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VA NW Health Network

Summer 2013

VA Northwest Health Network (VISN 20)

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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 Streight via email at megan.streight@va.gov.



Message from the Network Director



Lawrence H. Carroll
Network Director
VISN 20

Mid-way through summer, we are growing close to another year's end (Fiscal Year that is). As always, there are new initiatives to respond to and long existing priorities that demand renewed attention. For the past few months, I have had the opportunity to expand my travel schedule, visiting various points of care and experiencing incredible things. A recent trip to Alaska was a highlight, with stops in Anchorage, Fairbanks and Barrow – the northern most city in the United States. It was amazing to witness the stark differences in lifestyle; i.e., every structure is elevated on stilts to protect foundations from expanding and contracting ice flows, and the fact

that a gallon of milk costs \$10. Equally amazing was the commitment of our Alaska employees and community leaders to work together to deliver care in communities that go far beyond the traditional definition of "rural."

On the same trip, I had the privilege of attending training put on by the Southcentral Alaska Foundation's (SCF) "Nuka System of Care." Nuka, is an Alaskan word used to describe strong, giant structures and living things. It is the meaning behind a health care system created, managed and owned by Alaska Native people to achieve physical, mental, emotional and spiritual wellness. Nuka is comprised of organizational strategies and processes; medical, behavioral, dental and traditional practices and supporting infrastructures that work together – in relationship – to support wellness. By putting relationships at the forefront of what they do and how they get it done, the goal of the Nuka System is to continue to develop and improve for future generations. It was inspiring to learn about Nuka and the commitment of its members to better the lives of Alaska Natives. The emphasis on culture and resulting concepts provide valuable learning opportunities for the VA, and I look forward to exploring opportunities to put them into practice in VISN 20.

On a much broader scale, the one topic that seems to be on everyone's mind is the Affordable Care Act (ACA) – specifically, how will it affect Veterans and the VA? With less than 2 months before implementation, there are many questions to be answered.

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> Message from the Network Director, continued >

ACA was created to expand access to coverage, control health care costs and improve health care quality and coordination. It puts in place comprehensive reforms that improve access to affordable health coverage and protect consumers. It is NOT intended to replace the VA, but rather to allow all Americans to make health insurance choices that work for them, while guaranteeing access to care for our most vulnerable.

Since the Affordable Care Act's enactment, VA has been proactive in working to understand the law's impact on Veterans, other beneficiaries, and our health care system; and in preparing for implementation of the law. VA's focus is on providing personalized, Veteran-centric health care. Our ongoing efforts include developing data tools and coordinating directly with other Federal agencies, including the Internal Revenue Service (IRS) and the Department of Health and Human Services (HHS).

VA is committed to providing timely access to high-quality health services. We currently deliver care to nearly 9 million enrolled Veterans and other beneficiaries, primarily dependents and survivors. Enrollment in our system meets the Affordable Care Act requirement to maintain minimum essential coverage. This means that Veterans enrolled in VA health care and beneficiaries enrolled in the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) and Spina Bifida program do not need to obtain additional coverage as a result of ACA.

