March was National Professional Social Work Month, and in keeping with tradition Central Alabama Veterans Health Care System (CAVHCS) had several observances and concluded the month with an area-wide workshop. The fact that the workshop was once again well attended can be directly attributed to CAVHCS Social Work Service’s reputation for professionalism. That reputation was bolstered a few days later when Iva Davis, Chief, CAVHCS Social Work Service, was selected as NASW Alabama Chapter, Social Worker of the Year, 2012.

“She is dedicated to the furtherance of professional education for her own staff, and just as importantly, for social work students,” said one of three supporting letters to her nomination. “Providing a centralized leadership for programs and staff throughout the Southern, Central part of Alabama and Georgia is no easy task, though Ms. Davis does so in such a manner as to make it appear so. She embodies the essence of the criteria for this award.”

High praise: But Davis recently deflected those kind words to share the honor with staff. “I know enough to realize that when one person receives an honor like this, it’s usually the result of team effort,” said Davis. “We have a strong team of professionals here at CAVHCS, who rally to help one another. Of course that’s what Social Work is supposed to be about...helping each other with identifying and then accessing resources.”

“Ms. Davis has served as a coordinating and coalescing presence in the areas of community and social work services,” the nomination letter read, “bringing together many task force opportunities for services to Veterans and clients in the broader community.”

“Well, that’s why we’re here,” said Davis. “Some Veterans who are coming back from deployment may only need a little help re-integrating into the community.”

All Employee Survey
Time to Share your Opinions, Concerns they Do Matter

Communication – or more accurately lack of communication, has frequently been cited as the greatest impediment to Central Alabama Veterans Health Care System (CAVHCS) realizing its Vision; achieving the best possible outcomes for Veterans and employees. Fortunately, the Veteran Health Administration’s Annual Employee Survey (AES) provides all participating staff an opportunity to communicate their concerns, and observations, while remaining totally anonymous.

Of course the key to fostering and maintaining a productive line of communication is participation. Unfortunately, when presented with the opportunity to express themselves - a large number of staff chose to remain silent. If you are one of those folks that hear about the AES, but choose not to participate, this article is intended especially for you. Nobody can compel you to participate. However, if you are truly interested in realizing CAVHCS’ vision...we need your input!

The AES is an assessment tool designed to measure various aspects of the work environment. VA employees are asked a wide range of questions related to areas such as employee satisfaction, workgroup relationships, and facility practices.

This survey is part of an ongoing effort to assess employees’ satisfaction, to eliminate barriers to employees’ effectiveness, and to make VA an employer of important. By voicing their opinions employees can influence their work destiny and assist in making changes where needed.

Once leadership receives the AES results and evaluates them, an action plan is created to address or modify the current conditions in an effort to improve organizational health. These actions of change occur based on the feedback the employees provide.

The 2012 AES is being conducted RIGHT NOW. The survey will continue to be ongoing until at least May 14, 2012. History says an extension of that deadline is often provided to encourage additional participation, but this is not always the case, and May 14 is the deadline.

All employees will need a seven-digit work center code, which has been provided to supervisors. You can take the AES using three different modes:
- Telephone (Interactive Voice Response – IVR)
- Paper
CAVHCS All-Stars

I wish to call your attention to MSA Ellen Glover employed in the Geriatric Ward at the Montgomery Facility. She has shown due diligence in attending to this VA Military Veteran, making a difficult walk-in appointment tolerable. She deserves recognition. (P.S. I also want to acknowledge Dr. Gbenle for some great work!)

-- Respectfully, Fred F., (Col., Ret) Montgomery, Ala.

I would like to compliment the staff and medical personnel for being so nice and helpful to me. They all have gone out of their way to help, especially Kelly in Audiology. I have had bad experiences at the VA in Texas and Arizona in the past and I expected the same treatment here, but was happily surprised by how helpful everyone here was.

-- Sincerely, Melvin P., Alabama

I would like to express my sincere thanks and appreciation to the following individuals for the exceptional care and treatment provided to me by the entire staff of the Emergency room following my severe chest pains Thursday, April 19, 2012. The exceptional care provided to me is an incredible example of what CAVHCS is all about, “Providing Exceptional Care to Exceptional Veterans.” No matter how excellent or exceptional our staff performs as a team, there are always those who excel and exceed above and beyond the staff as a whole. Please recognize and acknowledge the outstanding performance of the following individuals: Mrs. Hazel Bell, Nurse Practitioner; Mrs. Cheryl Owens, RN; Ms. Galilea Rawlinson, RN and Mr. Fidel Cintron, Occupational Health. Again please convey my sincere thanks and appreciation to these individuals in our Emergency Room staff. -- Thank you again, Earl H., Montgomery, Ala.

