



Elizabeth Goolsby
Fayetteville VAMC Director

Director's Forum

by **Elizabeth "Betty" Goolsby**

Fayetteville Priority - Access to high quality, safe patient care and service

Integrity, transparency in access to care – Fayetteville experience

In recent weeks and months, we have seen in the media concerns about patient access to care and its relationship to scheduling of patients for care. How does this relate to the Fayetteville Enterprise? What is our experience?

The growth in veteran numbers we are seeing is reflective of the 13 years of war that is producing more Veterans. The number of service members who are stationed across our catchment area — Camp Lejeune, Ft. Bragg, and Seymour Johnson Air Force Base — has increased and they tend to settle close to the last duty station or near an area of their former military affiliation, when they leave service.

Fayetteville Enterprise is seeing a 7% growth, annually, in new Veterans as compared to 1% across all of VA. The rapid growth has strained our physical plant, challenged our

ability to recruit and retain enough providers, as well as lowered patient satisfaction scores due to crowded clinics, lack of parking, and amenities below community standards.

Given all of these challenges we have made progress in improving our access to care. We have partnered with the community, Department of Defense facilities, and other VAs to provide services. We have also built internal capacity through adding new clinics at Robeson, Goldsboro, Village Green Annex, Wilmington Health Care Clinic in the past 4 years (120K new space), with construction under way at Sanford for a CBOC, Jacksonville for a larger CBOC and the Fayetteville Health Care Center (another 300K in new space in 2015/2016). We have added evening and weekend clinics, used 10 hour shifts to accommodate 5 PACT Teams in the

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Highlights

Director's Forum continued

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space of 4 Teams, a new PACT Team to be located on Camp Lejeune in September and telehealth among other strategies. Even with all of these strategies, our wait times for primary care are among the longest in the VA. Our most critical need is for space, immediately, to allow us to expand services with new providers.

We are cautiously optimistic we will have

approval for additional leased space in the near future. In the meantime, we will continue to monitor those who are waiting and when possible, add community resources for care to others. Though it might be tempting to understate our needs and wait times, we will be transparent with our status and our needs to provide care.

As our options to provide care expand, I will keep you updated. No matter what our challenges are, we will continue to seek only the best care for our Veterans.

Profile of new Secretary of Veterans Affairs

Name: Robert A. McDonald

Born: Gary, Ind. Age: 61

Military service: West Point graduate, U.S. Army Captain from 1975-80 serving primarily with 82nd Airborne Division

Civilian Work History: Joined Procter & Gamble in 1980; rose through the ranks, eventually serving as CEO, president and chairman of the board from 2009-13.

Education: Bachelor of Science in engineering from West Point, 1975; Master of Business Administration, University of Utah, 1978.

Family: Wife, and two adult children

Quotable Quote: *"He is an exceptional person—a great leader, a skilled manager, an extraordinarily talented executive of great experience, and a man with the strongest moral compass,"* said

then Acting VA Secretary Sloan Gibson, in describing McDonald, a former West Point classmate and close friend for 40 years.



Message from Secretary McDonald

I am grateful to President Obama and to Congress for this opportunity to join the dedicated employees of the Department of Veterans Affairs (VA), and I am honored to serve as your Secretary and lead VA. We are immensely fortunate to work in an organization with the noblest and most respected mission in Government—serving this Nation's Veterans.

We have strong institutional values—Integrity, Commitment, Advocacy, Respect, and Excellence. We will all need to depend on and live by our values as we rise to meet the challenges ahead. Deputy Secretary Sloan Gibson—my West Point classmate, a trusted friend, and a great leader—had it right in his recent statement to Congress: “We can turn these challenges into the greatest opportunity for improvement in the history of the Department.”

I recognize that the last few months have been difficult—and the days ahead will not be easy. In fact, many tasks that we must accomplish will be difficult, but I assure you that I will be with you each step of the way. I want to hear your ideas for improving the Department, and I will not tolerate those who stifle initiative, seek to punish people who raise legitimate concerns or report problems, or lack integrity in word or deed. Trust is essential in everything we do.

I am proud of the work you do and the mission we share, and I am determined to move forward to ensure that VA is the provider of choice for care and benefits for every generation of America's Veterans.

