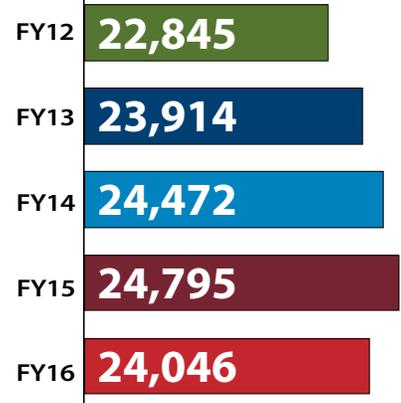




Women Veterans Treated in VISN 4



Nationally, women between the ages of 50 and 59 use VA services more than women in any other age group.

Dr. Desmarie DeCuir is VISN 4’s lead women Veterans program manager. As a nurse practitioner, she also serves as a women’s health primary care provider at VA Pittsburgh Healthcare System. Leadership at both the VISN and medical center levels constantly monitor patient satisfaction

survey results to assess how services can be improved.

Welcoming Our Women Veterans

Did you know that women are the fastest growing group within the Veteran population? Women have formally been a part of the United States Armed Forces since the inception of the Army Nurse Corps in 1901, but have informally served since the inception of our Nation’s military. In 1948, Congress made women a permanent part of the military service.

VA is working hard to understand who our women Veterans are, how their

military service affects their post-military lives, and how they can be better served based on these insights.

In fiscal year 2016, eight percent of the Veterans treated in VISN 4 were women (and we expect that number to continue to grow). According to a VA fact sheet, as of September 30, 2016, the population of women Veterans in Pennsylvania was just over 71,000; Delaware’s was nearly 9,000; and New Jersey’s was just over 33,000.

At each VA Medical Center nationwide, a Women Veterans Program Manager (WVPM) is designated to advise and advocate for women Veterans with program management at the local level. The WVPM can help coordinate all the services a woman may need, from primary care to specialized care for chronic conditions or reproductive health. VISN 4 maintains an updated list of WVPMs on the women Veterans’ webpage where you can also watch two videos about women Veterans who

(Continued on Page 3)

Dear Veterans, fellow employees, volunteers and friends of VISN 4:

Our VA Secretary, Dr. David Shulkin, has laid out his five priorities for strategic actions throughout the Department. In working to achieve these priorities, we will aim to provide Veterans safe, high-quality, personalized, and timely care wherever they receive the services they have earned and deserve. I'd just like to run through these very quickly, and how they might affect Veterans in VISN 4.

Greater choice for Veterans

Dr. Shulkin is committed to providing greater choice for Veterans. He believes that we must make bold changes so that Veterans will choose VA. However, we do still aim to provide a high-performing, integrated network of care by pairing the best of what is available in VA with the best of what is available in the private sector (or elsewhere in the federal government). VA wants to make it easier for Veterans to receive community care when VA isn't able to provide the care, or doesn't have the level of care that Veterans need.



Dr. Shulkin also wants VA to recommit to greater transparency by showing Veterans how VA care compares to the private sector and by simplifying the way VA measures wait times.

This spring, VA released a new, online access and quality tool. At www.accesstocare.va.gov, anyone can view wait times as well as quality and patient satisfaction data, which compares VA with national, regional and local community hospitals. The wait times and data available varies between facilities.

Additionally, VA uses the Strategic Analytics for Improvement and Learning (SAIL) to benchmark VA

medical centers, and measures areas such as death rates, complications, and patient satisfaction. A star-rating system ranks each medical center from 1 (lowest) to 5 (highest). While you can access more SAIL data online, I'm happy to report that four VISN 4 facilities currently have five stars, one has four, and we are working very hard with the other four to improve their ratings. None have a one-star rating, meaning they are below the community standard of care.

Modernize our systems

We are focused on modernizing our system to make sure that we have world-class facilities for our Veterans. This involves processes, infrastructure improvements, and electronic medical records, as well as modernizing our IT systems.



Focus resources more efficiently

Our goal is to be excellent in foundational services, such as our Million Veteran Program.



