

## W2SM Program

*Contributed by Tiel Keltner  
Health Systems Specialist, VISN 20*

In late 2014, VISN 20 kicked off a new program for Veterans and their families. VA recognizes that peer and family relationships substantially affect overall health and wellbeing. Offering relationship building exercises and peer support for Veterans and their significant others supplements a comprehensive approach to proactive, preventive health



care. VA’s Warrior to Soulmate (W2SM) Program provides psychoeducational retreats and workshops for Veterans and their significant others aimed at facilitating healing and wellbeing in distressed relationships and fostering intimate connections in healthy relationships. Portland and Puget Sound join nearly two dozen VA sites across the country that have successfully implemented the W2SM Program since 2008. The W2SM Program utilizes the Practical Application of Intimate Relationship Skills (PAIRS) curriculum to teach communication skills, constructive conflict resolution, bonding, and emotional literacy.

To date, the VA Portland Health Care System has hosted two day-long Saturday retreats for Veterans and their significant others. Serving nearly 20 couples, Portland’s retreats have been coordinated

by Chaplain Thomas Phillips and have utilized facilitators from Mental Health, OEF/OIF/OND, Chaplain, and Social Work service lines. At Portland's latest retreat in January 2015, participants noted that "it was helpful to know that others struggle" "seeing my spouse cry and being there for him was a highlight of the event" and "if only one of the tools helps, it was well worth it." To complement the day-long retreats hosted by Portland, the VA Puget Sound Health Care System developed shorter workshops for Veterans and their significant others, with facilitators from Social Work, Patient Centered Care, and OEF/OIF/OND service lines. VISN 20 would like to make this opportunity available to

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*“VISN 20 is exploring the expansion of the W2SM Program to all facilities”*

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Veterans throughout the Network. To achieve this goal, we are exploring the expansion of the W2SM Program to all facilities, as well as the provision of recurring workshops, virtual retreats, and ongoing peer support.

Providers, chaplains, social workers, and other frontline staff supply information about the W2SM Program to Veterans who may be interested in or benefit from the curriculum. Interested Veterans must meet the following three intake criteria: (1) the Veteran has been in a committed relationship for the past six months; (2) no physical violence



has occurred within the past six months; and (3) the Veteran's significant other is willing to participate and to speak with W2SM Program coordinators. The W2SM Program's successful sustainment depends on strong partnerships with local communities, businesses, and faith-based organizations. These partners help provide space, meals, and other general support for retreats. If you know of a potential community partner or would like more information about the W2SM Program, please contact Tiel Keltner ([tiel.keltner@va.gov](mailto:tiel.keltner@va.gov) or 360-567-4693). VISN 20 hopes to expand availability of the W2SM Program to all facilities within the next year.



# Clinical Informatics: Improving the Delivery of Nursing Care through Informatics

*Contributed by Brent Stevens,  
Chief Health Informatics Officer*

In 2010, VISN20 implemented a Clinical Information System (CIS) in each of the facilities' Intensive Care Units. The CIS is a software application used by nursing within the ICU in order to document care over time; something CPRS has never been able to adequately accomplish.

The initial chartable rows provided by VHA consisted of approximately 30,000+ terms and was dumped into the CIS database. In production, it soon became evident that the amount of charting "requirements" expanded significantly. Nurses were either over or under charting and/or missing key interventions/assessments within the quagmire of charting fields. The quality of charting was diminished and missing information regarding care, such as interventions used to reduce infection rates was being missed.



Nursing satisfaction with the charting system and its ability to support care was a 2.6 out of 5.

A team in Portland was formed to improve the system with the charge of reducing redundancy, improving efficiencies and clarity, and ensuring that any item must add value or be removed. They analyzed and rebuilt several sections item by item, removing items that were not meaningful and consolidating key interventions, or accentuating those that were of high value or impact.

After removing redundancies and improving efficiencies in the rebuilt sections, the Portland team reduced the time required to chart the nursing initial assessment by 4 minutes.

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*“Reducing even small  
inefficiencies can have  
a major impact.”*

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Four minutes doesn't seem like a big change, but it adds up. If VISN 20 averages 35 nurses / shift, 1703 hours of nursing time was transferred from redundant, inefficient charting practices to other care needs over a year period. These changes were rolled out to all other VHA facilities (approximately 91 ICUs). If each VISN averaged a similar # of nurses / shift, 35,000+ hours (17 FTEE) were saved. With the rebuilt sections, nursing satisfaction rated between 4.2-4.5. Overwhelmingly, the nursing staff felt that it was "less redundant", "easier to chart", and "more meaningful." Reducing even small inefficiencies can have a major impact.

