Mending Hearts, 
One Pillow at a Time

Suicide Prevention: 
Together, We Can Save 
Veteran Lives

WWII Army Veteran 
Celebrates 103 Years of Life
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After the preliminary Office of Inspector General (OIG) report was released in April, the medical center staff undertook a number of immediate changes and improvements to resolve logistics and supply deficiencies noted by the OIG including:

- Establishing an effective inventory management process by reactivating the VA's Generic Inventory Package (GIP);
- Launching a new process to monitor critical areas with Environment of Care rounds conducted twice daily to identify low medical supply stock, and to ensure cleanliness of supply areas;
- Creating a new supply request process, activating a dedicated telephone request line and email address to receive and manage emergent supply requests;
- Procuring a new Sterile Processing Service (SPS) temporary trailer space to ensure proper sterilization, decontamination and processing of medical equipment. The new trailers offer staff expanded and better-quality workspace and modernized equipment;
- Procurement of more than 2,700 medical instruments to ensure Surgical Service has replacement and spare instruments to safely perform procedures, increase operating room proficiency and improve the number of procedures that start on time;
- Initiating an aggressive recruitment effort to fill critical vacancies in Nursing, Logistics, Sterile Processing, Prosthetics, Mental Health and Police Services;
- Implementing an Environmental Management Service support contract to supplement cleaning the facility;
- Implementing a customer service internal communication campaign, “Putting Veterans First”, to offer helpful points of engagement to increase customer service and improve Veterans' perception of VA care;
- Coordinating with community partners like the American Legion to host a Veterans Town Hall, as well as establishing regular employee town halls, monthly employee recognition ceremonies and one-on-one open-door sessions to encourage open communication and information sharing opportunities.

In May of 2017, Department of Veterans Affairs Secretary, Dr. David Shulkin, committed VAs nationwide to upholding the “Five Priorities”:

1. Offer Veterans greater choice by building a high performing integrated network of care and redesigning the rules around the choice program.
2. Modernize VA systems to enhance electronic medical record inter-operability and modernize Information Technology.
3. Focus resources to ensure efficient strengthening of foundational services within the Department and around community coordination with the Department of Defense and other stakeholders.
4. Improve Timeliness of Services by expanding access to care to decrease wait times, decisions on appeals and performance on disability claims.
5. Eliminating suicide among Veterans by expanding mental health care to Veterans with other than honorable discharge who require emergent mental health care as well as expanding community collaboration to broaden awareness of suicide prevention programs and opportunities available to Veterans.

The Washington DC VA Medical Center leadership team has been quite busy working on initiatives and establishing processes to align with Secretary Shulkin’s priorities by expanding access and offering weekend clinic hours; opening the new Transition and Care Management Center to offer enrollment assistance, care coordination and community resources to Veterans; as well as the Office of Public Affairs and the Suicide Prevention team launched a major Suicide Awareness Campaign that includes on-site issuance of gun locks, information about peer-support groups, therapy and marketing to bring awareness to the National Crisis Line.
Research Corner

The Washington DC Veterans Affairs Medical Center’s Research and Development is an interdisciplinary endeavor that incorporates laboratory translational, clinical, and epidemiological studies to address a number of medical conditions from HIV/AIDS, TB, heart disease, stroke, and rehabilitation medicine to TBI, PTSD, alcoholism, substance abuse and mental health, age-related illnesses. Several notable studies were published recently:

- Characteristics and Incidence of Chronic Illness in Community-Dwelling Predominantly Male U.S. Veteran Centenarians was recently published in the “Journal of American Geriatrics Society”. This is the largest study to-date with predominantly male Veteran centenarians and it found that 85 percent of all the Veteran centenarians had no incidence of major chronic conditions between the ages of 80 and 99 years of age. The data demonstrate that Veteran centenarians tend to have a better health profile and their incidence of having one or more chronic illness ranges between 0.1-12.8 percent, which is lower than in the general population, underscoring the importance of further studying factors contributing to health and longevity in men and in Veterans.

- The study shows that melamine, widely used in plastic dishware, can act on the calcium sensing receptor to regulate acute kidney injury and contributes to kidney stone formation.