I look forward to meeting as many of you as possible in the coming days. God bless you all.

Robert A. McDonald



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Photo by Brad Garner

Then-Acting VA Secretary Sloan D. Gibson fields questions from Fayetteville VAMC employees during his June 12 visit here.

VA Acting Secretary Gibson visits Fayetteville VAMC, announces immediate actions to improve access to care

In the wake of the release of Nationwide Access Audit along with facility level patient access data, Acting Secretary of Veterans Affairs Sloan D. Gibson visited the Fayetteville VAMC June 12.

During the visit Gibson met with medical center leadership, Congressional staffers and Veterans Service Officers, and medical center employees.

During a press conference at the conclusion of his visit here, the acting VA Secretary announced immediate actions to improve access to care for Veterans in Fayetteville's catchment area.

"Far too many Veterans in Fayetteville – and across this country – are being told they have to wait in line. I'm here today to say that no Veteran should ever have to wait for the care they have earned through their service and sacrifice," said Acting Secretary Gibson. **"The data we released this week shows the extent of the problems we face. As the President has said, we must work together to fix the**

unacceptable, systemic problems in accessing quality healthcare. And that starts by addressing and **solving the problems right here in Fayetteville."**

In addition to the system-wide actions taken in response to the audit findings and data, Gibson outlined actions to accelerate access to care for Veterans in Fayetteville:

- The Fayetteville VAMC is reaching out to all Veterans identified as waiting longer than 30 days for care to discuss individual medical needs and schedule appointments – more than 2,000 Veterans have been contacted.
- Gibson directed that the Fayetteville VAMC receive an additional **\$7.4 million from within VA's** budget specifically to accelerate access to care.
- Fayetteville VAMC has expanded hours – adding mornings, evenings and weekends – and deployed a mobile care unit to see patients.

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: Acting Secretary visits Fayetteville VAMC

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- Gibson directed that the Fayetteville VAMC use temporary staffing measures, along with clinical and administrative support, to ensure these Veterans receive the care they have earned through their service.

- Gibson directed that the Fayetteville VAMC increase the use of established contracts with community partners to schedule Veterans waiting to be seen by a doctor.

Several days later, VA announced the following actions in response to the Nationwide Access Audit findings and data:

- **New Patient Satisfaction Measurement Program-** Gibson directed VHA to immediately begin developing a new patient satisfaction measurement program to provide real-time, robust, location-by-location information on patient satisfaction, to include satisfaction data of those Veterans attempting to access VA healthcare for the first time. This program will be developed with input from Veterans Service Organizations, outside healthcare organizations, and other entities. This will ensure VA collects an additional set of data – **directly from the Veteran's** perspective – to understand how VA is doing throughout the system.



Photo by Brad Garner

Then-Acting SecVA Sloan Gibson meets with VSOs and Congressional staffers.

- **Holding Senior Leaders Accountable-** Where audited sites identify concerns within the parent facility or its affiliated clinics, VA will trigger administrative procedures to ascertain the appropriate follow-on personnel actions for specific individuals.

- **Immediate VHA Central Office and VISN Office Hiring Freeze-** Gibson ordered an immediate hiring freeze at the Veterans Health Administration (VHA) central office in Washington D.C. and the 21 VHA Veterans Integrated Service Network (VISN) regional offices, except for critical positions to be approved by the Secretary on a case-by-case basis. This action will begin to remove bureaucratic obstacles and establish responsive, forward leaning leadership.

- **Removing 14-Day Scheduling Goal-** VA eliminated the 14-day scheduling goal from employee performance plans. This action aims to eliminate incentives to engage in inappropriate scheduling practices or behaviors.

- **Increasing Transparency by Posting Data Twice-Monthly-** At the direction of the Acting Secretary, VHA will post regular updates to the released access data released at the middle and end of each month at VA.gov. VA officials say twice-monthly data updates will enhance transparency and provide the most immediate information to Veterans and the public on Veterans access to quality healthcare.

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: Identity Theft

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and has a strong multi-layered defense in place to combat evolving cyber security threats. VA is committed to protecting Veteran information, continuing its efforts to strengthen information security and putting in place the technology and processes to ensure that Veteran data at VA is secure.