Just wanted to express my concerns about the personnel in the eye clinic. They were awesome. Ms. Angel and Ms. Ritchie were complete professionals. Please let them know the great job they are doing. I know that they don’t always get compliments but they are worthy of one today. Thank you for their great service. Please let them know they were great! -- Respectfully, Zachery E. Alabama

I really appreciate the help and hospitality I’ve been shown by Mrs. Potts. She is a wonderful and warm lady, a true asset to the VA Volunteer Corps. You need more terrific people like her to assist us Veterans. She always treats everyone like family. In addition I am always treated well by the staff and they look up to Mrs. Potts. -- Robert H. D., Alabama

Mrs. Stinson has just started and is doing a very good job. Please keep her in mind and please let her know what a great job she is doing for the Veterans! -- Signed, Colby D., Alabama

The Joint Commission

The VISN 7 Joint Commission Education Conference will take place in Augusta, Ga., May 16-17, 2012. As last year, the conference will be V-telto to VISN 7 facilities.

Tentative topics will include The Joint Commission Standards Update and challenging standards for 2012 for the Hospital, Long-Term Care, Home Care and Behavioral Health programs.

The conference via V-tel will occur on both campuses at the following locations:

**May 16, 2012: Noon – 4:15 pm**
West Campus - Director’s Conference Room 1A-133
East Campus - Staff Training Room

**May 17, 2012: 8 am – 12:15 pm**
West Campus – Multipurpose Room 1E-104
East Campus – Staff Training Room

Everyone is encouraged to attend the conference.
If you have any questions, please give me a call at ext. 4564.

The CAVHCS Salute

The CAVHCS Salute is produced by the Central Alabama Veterans Health Care (CAVHCS) Public Affairs Office. CAVHCS Salute is an unofficial, internal communications publication.

Interim Director
Acting Associate Director
Acting Associate Director, Patient Care Services
Chief of Staff
Public Affairs Officer

James R. Talton, PA-C, MBA, MS, FACHE
Johnny Davis
Rozelia Bean, MS, RN
Cliff Robinson, MD
Al Bloom
The CAVHCS Survey says...

“What is the Number One thing that you need to accomplish your workload?”

Thomas McDaniel, Material Handler, Acquisition and Material Management.
“Getting the help of my co-workers to get the jobs done on time.”

Mary Lynn, Recreation Assistant, Recreational Therapy
“I can’t put it at just one thing. I need the Veterans and an open line of communication with everyone who comes in contact with the Veterans, to serve them, and meet their needs adequately.”

Robin Lesure, Clinical Applications Coordinator, Clinical Informatics
“A combination of a positive attitude to serve customers, a desire to learn, management support, and a good computer system.”

Pharmacy Excellence confirmed by J.D. Power and Associates

J.D. Power and Associates (JDPA) has a strong and well-earned reputation for gauging customer satisfaction. In fact, J.D. Power and Associates are known as the, “Voice of the Customer.” So it was with great pride and maybe a little bit of “where have they been,” that the Department of Veterans Affairs received word that the VA’s pharmacy program was being recognized as a J.D. Power 2012 Customer Service Champion.

Apparently one of the keys to the pharmacy program’s success (at least locally at Central Alabama Veterans Health Care System (CAVHCS) is the combination of technology and outstanding personnel. “I think combining the caring attitude and talents of the CAVHCS pharmacy staff with pharmacy automation to enhance prescription services are contributing factors,” said Ty Beasley, Chief CAVHCS Pharmacy. “Pharmacy dispensing services and automation is in use at all of CAVHCS Pharmacy divisions (Montgomery, Tuskegee, Columbus, Wiregrass, and Dothan). This has allowed our service to better serve Veterans with processing and dispensing systems that promote low medication error rates and on-site pharmacy dispensing.

“Of course Outpatient Pharmacy is more than dispensing and I think the presence of the clinical pharmacist specialists in the clinics has improved Veteran satisfaction with outpatient pharmacy services.”