- A clinical trial from the Department of Veterans Affairs was recently published in the Journal of the American Medical Association (JAMA). The Washington DC Veterans Affairs Medical Center was one of 35 participating study sites with John T. Little, M.D. of the Mental Health Service serving as the Local Site Investigator. The study looked at 1,522 Veterans with Major Depressive Disorder, and found that the addition of an atypical antipsychotic medication to an antidepressant regimen showed greater improvement in symptoms of depression than switching to another antidepressant among patients who were not responding to their current antidepressant treatment.

- The study, Executive Functioning in TBI from Rehabilitation to Social Reintegration: COMPASS (Community Participation through self-efficacy skills Development), described in the Military Medical Research journal, seeks to determine whether Veterans who served in Iraq or Afghanistan and have executive dysfunction due to traumatic brain injury, will benefit from a novel goal self-management intervention. The study is funded by a grant from the VA ORD R&D Program.

Program. The name changed last year (2016) but its mission, to provide hands-on care management services to address physical, emotional, and social concerns associated with transitioning to civilian life, remains unchanged.

Co-located within the new TCM Center are a number of VA and community partner services including: Release of Information, MyHealtheVet, Eligibility Office, The Veterans Pro Bono Legal Clinic, Financial Counseling Clinic, Veterans Benefits Administration/Vocational Rehabilitation & Education, Caregiver Program for Post 9/11 Veterans and Veteran Service Organization Claim Assistance. Please note some community and partner services are only available on a rotating basis. Please call the TCM for more information, (202)745-8000, extension 5-5560 or 5-5557.
Vein Illumination

Helping Ease Anxiety and Failed Venipunctures

If you’ve ever felt like a pincushion while giving blood or getting an IV started, technology now being used at the Washington DC Veterans Affairs Medical Center will be a welcome relief.

The vein illumination system is designed to help health care professionals locate the best vein for venipuncture and demonstrates the hospital’s commitment to improving patients’ experiences.

Simply pointing the lightweight, portable device at the skin and clicking to display the peripheral veins beneath the skin is improving the “first stick” success and reducing patients’ pain and anxiety.

Venipuncture is the most common invasive medical procedure worldwide with an estimated 2.7 million procedures conducted every day in the United States alone. Studies reveal that up to one third of attempts to access a vein fail the first time, creating unnecessary patient pain and stress.

Even the most experienced health care professionals can have difficulty accessing veins safely and quickly the first time. Before vein illumination, patients who are dehydrated, obese, have low body temperature, or whose veins roll often experienced multiple unsuccessful punctures.

The Infusion Nurses Society now recommends the use of vein visualization technology in their Standards of Practice.

The INS Standards state, “Vascular visualization technology is employed to increase the success with peripheral cannulation and decrease the need for central vascular access device.”

The health care professionals of the Washington DC Veterans Affairs Medical Center welcome the new technology which is making their jobs a little easier and making their patients a little more comfortable.
CULTURAL TRANSFORMATION

Meet the Newly Appointed Acting Director

April 13, VA Secretary, David J. Shulkin, M.D., appointed Col. (retired) Lawrence B. Connell Acting Medical Center Director at the Washington DC VA Medical Center. Mr. Connell is focused on providing staff the resources needed to ensure Veterans receive safe, quality health care.

“As the acting director of the Washington DC VA Medical Center, my top priority is the safety and well-being of the Veterans we are privileged to serve. My focus has been, and continues to be, on establishing processes that ensure employees and leaders have the appropriate resources and staffing to continue to deliver high quality care while improving the Veteran experience,” said Mr. Connell.

Since arriving at the medical center, he has instituted a new internal and external stakeholders communication plan complete with employee, Veteran and stakeholder town hall meetings to establish and maintain transparent communication. Connell says, “The collaboration of our Veterans, employees, Veteran Service Organizations, members of Congress, and our community partners has been, and will always be, instrumental to our progress. Their insights are invaluable and are helping to chart our path moving forward.”

Prior to being appointed acting medical center director, Mr. Connell served as a senior advisor to the Secretary of Veterans Affairs. He graduated from the University of Rhode Island with a Bachelor of Science in Communications and earned a Master’s degree from Troy State University in International Relations.

He entered the Army in August of 1985, as a Distinguished Military Graduate and received a Regular Army appointment in Army Aviation. He served in the military all over the world including: Germany, Alabama, Washington, Hawaii and Texas.

