Message from the Director

Darwin G. Goodspeed
Director, VA Portland Health Care System

Since reporting to the VA Portland Health Care System in November 2018, I have been impressed with the cadre of committed professionals who work at our facilities to care for the equally impressive Veterans in the Pacific Northwest.

VAPORHCS has a proud history of providing state of the art high quality care. Through our world class transplant programs, we care for Veterans from all parts of this great nation. I am exceedingly proud to be a part of this team of professionals and honored to uphold the commitment to care for my fellow Veterans. We are an organization that is focused on continuous improvement and very much want to know when we have missed the mark. I invite Veterans to be a part of improving their VA. I encourage you, to provide feedback on how we can continue to improve and meet your needs. There are multiple ways you can do this.

- I invite all Veterans to attend one of the ‘Veteran Listening Sessions.’ These events are throughout the year in a variety of locations (see page 5 for details).
- When you receive patient surveys in the mail or email, please complete the survey. I really do see the survey results and the information is used to help us improve. If you have an email, please provide that information at your next clinic appointment and we will add you to our email survey list. Additionally, you can receive updates on happenings at your VA.
- I invite Veteran Service Officers and representatives for Veteran Service Organizations to join the Portland VA VSO Committee. Monthly meetings are hosted by Portland Regional Benefits Office, Willamette National Cemetery, Oregon Department of Veterans Affairs, and VAPORHCS to provide important program changes and updates. This is a great opportunity to learn valuable information about what is happening in the VA that will be helpful to the Veterans you represent. To join the VSO Committee, please contact my Public Affairs Office at VHAPOR-PublicAffairs@med.va.gov.
- I welcome hearing from Veterans in writing as well. You can connect with me by sending an email through my Public Affairs Office (VHAPOR-PublicAffairs@va.gov) or write me a letter; VAPORHCS, Attn. Director, 3710 SW U.S. Veterans Hospital Rd. Portland, OR 97239

The number one priority of VAPORHCS is the Veterans who depend on us for their health care. With the over 4,000 VAPORHCS employees, I am committed to making your VA the best it can be by focusing our efforts on:
- Improving Customer Service (Veteran Experience),
- Implementing the MISSION Act,
- Ending Veteran Suicide, and
- Increasing Veteran Access to Care

The MISSION Act will be a seismic change to how Veterans access care in the community. It provides Veterans with

(Continued on next page)
better options to access care in a more streamlined and less confusing way. We are just starting to learn the details about how this program will be implemented and this information will be shared widely. As we get closer to implementation, opportunities will be available for all Veterans to learn more. (See the latest details on page 7.)

It is my distinct honor to serve as the Director of your VA and I know I will work closely with many of you to continue to grow and improve our VA.

Darwin Goodspeed

New Simulation Training Center

VAPORHCS opened a brand new Simulation Training Center on January 9, 2019, in the Portland VA Medical Center.

The new training center for staff features with more than 1000 square feet, featuring an outpatient exam room, inpatient room, observation room, simulation briefing & training room, and CPR training room.

Catherine Crespo, RN and VAPORHCS Simulation Coordinator in the Education Division, poses in the new Simulation Training Center at PVAMC.

New Vancouver Specialty Care Clinic

VAPORHCS Director Darwin Goodspeed (3rd from left) along with several VAPORHCS staff cut the grand opening ribbon officially opening the new Vancouver Specialty Care Clinic Specialty Care on December 13, 2019.

VAPORHCS opened a brand new Specialty Care Clinic on the Vancouver VA campus on the third floor of the Clark County Center for Community Health Building on December 13, 2018. The project consolidates several specialty care services in one location, expands available services, while opening up the vacated space to expand clinical space and access to care in other service areas. The new clinic included Eye Care Service (optometry, ophthalmology, blind rehab & low vision clinic), and in subsequent months started adding dermatology, podiatry, hand surgery, geriatrics, and clinical space for these services to perform minor procedures.
Veteran thanks VA Laboratory and Hematology teams for saving his life

Steven Johnson is a Veteran who served in the Coast Guard from 1961-1969.

Mr. Johnson had an ongoing issue with dizziness due to unstable blood pressure. In January of this year he was hospitalized at the Roseburg VA where he was found to have rapidly clotting blood. Upon discharge, his labs began to be monitored by Portland VA Hematology staff and in May 2018 he established care with Dr. Ted Braun.