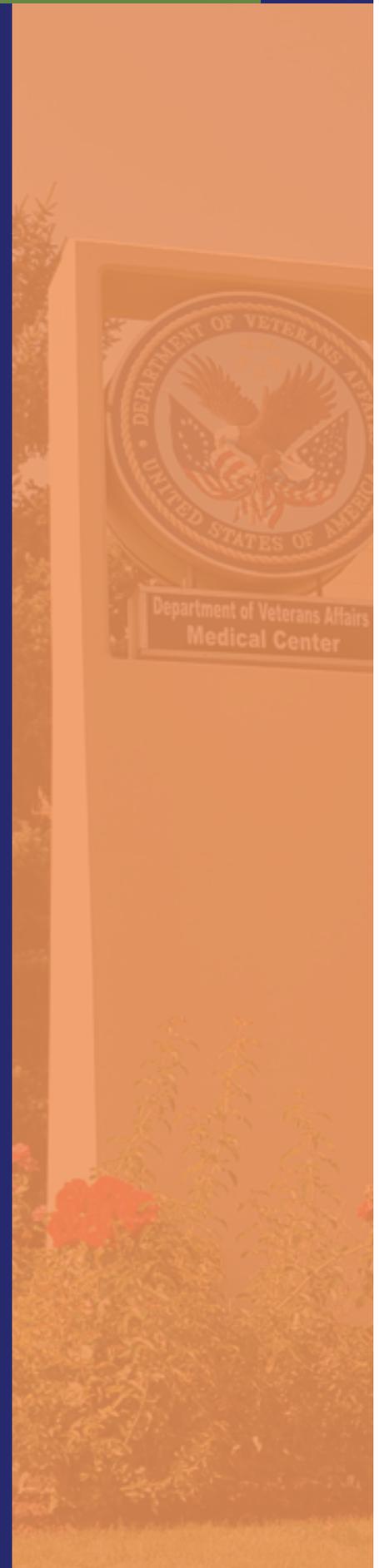
There will be much more information provided in the coming weeks on ACA as it relates to VA, to include a detailed communication plan. This will be distributed widely to employees and Veterans. Until then, I encourage you to learn all you can about this monumental change in our nation's care delivery system. This is not a time to worry about the impact on the VA, but to renew our commitment to providing exceptional service to Veterans each and every day. What we do here is unique and valuable – the more options Veterans have available, the more important it becomes to provide consistent reasons why we are their first choice.

Thank you for seeing the value in that and for what you do, each day, in service to our nation's heroes. Enjoy the remainder of your summer and get all you can out of the extra hours of sunshine. Be safe in your travels and everyday adventures.

Sincerely,



Lawrence H. Carroll
Network Director, VISN 20



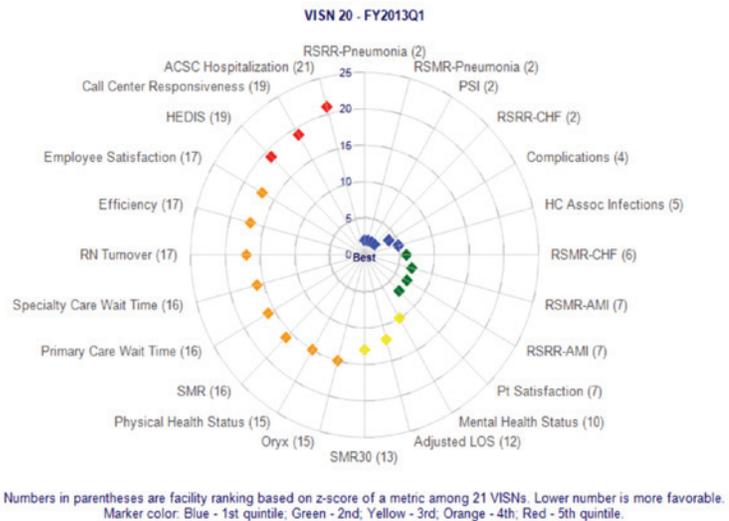
Message from the Chief Medical Officer

During a recent Network Director’s performance review, one of the many reports reviewed was SAIL – Strategic Analytics for Improvement and Learning Report (depicted below). At first glance, it seems complicated but, in reality, it is just one way of displaying a great deal of data on a single page.

I like to think of it as an archery target, with each measure being an arrow. The bull’s eye represents the best performance in the VA. Arrows hitting the outer ring of the target represent the worst performance. At this time, VISN 20 has a nice cluster of blue arrows very near the bull’s eye. This is something to take pride in as our sharpshooter marks represent very important measures. For example, our Patient Safety Program (PSI) is very strong, the second best in the nation. Further, our Veterans have very few complications and get very few hospital acquired infections (HC Assoc. Infections). We are respectively fourth and fifth in the nation for these two measures. Once discharged home, our Veterans experience very low mortality rates (RSMR) and seldom need to return to the hospital (RSRR).