VA Expands Emergency Mental Health Care to Former Service Members With Other-Than-Honorable Discharges

Department of Veterans Affairs has finalized plans that lay the framework for providing emergency mental health coverage to former service members with other-than-honorable (OTH) administrative discharges. This is the first time a VA Secretary has implemented an initiative specifically focused on this group of former service members who are in mental health distress.

“Suicide prevention is my top clinical priority,” said Secretary Shulkin, also a physician. “We want these former service members to know there is someplace they can turn if they are facing a mental health emergency — whether it means urgent care at a VA emergency department, a Vet Center or through the Veterans Crisis Line.”

Effective July 5, 2017, all VA Health Administration (VHA) medical centers are prepared to offer emergency stabilization care for former service members who present at the facility with an emergent mental health need. Under this initiative, former service members with an OTH administrative discharge may receive care for their mental health emergency for an initial period of up to 90 days, which can include inpatient, residential or outpatient care.

The dedicated staff of the Women’s Health Clinic provides comprehensive and specialty care to meet the unique needs of women Veterans. The team promotes the welfare and dignity of the fastest growing population of Veterans by ensuring timely and equitable access to top quality general health care, mental health, and specialty care.

The Washington DC VA Medical Center has implemented a number of service improvements for women including the hiring of two maternity coordinators and a social worker who helps expectant mothers with obstetrics care as well as a full-time gynecologist and an in-house mammography suite for 2D and 3D mammograms with same-day results.

For more information, call the Women’s Health Clinic, 202-745-8582.
Since 2001, the age-adjusted rate of suicide among U.S. Veteran females has increased by 85.2%.

Suicide Prevention: Together, We Can Save Veteran Lives

I don’t want folks to know I’m asking for help.”
“Don’t want folks to know I’m asking for help.”
“I didn’t contact you sooner ‘cause I didn’t want it in my record.”

She hears Veterans say comments like this every day. And for the Washington DC Veterans Affairs Medical Center’s Suicide Prevention Program Coordinator, Valerie Jones-Rojas, it’s a fact she wishes she could change.

There remains such a stigma in our society attached to mental illness, Jones-Rojas explains. “I wish Veterans could know there is nothing to be ashamed of, it’s a part of life. Veterans who have diabetes and seek medical care are not marginalized unlike mental health consumers. We all need a little help sometimes.”

Jones-Rojas and her team are committed to helping Veterans in crisis and unfortunately they are very busy. According to the latest comprehensive analysis recently released by VA, an average of 20 Veterans commit suicide each day.

The medical center’s Suicide Prevention Program Office has a comprehensive plan that includes: handling referrals from the Crisis Line; accessing high risk Veterans, keeping close contact with Veterans and educating staff to recognize warning signs of suicide. They also have an open-door policy to their office on the third floor and a lot of Veterans stop by to chat.

“What to do if you recognize warning signs in a friend or family member?”

• Probe a little bit. Is the person experiencing psychological or mental pain? Ask how you can help
• Talk openly to the person; don’t be afraid to ask, “Are you thinking about taking your life?” Asking does not put the thought in a person’s mind, but rather it opens an important dialogue
• If they say yes, do NOT leave them alone. Explain that you will get help
• Remain calm, be direct and non-judgmental. Call 911
• Ask the person how they plan on taking their life
• Never promise to keep a person’s thoughts, plans or intent of suicide a secret
• Remember, they have opened up because they want help

Warning signs associated with suicide:
• Talking or writing about suicide or death
• Displaying a sense of hopelessness and worthlessness
• Reckless behavior, like driving too fast
• Giving away possessions
• Increased use of drugs or alcohol
• Preparatory behavior, like stockpiling medications
• Buying a rope and fashioning a noose

Help them advocate for themselves,” Jones-Rojas said.

Some contributing factors related to Veteran suicide include: deployment stress, traumatic events, body image disturbance, transitioning to civilian life, social status change, loss of physical function and changes in the world view. Jones-Rojas says some Veterans may display warning signs of contemplating suicide.

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Eagle Eye Customer Service Program

A customer service program is part of the Putting Veterans First initiative to focus on improving Veterans' total health care experience. The program deployed at the DC VA Medical Center to assess, evaluate, and improve and ensure excellent employee engagement and communication with colleagues, Veterans, and visitors.

Eagle Eye Customer Service Hotline

If you have customer service feedback for the medical center director, you are inside the medical center, pick up any telephone and dial extension 5-7474 to leave a voice message. These are also orange telephones located throughout the medical center that allow direct telephone communication.

