CAVHCS’ Annual Memorial Day Observance

Central Alabama Veterans Health Care System (CAVHCS) conducted its annual Memorial Day observance Monday, May 28, at the Montgomery VA Medical Center, complete with patriotic music from the Capitol Sounds Band, a wreath laying ceremony and of course Taps.

“When we think of Memorial Day, most often we are mindful of those who have given their lives in defense of our great nation,” said CAVHCS Interim Director James R. Talton. “As people and as Americans, every day we are called to, and commit ourselves to, many things. But the call to arms is different from every other calling on earth.

“Commitment to one’s occupation, no matter how noble the cause, is tangibly rewarded every pay day. Commitment to one’s family brings its own sense of satisfaction when we see our wives and our husbands, our children and other relatives, happy, well adjusted, needs met, contributing to the world around them. But, the call to arms is different from every other call. Because the only promise inherent in the call to arms, is the promise of the opportunity to be maimed or killed for a cause whose aim is only an ideal and whose outcome is yet to be determined.

“People will work for money. People will sacrifice for the well being of those they love. People will invest in a community that enhances their social environment. But to give one’s life for something beyond their control, to defend a nation whose direction sometimes seems off point, to risk one’s safety to preserve the rights of the unreasonable, to secure the rhetoric of the unpeaceable, to maintain the habitat of the unlovable requires a special man or woman. And that is what those we are here to honor today have done. And we owe them a debt of gratitude that we will never have the capacity to repay.

But still we try. So thank you, Veterans and survivors of Veterans, for your sacrifices in defense of America.”

CAVHCS Emergency Management in Good Hands

By: James R. Talton
Interim Director

CAVHCS is privileged to serve many outstanding employees. Employees who work silently each day to improve the quality of life for Veterans, employees who leave their mark on their communities, employees whose contributions are acknowledged throughout the state of Alabama, and even those who have gained national recognition for accomplishments that ripple beyond CAVHCS. I am honored to commend to you, Ms. Deborah Morrison. Ms. Morrison has amassed an impressive list of achievements.

* Biltmore Who’s Who Executive of the Year 2011-2012, for demonstrated leadership and achievement in her profession.
* Biltmore Who’s Who Honored VIP 2011-2012
* Presidential Who’s Who 2011
* Presidential Who’s Who Executive of the Year 2012-2013
* Continental Who’s Who, Pinnacle Professional of the Year 2012
* Princeton Global for 2011
* National Association of Professional Women 2011
* Certified Healthcare Safety Professional
* Certified Fire Safety Manager

Please join me in celebrating Ms. Morrison’s noteworthy acts of selflessness, commitment to excellence, and professional credentials. Ms. Morrison, please accept our literary ovation.

Preferring to get a first-hand look at the operation of equipment, CAVHCS Emergency Management Program Coordinator Debbie Morrison tests the operation of a Dual Utility Vehicle, which would be used to evacuate patients in the case of an emergency. CAVHCS Emergency Management recently shined during a Booz Allen Hamilton site visit, which lauded the level of training.

(VA photo Eric Johnson)
From the Top: Where VA Healthcare is Headed

Robert A. Petzel, MD
VA Under Secretary for Health

VHA provides excellent healthcare to six million veterans – some say the best care anywhere. Not only have we earned higher marks in patient satisfaction than the private sector, we also lead the nation in measures of quality.

However, we know that the reality of veteran healthcare is changing dramatically. Today we treat patients who range from 19-year-old veterans who served in uniform in Baghdad to 87-year-old veterans who served at Omaha Beach.

Today, VHA is transforming – shifting fundamentally and radically from a problem-based disease-care system to a patient-centered healthcare system. This approach puts the desires of the veteran first. I am so committed to patient-centered care that I created a new office called Patient Centered Care and Cultural Transformation, and actively recruited Tracy Gaudet, MD, former executive director of Duke Integrated Medicine at Duke University Medical Center, Raleigh, NC.

So what does the future look like for VA healthcare? To begin with, it will be people-centric, results-driven and forward-thinking.

Patient-Centered

In the future model of care, we partner with veteran patients across their lives to optimize their health and well-being. We do more than treat problems and diseases; we also work with veterans to develop a personalized health plan that is based on their vision and their goals for health. We then support veterans in acquiring the skills and resources they need to succeed in making sustainable changes in their health and life.

Today, we are offering more options for care and more access to healthcare providers than ever. Patients now can choose to come in for a face-to-face appointment with their doctor or avoid the long drive and hassle by instead interacting with a provider through our tele-health programs, secure messaging or mobile-communication strategies.

Already, the number of patients who have chosen telephone care has increased dramatically, and about 5,000 patients a month are opting into secure messaging. VHA has seen success on other levels, as well. We’ve increased the frequency with which we contact patients within two days. Most importantly, the rate of patients hospitalized for ambulatory-care-sensitive conditions has decreased by 5% nationwide.