Frank Marré
DO, MS, FAOCOPM
Chief Medical Officer



On the other hand, we have room for improvement. Three of our arrows (red) struck near the outer rim. One measure (ACSC Hospitalizations) represents how often our patients are admitted for things that ideally should be treated and controlled by their primary care team. A good example is an infection like pneumonia. Ideally, a patient with pneumonia should get better with good treatment and not need to go to the hospital. Another arrow missing the mark is a quality measure (HEDIS) largely associated with primary care and specialty care in an outpatient setting. For these measures, we are respectively 19th and 21st in the nation. This represents the worst and 3rd worst performance in the nation.

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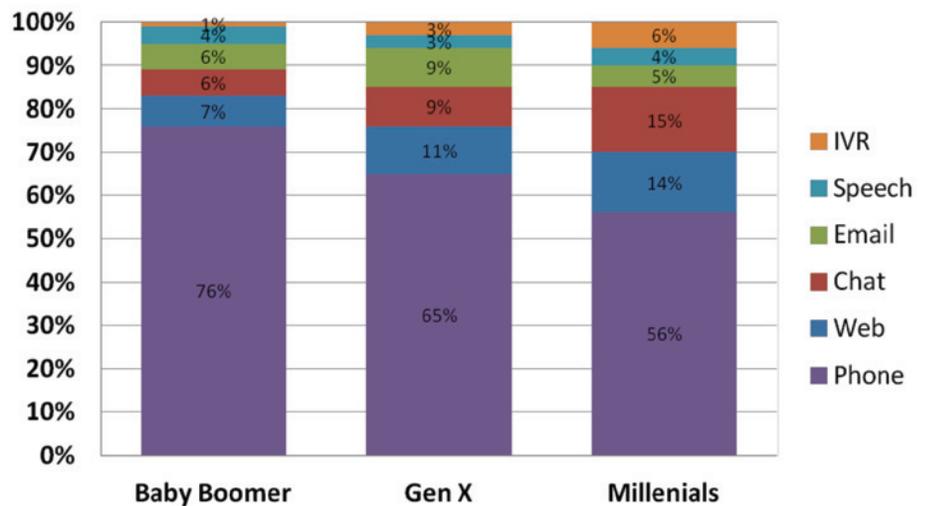
> Message from the Chief Medical Officer, continued >

The third measure missing the mark is our ability to answer the telephone (Call Center Responsiveness). On this, we were 19th, the 3rd worst VISN in the nation and at the time this measurement was taken, our telephone abandonment rate was 20%. This is no small problem. VISN 20 receives about 200,000 calls per month. A 20% abandonment rate means that roughly 40,000 Veterans hang up frustrated before their call is answered. As the graph below indicates, Baby Boomers (older adults), Generation X (middle aged adults) and Millenials (young adults) still prefer to use the telephone despite advances in technology. For example, 56% of Millenials, people 25 to 35 years old, pick up the telephone when they want to communicate with the VA.

Sheila Arie, former Puget Sound Chief of Outpatient Support and Health Plan Management, stepped forward to lead this major initiative. Other leaders also stepped forward and Dr. Robby Riddle, VISN 20 Primary Care Chief and Chief of Ambulatory Care at Spokane, is leading the clinical team. Denise Plowman, Boise’s Chief of Health Administration, is leading the contact representative environment team. Brian Mahlum, Region 1 Information Technology Specialist, is leading the technology team, and Cindy Fagerness-Reiter, Portland Telephone Center Program Assistant, is leading the training program team. The vision for the Contact Center reads, “When the Veteran needs the VA, their provider team is just a call away.”

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Communication Preferences by Generation



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> Message from the Chief Medical Officer, continued >

What will a successful call center look like? Telephone calls answered in 30 seconds. Although a contact representative might be located anywhere in the VISN, the Veteran experience will be similar to speaking to someone on their primary care team. How can this be? Call representatives will be highly trained with strong customer service skills, supported by a Knowledge Base that operates much like a Google search engine to help them address questions.