Youth Volunteers: A Summer of Service

You may have noticed them at your last visit to the Washington DC VA Medical Center, the fresh-faced youth volunteers dressed in their bright red vests helping Veterans and working alongside staff throughout the hospital. There were 80 of them, ages 14-17, who raised $6,200 through working alongside staff through the departments of the medical center including, administrative, clerical, research and customer service. The medical center’s Summer Youth Volunteer Program is a six-week commitment. At the end of the program, August 4, 2017, the youth volunteers will have volunteered, collectively, 7,200 hours.

The program provides a positive learning experience and professional growth for the youth volunteers who come from near and far to participate in the program. This year, 14 youth volunteers who worked were from the Howard University College of Pharmacy. To volunteer with or make a donation to the Washington DC VA Medical Center, call Voluntary Service, 202-745-8320.

Mending Hearts, One Pillow at a Time

Veterans who have undergone cardiac surgery at the Washington DC Veterans Affairs Medical Center may now have an easier time recovering and adjusting to life after surgery thanks to the efforts of Chief of Cardiothoracic Surgery and Director of the Heart Center, Dr. Gregory Trachiotis.

In the 1990’s when the young doctor was in training at the George Washington University Hospital, he encountered a volunteer organization, the Mended Heart Program (MHP). Volunteers trained by (MHP) visit hospitalized heart patients across the nation to provide them a hand-made, heart-shaped pillow, education and someone to talk to who has been through heart surgery. The doctor was always pleased to see how well-received the visits and pillows were.

“I was familiar with MHP and I knew it would be good for our Veterans,” said Dr. Trachiotis.

The volunteers listen and share their experiences about what they faced including: lifestyle changes, depression, recovery, treatments as well as address issues that go beyond the walls of the medical center. Most of all, MHP volunteers offer tangible proof and hope that life will be good again.

The doctor explains that with cardiac surgery often comes major stress, fears and personal questions about recovery and post-surgical activities. “With peer-to-peer support, Veterans are often more comfortable. It’s always best to hear from someone who has personally been in that position.”

Dr. Trachiotis, who also serves as professor of surgery, and also Chief, Cardiothoracic surgery at The George Washington University Hospital, explains when it comes to heart surgery, much has changed in recent years. Patients are recovering quicker and returning to work sooner and often leading more active lives than before having an operation for their heart disease. Veterans may remember their grandfather’s or father’s heart disease and have unrealistic or outdated expectations about their own recovery.

Having a peer who is willing to share his or her experience is becoming an invaluable part of the Veteran’s recovery.

The MHP has only been at the medical center for a few months, but already Veterans are benefiting from the program. They say they like that the pillows are sturdy enough to use as a brace against the surgical incision when they have to cough or sneeze or stand-up. After discharge, the pillow serves as a permanent reminder that they are not alone and that there is hope for a rich life after cardiac surgery.

MHP volunteers are providing a vital service that is much needed in a busy place like the Washington DC Veterans Affairs Heart Center. The Heart Center performs about 120-140 procedures a year, from beating heart cardiac bypass to complex valve surgeries, including transcatheter valve therapy (TVT), and transcatheter thoracic endovascular repair (TEVAR). The survival rates and outcomes measure compare favorably or exceed other non-VA programs in the mid-Atlantic region.
Connecting With The Community

Local volunteers and community partners are a crucial part of our health care team. By contributing their time, talent, funds or goods, they make it possible for us to continue to offer important Veteran programming and services. Also, the efforts of employees who volunteer their time, allow us to broaden community outreach and engagement events.

Crafts and Camaraderie for Community Living Center Residents
From gardening to learning, serving coffee, and delivering care packages to fun crafts & games, the Deloitte volunteers’ efforts were greatly appreciated by Veterans and staff members throughout the medical center.

Gift Baskets for Formerly Homeless Veterans
Four hundred Veterans in the HUD-VASH program were treated to a fun afternoon with barbeque lunch and fellowship. Each walked away with a much-needed basket of food, cleaning supplies and personal care items thanks to the generosity of: Coalition to Salute America’s Heroes, Feed the Children, Amazon Fresh, America’s Adopt a Soldier, Knights of Columbus, Omega Psi Phi and others.