Improve timeliness of services

We want to decrease wait times and provide more same-day services. All VISN 4 facilities currently provide same-day mental health and primary care services.



Suicide prevention

This is our biggest clinical priority, and this is where we need help from ALL of our community members to make sure anybody in need knows we are here to help them. We are working with national experts to establish the best strategies



possible, including improving the ability to identify at-risk Veterans and intervene early.

We are training all of our staff to better identify those at risk and get them services. We are also using data analytics to identify Veterans at risk and reach out to them through our REACH VET program that started earlier this year. However, of 20 Veteran suicides each day, 14 involve Veterans who have not had contact with VA during the past year, if at all. To really impact Veteran suicide, we must involve our communities.

With these priorities guiding us, VISN 4 will continue to offer the best possible care and services available for Veterans. We owe it to Veterans and we owe it to this Nation.

Thank you for your support of VISN 4, and thank you for reading this e-zine.

Sincerely,

Michael D. Adelman, M.D.
Network Director

(Continued from Page 1)

had their lives changed by a women's health clinician. In VISN 4, the WVPMs vary in occupation (registered nurse, licensed clinical social worker, occupational therapist) and years of experience in this role (two to 15 years).

The nine VA medical centers and 75% of outpatient clinics in VISN 4 also have designated women's health providers in primary care who have received specialized training.

Seven VISN 4 facilities have onsite gynecological services. Of course, Veterans can also receive care in the community for these services as needed.

Telehealth services specifically available for women Veterans include spiritual care, gynecological care, counseling, military sexual trauma, lactation support, and medication counseling. A Veteran can contact

the local WVPM to learn of which programs are available.

Women Veterans can also receive mental health, multiple preventive health services—including mammography and Pap smears—and emergency care from VA. Additionally, VA can assist with maternity care for eligible Veterans as needed.

Top 10 Diagnoses for Women Veterans in VISN 4

- high blood pressure
- elevated cholesterol
- Post-Traumatic Stress Disorder
- esophageal reflux
- depression
- tobacco use disorder
- diabetes
- thyroid disorders
- bipolar disorder
- suicidal ideation

For more information, visit www.visn4.va.gov/services/women.



Women Veterans Call Center



Do you know your Veteran status? Do you have a Veteran ID card? Should you receive any benefits from VA, like the GI Bill? Do you know what health care benefits you have earned?

If you do not know the answer to even one of these questions, VA's Women Veterans Call Center (WVCC) is just for you.



1.855.VA.WOMEN
WOMEN VETERANS
CALL CENTER

The WVCC staff is trained to provide women Veterans, their families, and caregivers with information about VA services and resources. The call is free, and you can call as often as you like. You can also chat anonymously with someone by visiting www.womenshealth.va.gov and clicking on the "Chat with the Women Veterans Call Center" icon.

The Call Center is available Monday through Friday between 8 a.m. and 10 p.m. (Eastern Standard Time), and on Saturdays from 8 a.m. to 6:30 p.m.

All WVCC representatives are women, and many are Veterans themselves. In addition to linking women Veterans to information, the WVCC makes direct referrals to Women Veterans Program Managers.

For more information, visit www.va.gov/womenvet or www.womenshealth.va.gov



Care Close To (or at!) Home

Already recognized as a leader in the development and use of telemedicine, VA is expanding its telehealth services to meet the growing needs of its patient population.

“The future of health care is about meeting Veterans where they are,” Acting Under Secretary for Health Dr. Poonam Alaigh recently said. “Further expansion of care beyond the walls of the traditional medical center or clinic is part of our future and is the type of health care our Veterans deserve.”

Last year, home telehealth across VA nationally reduced hospital bed days of care by 58% and hospital admissions

by 32%; telemental health reduced mental health bed days of care by 35%.

Here are some of VISN 4’s Telehealth Success Stories:

Telederm Saves Veterans Miles

Teledermatology allows dermatologists to serve Veterans hundreds of miles away by viewing high quality images remotely. In the first half of fiscal year 2017, Teledermatology saved more than 300 Veterans in VISN 4 from traveling more than 100 miles for a dermatology appointment; more than 800 from traveling between 51 and 100 miles; and 2,157 from traveling less than 50 miles.

