NCIS: New Orleans returns to film at SLVHCS Page 18
It’s been another active quarter! In April, we reached another milestone when we activated a second house in our Community Living Center! A few weeks later we performed our 1,000th surgery at the medical center! Our Veteran was excited to receive his eye care with us, in a medical center just for Veterans. While these are significant milestones, this is only the beginning as we continue to increase the complexity of our surgeries and grow our referral opportunities from throughout the state and across the Gulf coast. One of the ways we do this is through virtual care. Through telehealth capabilities and collaborative efforts in our Louisiana and Gulf coast facilities, we are becoming a referral center for Alexandria and Biloxi VA medical centers, allowing Veterans to receive the specialty health care they have earned and deserve without the burden of traveling far distances to reach us.

We are excited about the president signing the MISSION Act. It’s a groundbreaking legislation that will accomplish a number of important goals, including enhancements for purchased care. To implement requirements under the MISSION Act for the consolidated VA community care program, VA will immediately begin drafting the required regulations, which are targeted to be completed in one year. In the meantime, the MISSION Act includes an additional $5.2 billion in funding for the Veterans Choice Program to continue until the regulations are published and the new consolidated community care program is operational.

Throughout our health care system, we are relentless in maintaining organizational excellence. One of the ways we do this is through diversity and inclusion. We have been identified as a leader in the Lesbian Gay Bisexual Transgender and Queer/Questioning (LGBTQ) Healthcare Equality Index (HEI) for the second year in a row. The HEI is a national benchmarking tool that evaluates health care facilities’ policies and practices related to equality and inclusion of LGBTQ patients, visitors and employees.

Should you have any questions, please contact me directly by email at Fernando.Rivera@va.gov, on my office phone at (504) 507-7687 or my cell phone at (202) 834-7893. Please feel free to contact me anytime you feel I can be of assistance to you and/or our Veterans.
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NCIS: New Orleans actor Scott Bakula dropped off a gift bag during a break in filming the crime drama TV show inside SLVHCS to Veteran Glenn Harris who was a medical center inpatient. (Photo by Anne Marino)
SLVHCS director receives “Veterans Oscar” award

By Amanda Jones

Southeast Louisiana Veterans Health Care System (SLVHCS) Medical Center Director/CEO Fernando O. Rivera received the American Veterans (AMVETS) Silver Helmet Award for Civil Service on March 9 at the annual AMVETS Silver Helmet Gala in Alexandria, Virginia.

“I can’t think of anything more gratifying than being recognized by the people I serve,” said Rivera. “I am proud to accept this award and share it with my entire team, who work hard every day to make sure all of our Veterans receive the respect and best care anywhere that they deserve. I am honored and humbled to received such a renowned award from AMVETS.”

Known as the “Veterans Oscar,” the award recognizes excellence and outstanding accomplishment in the fields of Americanism, defense, rehabilitation, congressional, and civil service.

“This award has over the years acquired a well-deserved reputation as the most prestigious of all the awards given by Veterans organizations,” said AMVETS Communications Manager Miles Migliara. “We are honored to present and recognize Mr. Rivera with the Civil Service AMVETS Silver Helmet Award for his many years of leadership for Veterans and for helping rebuild the New Orleans VA Medical Center—a magnificent new facility in the heart of the city.”

Rivera received the award for his more than 30-year service to Veterans with the Department of Veterans Affairs. He currently oversees a network of health care operations in 23 parishes in southeast Louisiana, including seven outpatient clinics and a new 1.6 million sq. ft. world-class medical center that serves more than 44,000 Veterans.

Rivera earned a bachelor’s degree in civil engineering and a Master’s of Business Administration Degree from the University of New Orleans and is committed to community service on many levels. He is an honorary member of the Vietnam Memorial Wall Washing Crew and has received the Military Order of the Purple Heart Distinguished Service Award, the Marine Corps League Distinguished Service Award, the Presidential Rank Award, the American College of Healthcare Executives Federal Healthcare Leadership Award and the AMVETS Leadership in Service Award. He served as Assistant Scout Master in Troop 1444 of the National Capital Region Council of the Boy Scouts of America and Troop 64 in New Orleans.
Town halls enhance communication with Veterans

By Jeff Nowakowski

During the first three months of 2018, Veterans learned about recent activations at the new Veterans medical center, received new information on health care benefits and heard about a wide variety of other topics during Veteran town hall meetings conducted at locations all across southeast Louisiana.

SLVHCS Medical Center Director Fernando Rivera began each meeting with a brief presentation on the new medical center.