In the event of a loss of VA data, VA has safeguards in place to protect against identity fraud. Acting out of **an abundance of caution**, VA's standard practice is to provide free credit protection service enrollment, monitoring services and reports, fraudulent charge alerts, and fraud resolution and identity theft insurance to individuals affected by a VA data breach with a reasonable risk for the potential misuse of any sensitive personal information.

For additional information on identity theft, visit www.va.gov/identitytheft or contact the VA Identity Safety Service at vaidtheft@va.gov.



Photo by Brad Garner

Legislators visit for access updates

Above, Sen. Kay Hagan (D, N.C.) greets well-wishers during her June 23 visit here to receive an update on access to care issues. Below, far right, Rep. David Price (D, N.C. 4th District) receives briefing from medical center officials during his fact-finding visit here June 27.



Photo by Jeff Melvin



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News

Nurses feted during National Nurses Week, May 6-12



Photo by Brad Garner

FVAMC Nursing Excellence awards recipients, Jan Rogers, adult nurse practitioner board certified; LaShonda Tomlinson, certified nursing assistant; Teresa Alston, licensed practical nurse; and Felice Carlton, registered nurse



Photo by Jeff Melvin

Gidget Wilson, left, presents gift to bake off contest winner Brenda Owens



Photo by Brad Garner



Photo by Brad Garner

VALOR nursing students Sarah Monori, above, and Katie Galbreath, left, participate in the White Uniform contest



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News

Nurses feted during National Nurses Week, May 6-12



Photo by Jeff Melvin

Above and below, nurses appreciation picnic



Photo by Brad Garner

White Uniforms Day group photo



Photo by Jeff Melvin



Photo by Brad Garner

Kim McDonald (L), and Katrina Canady (R) pose for a photo with Nursing Excellence Award recipient Felice Carlton



Photo by Jeff Melvin

Blessing of the Hands ceremony



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America's Veteran

Have you had your pneumococcus vaccination yet?

Pneumococcal disease pronouncing it is hard, getting vaccinated is easy

While immunizations (shots) are something we usually think about for babies and young children, adults need some shots, too.

One of these shots is the vaccine for pneumococcal (*pronounced nu ma kok kal*) disease. This vaccine is for adults over 65 or for those with certain health conditions.

Pneumococcus is a type of bacteria that can cause many types of infection such as pneumonia, meningitis, or blood and ear infections. Pneumococcus is passed from person to person by a sneeze or cough. Even healthy people can carry pneumococcus in their lungs or nose, but it does not make them sick.

Adultvaccination.org reports that each year in the U.S., about 175,000 people have to be put in the hospital due to pneumococcal lung infections. Pneumococcal infections can be treated with antibiotics, but bacteria that resist antibiotics are much more common.

People most often have to be treated in the hospital with IV antibiotics.

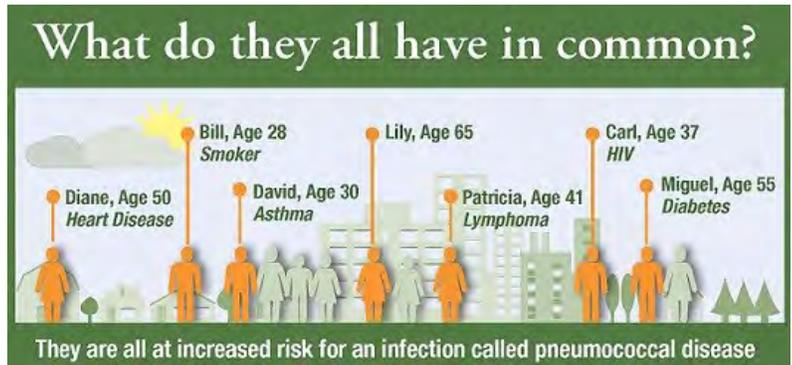
The Centers for Disease Control and Prevention (CDC) recommend

that all adults ages 65 years and older receive one dose of the pneumococcal vaccine. People under 65 years of age should receive the vaccine if they have chronic lung disease (such as COPD, but not asthma).