Even though just three facilities are leading the way, all are getting ready to join the "Contact Center Cloud," and adopting processes like the "Hunt Group." This allows the telephone to ring for three seconds at one person's phone on the primary care team. If the call is not answered, it will move to the second person and so on, "hunting" for someone who is available. In this way, the majority of the calls are answered within twelve seconds.

About 30% of calls are regarding medication refills and renewals. By making "medication refill and renewal" the first choice on the telephone tree, these inquiries can be directed to an automated system where refills can be quickly ordered. Another process is called the "Call Back" feature, which allows Veterans to choose a call back option as soon as an agent is available, avoiding long waits and losing their place in line.

Fully implementing a modern call center will require the adoption of standard processes and procedures, as well as hard work. The Pilot launched in early July; however, some unforeseen challenges necessitated a roll back, which is expected to last through the summer.

It remains our full intention to re-launch the call center, as the concept has proven successful in other health care systems, and will ultimately improve efficiencies and Veteran satisfaction.

By the end of the calendar year, all facilities should be connected to the VISN 20 Contact Center Cloud, and Veterans needing their primary care team will be "just a call away."



Frank Marré, DO, MS, FAOCOPM
Chief Medical Officer
VISN 20

Leadership Transitions



Michael J. Murphy was appointed Director of the VA Puget Sound HCS on May 19, 2013. Prior

to his arrival, he served as Director of the Fargo VA Health Care System. Mr. Murphy's diverse background and extensive experience also includes serving as the Director of the VAMC Iron Mountain. Prior to joining the VA, he enjoyed a distinguished leadership career, also in the field of health care, in the US Air Force.



John Patrick, Director of the PVAMC, was appointed Network Director for VISN 9, effective June 10,

2013. Brian Westfield, Director, VAMC Walla Walla, is serving as Acting Director until a permanent Director is selected.



Nancy Benton, VISN 20 Quality Management Officer, was appointed Nurse Executive at the VAMC Spokane,

effective July 15, 2013. Dr. Benton has been the QMO since July 2008. Recruitment for her replacement is currently underway.



Walt Dannenberg, Assistant Director, VA Puget Sound HCS, has been appointed Associate Director, VA Palo

Alto Health Care System, July 19th, 2013. Recruitment for a permanent replacement is underway. In the interim, Mr. Eric Leal, Chief Fiscal Officer, has been named Acting Assistant Director.

VISN 20 Organizational Health Board

VHA defines Organizational Health as a state of systemic well-being that nurtures success in chaotic and complex organizations. It is not one more thing to do: it's the way we do everything!

In this spirit, the VISN Office chartered a new committee in June, focused on the following:

- Employee Learning
- Workforce Planning and Development
- Safety and Wellness
- Customer Service
- Veteran-Centered Services
- Systems Redesign
- Organizational Development
- Ethics
- Surveys

Committee Co-Chairs Brian Westfield, Director, VAMC Walla Walla, and Tim McGuigan, VISN 20 HR Officer, emphasized the following at the group's first meeting: Healthy organizations are incubators for transformation. Studies show that healthy organizations out-perform others in customer service, quality, safety, ethics, efficiency, and employee satisfaction. Clearly there are benefits to fostering a healthy organization. More importantly, "it's the right thing to do!"

The establishment of a VISN 20 Organization Health Board will assist the VISN and medical centers in provoking thinking about healthy organizations, as well as providing practical tools.

Blind Rehabilitation Rural Outreach Clinic Via the MMU

Submitted by Irene L. Yang, OD, FAAO

The third Blind Rehab Rural Outreach Clinic using the Mobile Medical Unit (MMU) took place April 22 to 26 and served north Puget Sound Veterans in Whatcom County, WA. The week was split between clinics in Deming, hosted

by the Nooksack Indian Tribe, and in LaConner, hosted by the Swinomish Indian Tribal community. Once again, Puget Sound sends thanks to Elders and Tribal Veterans Representatives, Jovie Joven, Phil Dan, and Ray Mitchell, for their amazing grace and hospitality.

The mission for the visit was two-fold: to bring blind rehabilitation and low vision services to rural, visually-impaired Veterans and to outreach to Native American Veterans in north Puget Sound. The week was a huge success, with 40 Veterans served, 7 new enrollments, and over 20 receiving claims assistance.