“We’ve completed several more milestones at the new Veterans medical center and we are offering expanded health care choices,” said Rivera. “As we continue to bring additional services to the new Veterans medical center, we need to recruit and retain the best and the brightest to provide our nation’s heroes with safe, high quality care.”

In January, SLVHCS conducted a Veterans town hall meeting in Houma, where Veterans learned that SLVHCS is looking to expand telehealth and rehabilitation services at the Houma clinic.

“Now that is what I need to get the answers I’m looking for,” said Army Veteran Dan Honore. “This is a good way to for us Veterans to get the information we need.”

Veterans from eastern St. Tammany parish attended the Veterans town hall meeting in Slidell in March and heard about the future plans for the Fisher House to be constructed on the campus of the new Veterans medical center, with groundbreaking sometime later in 2018.

The Veterans town hall meeting held in April at American Legion Post #222 on New Orleans Westbank was well attended and Veterans learned about expansion plans for the Veterans service center.

Town halls are held each month throughout Southeast Louisiana. Check us out on Facebook and Twitter for more information.
By Jeff Nowakowski

A 71-year old Marine Veteran with multiple lung abnormalities underwent bronchoscopy with endobronchial ultrasound, one of the latest activations here at the Veterans medical center.

A bronchoscopy is a test that allows a doctor to examine a patient’s airways and can be used to diagnose a lung disease such as a tumor, infection or causes of chronic cough.

“The capability of performing endobronchial ultrasound bronchoscopies in our institution is an important milestone that will allow us to continue improving in timeliness of diagnosis in patients with possible thoracic malignancies,” said Pulmonary Specialist Dr. Jaime Palomino.

The doctor threads an instrument called a bronchoscope through the patient’s nose or mouth and down the throat to reach the lungs. The bronchoscope is made of a flexible fiber-optic material and has a light source and a camera on the end.

A bronchoscopy can acquire airway images and collect tissue samples.

Advanced forms of imaging, such as endobronchial ultrasound, can provide a more detailed picture of the inside of the lungs, especially for lung masses and lymph nodes.

If needed, needle or forceps instruments may be introduced through the bronchoscope to collect tissue samples from the lungs or lymph nodes. These samples can help the doctor diagnose any lung conditions a patient may have.

A bronchoscopy is relatively quick, lasting about 30-45 minutes. Because of sedation, the patient may require recovery in the hospital for a couple of hours before leaving for home.
The Southeast Louisiana Veterans Health Care System (SLVHCS) has gained another star in the VA’s Quality star ranking for medical centers, moving from a three-star to a four-star facility based on FY17 fourth quarter data!

In FY16, SLVHCS rose from a two-star to a three-star facility in the national facility rankings and in FY17, SLVHCS continued to grow and improve our patients’ experiences with every interaction.

“I am extremely grateful to every employee and volunteer who has worked so hard to engage with our Veterans, not only making their health care a priority, but working to ensure we care for the Veteran as a whole,” said SLVHCS Medical Center Director/CEO Fernando O. Rivera.

Everyone’s hard work is paying off! Quality performance has always been our goal and we continue to challenge ourselves to provide the best care, customer service, care coordination and patient satisfaction.

Emphasizing continuous improvement sets no limit for how well our health care system can perform and that’s what we need to continue to promote and do. At SLVHCS, we have a noble mission of caring for our nation’s heroes and we have a dedicated team to meet their needs. Only one more star to go!
SLVHCS observes Glaucoma Month

By Jeff Nowakowski

Dozens of Veterans and their family members visited the display table on the first-floor concourse of the Veterans medical center on January 23 to learn more about a sight-stealing disease that is the second most common cause of blindness.

January is glaucoma awareness month and specialists from the Ophthalmology Service saw it as an opportunity to spread a message of prevention on Glaucoma Day.

Currently, more than 3 million people in the United States have glaucoma. Of that, approximately 120,000 are blind from glaucoma. Moreover, among African American and Latino populations, glaucoma is more prevalent. Glaucoma is six to eight times more common in African Americans than Caucasians.

“I wanted to know what the warning signs of glaucoma are for me because I have diabetes and my wife has glaucoma,” said Army Veteran Alphonso Wilson. “After talking with these doctors, I’m going to schedule an exam.”

The term “glaucoma” refers to a group of disorders that damage the ocular nerve, leading to vision loss and blindness. Glaucoma is most commonly caused by ocular hypertension, or high pressure inside of the eye.

Typically, there are no early warning signs or symptoms, which is why glaucoma is so frightening; however, with regular eye exams, a person’s sight can be protected or preserved if treatment is begun immediately.