When Mr. Johnson came to Portland for his initial consultation and had his blood drawn, it took over 90 minutes and multiple phlebotomists - his blood was as thick as jelly. Lue Ann MacKenzie, a medical technologist, began to run his blood and it gummed up the analyzer. She immediately recognized that it was not just a blood clot. A team of medical technologists - Lue Ann Mackenzie, Dawn Hornby, Christopher David and Ryan Snodgrass - put their heads together to figure what was going on. Together they decided on a plan to dilute the blood and manually calculate the protein level. The result sent a shock wave through the lab. Mr. Johnson’s protein levels were higher than anyone could have imagined! Chris called Dr. Braun to let him know. The Veteran was in hyperviscosity syndrome - which could be fatal.

Dr. Braun called Mr. Johnson, who was already almost two hours away, and asked him to return to the hospital to be admitted. He was found to have Waldenstrom’s macroglobulinemia (WM), a rare type of blood cancer.

But the story doesn’t end there...

During his admission, Jennifer King, RN with the Cancer Care Navigation Team, went to the bedside to meet with Mr. Johnson and his wife. The Veteran expressed a strong desire to meet and thank the lab team who helped save his life. Jennifer tracked down all the team members involved and took Lue Ann, Chris, Dawn, Ryan, along with their supervisor,
Kathleen Miles, to the Veteran’s bedside. Mr. and Mrs. Johnson were overcome with emotion and joy to meet the team. His wife said, “Because of you, he will die with this disease and not because of it.” There were tears and hugs all around the room. “I’ve been in this business for 35 years and I have never had anything like this happen,” said Kathleen Miles, “No one ever asks to meet us!” It was clear the medical technologist felt honored and touched that the Veteran wanted to personally thank them for their care.

For the past six months, Mr. Johnson has been under the care of multiple talented providers, including Dr. Braun and Jennifer King, and is doing well. He recently came in to the Portland VA Medical Center for chemotherapy and had a special gift to present to the laboratory staff. He had a plaque made that says, “This is the A team of all lab rats” Unbeknownst to Mr. Johnson, the Laboratory staff also had a surprise for him! They gave him a t-shirt that read, “The lab saved my life.” It was a truly special moment for all.

Thank you, Mr. Johnson, for letting us share your inspirational, courageous story with fellow Veterans, families, staff, and the VA community!
Veterans Listening Session and VBA Claims Clinics

- **Newport**— March 21, 12:30 to 2:30 p.m.  
  American Legion Post 116
- **Redmond**— April 22;  VFW Post 4108
- **Prineville**— April 23;  Elks Lodge 1814
- **TBA** = Christmas Valley, Lincoln City, Astoria, Vancouver, Longview, Albany, and more.

The Veterans Benefits Administration (VBA) Claims Clinic staff can answer questions and address issues about your benefits or claim.

The VA Portland Health Care System will have staff from services such as:
- VA Health Care Enrollment
- Women Veterans Health Care
- Suicide Prevention
- MyHealtheVet, and more

Also meet VA Portland Health Care System and Veteran Benefit Administration Portland Regional Office Directors personally to share ideas on how to improve VA services and address concerns.

Questions? Call (503) 808-1920 or VHAPOR-PublicAffairs@med.va.gov.

For reminders and more details about these and other VAPORHCS events and activities, sign up for email notifications under “CONNECT WITH THE VA PORTLAND HEALTH CARE SYSTEM” on the VAPORHCS main web page.

You can also follow us on Facebook or email VAPORHCS Public Affairs to be put on an email list.
Preventing suicide - you can make a difference
By Darwin G. Goodspeed
Director, VA Portland Health Care System
(This is a reprint of an OP-ED published January 24, 2019)

Preventing Veteran suicide is a top priority for the VA, the VA Portland Health Care System, and it is a national public health issue that affects all Americans. Just as in the general population, there is no single cause of suicide among Veterans. A death by suicide often reflects the complex interaction of risk factors at the individual, community, and societal levels.

Over the last decade, VA has implemented numerous programs, policies, and initiatives related to suicide prevention. Locally, the VAPORHCS Suicide Prevention Team provides timely follow up to any Veteran or loved one who’s called the Veterans Crisis Line – in 2018, the team responded to 1,800 referrals helping Oregon and Southwest Washington Veterans access healthcare, coordinated enhanced mental health care for Veterans at high risk for suicide, and they provided information on VA and community resources for housing, financial, and other social service assistance.