Homeless Update

Mann-Granstaff (Spokane VAMC) Coordinates Funeral Services for Homeless Veterans

Continuing to honor our nation's heroes, even after they have passed on, is something in which Spokane's Homeless Program has taken a very active role. Staff work directly with the Washington Department of Veterans Affairs County Coroners, nursing homes, the sheriff's office and other community partners to identify the remains of homeless Veterans who have no family to take care of their burial arrangements.

If a Veteran is determined eligible, a service is scheduled and staff members represent the appropriate branch of service during the burial. Although staff are often the only people at the funeral, the Veteran receives a full ceremony with full military honors.

John Davis, Spokane's Homeless Program Manager recently stated, "I cannot tell you how good it feels to look up at the wall and see a person whom you knew only as a homeless Vet and on the stone, they are listed by name and rank along with, Loving Father, Brother, Son. You remember when you found the

fellow in a dumpster and helped him through rehab and he passed clean and sober and was able to reunite with his family at the end."

Staff recently worked with a Native American widow to place a new "Healing Circle" emblem on her husband's headstone, the first one in the county. They also spoke to all the homeless Veterans they work with about their plans if something should happen. If they choose, staff will help them fill out forms for preapproval for burial at the cemetery, and place the approval form in their records.

Recently, one of the program's formerly homeless Vets passed and his family called, inviting staff members who had worked with him to the service. Said John Davis; "Several staff attended and were overwhelmed by the acceptance of his family and how he had referred to VA staff as his other family. Two of his family were in uniform and had recently returned from OEF/OIF and thanked us for helping their uncle! What an honor it was to be there."

Spokane's Homeless Program Manager Receives National Honor



*Dr. Quinn Bastian,
Chief – Behavioral*

Health Services at the Mann-Grandstaff VA Medical Center in Spokane, presents John Davis, the VAMC's Health Care for Homeless Veterans Coordinator with the Outstanding Department of Veterans Staff Member for 2013 Award from the National Coalition for Homeless Veterans. Also present here, Spokane Housing Authority (nominating organization) and Medical Center Leadership.

John Davis was recently selected by the National Coalition of Homeless Veterans (NCHV) to receive the Outstanding Veterans Affairs Employee Annual Award for his tremendous work on behalf of homeless Veterans. The award was accepted on John's behalf by a colleague in late May at the 2013 National Coalition for Homeless Veterans Awards Annual Banquet at the Grand Hyatt Washington in Washington, D.C. Notes VISN 20's Homeless Coordinator, Eileen Devine, "I can say from personal experience in working with John that this is an honor he very much deserves and we are very fortunate to have him on our VISN 20 team." Congratulations, Mr. Davis!



PVAMC HUD-VASH Success



The HUD-VASH Program at the VAMC Portland, in tandem with dedicated community partners, has made HUD-VASH utilization a top priority in a very tangible and visible way. Since the program's inception in 2008, Portland has received 305 VASH vouchers. While a valued resource, these are restricted as they must be used only as rent assistance and are not allowable for other expenses related to securing a home; i.e., deposits, bus tickets, rental application fees and furnishings. Most VASH-eligible Veterans have little or no income and, for them, a \$25 application fee could be a barrier that results in prolonged homelessness. In order to use every voucher and be more competitive for future VASH allocations, the City of Portland, Multnomah County, Home Forward (Portland Housing Authority) and United Way each contributed \$10,000 in flexible dollars. JOIN, another homeless service provider in Portland, agreed to serve as a conduit for the funds. The result: Since October 2012, flexible funds have made it possible for 80 veterans to get into housing.

71 have "leased up" and 9 others are in the home stretch, having passed housing application and awaiting Home Forward inspection. The average cost per Veteran to assist in moving them to housing has been just \$300. To date, all 305 vouchers are leased up. This was truly community collaboration and a collaborative success at its finest.