“There’s no cure for glaucoma; however, when caught early, we can take steps to slow or halt vision loss,” said Ophthalmologist Dr. Rebecca Metzinger. “Often treatments as simple as specialized eye drops that reduce the pressure building up inside of your eye can make a difference.”

Glaucoma is a chronic condition that must be monitored for life. With proper monitoring and compliance with treatment, glaucoma can be managed – to slow or prevent further vision loss.

The appropriate treatment depends upon the type of glaucoma among other factors. Current treatments include eye medications, laser treatment, surgery, and several newer surgical alternatives.

“If patients will do an eye exam and catch those early warning signs, we have state-of-the-art equipment that gives patients several treatment options,” said Glaucoma Specialist Dr. Lena Al-Dujaili. “There are new micro-invasive glaucoma surgeries that weren’t even being taught five years ago. It’s changing the way people face glaucoma.”

Ophthalmologist Dr. Rebecca Metzinger (l) and Ophthalmologist Dr. Lena Al-Dujaili (r) discuss warning signs and treatment options for glaucoma with Veteran Alphonzo Wilson during Glaucoma Awareness Month. (Photo by Jeff Nowakowski)
SLVHCS observes Low Vision Month

By Jeff Nowakowski

Navy Veteran Donald Alexander noticed recently that his eyesight just wasn’t the same so he came into SLVHCS for an eye clinic appointment two weeks ago.


But just to be sure, Alexander stopped by the low vision display on the first-floor concourse.

“I’m still amazed at what I can see,” said Alexander.

Low vision is the term used to describe significant visual impairment that can’t be corrected fully with glasses, contact lenses, medication or eye surgery. Currently, more than 350 Veterans in the southeast Louisiana area suffer from low vision or are visually impaired in some way.

SLVHCS can help individuals with all levels of vision loss ranging from mild visual impairment to legal blindness. SLVHCS uses a multi-disciplinary approach to care — from ophthalmologists to optometrists to low vision therapists — who are trained to evaluate a patient’s condition and identify an individualized rehabilitation plan to help him or her maximize remaining functional vision and maintain independence in daily living.

“The loss of sight affects each person differently,” said Blind Rehabilitation Outpatient Specialist Carmen McLain. “I guide each Veteran to help them better understand their type of vision loss and how to maximize their daily living skills through instruction in areas of homemaking, cooking, financial management, leisure participation, and overall independent living.”

Vision loss in adults and seniors can be particularly traumatic, leading to frustration and depression. Losing the ability to drive safely, read quickly, watch television or view a computer screen can cause people with low vision to feel shut off from the world. They may be unable to get around town independently or shop for food and other necessities.

Many people with low vision also have difficulty making a living.

Most people develop low vision as a result of eye conditions and diseases, including macular degeneration, diabetic retinopathy, glaucoma, cataracts, retinitis pigmentosa, and stroke. Some causes of low vision, such as cataracts, are treatable and good vision can be restored.

If you have a vision impairment that interferes with your ability to perform everyday activities and enjoy life, your first step is to see an eye care professional for a complete eye exam.
Veteran uses VA program to put his house in order

Navy Veteran Karl Allen prepares to move to his new house near Atlanta after completing the HUD-VASH program that allowed him to qualify for housing assistance for rental housing in Baton Rouge. (Photo by Jeff Nowakowski)

By Jeff Nowakowski

Navy Veteran Karl Allen just came inside from outdoors after walking around his rental house in Baton Rouge for the last time.

“I’ve purchased a retirement house with my wife,” he says. “It’s the final move I’m going to make.”

But his best move was four years ago when he woke up inside an abandoned garage after a day and night of drugs and alcohol.

“I lost my family, my house, my friends, everything because of drugs and alcohol,” he explained. “The drugs and alcohol overwhelmed me, but they were just masking over my PTSD. When I woke up in that garage, I knew I needed to get help.”

So, in 2013 Allen walked into the Baton Rouge CBOC and met detox specialists who immediately admitted him into the Shreveport VA hospital. After he was stabilized, Allen was transferred to a dependency rehabilitation program in Harvey. From there, Allen underwent a PTSD treatment program in Biloxi. He successfully completed the program and returned to Baton Rouge to continue his treatment program.

“His medical and mental health issues hindered his ability to obtain and maintain full-time employment,” said HUD-VASH Social Work Case Manager Judy Edwards, LCSW. “He had to address several issues, such as substance abuse, PTSD, unemployment, and being newly diagnosed with diabetes, that all could have combined to become fatal barriers.”