This year, the same team is continuing the mission to improve efficiencies by working on invasive lines, skin and wound, and pain.

## Personal and Family Disaster Preparedness

*Contributed by Paul Phillips,  
VISN 20 Emergency Manager*

**H**ow prepared are we? A 2012 FEMA National Survey revealed that only 43% of American households have an emergency plan, and only 52% reported having disaster supplies in the home. This article provides some resources to assist with planning for a potential disaster.

The safest place during a major disaster may be your home. The ability to get food, water or fuel can easily become an insurmountable challenge. Loss of electricity, internet, and wireless communication will have an immediate and frightening impact on your family and community. A solid emergency plan and adequate supplies will help alleviate stress during times of crisis.

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*“Only 43% of American households have an emergency plan.”*

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There are many ways to develop an emergency plan: [www.ready.gov](http://www.ready.gov) provides tools and templates. Children will find the process fun and exciting and [www.ready.gov/kids](http://www.ready.gov/kids) offers invaluable planning resources for parents, kids and educators.

Having enough disaster supplies in your home will also reduce the need to go out into potentially hazardous areas. [www.ready.gov/build-a-kit](http://www.ready.gov/build-a-kit) offers suggestions and supply lists to help you stock up before you need to.



One of the most stressful parts of an emergency is the time between when a disaster begins and when you are able to make contact with your family. Therefore, family communication plans are an excellent idea, and something we highly recommend you practice.

Parents should also know the emergency response plan for any school their children attend. These plans describe how the school will notify parents during a crisis, whether they have a solid shelter plan and supplies, and where children will be escorted for parents to pick up. [www.ready.gov/school-and-workplace](http://www.ready.gov/school-and-workplace) has additional information on school and workplace planning.

Finally, neighborhood and community emergency preparedness efforts are very important as critical emergency services and utility restoration may be cut and repairs delayed. To find out if your neighborhood or community participates in the Community Emergency Response Team program, or to find out details, go to [www.fema.gov/community-emergency-response-teams](http://www.fema.gov/community-emergency-response-teams).

Personal and family emergency preparedness is not difficult or time consuming. The minimal amount of effort will pay immense dividends should a need arise. Please take the time to prepare yourself and your family.

## VISN 20 AO Academy

*Contributed by Jacalyn Hardy,  
VISN 20 Designated Learning Officer*

The AO Academy kicked off their FY15 program on February 23, 2015 in Vancouver, Washington. This second cohort of the Academy includes administrative officers from across the VISN, some seasoned and many of them quite new to the AO position. Congratulations to all for being selected to participate.

Cohort 2 has their work cut out for them. They will be delving into a robust curriculum that goes way beyond an overview – and there will be homework! The 8-month course includes three face-to-face sessions where participants will be able to work directly with faculty for hands-on training. It also includes bi-monthly virtual classes. Focusing heavily on data management, the curriculum covers the nuts and bolts of how a medical center runs, including: costs, logistics, budget, workload, staffing, utilization, labor relations, quality management, patient safety, capital management, interpersonal relations, strategic planning...the list goes on.

Mentoring is also a part of the AO Academy. Experienced AOs have signed on to serve as mentors. This will help create a community of practice to improve competencies, build cohesion and standardize and improve administrative functions across the VISN.

New AOs will no longer have to experience the “trial by fire” approach to learning their role and seasoned AOs will be able to share their knowledge and experience through an organized and structured mentoring approach. To support and sustain efforts and learning, facility events such as lunch-n-learns, classes and coaching sessions will augment the program.

There will be soft skills training on a variety of topics such as interpersonal effectiveness, working with

your boss, stress management, and so on. Facility Directors will also assign a project to the AOs from their site. This will offer additional opportunities for real-life learning and practice. Creating a culture of continuous improvement is the foundation of the AO Academy. We want to ensure that AOs have the standard processes and the most up-to-date training and resources to be effective and efficient in their jobs.

Congratulations on being selected for the VISN 20 AO Academy - good luck!

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*“Creating a culture of  
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### ***Cohort 2 Consists of:***

**Boise** – Randy Helland and Adele Smith

**Portland** – Samalya Ahmed, Amanda Weber, Charles Dailey, Suzanne Denker, Melissa Harris, and Valdez Bravo

**Puget Sound** – James Wilson, Aleece Faivre, Karen LaThorp

**Roseburg** – Deborah Wheeler and Carolyn Rhodes-Rapant

**Spokane** – James Erickson, Frank Paulson, Lawrence McMurtry, Alaina Hogan, and Chris Galster

**Walla Walla** – Brandy Miller and Lisa Noren

**White City** – Peter “Ryan” Carter

## VISN Staff Wear Red in Support of Women's Heart Health

Heart disease is the No. 1 killer of women and is more deadly than all forms of cancer combined. One in three women experiences heart disease in her lifetime.