Our Suicide Prevention Team hosts suicide prevention support groups for Veterans at five locations within the VAPORHCS. Any interested Veteran should reach out to the team at 503-402-2857.

Our team also provides more than 10 outreach and training events every month with organizations in the communities we serve. If your organization is interested in understanding suicide and how to help prevent suicide, please contact our team to set up a training or to attend an outreach event.

Some of the resources VA offers to Veterans, their family members and friends include:

The #BeThere campaign — emphasizing that everyday connections can make a big difference to someone going through a difficult time and that individuals don’t need special training to safely talk about suicide risk or show concern for someone in crisis.

Make the Connection — providing hopeful stories, information and solutions to issues affecting Veterans.

The Veterans Crisis Line — a confidential toll-free hotline, online chat, or text to connect with qualified, caring VA responders. Call 1-800-273-8255 and Press 1, chat online, or text a message to 838255 to receive confidential support 24/7/365. All of us should have this number in our cell phones should a Veteran need support.

We all can make a difference in preventing Veteran suicide.

Thank you for being a part of the solution.

-VAPORHCS-
MISSION Act of 2018 update
The VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act

On January 30, 2019, the Department of Veterans Affairs (VA) announced its proposed access standards for community care and urgent care provisions that will take effect in June 2019 and guide when Veterans can seek care to meet their needs under the MISSION Act – be it with VA or with community providers.

Eligibility Criteria and Access Standards for Veteran Community Care:

The proposed access standards support VA’s goal of making sure Veterans have the best access to care when and where they need it through either a VA medical facility or community provider.

When offered, Veterans will continue to have a choice whether to receive care at a VA medical facility or a community provider.

In consultation with a VA provider, a Veteran may be eligible for community care in one of the following situations:

- **Services unavailable.** If the type of care needed is not available at the Veteran’s closest VA medical facility. For example, a female Veteran seeking maternity care will always be referred to community care as VA does not provide this service.

- **Residence in a state without a full-service VA medical facility.** If the Veteran is located in Alaska, Hawaii, New Hampshire, and the U.S. territories of Guam, American Samoa, Northern Mariana Islands, and Virgin Islands.

- **40-mile legacy/grandfathered Choice.** If a Veteran was eligible to receive community care through the Veterans Choice Program (VCP) under the 40-mile rule at the time that the MISSION Act was enacted, and remains eligible under the same distance standard (i.e. has not moved closer to a VA primary care provider), and either lives in one of the five most rural U.S. states (SD, ND, MT, WY, AK) or is seeking care before June 5, 2020 and has received care since June 5, 2017, he or she can be referred to community care.

- **Access standards.** If a specific wait-time cannot be met by either the VA medical facility (wait time) or the average amount of time it takes the Veteran to drive from his or her home to where the service can be provided (average drive time). For example, if the wait time for a Veteran to receive primary care at his or her nearest VA medical facility is 50 days, he or she would be eligible for community care.

  - For primary care, mental health, and non-institutional extended care services, VA is proposing the same 30-minute average drive time standard currently used for primary care by portions of the TRICARE Prime program.

VA encourages the public to comment on the proposed access standards and urgent care benefit during the public comment period. You can view and comment on the published proposals in the Federal Register: “Veterans Community Care Program” (RIN 2900-AQ46) and “Veterans Community Walk-in Care” (RIN 2900-AQ47).

(Continued on next page.)
MISSION Act of 2018 update — continued

- For specialty care, VA is proposing a 60-minute average drive time standard.
- VA is proposing appointment wait-time standards of 20 days for primary care, mental health care, and non-institutional extended care services, and 28 days for specialty care from the date of request with certain exceptions.
- Eligible Veterans who cannot access care within the above standards would be able to choose between eligible community providers and care at a VA medical facility.

- **Best medical interest.** If the Veteran’s provider determines that the Veteran would be better served receiving care from a community provider. For example, if a Veteran has a specific type of ovarian cancer that the oncologist is unfamiliar with, and the Veteran lives close to a medical facility where the relevant specialist for her cancer works, that Veteran would be eligible for community care for that type of care.
- **Needing care from a VA medical service line that VA determines is not providing care that complies with VA’s standards for quality.** If a Veteran needs care from a specific VA medical service line that is determined to have a lower quality (based on specific quality standards) than the same care that can be provided by a community provider, a Veteran is eligible for community care for that specific type of care.