But with the support of the Baton Rouge CBOC, Allen entered the Housing and Urban Development-VA Supportive Housing (HUD-VASH) Program, which he qualified for a voucher for housing assistance.

HUD-VASH is a collaborative program between HUD and VA that combines HUD housing vouchers with VA supportive services to help Veterans who are homeless and their families find and sustain permanent housing.

“Until you change your thinking, you will just recycle your experiences. I’m not afraid now. My mind is made up. Don’t give up. There’s still more to learn in life. This is a brand new me.”
VA medical foster home program is best for Veteran

By Jeff Nowakowski

Retired Air Force Veteran Alfred Taylor chose to receive his health care at a VA Medical Foster Home.

As he got older and his care needs increased, he needed more assistance, but wanted to remain in a home.

Kimyatta Clay is a certified nursing assistant who wanted to provide care to someone in her home rather than travel all over the city.

Recently, she heard about the medical foster home program for Veterans, and she signed up.

After applying and being accepted, Clay was matched with Taylor and he moved in at the end of 2017.

“I knew she was the one for me when I came to visit her house and I saw that she had a jar full of peppermint candy,” said Taylor. “That won me over.”

Taylor now has a four-poster bed in a warm house in the lower Ninth Ward near where he grew up in New Orleans.

Medical foster homes are private homes in which a trained caregiver provides services to a Veteran 24 hours a day, 7 days a week. This caregiver can help the Veteran carry out activities of daily living, such as bathing, getting dressed and preparing meals. VA inspects and approves all medical foster homes.

The medical foster home for Veterans program has been at SLVHCS since a pilot project in 2000.

“This program is ideal for Veterans who won’t thrive in a group setting, such as a nursing home, and who are at risk for homelessness,” said Medical Foster Home Coordinator Elissa LeSassier. “We have a team of doctors, nurses and social workers that will follow his medical condition, ensure he takes the right medications daily, is fed good home-cooked meals, socializes with other Veterans, and is treated with dignity and compassion.”

For Clay, the medical foster home program and Taylor all clicked after talking it over with her family.

“You have to want to do it and be committed,” said Clay, “not just be in it for the paycheck. When you like to take care of other people, you look at Alfred as the newest member of the family.”

Any Veteran interested in learning more about the MFH program should contact their clinic social workers or through the staff of their Home-Based Primary Care program (HBPC).
Veterans aren’t putting around PTSD with golf program

By Jeff Nowakowski

Almost every weekend, Marine Veteran Bob Nolan played golf with his brother-in-law as a way to help him cope with his PTSD.

One day, at a charity golf tournament, his brother-in-law complained of chest pains and was rushed off the course to a nearby hospital. He died later that night.

Nolan stopped playing golf for the next ten years. His PTSD became worse with each passing year.

But an innovative program from the Pro Golfers Association of America got Nolan re-thinking about picking up golf again.

“I had to try something to put away my PTSD so I tried this program,” said Nolan following a warm, windy morning at Stonebridge Country Club in Gretna. “You have to realize you can’t think of what happened to you. You have to focus on something else. This program has helped me a lot.”

Nolan was one of eight Veterans participating in the Veterans adaptive golf clinic, an eight-week program that introduced golf to Veterans to overcome physical/cognitive challenges and further assist in community transition.

SLVHCS was one of 50 VA hospitals across the country that participated in the PGA Hope golf program. The Veterans learned rules of golf, rules of the course, hitting strategy, and the process of playing out in public – a big concern for several participants.

“Each Veteran had different goals they wanted to achieve with this program, but all wanted to be more independent,” said Recreational Therapist Glenis Thompson. “You could see how much each Veteran improved after each clinic. This brought them together to do more.”

The PGA partnered with local PGA professionals to manage the clinic, access the golf facilities, and secure training aids or adaptive equipment for each Veteran player.

“This was a really neat group of people,” said Stonebridge PGA professional Stacy Amann. “The first two weeks was key to their success. And you could tell they were committed. They showed a lot of improvement. I’m very happy with the results we’ve gotten from these new players.”

Some of the Veterans say they want to continue playing golf and hope to move into the VA’s TEE program.
Tennis workshop draws the line on PTSD

By Jeff Nowakowski

Veteran Cynthia Andry had never played tennis before, but she made it to the recreation center every week to participate in a first-ever tennis workshop that was taught by a tennis professional and sponsored by the Louisiana Tennis Association (LTA) from Baton Rouge.

“These tennis lessons literally got me into the swing of things,” said Andry. “I was in the MOVE program when I heard about this. I had never played before. But I wanted to learn. And it’s fun. It will definitely keep me active.”