In addition, people with chronic heart disease, diabetes, chronic liver disease, chronic alcoholism, and chronic kidney failure should get the vaccine. People without a spleen, people with a weak immune system (such as those with an organ transplant or HIV infection), and people who live in nursing homes or other long term care facilities should also get the vaccine.

People who receive this vaccine before they turn 65 years of age should get a second dose when they turn 65 (as long as it has been

5 years since the first vaccination). Veterans and family members seeking facts on vaccines may have questions about two



types of pneumococcal vaccines offered now for adults. The two vaccines are pneumococcal polysaccharide vaccine (PPSV23) and a pneumococcal conjugate vaccine (PCV13). Some people with a weak immune system may need both doses of vaccine.

While that can be confusing, Fayetteville VAMC Clinical Applications Coordinator Angela Crummell said the bottom line is **that a patient's provider makes the call based on each person's medical history.**

"There is no one shot fits all," said Crummell. "The main thing is to get the pneumococcal vaccine."

Not sure if you had your pneumococcal shot? Do you think you should get it? Check with your health care provider!

Pneumococcal disease can strike quickly and it can cause death. Getting the vaccine is the safest, best way to protect against this infection. Even if the vaccine does not prevent the infection, it can make it less severe and help keep you out of the hospital.



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America's Veteran

VA releases nationwide data on access to veterans health care

WASHINGTON – VA released the first of the bi-monthly data updates showing progress on VA efforts to accelerate access to quality health care for Veterans who have been waiting for appointments June 9.

Acting Secretary of Veterans Affairs Sloan D. Gibson announced that VA outreach has now extended to nearly 140,000 Veterans across the country to get them off of wait lists and into clinics for medical appointments. VA also released the latest updated, facility-level patient access data.

“In many communities across the country, Veterans wait too long for the high quality care they’ve earned and deserve,” said Acting Secretary Gibson. **“As of today, we’ve reached out to nearly 140,000 Veterans to get them off wait lists and into clinics, and there is more work to be done. As we continue to address systemic challenges in accessing care, these regular data updates enhance transparency and provide the most immediate information to Veterans and the public on improvements to Veterans’ access to quality health care.** We are fully committed to fixing the problems we face in order to better serve Veterans. We must restore the public’s trust in VA, but more importantly, we must restore the trust of our Veterans who depend on us for care.”

The latest patient access data is available at www.va.gov/health/access-audit.asp.

VA rolls out burn pit registry

VA’s Airborne Hazards and Open Burn Pit Registry (<https://veteran.mobilehealth.va.gov/AHBurnPitRegistry/index.html#page/home>) is now available to help servicemembers and veterans report exposures to airborne hazards such as burn pits, oil well fires and other forms of pollution and document their health problems.

Advocacy groups for servicemembers who believe they have developed illnesses from working and

living near burn-pit disposal sites in Iraq and Afghanistan noticed Thursday they could log in and register on the [VA’s public health website](#), according to a report in the Military Times.

Eligible veterans and servicemembers include those who served in:

- Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn
- Djibouti, on or after September 11, 2001
- Operations Desert Shield or Desert Storm
- Southwest Asia theater of operations on or after August 2, 1990

“This is a great stepping stone in a long journey, the initial acknowledgment that people are sick and that illnesses related to burn pits do exist,” Rosie Lopez-Torres, co-founder of Burn Pits 360, told the Times. Her husband, retired Army Capt. LeRoy Torres, developed a rare lung disorder after serving in Iraq.



President Barack Obama in January 2013 signed into law a bill requiring VA to establish the registry for those exposed to potentially toxic fumes. The VA initially had balked, saying the effort was redundant since it already tracked servicemembers through an injury and illness surveillance system.