Team Care

One of the most important components of VHA’s transformation is the move to a team-based approach for providing care. With Patient Aligned Care Teams (PACT), providers and staff members from multiple disciplines, outlooks and experiences work together to provide the best possible care – care that is integrated and coordinated with the veteran and his or her family. Team members regard each other as peers and work collaboratively. The patient and family members are considered part of the team too. This combination of expertise and viewpoints helps ensure that the team considers all potentially relevant factors. The Patient Centered Care principles are infused throughout all team activities.

VHA has developed special team training for PACT. Several thousand VHA employees have completed this training, impacting the care of more than one million veterans. In addition, the leaders of our medical facilities and leadership groups have taken training to improve team effectiveness.

As you can imagine, the better the team members work together, the better their results. When you’re talking about healthcare, that’s critically important. VHA has found, based on 10 years’ worth of solid data, that good team camaraderie leads to better patient outcomes and lower hospital mortality rates. This conclusion is based on data we’ve gathered from annual surveys on employee satisfaction and workplace climate since 2001.

One of the things our survey measures is psychological safety – whether a worker feels free to speak up, ask questions or admit when he or she is not sure. Our data shows that, in an ICU setting, the higher the degree of psychological safety among staff members, the shorter a patient’s length of stay in the hospital and the lower the rate of mortality.

We also measure civility, which encompasses politeness, inclusion, diversity and mutual support. We found that, as the degree of civility rises among workers, measures of performance also rise, while the rate of absenteeism and employee complaints declines.

The conclusion? If you want to do a good job, work on civility. VHA is training employees throughout its nationwide system in civility, respect and engagement in the workplace. Our research clearly shows this training enhances our veteran-centered approach to healthcare and leads to better patient outcomes.
The CAVHCS Survey says...

CAVHCS just participated in the All Employee Survey – what other ways would you suggest to improve communication throughout the system?

Chancey Barnes, Nurse Practitioner,
“I think top management should be more aware of what we clinicians actually do ‘on the front lines in Primary Care.’

Oscar Goode III, Nurse’s Assistant
“The administration should get out among the different clinics and wards more, talking with the ‘people in the trenches.’ When everyone understands what the mission of the VA is, then people are more likely to offer solutions instead of only seeing a problem. Spend less time on ‘image’ and more on the Veterans.”

Monique Peterson, Retail Store Sales Clerk Canteen Service
“I think if we can get back to a more teamwork atmosphere and be more family oriented, we will communicate better.”

June: Post Traumatic Stress Disorder Awareness Month

The VA’s National Center for PTSD encourages everyone to raise awareness throughout June in honor of PTSD Awareness Month. You can learn how to help anyone who has been through trauma by visiting VA's National Center for PTSD at www ptsd va go v A traumatic event is something terrible and scary that you see, hear about, or that happens to you, like:
* Combat exposure
* Child sexual or physical abuse
* Terrorist attack
* Sexual or physical assault
* Serious accidents, like a car wreck
* Natural disasters, like a fire, tornado, hurricane, flood, or earthquake

During a traumatic event, you think that your life or others’ lives are in danger. You may feel afraid or feel that you have no control over what is happening around you. Most people have some stress-related reactions after a traumatic event; but, not everyone gets PTSD. If your reactions don’t go away over time and they disrupt your life, you may have PTSD.

How does PTSD develop?
Most people who go through a trauma have some symptoms at the beginning. Only some will develop PTSD over time. It isn’t clear why some people develop PTSD and others don’t.

Whether or not you get PTSD depends on many things:
* How intense the trauma was or how long it lasted
* If you were injured or lost someone important to you.

How close you were to the event.
* How strong your reaction was
* How much you felt in control of events
* How much help and support you got after the event

What are the symptoms of PTSD?
PTSD symptoms usually start soon after the traumatic event, but they may not appear until months or years later. They also may come and go over many years. If the symptoms last longer than 4 weeks, cause you great distress, or interfere with your work or home life, you might have PTSD.

There are four types of symptoms of PTSD:
1. Reliving the event (also called re-experiencing symptoms)
   You may have bad memories or nightmares. You even may feel like you’re going through the event again. This is called a flashback.
2. Avoiding situations that remind you of the event
   You may try to avoid situations or people that trigger memories of the traumatic event. You may even avoid talking or thinking about the event.
3. Feeling numb
   You may find it hard to express your feelings. Or, you may not be interested in activities you used to enjoy. This is another way to avoid memories.
4. Feeling keyed up (also called hyperarousal)
   You may be jittery, or always alert and on the lookout for danger. This is known as hyperarousal.

CAVHCS Salute - May, 2012 Edition
CAVHCS Photo Gallery

During May CAVHCS hosted its annual Memorial Day observance, celebrated Nurses Week and Women’s Health Week. For more images are available on the CAVHCS Facebook site at: www.facebook.com/VACentralAlabama.