Andry was one of ten Veterans who participated in all eight weeks of the tennis workshop.

The LTA donated 20 rackets, two cases of lower-velocity tennis balls, and reduced size nets to support the workshop.

The rules of tennis were the same, except wheelchair participants used the two-bounce rule.

“These Veterans show a lot of promise in learning this game,” said LTA tennis instructor James Branche. “No two players learn the same way so we’ve got to adapt to each pupil. Tennis is an easy game to learn. You can see that they got it because over the past two months each player has developed a rhythm to the game.”

“Our Veterans learned this game so fast and they will tell you they really enjoyed it because it’s a new activity for them,” said Recreational Therapist Glenis Thompson. “If I can give them a mental break from their PTSD, even for just an hour, than it will be worth it.”

As Andry completed her last lesson, she remarked that now the ball is in her court to keep going and practice the fundamentals so she can improve her game enough to get on the court and play against her nieces and nephews.
Hurricane season means time to be prepared

By Chris W. Cox

The Atlantic hurricane season occurs annually from June 1 through November 30. The peak of the hurricane season for Louisiana is from mid-August to late October. During these months, Louisiana has a very high strike potential. While hurricanes pose the greatest threat to life and property, tropical depressions and tropical storms can also be devastating.

To ensure the continued availability of health and medical services to all Veterans, SLVHCS has developed a hurricane plan that assures the continued operations of facilities during severe weather. This plan is reviewed prior to the beginning of each hurricane season.

To help develop a personal hurricane plan, go to www.getagameplan.org/planFamily.htm or www.weather.gov/wrn/hurricane-preparedness for ready-made checklists, tips and strategies to surviving foul weather when it comes.

Each hurricane or other natural disaster is unique. No one can know when or how future storms will impact them.

Loss of electricity, lack of drinking water, impassable roads, impaired phone service and a severely damaged home are effects to anticipate from a powerful hurricane. Preparations should include stores of food and water, medications, family documents, and a number of other items.

Veterans and their families and pets may also need to be ready to evacuate, which means having a “go kit” packed and ready, knowing your hurricane evacuation route and having a plan for where you will stay.

Veterans can call the SLVHCS main number, (800) 935-8387, to seek additional information or guidance and by Internet at www.neworleans.va.gov, as well as Facebook and Twitter, keyword: VANewOrleans
Saluting America’s heroes

By Debra Ceaser-Winbush

Southeast Louisiana Veterans Health Care System (SLVHCS) honors the service of Veterans every day. But in February this year, National Salute to Veteran Patients week was held the third week, offering another opportunity to thank and pay tribute to Veterans.

“It not only gives me great honor to salute my fellow Veterans,” said Human Resources Chief Inger Alston, “but it feels great to be honored as a United States Veteran.”

On Valentine’s Day, inpatient Veterans were greeted by the SLVHCS executive leadership team and given bags that included, adult coloring books with color pencils, crossword puzzle book, lapel pins and a heart-shaped stress ball.

The following week, specialty clinics and all community-based outpatient clinic Veterans were greeted by a member of the executive leadership team and given a lapel pin.

“Caring for and honoring Veterans is a daily privilege,” said Chief of Staff Dr. Ralph Schapira. “However, National Salute to Veterans week gives an extra special meaning to honoring America’s heroes.”

SLVHCS will continue to honor the service of Veterans every day.

Interested individuals and/or groups can request a volunteer application packet by visiting the Voluntary Service office in room 1E111, calling 1-800-935-8387 extension 62105 or emailing the staff at vhanolvoluntaryservice@va.gov.

A Veteran inpatient thanks Human Resources Chief Inger Alston (c) and Chief of Staff Dr. Ralph Schapira (r) for special goodie bags delivered by SLVHCS leadership team during National Salute to Veterans. (Photo by Jeff Nowakowski)

Patient Care Service/Nurse Executive Associate Director Brinda Williams-Morgan (l) and LPN Florence Sentmore-Jones (r) deliver bags to Veterans living in the CLC Cypress residence during National Salute to Veterans. (Photo by Josh Avist)
Cardiac rehab does a heart good