VA officials acknowledge that troops may suffer from illnesses related to environmental exposures and has established a surveillance program for servicemembers exposed to hexavalent chromium, a known carcinogen, at a water treatment facility near Basra in 2003, but also say there is not enough scientific evidence to prove that exposure to burn pits causes long-term health problems, according to the Times. (Reprinted from Stars and Stripes)



Highlights

Med Ctr holds Memorial Day celebration

Right, guest speaker Lt. Col. David Bryant, Operations Officer, 44th Medical Brigade, Ft. Bragg, NC, and Medical Center Director Elizabeth Goolsby place a wreath during the annual Memorial Day ceremony. Below, Memorial Day ceremony participants, Lt. Col. David Bryant, members of the U. S. Army Ground Forces Band Brass Quintet, and Victoria Huggins, Miss Central Carolina, pose for a group photo to mark the occasion.



Photos by Brad Garner



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Highlights

Army birthday celebration

In commemoration of the U.S. Army's 239th birthday, Fayetteville VA Medical Center hosted its third annual U.S. Army Birthday Cake Competition. Congratulations to Kimberly Roy, who won first place with a beautifully decorated two-tiered chocolate & vanilla cake paying tribute to various specialties, branches and commands. Ms. Roy's cake also featured a nod to the Army Corps of Engineers in honor of her husband, Capt. Justin Roy, who is currently serving in Afghanistan. We congratulate all the wonderfully gifted bakers who entered this year's competition as well as our friends from Fort Bragg who serve as the host organization for the event each year. The entries were both beautiful and delicious! (Photo by Brad Garner)



Photo by Dr. Brittany Hartzell

Carry the Fallen

Fayetteville VAMC was the starting and end point for the May 31 Carry the Fallen March to bring awareness to troop suicides. On a related note: Veterans in crisis and their families and friends are instructed to remember to please "Press 1" when contacting the Veterans/Military Crisis Line (1-800-273-8255) to get them in direct contact with Veterans/Military Crisis Line Responders.



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Highlights

NPD staff debut clinical simulation lab, show capabilities, benefits

Nursing Professional Development (NPD) Department staff hosted an open house in May to officially introduce Fayetteville VAMC health care providers to the new clinical simulation lab.

Describing the simulation open house as “an educational and learning event to introduce the educational resources and opportunities within the FNC VAMC Clinical Simulation Lab,” NPD’s Nurse Educator Lead **Sharonda Boykin** said the lab’s mission is to improve safety and quality of care through use of clinical simulation in education.

“The focus is to provide hospital staff with an exceptional educational experience in a dynamic and diverse learning environment,” said Boykin. “Simulation is an educational strategy to mirror, anticipate, and amplify real healthcare situations with guided experiences in a fully interactive way.”



Sharonda Boykin, left, and Katie Galbreath examine new crash carts

The open house represented an ideal opportunity to introduce attendees to equipment that will be utilized in the SimLab. Included among the equipment on display were:

- **Automatic External Defibrillator (AED)** provides realistic training experience for emergency responders to deliver optimal therapy when facing cardiac arrest.
- **Central Venous Catheter Placement (CVCP) Training equipment**
- The **Advanced Life Support (ALS) Patient Simulator**, a realistic interactive training manikin for simulating a wide range of advanced life saving skills. It is designed to meet the training requirements for medical emergencies. The ALS simulator responds to clinical interventions and targets key learning objectives including CPR, ACLS, NBC, trauma, bleeding control and first aid. Some of the ALS Simulator features include difficult airway



Photos by Jeff Melvin

From left, Sekeya Payton, Sarah Monori, Diana Cueli and Katie Galbreath perform CPR compressions on adult training manikin

management, variable spontaneous breathing, blood pressure arm which allows for palpation and auscultation (listening to the sounds made by a patient's internal organs, especially the heart, lungs, and abdominal organs, usually with a stethoscope), and ECG interpretations.

- **SimMan 3G**, a realistic, full-body, adult, wireless patient simulator with advanced clinical functionality to teach critical skills. It allows training in the actual environment in which employees work- such as in a hospital unit or ambulance or even in a military combat environment. Its features

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Highlights

: NPD staff debut clinical simulation lab

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include quality CPR feedback, convulsions, bleeding, wounds, wireless monitors, secretions, eye signs, vascular access, chest decompression, chest drain, drug and event recognition.