Tele-ICU

Veterans who need intensive care at the Wilkes-Barre VA Medical Center are safeguarded by an additional layer of safety and experience better outcomes thanks to a critical care team at the Cincinnati VA Medical Center.

In Wilkes-Barre VAMC’s Tele-ICU, intensivists and nurses monitor health information and communicate with Wilkes-Barre staff through real-time audio, visual, and electronic means.

“This backup service gives nurses and doctors a sense of comfort, knowing they will bolster patient care outside of regular administrative hours,” said

Registered Nurse Bill Burger. “The additional set of eyes is instrumental in giving us alternative treatment plans.

“On several occasions while working the evening shift, I have called upon them to assist in the management of complicated medical situations.”

Telehealth Defeats Weather

In March 2017, Winter Storm Stella created travel and communications challenges that threatened to jeopardize home monitoring for patients at both the Lebanon and Wilkes-Barre VA Medical Centers.

Thanks to modern telehealth technology, Lebanon VAMC care coordinators, who are registered nurses, were able to provide ongoing monitoring and care to more than a thousand Veterans from both medical centers – all from the comfort and safety of their homes.

The Impact of Telehealth on Mental Health Care

At the Corporal Michael J. Crescenz VA Medical Center in Philadelphia, some Veterans benefit a great deal from Clinical Video Telehealth counseling sessions, for a variety of reasons.

“I have to travel from Delaware to Philadelphia, and having virtual access to my medical team saves me loads of time and money,” said one Veteran. “The systems are easy to use. I believe it is equally effective to being physically present. The experience is extremely personal. I don’t feel like a number. I get to bring her into my personal space. The environment is comfortable and safe.”

Following a telehealth session, another Veteran shared: “It didn’t feel clinical. I felt less guarded and more open to say my feelings. Sometimes, when sitting with someone face-to-face in

a room, it can feel, um, interrogating, and less like talking with someone listening to help you.”

Additionally, following a February snowstorm, Dr. Marta MacDougall, a psychologist, was able to keep appointments with Veterans despite not being able to travel in hazardous conditions.

All of these timely, uninterrupted episodes of care are important examples of achieving VA’s mission of caring for those “who shall have borne the battle,” and for their families and their survivors.



VISN 4 offers three types of Telehealth technologies:

- **Store and Forward Telehealth** is the acquisition and storage of clinical information such as data, images, sound, and video.
- **Home Telehealth** makes it possible for clinicians to monitor patients in their homes using telephone lines and mobile phones.
- **Clinical Video Telehealth** connects Veterans with distant providers in real time using video conferencing.

Telehealth enables more accessible and convenient health care for Veterans. It reduces the time Veterans need to spend in the hospital, and increases access to services without requiring long drives for patients.

View a brief video and learn more about VISN 4’s Telehealth program at www.visn4.va.gov/services/telehealth.asp.

“The future of health care is about meeting Veterans where they are.”