Veterans David Snow and Larry Breaux are the first two Veterans taking part in the new cardiac rehabilitation program at SLVHCS. Cardiac rehabilitation is a medically supervised program designed to improve a patient’s cardiovascular health following a heart attack, heart failure, angioplasty or heart surgery. “This is the first time we’ve offered a cardiac rehab program here,” said Cardiology Chief Dr. Anand Irimpen. “Previously, we had to outsource this program. But with this new facility, we now had the space to offer this type of program here.” The SLVHCS cardiac rehab program involves three major parts: exercise training, heart-healthy education, and stress counseling. The medical teams supervising both Veterans believe they should be able to graduate to a cardiac maintenance program sometime after the first of the new year. (l to r) (standing): Registered Nurse Tim Connelly, (seated): Cardiac Fellow Dr. Alaa Boulad, Cardiologist Dr. Kevin Cartwright, Veteran patient Larry Breaux on stationary bicycle, Veteran patient David Snow on elliptical cycle, Physical Therapist Amy Rotheaermel monitoring on iPad. (Photo by Jeff Nowakowski)

SLVHCS goes green on Earth Day

SLVHCS Green Environmental Management Systems (GEMS) committee celebrated Earth Day in April by planting a southern magnolia tree in the outpatient courtyard next to the chapel. The tree was donated by Rotolo Construction. Earth Day is a nationally recognized day dedicated to promoting and celebrating recycling in the United States. The GEMS committee renovated atriums and re-landscaped areas around the medical center campus as well as outdoor patios and courtyards. (l to r): Acting GEMS Coordinator/Industrial Hygienist Erica Harris, Safety Management Chief Veronica Lee, Laboratory Technology Supervisor Edward Moran, Safety Specialist Kim Robinson, Facility Management Service Assistant Chief Angela McKenzie. (Photo by Arthur Castle)
SLVHCS cuts opioid prescriptions by almost half over past 5 years

By Jeff Nowakowski

The proportion of patients prescribed opioids at SLVHCS has dropped significantly since 2012, according to data released in January by the Department of Veteran Affairs.

Of patients who received an opioid prescription from SLVHCS in 2017, 10 percent were prescribed opioids, compared to 17 percent in 2012. That’s a reduction of 43 percent over that five-year time period.

“A concerted effort has occurred to create new pain evaluation programs to address the chronic pain needs of our Veterans,” said Associate Chief of Staff of Education Dr. Randy Roig. “With the additional, dedicated resources, we have been able to provide thorough, individualized evaluations to assure that our Veteran patients receive the best possible care for their chronic pain conditions. The end result has been a safer treatment regimen for many Veterans.”

With the release of this data for its hospitals around the country, VA became the only health-care system in the country to post information on its opioid-prescribing rates.

SLVHCS has undertaken numerous efforts in recent years to better educate patients about the risks of opioids, introduce other ways to treat pain, and monitor those who may be attempting to get painkiller prescriptions from multiple doctors.

The report showed a 41 percent drop in opioid-prescribing rates across VA between 2012 and 2017.

VA said more than 99 percent of its facilities have shown a decrease since 2012 in the percentage of patients prescribed opioids among all patients with prescriptions.

VA will update its opioid prescribing rate information again on July 15. VA is working to release opioid prescribing rate information on a semi-annual basis, on January 15 and July 15 of each year.
SLVHCS introduces new technology for Veterans to keep track of appointments

By Jeff Nowakowski

The Southeast Louisiana Veterans Health Care System recently launched a new messaging program for Veterans called VEText that will notify Veterans of pending medical appointments and allow them to opt in or out of an appointment with a simple text message reply.

Over the first four weeks of the new program, SLVHCS sent out more than 47,900 text messages.

The program can be very convenient and every Veteran in the SLVHCS system is automatically enrolled in the program.

“As a Veteran: VEText is amazing!,” said Health Administration Service Chief Lori Hall. “I haven’t missed an appointment since VEText reminder. It’s a great program for those of us with a busy schedule and short memory!”

The text messages do not replace the letters, postcards and automated phone calls Veterans already receive for appointment reminders, but are just another communication channel available between SLVHCS and Veterans.

The program works by sending out its first message about five days prior to the appointment and then the Veteran will receive a reminder the day before the appointment. The Veteran can respond “cancel” to either message and the appointment will be opened for a fellow Veteran.

“The VEText app is a very user-friendly program and provides a convenience for Veterans to be reminded or cancel appointments,” said VISN 16 Operations Manager Embra Jackson. “I believe this program will continue to be a great resource for our Veterans and we’re excited to see how we can continue to enhance our services.”

In just the past three weeks, SLVHCS’ no-show rate for appointments dropped from 14 percent to 12 percent, which means more appointments are available for other Veterans.

Because the program automatically enrolls Veterans in the SLVHCS system, it’s important to ensure you have updated your contact information.

If you are not receiving appointment reminders via text message, please be sure to contact your primary care clinic to update your contact information.
VA is changing the way health care is provided to Veterans dealing with PTSD. It’s called the Whole Health Initiative. The focus of whole health is to work collaboratively with the Veteran to help identify their values and priorities and then to set goals that link the Veteran’s health with what brings meaning to their life.