- **Voice Assisted Manikins (VAMs).**

VAMS provide immediate audio feedback, adding a new level of realism and precision to CPR training. During the first part of the course, the trainee is instructed on how to do compressions, ventilations, and CPR – then the manikin actually becomes the coach, providing real-time feedback as the trainee completes the hands-on section. If the manikin detects **that the actions don't** match American Heart Association 2010 guidelines, it verbally corrects the trainee, something that studies show almost immediately

improves basic CPR skills performance.

- **CPR Training Manikins (Adult and Baby)**

Simulation training provides an opportunity to enhance professional competencies, experience specific clinical situations, and implement interdisciplinary care. It offers opportunities to practice rare and critical events in a safe and controlled environment, affording unlimited practice without risk to patients. It promotes critical thinking and best practices in a

positive learning environment.

Boykin used a quote from the ancient Chinese philosopher Confucius to describe the benefits of simulation. **“Tell me, and I will forget. Show me, and I may remember. Involve me, and I will understand.”** -- Confucius, 450 BC

The Clinical Simulation Lab is located on the 4th Floor, B Wing, Room 431 (formerly the Dining Room for Ward 4C).

For further information about the FNC VAMC Clinical Simulation Lab, please contact the Nursing Professional Development (NPD) Department (VHAFNCNPD@va.gov). Staff members are Boykin, RN, MSN-Edu, at Ext. 5564; Wanda Jesse, RN, BSN, at Ext. 5552; Diana Shipp, RN, MSN-Edu, Simulation Coordinator, at Ext. 5550; and Crystal Hopkins, RN, MSN-Edu, Wilmington HCC educator, (910), (910)53-5300 Ext. 3635.

To schedule time in the FNC VAMC Clinical Simulation Lab, please contact the coordinator or email the department.



Simulation coordinator Diana Shipp, left, gives instruction using the SimManG

WORSHIP SERVICES
IN OUR MEDICAL CENTER CHAPEL
PROTESTANT SERVICE: SUNDAYS 2:00 pm
CATHOLIC MASS: SUNDAYS 11:00 am
MONDAY - THURSDAYS 12:00 pm
All Are Welcome! Contact us at 7031/5906

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Highlights



Prize drawing for the July 1-7 scavenger hunt sponsored by Organizational Health Committee will take place July 31. The campaign encourages all Fayetteville VAMC employees to join the committee “in navigating the sea civility.” The object of the scavenger hunt was to complete a questionnaire using information contained on civility posters like the ones above placed throughout the medical center and surrounding clinics. The hoped for intent, however, is more lasting: to help create a better

workplace climate by drawing attention to a something every workplace needs more of, civility. The dictionary defines civility as polite, reasonable, and respectful behavior. Who can argue that more of that will be good for employees and Veterans alike? 1st prize is a parking space for 30 days, 2nd and 3rd prize -- gift card to a local restaurant. And everyone who takes the message to heart is a winner.

CONSTRUCTION UPDATES

Construction on the new health care center continues to progress. Some of the highlights include: Continued flushing out of equipment and furnishing needs; vertical and horizontal steel in sections E, F, and A., continued above ground floors

concrete pour in sections E, and F. Continued roof steel and roof sheet metal, electrical continued conduit for parking area light poles, electrical continued vertical risers from first floor and floor sleeves for 2nd and 3rd floors and more.



Patient Safety

Root cause analysis



“RCAs look beyond an adverse event and closer at the causes, or the “root” of the problem to strengthen the system as a whole and produce better results.”

- Tamara Passut, Patient Safety Manager

WHO'S GETTING INVOLVED?

Administration Staff
Health Systems Staff
Nurses
Pharmacy
Police Officers
Radiology

Biomedical Engineers
Kinesiology
Nurse Assistant
Physical Therapists
Program Analysts
Respiratory

Education Staff
Medical Technologists
Nurse Practitioners
Physicians
Psychiatrist/Psychologists
Social Work

WHAT ARE THEY SAYING?

“Being part of an RCA enables one to see the bigger picture, be involved in helping make this a better place and to know there are a core group of people here who are trying to make things better.”

“I learned the primary focus of the RCA is on systems and processes and not on individual performance. Our goal was not to find fault, but rather to focus on the systems and processes.”