~ Dr. Poonam Alaigh, Acting Under Secretary for Health



AROUND the NETWORK

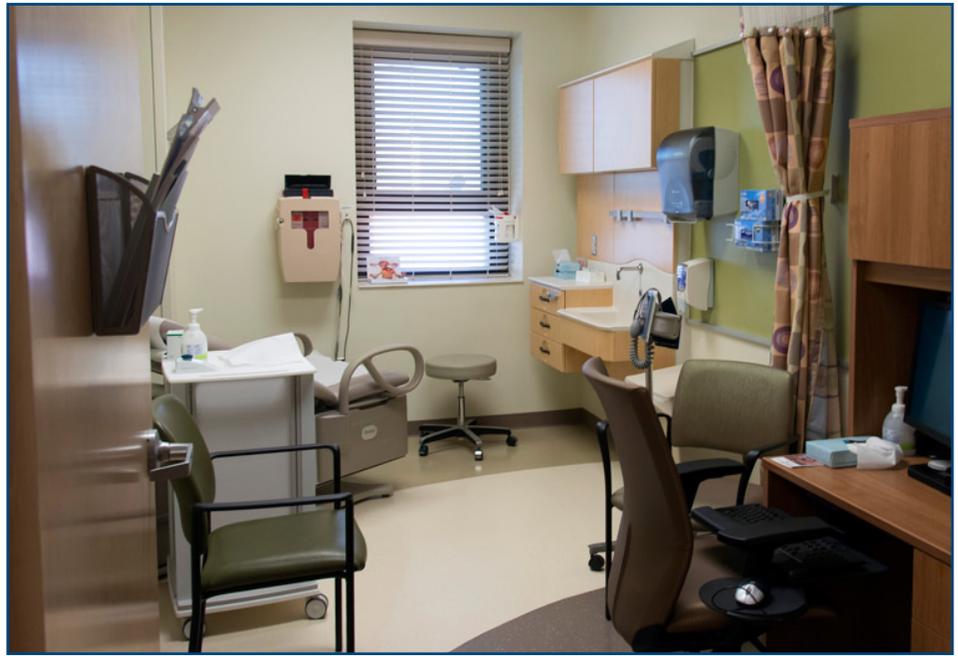
New Women's Health Center in Philadelphia

Providing enhanced services for women

On May 5, 2017 the Corporal Michael J. Crescenzo VA Medical Center held a ribbon-cutting ceremony and health information fair at their new Women's Health Center.

The renovated space provides enhanced services for women Veterans and offers an increased level of dignity, privacy and security, with a separate private entrance and dedicated waiting area, including a child's play area.

With seven exam rooms, including a procedure room, and multi-functional spaces, there is more flexibility and the opportunity to offer educational events and a quarterly movie night for women Veterans to gather in a relaxed setting.



Recognizing Vietnam Veterans

March 29 designated as National Vietnam War Veterans Day

In April, U.S. Senator Pat Toomey visited 23 Vietnam Veterans at the Wilkes-Barre VA Medical Center to thank them for their service and present them with Vietnam War 50th Anniversary Commemorative pins.

Senator Toomey co-sponsored The Vietnam War Veterans Recognition Act, which was signed by President Donald Trump in March and permanently designates March 29 as National Vietnam War Veterans Day. On that date in 1973, the last American combat troops were ordered out of Vietnam.

VA is one of more than 9,000 organizations across the country serving as Commemorative Partners to honor our Nation's 7 million living

Vietnam Veterans. The Vietnam War Commemoration recognizes all 9 million American men and women who served on active duty in the U.S. Armed Forces from Nov. 1, 1955 to May 15, 1975, making no distinction among Veterans who served in-country, in-theater, or were stationed elsewhere during those 20 years. All answered the call of duty.

Wilkes-Barre VA Medical Center Director Russell Lloyd and Senator Pat Toomey came together to honor the service and sacrifice of those who served in the Vietnam War.



VA Mourns Loss of Organ Transplant Pioneer Dr. Thomas E. Starzl

Pioneer of many facets of transplantation

Often regarded as the “father of transplantation,” Dr. Thomas E. Starzl is credited with performing the first successful liver transplant. As a transplant surgeon and research scientist for more than 50 years, he greatly advanced the science of organ transplantation. In fact, every organ transplant performed by surgeons within VA or any health care system relies, to an extent, on methods pioneered and developed by Dr. Starzl.

Dr. Starzl, who died March 4 at age 90, was a Veteran of the U.S. Navy. He began his VA career in the 1950s as a resident surgeon in the Chicago VA Medical Center. He then served at the Denver VA Medical Center, and retired from VISN 4’s VA Pittsburgh Healthcare System (VAPHS) in 1991.

Dr. Starzl pioneered many aspects of transplantation, including immunosuppressive drug development, organ preservation,

tissue matching, and innovative transplant surgical procedures. He developed the organ-specific, multi-disciplinary team approach to organ transplantation. Surgeons and physicians from around the world traveled to learn from and practice under Dr. Starzl, including VA Secretary Dr. David Shulkin.