The SLVHCS PTSD Clinical Team (PCT) began a whole health for Trauma Recovery Program in September 2017 based on the VA whole health initiative model.

The SLVHCS program uses whole health concepts and philosophy to create a whole health program tailored to addressing symptoms and impairment specific to trauma survivors. The program consists of eight modules that are consistent with the eight whole health components of proactive health and well-being specific to trauma survivors. A team of SLVHCS providers from multiple disciplines will collaborate to bring this program to Veterans receiving care within the PCT.

In whole health care, providers look at all areas of the Veterans life. The 8 components of proactive health and well-being include:

1. **Working Your Body**—exercise and movement for energy, flexibility, and strength

2. **Surroundings**—how things around you affect your body and emotions

3. **Personal Development**—learning and growing throughout your lifetime

4. **Food and Drink**—nourishing your body

5. **Recharge**—sleep, rest, relaxation

6. **Family, Friends, and Co-Workers**—your relationships with others

7. **Spirit and Soul**—a sense of connection, purpose, and meaning

8. **Power of the Mind**—tapping into your ability to heal and cope.

More information on the whole health initiative and these eight topics will be explored in detail in upcoming issues.
Veteran uses Native American rituals to cope with PTSD

By Jeff Nowakowski

Vietnam Veteran Glaise Chaisson recently moved out of a rundown trailer and into a new house that reminds him daily of the “huge piece of my life yet to live.”

But that sense of confidence today, to “continue moving forward” as he puts it, was not easy to attain. It’s taken almost 20 years and more than 10,000 miles between Louisiana and North Dakota.

“When I got back from Vietnam and the way we were treated and what we were called, I walked around with a chip on my shoulder,” said Chaisson. “Then one day, I decided to shed being unhappy. And that’s when I went on my journey.”

It was the fall of 1999 when Chaisson bought a truck, packed a sleeping bag and a few clothes and headed for the plains of the upper Midwest.

Over the next three weeks, Chaisson learned how some Native American rituals could be used to reduce his PTSD. “I went through a purification ceremony in a sweat lodge, participated in a POW WOW, and it inspired me to get my feelings out through painting, carving, and wood burning artwork,” said Chaisson. “Just the physicality of the art, the shapes you’re working with, the different colors that have some meaning to you – all of that helped me.”

“Glaise’s story is a wonderful example of the power of creativity, the arts, and spirituality in trauma recovery,” said SLVHCS PTSD Clinical Team Program Manager Dr. Madeline Uddo. “Many have recognized the important benefits of complementary and integrative health interventions (CIH) and now there is growing empirical support that documents the effectiveness of these approaches as adjunctive treatments.”

“Every day, I used to be in Vietnam until 3 a.m. Then, I’d get up after a little sleep and have breakfast. But by 11 a.m., I was back in Vietnam. Now, I can stop that cycle by painting or carving or wood burning an image that’s important to me in my life’s journey.”

“Through all of this, I’ve learned that Vietnam wasn’t my life,” he said. “It was just one slice of my life. There’s still a huge piece of my life yet to live and I have to go explore that life to its fullest.”
Prolonged Exposure helps Veterans overcome PTSD

By Marie Barrett, Psychology Intern and Doctoral Candidate

PTSD affects many Veterans, but it doesn’t have to affect them for many years. There are evidence-based treatments available at SLVHCS and providers from all services can help Veterans find PTSD-related care.

“Trauma-focused therapies like Prolonged Exposure (PE) have the most evidence for effectively treating PTSD,” said SLVHCS Psychologist, Evidence Based Psychotherapy Coordinator, and Prolonged Exposure National Consultant Dr. C. Laurel Franklin. “It is important for all clinicians to be aware of the symptoms of PTSD and the effective psychotherapies that alleviate these symptoms.”

As such, all Veterans with PTSD should be offered these treatments. The VA has invested in resources to ensure that mental health clinicians at the new Veterans medical center and CBOCs are trained to provide PE therapy. Research conducted at SLVHCS has shown that PE provided via telemedicine is also effective.

Healthcare providers, even those without mental health training, can look for symptoms of PTSD. People with PTSD may revisit their trauma though symptoms such as nightmares or unwanted memories. They may isolate themselves and avoid things that remind them of the trauma, such as certain sounds or activities. They may have negative thoughts and feelings; examples are numbness, irritability, guilt, and beliefs that people are untrustworthy. They may feel on edge, startle easily, or watch for danger even in situations that are typically safe.