“We clarified the event process, identifying the basic, causal and contributing factors that caused the incident, we worked on developing an action plan designed to implement improvements to reduce the likelihood of recurrence, and are monitoring the effectiveness of those improvements.”

“I truly enjoyed this experience”

“Working with the doctors and the administration staff was enjoyable and interesting to hear the different points of view.”

“I enjoyed the experience of being on an RCA team. Being able to support the Medical Center to bring understanding to a situation that required team work, an open mind and fact finding. I learned it was not about pointing fingers but to examine a situation and hospital policies, to find out what went wrong and what could be done in the best interest of the Veterans to prevent it from reoccurring again or make it better.”

EXAMPLES OF SOME OF THE GREAT CHANGES!

- New standard of care for 1:1 observation of High Risk Patients in the Emergency Department preventing any harm Veterans in acute crisis. No repeated adverse events!
- Improvements in hand off processes and communication of ED patients traveling to radiology. No repeated adverse events!
- Reduction in contraband introduction to the Mental Health Unit! No adverse events!
- Greater visual educational material in Omnicell, 90% reduction in med events involving unintended medication!
- Enhanced Communication of team approach providing observation of patients, increased staffing and resolved barriers. No repeated adverse events!
- Improved staff visualization of patients by removing line of sight barrier in Emergency Department! No repeated adverse event.
- Reorganized location of supplies in the Emergency Department to reduce staffing fatigue and enhance patient care.
- Increased entertainment in living room of CLCs to bring residents more social interaction and reduce in-room falls.
- Bolstered Recreational therapy and Restorative Feeding to prevent falls and pressure ulcers for high risk patients.
- Enhanced Wanderguard alerting radius to prevent high risk patient elopement – No repeated adverse events!

“Coming Soon”

Enhanced Security Devices for the Emergency Department
Initiate Portable wireless monitoring system
Install Enhanced Call Bell Capabilities
Purchasing new beds/mattresses for fall and pressure ulcer reduction on CLCs
New storage management system for intraocular lenses - standardizing processes and enhancing safety measures.
Increased renal value alerts for providers and nurses to prevent medication dosing errors



Are You On Board?

The Patient Safety Train

Safe, High Quality, Patient Care & Service



Questions: Contact your Patient Safety Manager Tamara Passut 5097



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Employee Spotlight

Student Spotlight

Dr. Gregory Antoine

EDITOR'S NOTE: The following is a reprint of a profile of our chief of staff Dr. Gregory Antoine appearing on FEMA's Center for Domestic Preparedness web site.

Worked at Boston Medical Center helping survivors after Boston Marathon

Now Chief of Staff for the Fayetteville (N.C.) VA Medical Center.

The Center for Domestic Preparedness is proud to have Dr. Gregory Antoine attending the Healthcare Leadership for Mass Casualty Incidents (HCL) course April 14-18.

Antoine has worked for the Veterans Health Administration (VHA) for the past nine months, and for the 12 years

prior worked at the Boston Medical Center.

He was on duty, just over a year ago, when two bombs were detonated near the finish line of the Boston Marathon. At Boston Medical he served as the chairman of the Plastic Surgery Department.

"I heard a lot of sirens, but since the Boston Medical Center is the busiest trauma center in New England, it wasn't odd to notice sirens," he said. "But they became more frequent, multiple-



Dr. Gregory Antoine, chief of staff, Fayetteville VAMC

"Training emphasizes the importance of communication, speaking the same language and understanding other's roles."

— Dr. Gregory Antoine

chaotic scene that resembled a combat hospital with screaming, crying and horrific injuries. People were missing limbs, many others had major shrapnel injuries and the floor was covered in blood.

"When I got to the ED it became obvious this was more than just an accident," he recalled. "I assisted the trauma surgeons triage and prioritize patients."

According to Antoine, training plays a major role in an organization's success.

"Training helps eliminate dysfunction and guess work," he said. "Training emphasizes the importance of communication, speaking the same language and understanding other's roles. Practicing for emergency puts people in a mindset to perform during an emergency."

During CDP training, the students were required to activate the hospital's command center and effectively provide a medical response to a simulated mass-

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Employee Spotlight

: Student Spotlight

(Continued from page 17)

casualty incident. The week of training was held at the CDP's Noble Training Facility (NTF). The NTF is the only hospital in the nation solely dedicated to training healthcare professionals for mass casualty response.