Puget Sound Chief Social Worker Honored

Taylene Watson was recently recognized by the University of Washington School of Social Work (UWSSW) when she was given an award dedicated to "Lifetime Career Excellence in Social Work Student Training." After a long history of leadership at the VA, and on-going responsibility for directing UW's popular School of Social Work program, this recognition comes as no surprise.

Ms. Watson is a dedicated and skilled manager. Along with the significant responsibilities of leading Social Work Service at VA Puget Sound, she also spearheads the UWSSW's largest health care unit, with, on average, 18 to 25 students/year. In these roles, she has supported, encouraged and inspired her staff to develop the leadership and teaching skills required to become UWSSW Practicum Instructors (PIs). As a Clinical Associate Professor at the UWSSW, Taylene also co-teaches a course on working with Veterans and active duty military during spring quarter to outstanding reviews.

Additionally, Taylene has supervised 25 administration students and many other clinical students. She has repeatedly been nominated for Practicum Instructor of the Year and served as a valuable member and Chair of the Practicum Advisory Committee (PAC). The National Association of Social Work has also benefited from her leadership, as she has served as Past President of the Washington State Chapter, Board of Directors; the Nomination and Leadership Committee, the Professional Standards Committee, and represented the State at the Delegate Assembly to the National Chapter. Taylene was also recognized as Social Worker of the Year by the Washington State Chapter in 1999, the profession's highest honor in the State of Washington. Many sincere congratulations to Taylene on this latest achievement!

AO Academy

Push-ups were not required when the first VISN 20 AO Academy Boot Camp kicked off on May 13th. Instead, employees from every site worked together, focused on a common goal – improving their knowledge and skills while building a community.

AOs (Administrative Officers) play a crucial role in the delivery of patient-centered health care. The development of an advanced training program has been in

the making for several years in response to the need for better data management. Once the program was identified as a top priority in the VISN 2013 strategic plan, it was expanded to include broader learning needs and 9 core functions: Data Management, Fiscal/Budgeting, HR, Quality management, Facilities/Logistics, Communication, Contracting, Business Operations, Organizational Health/Wellness.

The first cohort was 20 participants, many of whom also served on the steering committee. They were nominated by facility Directors with the caveat that they would grow and sustain the Academy and serve as mentors for future participants. After completing boot camp, Heather Parks-Huitron (PVAMC) said, “The AO Academy provided an opportunity to meet and network with our counterparts. It empowered us to reach across services and throughout VISN 20, work together, and better the Veteran experience.”

The Academy will include quarterly virtual trainings for all AOs and a face-to-face boot camp at least once each Fiscal Year. The next session is scheduled for October 2013. Applications and additional information will be distributed later this summer. Please contact your Education Department for additional details.



VISN 20 Deputy Network Director, Michael Fisher, participates in the AO Academy

Fisher House Healing Garden Dedication

On Thursday June 13th, Phase II of the VA Puget Sound Fisher House, the Healing Garden Project, was dedicated. The Garden is the result of a partnership with the University of Washington School of Landscape and Architecture Design, Friends of VA Puget Sound Fisher House and the VA.

The Healing Garden project was undertaken in conjunction with the Design/Build program of the University of Washington Landscape Architecture Department, and beautifully fulfills the intended purpose: to soothe the souls and refresh the spirits of the military and Veteran families staying at Fisher House. The Fisher House is already a haven for families who stay there, and the desire to build a Healing Garden grew from wanting to extend that haven to the surrounding garden.

Phase I of the Healing Garden was installed in 2010. In the years since, it has been the site of everything from yoga classes to memorial services, providing a place where guests can find peace and respite surrounded by nature. In testament to this, a former guest recently sent the following:

“When I need peace and calm, when I need to be engulfed by a sense of warmth and love, I know to go to the Healing Garden and spend some time.”



(Featured L to R) Pat Norikane Logerwell, Secretary, Friends of VA Puget Sound Fisher House, VA Puget Sound Medical Center Director Mr. Michael J. Murphy, FACHE, Daniel Winterbottom, Professor, UW School of Landscape Architecture and Cecile Bagrow, Manager, VA Puget Sound Fisher House