Veterans Consortium Pro Bono
* A non-profit organization, Veterans Consortium Pro Bono, owns Boise’s new Transition and Care Management Center. * A Consortium is available to help low-income Veterans and family members with issues concerning housing, landfills, government benefits, discharge upgrades and more. For more information contact the TCM, 202-745-8000, ext. 55560.

Fisher House Family Members Summer BBQ
Veterans and family members celebrated the start of summer with a bbq atop the medical center’s Fisher House. Volunteers from Google served the annual event and music was provided by the all-Veteran band. * 2 Bell Harrison Project. Fisher House provides a home away from home for families whose Veterans are hospitalized or undergoing treatment.

Welcome Home
Recently returned combat-OEF/OIF/OND Veterans, active duty service members, as well as Veterans of all eras were honored with a Welcome Home Outreach Event at Walter Reed National Military Medical Center. * A one-stop venue brought together VA and community partners as we VA health care and benefits, employment and education opportunities, housing counseling and community resources. * It was the second year the medical center had partnered with VFW/AMVETS.

The Gift of Song: Country Artist Craig Campbell
On his way to perform in the fireworks show in New York City on the 4th of July, country music recording artist Craig Campbell stopped in to visit Veterans at the medical center. * A long-time supporter of active duty members and Veterans, brought along his acoustic guitar and helped lift the spirits of hospitalized Veterans.

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WWII Army Veteran Celebrates 103 Years of Life

Ms. Anne Reeside celebrated her 103rd Birthday with her favorite things: family, friends, chicken wings, and cake at the Washington DC Veterans Affairs Medical Center’s Community Living Center (CLC).

Ms. Reeside was born during a turbulent time in the world, July 22, 1914, just six days before the official start of WWI. Her military life began in a similar fashion, just after the attack on Pearl Harbor Dec. 7, 1941, which swept America into World War II.

“The attack on Pearl Harbor is what motivated me to answer the call to serve my country,” Ms. Reeside recalls. “I wanted to help the war effort and keep our country safe.”

Ms. Reeside’s first duty station was at Camp Crowder, Missouri, where she nursed soldiers who were getting ready to go overseas and tended to German prisoners-of-war, who were also housed at the base.

Taking care of others comes naturally to Ms. Reeside, she is still known for checking on her fellow residents in the CLC every day.

“The secret to living this long is to stay busy and help others as much as you can,” said Ms. Reeside. “As long as there is something that needs to be done, or someone who needs help, I am going to keep on moving forward.”

Ms. Reeside has been a resident of the Washington DC Veterans Affairs Medical Center since April 2013.

“I love being busy,” Ms. Reeside said. “I love baseball, animals, especially dogs, shopping, helping others and being around all my friends in the CLC.”
Bringing Health Care Closer to Home: Community-Based Outpatient Clinics

Washington DC VA Medical Center operates four Community-Based Outpatient Clinics (CBOCs) and a Community Resource and Referral Center in DC and the surrounding areas. The CBOCs offer Veterans the opportunity to receive quality health care closer to where they live. If you have any questions, you may call the clinic nearest to you directly or to make an appointment you may call the Patient Service Center, 202-745-8000, option 2.

Community Resource and Referral Center (CRRC) 202-636-7660
1500 Franklin Street, NE
Washington, DC 20018

Fort Belvoir Community Clinic 571-231-2408
9300 DeWitt Loop
Fort Belvoir, VA 22060

Southern MD VA Outpatient Clinic 301-884-7102
29431 Charlotte Hall Road
Charlotte Hall, MD 20622

Southeast Community Clinic 202-745-8685
820 Chesapeake Street, SE
Washington, DC 20032

Southern Prince George’s County Community Clinic 301-423-3700
5801 Allentown Road
Camp Springs, MD 20746

My HealtheVet is a web-based application designed specifically for Veterans and their families. It provides Veterans access to personal, secure, convenient, and trusted health information that improves their health and empowers them as health care consumers.

Services available on My HealtheVet:
- Managing Appointments
- Ordering prescription refills online
- Establishing a personal health journal
- Wellness reminders

Visit www.myhealth.va.gov for more information.

Three Ways to Order Your Prescription Refills and Have Your Meds Delivered by Mail.

1. Call the Pharmacy Refill Line at: 202-745-4046
2. Go Online to My HealtheVet at: www.myhealth.va.gov
3. Drop Your Refill slips in the Box on the Pharmacy Counter