(VA photos by Eric Johnson)
Shingles is more than Roofing Material!

By: Mary Catherine Porch, APRN
Health Promotion Disease Prevention Program Manager

I recently saw a commercial on television where a man is looking into the camera and describing the awful experience he had with a health condition called shingles, also known as herpes zoster. As a clinician, I see this condition on a regular basis. Whenever I see a patient 60 years and older with this condition, I am disheartened because there is a vaccine for shingles.

Shingles occurs in one million people each year in the United States. It is caused by the chicken pox virus. If you have had chicken pox, the virus stays with you and can cause shingles. You might have shingles if you develop a painful rash on one side of your body. The pain can be severe. Usually the rash will disappear in 2-4 weeks but the severe pain from shingles can last for a long time, sometimes for years.

Complications from shingles include pneumonia, hearing problems, blindness, brain inflammation and death. Shingles is not contagious but the virus is contagious. A person who has never had chicken pox can get chicken pox from someone who has shingles.

Fortunately, in 2006 a vaccine was developed and tested in several thousand people 60 years of age and older. The most common reaction to the vaccine was irritation at the site of the injection. Since 2006, the vaccine has been widely used. The vaccine prevents shingles in most cases. A few people who have gotten shingles despite receiving the vaccine have had only mild cases with reduced pain.

Shingles is more common in people 50 years of age and older. At this time, the vaccine is available at the VA to veterans age 60 years and older and it requires only one injection. Patients sometimes ask me if they can receive the vaccine if they have already had shingles. The answer is “yes”. The vaccine can help to prevent future outbreaks. Sometimes a patient is unsure whether he or she ever had chicken pox. It is recommended that patients receive the vaccine whether or not they are sure they had chicken pox.

Some people should not receive the vaccine. Anyone who has had a severe allergic reaction to gelatin or the antibiotic neomycin should not receive the vaccine. Be sure to tell your health professional if you have ever had a severe allergic reaction to anything. Furthermore, if your immune system is weakened by use of steroids, AIDS, leukemia, lymphoma, certain other cancers, chemotherapy or radiation, you may not be able to receive the vaccine. Be sure to discuss your medical history with your health professionals and always let them know what medications you are taking.

Although the cautions of pregnancy do not generally apply to the population getting this vaccine, it is important to be aware that pregnant women should not be vaccinated, and women should not get pregnant until 4 weeks after receiving the vaccine. Anyone with a fever of 101.3 degrees or higher or who has a moderate or acute illness should wait until recovery before receiving the vaccine.

Any vaccine, like any medication, has the risk of causing a serious problem like a severe allergic reaction. However, this risk is very small with the shingles vaccine.

If you are 60 years of age or older, talk to your health care team today about being vaccinated against shingles. You will likely be glad you did!

To read more about shingles and the vaccine go to http://www.cdc.gov/Features/Shingles/ or contact the Veterans Health Education Department in Montgomery and Tuskegee. Your health is important to us!

Healthy Living To YOU!

CAVHCS sends Veterans to Golden Age Games

More than 900 Veterans who served during World War II, the Korean War, and the Vietnam War competed in the 26th National Veterans Golden Age Games in St. Louis, Mo., May 30 – June 5. The Alabama contingent included 8 local Veterans who receive their health care at Central Alabama Veterans Healthcare System (CAVHCS).

Sponsored by the Department of Veterans Affairs (VA), Help Hospitalized Veterans (HHV) and Veterans Canteen Service (VCS), the National Veterans Golden Age Games is an exciting national sports and recreation competition.

Events at the Games were open to all U.S. military Veterans age 55 or older, who are currently receiving care at any VA medical facility. Hosted by the St. Louis VA Medical Center, the competition featured sports such as swimming, cycling, golf, track and field, bowling, table tennis and others, totaling 14 competitive events.

The Games have grown from 115 participants its first year to more than 700 in 2011. It is the only national multi-event sports and recreational seniors’ competition program designed to improve the quality of life for all older Veterans, including those with a wide range of abilities and disabilities. It is one of the most progressive and adaptive rehabilitative senior sports programs in the world.

CAVHCS sent eight veterans to the 2012 Golden Age Games. (VA photo Robin Johnson)
CAVHCS celebrated Nurses Week with several activities again this year. But, none of those activities were enjoyed more than the Nurses Week Picnic. (VA photo Eric Johnson)

The CAVHCS Community Calendar is not intended to be an all-inclusive, official calendar. It is intended rather to provide a medium for CAVHCS Salute to share upcoming events.

If you would like to add a CAVHCS event please email details directly to alan.bloom@va.gov. Submissions are not guaranteed to be published. Editorial considerations will be made for propriety, promptness and print space.