The VA’s pharmacy program was recognized as one of only 50 companies in the United States to receive the Customer Service Champion designation. In 2011, the VA mail-order pharmacy program was recognized as one of 40 companies in the U.S. to earn the distinction as a Service Excellence Champion. This year, that recognition was expanded to include the outpatient pharmacy programs at VA Medical Centers.

“High participation in the Consolidated Mail Outpatient Pharmacy (CMOP) program is key to promoting efficient prescription mail services for our Veteran population” explained Beasley. “CAVHCS Pharmacy has continued to maximize use of the CMOP mail program, while allowing local staff to focus on patient contact and dispensing of more urgent care medications.”

According to JDPA, the VA pharmacy program is the only federal agency ever named as a Service Excellence Champion. And, CAVHCS has a few “only” categories itself. “CAVHCS is the only facility in VISN7 that provides on-site pharmacy dispensing services at all of the community based clinics,” said Beasley. “In addition, our average prescription wait time has remained well below the national average of 30 minutes and is currently averaging 10 minutes. However, in the end it is people that make the difference and we have a great staff of caring individuals.”
During April CA VHCS hosted two Volunteer Appreciation observances to recognize the generous support provided by 872 volunteers throughout the year. An estimated monetary value of the more than 56,970 manhours donated this year comes to $1,008,511.10. So the next time you see a CA VHCS Volunteer please let them know how much we appreciate their support.

(VA photos by Robin and Eric Johnson)

Decision Support System Reliant on your Data

If you look up Decision Support System on the Department of Veterans Affairs Intranet you’ll get a detailed definition like; the Decision Support System (DSS) is an activity-based, cost-allocation system that generates estimates of the cost of individual VA hospital stays and health care encounters. But, what the heck does that really mean?

“DSS transforms day-to-day operational data into tactical information that can be used by managers to make informed operational decisions,” explains CA VHCS DSS Site Liaison Debbie T. Morris. “In other words DSS provides leadership with a wider scope of data than they would normally have, which allows managers to make the most informed decisions possible.”

DSS is a distributed national software system implemented at the facility level by staff members who comprise the local DSS site team. For each VHA facility, there is a DSS production database that combines cost data and selected clinical data with workload captured at the production level. The DSS production database software contains a set of tools for reporting, analysis, budgeting, and modeling, allowing DSS site teams to produce a variety of reports (e.g., analyzing patterns of care by day of inpatient stay, associating laboratory tests ordered with particular diagnoses, etc.).

The VHA DSS data files comprise a longitudinal, secondary relational database combining selected clinical data and fiscal (cost) data. DSS extracts costs from the VA payroll and general ledger. These are assigned to departments based on activity reports from physicians and managers (at some sites, all staff provide activity reports). Six categories of expense are assigned in this step. Overhead (the cost of departments that do not produce patient care) is distributed to patient care departments using a step-down method.

Costs of intermediate products are then determined. Examples of intermediate products are: chest x-rays, units of blood, clinic visits, or days of stay in the intensive care unit. They are called intermediate products to distinguish them from the final product—a patient encounter, which is a bundle of intermediate products. DSS relies on pre-existing VA databases for information on what care was provided and which patients utilized it. These data are combined with unit costs to estimate the cost of hospital stays and outpatient visits.

DSS provides a mechanism for integrating expenses, workload, and patient utilization. DSS information supports process and performance improvement by measuring quality of care, clinical outcomes, and financial impact. “Of course there is the old adage of ‘garbage in – garbage out,’ which emphasizes the importance of managers providing accurate and timely reports,” said Morris.
May: Nothing Beats a Good Night’s Sleep

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

I have two adorable kitties who sleep around 16 hours a day. I often think how nice it would be if everyone could sleep as well as they do. As May is Better Sleep Month let me see if I can help you get a better night’s sleep.

One half of people in the United States complain of sleep problems at one time or another. Chronic or ongoing sleep problems occur in about 10% of the U.S. population. It is important to find solutions to sleep problems as they are associated with the development of certain diseases and conditions. Most commonly, these are heart disease, stroke, heart failure, diabetes, high blood pressure, obesity and depression. They are also associated with motor vehicle and work-related accidents due to nodding off in these situations. Adequate sleep is essential for health promotion and disease prevention and not merely a luxury. In order to get enough rest to restore and maintain health, adults should sleep 7-9 hours per night.