Dr. Starzl trained and inspired a generation of transplant professionals, especially since he never lost sight of the people his work affected: his patients. He kept in touch with many patients long after he treated them. He remembered them, their human stories, and their medical histories.

When he lost patients, it affected him deeply and inspired him to learn more and fight harder.

Dr. Starzl’s legacy lives on, through his wife, son, grandchild, and the thousands of health care providers that he taught and inspired, including many throughout VAPHS and VISN 4.

For Convenience and Peace of Mind Closer to Home

Making access to health care easier for Veterans

To make access to health care easier and closer to home, the Veterans Health Administration utilizes more than 1,200 outpatient clinics across the country. These clinics provide the most common outpatient services, including health and wellness visits, without the hassle of visiting a larger medical center. The 44 outpatient clinics in VISN 4 continually expand care and services, and, when necessary, move or remodel to better serve Veterans.

Early this year, VISN 4 celebrated the opening of the relocated and expanded Cumberland County VA Outpatient Clinic in Vineland, New Jersey. U.S. Representative Frank LoBiondo participated in the ceremony. The new, larger clinic allows VA to serve more Veterans. It has improved waiting areas, more exam rooms, and additional space for group clinics, support groups, and expanded telehealth services.

Last fall, Erie VA Medical Center unveiled a newly renovated Warren County VA Outpatient Clinic. The renovation added 2,000 square feet to the existing clinic and included a new women’s health suite to assure privacy, a larger group room to increase capacity for telehealth groups, a larger waiting and reception area to improve patient privacy, additional exam rooms, an area to accommodate the expansion of specialty care services, and additional handicapped parking for easier access.

This summer, VA Pittsburgh Healthcare System’s Beaver County Outpatient Clinic will move from its current location in Monaca three miles away to a new location in Rochester, Pennsylvania. The relocated clinic is larger, has ample parking, and is on the public bus route.

An updated clinic exam room in the Warren County VA Outpatient Clinic.



Lebanon VAMC Physician Recognized With Prestigious, National Award

Scott T. Shreve, D.O. recently received the 2016 Mark Wolcott Award for Excellence in Clinical Leadership.

Dr. Shreve serves as both the national director of VA’s hospice and palliative care program and the program leader of the 17-bed inpatient hospice and palliative care unit at the Lebanon VA Medical Center.

The Wolcott Award is named after Dr. Mark Wolcott, who dedicated more than 30 years of his life to serve and improve health care for Veterans. The award was established in 1996 with two categories. The excellence in clinical care leadership category recognizes a health care practitioner who has demonstrated excellence through exceptional support and direction of patient care providers, including support of innovations that enhance the quality of direct patient care delivery.



Dr. Richard Allman, VA chief consultant for geriatrics and extended care (left), and Dr. Koji Nishimura, VA acting deputy undersecretary for patient care services (right), present Dr. Scott T. Shreve (center) with the 2016 Mark Wolcott Award for Excellence in Clinical Leadership in a ceremony held at the Lebanon VA Medical Center in April.

“This award is given only once a year to the top clinician and top leader in clinical care for the entire VA,” said Dr. Koji Nishimura, VA’s acting deputy undersecretary for patient care services. “The award recognizes a lifetime of services, not just one year.”

The award recognizes exceptional service in providing outstanding clinical care to our Nation’s Veterans and this ceremony marked the

first time VA officials traveled to a physician’s home facility to present the award.

“We have really seen a transformation in care for seriously ill Veterans nationwide because of Scott’s leadership,” said Dr. Richard Allman, VA’s chief consultant for geriatrics and extended care services.

“The mission of VA’s hospice and

palliative care program is to honor Veterans’ preferences,” said Dr. Shreve. “Our job is to find out what is important to the Veteran and their family and help them accomplish that – whatever it takes.”

“The care of Veterans at end of life is so important,” he continued. “The demographics of the Veteran population require us to be experts at it.”



VA

**U.S. Department
of Veterans Affairs**

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We’d Like to Hear from You

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