"I'm used to trauma, but trauma following the Boston Marathon has to be measured on a larger scale," he said. "This training should be essential for facilities all

around the country, especially in the areas that have a high likelihood of natural disaster or **manmade threats.**"

In his new role as Chief of Staff for his VA Medical Center he intends to master decision making in a healthcare environment. He says working in an emergency department or emergency room is different from management and the function of a hospital, particularly during a crisis.

"As a surgeon I know what is expected. Patient care comes natu-

rally," he said. "The leadership and decision making isn't always smooth. My past experiences in critical care and crisis response, coupled with this course, puts me in the frame of mind to visualize **the big picture.**"

Antoine said he's excited to return to North Carolina and examine how Fayetteville's VA medical center supports the local community. He intends to polish current procedures and develop new techniques outlining management roles following a mass casualty event or activation of his command center.

"I understand the roles the staffs play in designated areas," said Antoine. "I'm looking forward to working with our community hospitals to find how we're written into their plans and ensure they are written into ours following a disaster or mass casualty type event. With this training, I can better prepare our hospital to develop plans and demonstrate **our role in the community.**"

Antoine spoke passionately about the freedoms we enjoy in America, and he said we are better prepared.

"I feel proud that I have the ability to care for my fellow citizens and it is a privilege to serve my community," he added. "I think the CDP is a great resource and facility leaders should send their people here to get **trained.**" (Article by Shannon Arledge, Courtesy of FEMA's Center for Domestic Preparedness)



Photo by Jeff Melvin

Congratulations

Congratulations to Associate Director Patient Care Services Joyce Alexander-Hines. Alexander Hines, graduated from Old Dominion University in Norfolk, Va., May 10, 2014 with a Doctor of Nursing Degree concentrating in Nurse Executive. She has held her current position since 2007. She is Chair of the VISN 6 Reusable Medicine Equipment Committee and former Chair of the VISN 6 Nurse Executive Council.



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Highlights



Photos by Jeff Melvin

2014 VA Vipers Softball Team Picture:

Kneeling in front, (L-R) Tom McCaffery, (Ass't Coach) Shannen Wilson, Anthony Boyce, Henry Harriel; 2nd row, (L-R) Noirese Stallings, Maurice Graham, Amy Perrault, Keisha Baines, Kim Paquin, Aprielle Felder; Back row, (L-R) Anthony Pacheco, Tori Cheech, 'Mo' Bishop, Bill Dunton, Bjorn Nelson (Coach), Jeff Jarvis; Not pictured: Scott Wells, Lisa Ellies, Leann Gadbaw, Amanda Cotton, Debra Sargent, Preston Stallings

Coed softball teams finishes on winning note

The medical center's "VA Vipers" softball team overcame a sluggish start to climb in to contention and finish third in the East Division of the Fayetteville/Cumberland Co. Parks & Recreation Spring Coed Softball League.

The Vipers, led by Coach Bjorn Nelson, posted victories in 8 of their last 10 games, quite a feat considering their slow start. If you missed them be sure to check them out next year. Better yet, join the fun, the team plans to play in the Fall league.



VA Vipers coaches Bjorn Nelson, left, and Tom McCaffery



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Photo by Jeff Melvin

Community Homeless Stand Down — More than 300 Veterans received information, VA and community services during the Community Homeless Stand Down at Festival Park in Fayetteville, N.C., July 24 and 25. In addition to Veterans, more than 600 Cumberland County area residents received services during the two-day event. The event was co-sponsored by Fayetteville VAMC and the Cumberland County Continuum of Care on Homelessness.

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This training will be held Thursday, Sept. 11 in the 3rd floor Auditorium. Attend morning (8 a.m. to noon) or afternoon session (12:30 to 4:30. p.m.). Register for a session on the VA intranet under 'Fayetteville Events' (<http://vaww.visn6.va.gov/calendar.aspx?id=664&listview=true>) after obtaining your supervisor's approval. For more information, please contact Cindy Flynn, Healthcare Talent Manager @ 7377.



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