Two of the most common causes of sleep problems are obstructive sleep apnea and insomnia. Obstructive sleep apnea is a condition in which a person stops breathing for brief periods during sleep. Snoring and frequent night awakenings may occur. Daytime sleepiness or sleepiness when one should ordinarily not be sleepy is sometimes the only symptom realized by a person with sleep apnea. The diagnosis requires a sleep study and treatments include use of a machine worn during sleep that forces air into the nose.

Insomnia is the inability to fall asleep or stay asleep. It has numerous causes such as medication side effects, hormonal changes, stress, depression or substance use. Often a good sleep history, medical history and examination will help determine the cause. In order to assist your health care provider to determine the cause, keep a sleep diary before your health care visit. Include information about diet, caffeine and alcohol use, exercise habits, work hours and practices or treatments that have been tried to induce sleep. Bring all medications including over-the-counter medications.

Regardless of the cause it is important for everyone to practice good sleep hygiene in order to either cure sleeplessness or support other treatments. Good sleep hygiene includes the following:

1. Go to bed at the same time each day and arise at the same time seven days a week. Be sure the times include 7-9 hours of sleep.
2. In your bedroom create a comfortable, relaxing, quiet and dark environment. Avoid watching television, reading or using your computer while in bed. Avoid emotional discussions while in bed. Limit activities in bed to intimate moments and sleep.
3. Maintain a comfortable room temperature and avoid excessive cold or warmth.
4. Avoid disruptions to sleep such as pets in the bed.
5. If you awaken during the night, do not turn on lights, read, watch television or use the computer. If you must get up, use a nightlight for safety.
6. Avoid drinking fluids 2-3 hours before bedtime.
7. Avoid stimulants such as nicotine and caffeine. Caffeine may remain in your system for up to 14 hours. Although alcohol may initially cause sleepiness, it later causes arousal as it is metabolized or broken down within your body.
8. Avoid eating a large meal close to bedtime. A small bedtime snack that does not contain chocolate is ok.
9. Avoid exercising close to bedtime. To promote rest and stress relief, you may perform relaxation exercises and deep breathing. Clear your mind of the day’s concerns.

If these techniques do not induce adequate sleep and rest, seek medical attention. Remember adequate sleep is essential to good health!

For more information on sleep disorders contact the Veterans Health Education Department in Montgomery and Tuskegee. Healthy Living To YOU!

VHA uses ‘GROW’ model to develop Mentors

As VHA works through transformational change, coaching and mentoring will continue to play an integral role in “GROW-ing” employees at all levels of the organization. Transformational change is defined as an organization-wide, long-term change involving a shift of strategy or process in the business culture of the organization. Coaching and mentoring have been proven to help create clarity around new processes and cultural changes and facilitating movement toward action.

VHA uses the “GROW” model (G-GOALS, R-REALITY, O-OPTIONS, and W-WHAT’S NEXT) to accelerate the coachee/mentee’s progress by providing greater focus through development of key questioning skills and with the goal of initiating change in others through their own clarity. The GROW model advocates meaningful growth driven by the coachee/mentee. The coach’s/mentor’s efforts, therefore, become supportive in applying the GROW model process.

VHA proudly hosts one of the largest cadres of certified coaches/mentors in any organization. The program has grown exponentially since its initial roll out in January 2007, and those associated with the program pride themselves on integrating the International Coaching Federation (ICF) coaching competencies into the practices of the GROW model. To date, VHA has certified over 4,000 coaches/mentors at all levels of the organization.

After completing the core GROW model training with a VHA facilitator, one can begin logging experiential hours and work toward certification as a VHA Mentor. Hours collected reflect time spent with the mentor while using the GROW model.

To find out more about the VHA Mentor Certification Program please visit the website at http://vaww.succession.va.gov/Employee_Development/MC/default.aspx.
Regina and Davina Hicks (middle) are joined by William Petty, Chief, CAVHCS Voluntary Service and Mella Moore (r) during the recent East Campus Volunteer Appreciation observance.

“The Twins,” who have been volunteering for more than 16 years have each reached the 22,500 hour mark. Their 45,000 hours have an estimated monetary value of more that $750,000. Of course the value in terms of the love and kindness they’ve shared with Veterans and staff is priceless. (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.