**Urgent (Walk-In) Care**

- Eligible Veterans will have access to urgent (walk-in) care that gives them the choice to receive certain services when and where they need it.
- To access this new benefit, Veterans will select a provider in VA’s community care network and may be charged a copayment.

**Timeline and Public Comment Period**

- The proposed access standards will take effect when the federal regulations are published as final.
- VA encourages the public to comment on the proposed published access standards and urgent care benefit during the public comment period in the Federal Register (RIN 2900-AQ46 and RIN 2900-AQ47, respectively).
Managing Chronic Pain and Suffering: A Whole Health Resource Workshop

Monday, February 11, 2019, 9 a.m. to 1 p.m.

Portland VA Medical Center, Bldg. 100, Auditorium

Do you live with chronic pain? Join us to hear about the many resources available at VA Portland to help you manage chronic pain and increase your quality of life.

Presenters will include experts in:

- Pain Medicine
- CBT for Chronic Pain
- Chiropractic Care
- Medications
- Nutrition
- Yoga/Tai Chi
- Acupuncture
- Movement Therapies
- Stress Management

For more information or to sign up, call Dr. Timothy Wright
At (503) 220-8262, ext. 55612

Program offered by VA Integrative Pain Care

Please share on Facebook
Do You Have a family member or friend who is a Veteran or military service member living with mental illness? - You are not alone! -

NAMI Homefront is a free, six-session class for family, friends, significant others of Veterans, and Military Service Members with mental health conditions.

Topics include . . .

- PTSD, Bipolar Disorder, Depression, Anxiety, Schizophrenia, . . .
- Basics of Brain Biology & Medications
- Dealing with Crisis & Relapse
- Navigating the VA Medical System & DOD
- Communication & Empathy Skills
- Self-Care, Fighting Stigma and Advocacy

Tuesday evenings 6:00 – 8:30 p.m.
February 12 – March 19, 2019
Portland VA Medical Center

To register:
(503) 228-5692

Presented in partnership by the VA Portland Health Care System & NAMI Multnomah
Self Referral now offered for Podiatry, Nutrition Services, and Amputee/Wheelchair Clinics

Podiatry, Nutrition Services, and Amputee/Wheelchair clinics can all now see patients by Self-Referral, meaning they do not need a consult placed to be able to see a provider in one of these areas. In the community, depending on a person’s insurance they may or may not need a referral to see a specialist. This option reduces the number of times a Veteran has to physically travel to a clinic since they do not need to see their PCP first and it gives them the ability to seek the care they need at the time they need it, with the goal of improving Veteran satisfaction and their health.

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<tr>
<th>What are the changes</th>
<th>How to contact or direct dial number</th>
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<tr>
<td><strong>Podiatry</strong> – does the Veteran have new foot pain or</td>
<td><strong>Podiatry</strong> –</td>
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<td>open wounds on feet? They can call the Specialty Call</td>
<td>Through the Specialty Call Center,</td>
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<td>Center and be referred directly to the Podiatry service</td>
<td>(503) 220-8262 ext. 50820</td>
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<td>for scheduling. The Veteran no longer needs to go through</td>
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<td>their PCP to have a consult entered.</td>
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<td><strong>Nutrition Services</strong> – If a Veteran would like to see</td>
<td><strong>Nutrition Services</strong> –</td>
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<td>a dietitian, they can call the NFS direct dial number</td>
<td>(503) 273-5112</td>
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<td>to be scheduled. The Veteran no longer needs to go</td>
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<td>through their PCP or Specialist to have a consult</td>
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<td>entered.</td>
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<td><strong>Amputee clinic</strong> – for our Veterans who are missing</td>
<td><strong>Amputee &amp; Wheelchair clinics –</strong></td>
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<tr>
<td>a body part, they can call or come by the clinic to</td>
<td>(503) 273-5018</td>
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<td>be scheduled. No consult needed.</td>
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<td><strong>Wheelchair clinic</strong> – for Veterans in need of a</td>
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<td>wheelchair, power wheelchair/scooter they can call or</td>
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<td>come by the clinic to be scheduled. No consult needed.</td>
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