Since 2012, VA has been partnering with the American Heart Association's Go Red For Women® campaign to raise awareness nationwide.

On Friday, February 6th several VISN 20 facilities participated in the National VA Goes Red Event by sponsoring local activities to raise awareness about women's heart health. Staff were encouraged to wear red and help promote messages about how veterans can decrease their risk of cardiac disease.



## Homeless Update

*Contributed by Eileen Devine,  
VISN 20 Homeless Coordinator*



Every other year, during the last week in January, the Department of Housing and Urban Development (HUD) requires communities across the country to conduct unsheltered counts of people living in a place unfit for human habitation. This point-in-time (PIT) count is a community-wide effort, calling upon assistance from all agencies within that community that provide services to homeless individuals. On January 29th, VISN Staff, along with VA Portland Health Care System Homeless Program Staff, joined VAPORHCS Director Joanne Krumberger and VA Acting Principal Deputy Under Secretary for Health, Dr. James Tuschmidt, for the 2015 (PIT) in downtown Portland. The results provide communities with a good single night “snapshot” that allows them to see the year-over-year progress they are making towards ending homelessness within their community. VAPORHCS’s homeless program is certainly making a significant dent in the plan to end Veteran homelessness, having served nearly 3,600 homeless and recently homeless Veterans in 2014.

## Portland VA Fisher House Construction Progress

*Contributed by Barbara Decoito,  
Fisher House Program Manager*

The VA Portland Health Care System has received a generous donation from the Fisher House Foundation; a beautiful 16-room, 13,400 sq. ft. Fisher House located on the Vancouver Campus. It is a house to provide the “home away from home”- like environment for families of Veterans and military service members who are hospitalized at the Portland Campus acute care hospital or who are residents of the Vancouver campus Community Living Center or Residential Rehabilitation and Treatment Program. It may also serve family and caregivers of Veterans who are receiving extended outpatient specialty care, such as oncology care, at our various specialty clinics. The Fisher House enables family members to be close to their loved one during hospitalization by providing comfortable lodging in a beautiful and relaxing setting. There is no charge for families staying at the Fisher House.

After the ground breaking ceremony took place September 19th, 2014, construction began right away and is moving right along. It is very exciting to see this generous gift evolve and take shape. Target completion is November 2015. The program will be developed and managed by Barbara Decoito, Fisher House Program Manager.

Since 1992, the Fisher House Foundation has provided over 5.2 million nights of lodging Veteran and active duty military families; a savings of \$235,000,000. There are 64 Fisher Houses located on 37 military installations and 27 VA Medical Centers. Worklife benefit incentives and discounts available to VA employees.

## Did You Know?

Did you know employee incentives and discounts are available to Department of Veterans Affairs (VA) employees? These discounts are available to employees through the VA Wellness is Now program, the VA WorkLife4You program, and the Federal Employee Health Benefits program. For example, the WorkLife4You program can provide personalized assistance and referrals 24/7 through numerous program areas, such as: Child Care & Parenting, Adult Care & Aging, Education, Financial and Legal, as well as, Health and Wellness. The VA Employee Health and Wellness Program website can provide employees with helpful health tips and has some fun interactive web tools to ensure you are taking the right steps for a healthy you. Please take the time to visit: [http://vaww.va.gov/OHRM/Worklife/Wellness\\_and\\_WorkLife\\_Incentives\\_and\\_Discounts.asp](http://vaww.va.gov/OHRM/Worklife/Wellness_and_WorkLife_Incentives_and_Discounts.asp) to explore this employee centric opportunity.



## Innovation and improvements on display in Roseburg



A ribbon cutting and open house took place February 3, 2015, for the new VA Roseburg HCS Protective Care Unit. After the formal ribbon cutting, attendees were offered guided tours of the new facility. VARHS staff and the Soldiers Angels group assisted visitors and provided details about the state of the art equipment and the enhanced services that will be available for our residents once they transition into the new building. With the enhancements of services, added space, private rooms, full kitchen facilities and even a spa area, we believe we have achieved our goal. Our dedicated staff will have a new and wonderful environment to provide continued exceptional care to our Veteran residents.

Monthly Facebook virtual town hall information sessions are allowing Veterans to participate from the comfort of their own home. To date, Roseburg has reached over 850 people with our four virtual town halls: MyHealtheVet, Home Telehealth, Move Program, and Navigating the VA Hiring System. Veterans can participate and learn about the subject and help us by sharing their knowledge with other Veterans.