As the focus of Veteran health care is turning toward the whole health initiative and its eight modules, which is being piloted at SLVHCS by the PTSD program of the Psychology Service, an additional module on prolonged exposure is considered a gold-standard treatment for PTSD. PE is effective for Veterans from all service eras, of all genders, and with many different types of trauma. PE works by targeting avoidance of trauma reminders and teaching Veterans new, healthier ways to cope. Therefore, it is an especially good fit for Veterans who are isolated, worried about safety, and avoid encountering any reminders of their trauma.

Veterans who want additional PTSD treatments should talk with their provider about their health care needs.

Common Types of Trauma:

- Combat
- Sexual or physical assault
- Learning about the violent or accidental death of a loved one
- Child sexual or physical abuse
- Serious accidents (e.g., car wreck)
- Natural disasters (e.g., hurricane)
- Terrorist attacks
PTSD – acceptance and commitment therapy enriches Veteran quality of life

By Marie C. Barrett, M.A., Psychology Intern & Doctoral Candidate

Depression is a common mental health concern in the Veteran population.

Acceptance and commitment therapy for depression (ACT-D) is offered at SLVHCS and providers from all services can play a role in helping Veterans access this treatment.

“ACT-D has a strong evidence-base identifying both symptom reduction and increases in quality of life,” said Psychologist and ACT Therapist Dr. Lisa-Ann Cuccurullo. “Being able to provide Veterans with treatments supported by science is consistent with the VA mission of providing Veterans with the ‘best care anywhere.’”

Health care providers in all services can assist Veterans by looking for signs of depression. People with depression may present with psychological and/or physical symptoms. Common symptoms of depression not only include feelings of sadness, guilt, or hopelessness, but also physical symptoms such as fatigue, insomnia, restlessness, concentration difficulties, and unexplained changes in weight or appetite. Symptoms of depression may occur on a periodic basis or may persist for weeks, months, or even years. People experiencing symptoms of depression are at higher risk of suicide, and therefore awareness of and appropriate responses to these symptoms are of the utmost importance.

ACT-D helps Veterans overcome symptoms of depression by focusing on each Veteran’s personal goals and values.
NCIS: New Orleans returns to film at SLVHCS

By Chris W. Cox

For the second time in two months, the TV crime drama show NCIS: New Orleans filmed several scenes in the new Veterans medical center.

The cast and crew performed additional filming in unit 2B, on the second floor concourse in the diagnostic & treatment building, and at the main entrance during the week of Jan. 22 – 26.

In December 2017, NCIS: New Orleans filmed a few scenes for an episode inside the new Veterans medical center and just outside the main entrance.

That episode, called “The Ties That Bind,” aired on Tuesday Jan. 23 at 8 p.m. on CBS.

One of the stars of the show, Scott Bakula, took some time during breaks in filming to visit with Veterans who were inpatients on unit 3B. Bakula also had a chance to meet and talk with many of our team members on the unit.

This is the second time our new Veterans medical center has been featured on national television!

Last summer, the new Veterans medical center and some of its staff were featured in a TV commercial advertising career opportunities with VA.

“People will see how beautiful this new Veterans medical center is when they see it on national TV over the next couple of episodes of NCIS: New Orleans,” said SLVHCS Medical Center Director Fernando O. Rivera. “But what’s amazing is that our VA medical center is what Hollywood considers a top tier private hospital should look like.”

The CBS crime drama NCIS: New Orleans returned to SLVHCS in January to film more scenes for an upcoming episode. Actor Lucas Black (foreground) rehearses a scene with actor Scott Bakula (left) and actor Tom Day (inpatient). (Photo by Jeff Nowakowski)
American Legion DC @legionindc · May 1
While it is fashionable to criticize @VeteransHealth at @DeptVetAffairs, the
majority of the vets we speak with are happy with the quality of care. This
@RANDCorporation study confirms what we are hearing nation-wide. Still, there
is room for improvement.

RAND Corporation @RANDCorporation
Study: The VA health care system performs similar to or better than non-VA
systems on most measures of inpatient and outpatient care quality. But
there’s high variation in quality across individual VA facilities. r.rand.org/7hfa

SteelyMagnolia @SteelyMagnolia
Replying to @legionindc @VeteransHealth and 2 others
@VANewOrleans is the model by which all others should be run. 40+ yrs of superior svc,
despite operating, after Hurricane Katrina, on only 2 floors of their bldg. for 11 yrs. EVERY
S.E. LA veteran was accommodated at satellite locations by a staff that always goes
above & beyond

9:25 AM · 1 May 2018 from Louisiana, USA

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