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Network Director's Update

Winter Issue 2011



National News: (Click on titles to read full press release)

[VA Publishes Final Regulation to Aid Veterans Exposed to Agent Orange in Korea](#) - Veterans exposed to herbicides while serving along the demilitarized zone (DMZ) in Korea will have an easier path to access quality health care and benefits under a Department of Veterans Affairs

(VA) final regulation that will expand the dates when illnesses caused by herbicide exposure can be presumed to be related to Agent Orange. (1/25/11)

[VA's National Cemeteries Lead Nation in Satisfaction Survey](#) - For the fourth consecutive time in 10 years, the system of national cemeteries operated by the Department of Veterans Affairs has bested the nation's top corporations and other federal agencies in a prestigious, independent survey of customer satisfaction. (1/25/11)

[VA Office Developing Innovative Patient-Centered Model of Care for Veterans](#) - The Department of Veterans Affairs (VA) is creating a new office to develop personal, patient-centered models of care for Veterans who receive health care services at VA's more than 1,000 points of care across the Nation. (1/19/11)

[VA Adds Chat Feature to Online Application for Health Benefits](#) - Veterans will find it easier and faster to apply for their health care benefits now that the Department of Veterans Affairs has enhanced and streamlined its online Form 10-10EZ, "Application for Health Benefits." (1/18/11)

[Enhanced VA Health Care Enrollment Opportunity Closing for Certain Combat Veterans](#) - Certain combat Veterans who were discharged from active duty service before Jan. 28, 2003 have until Jan. 27, 2011 to take advantage of their enhanced health care enrollment opportunity through the Department of Veterans Affairs. (1/10/11)

[VA Posts Annual Medical Quality Report](#) - The Department of Veterans Affairs (VA) issued the 2010 annual VA Facility Quality and Safety Report on Jan. 5 that reports on VA health care for Congressional review and offers Veterans the opportunity to see the quality

[President Signed Improvements to Post-9/11 GI Bill](#) - To bring the educational benefits of the Post-9/11 GI Bill closer to more Veterans and Service Members, President Obama signed legislation Jan. 4 that streamlines the 18-month-old education program administered by the Department of Veterans Affairs. (1/5/11)

[VA Set to Verify Veteran Small Businesses](#) - To further advocate for Veterans, VA announced that companies identifying themselves as small businesses or Veteran-owned businesses to gain priority for some Department of Veterans Affairs (VA) contracts must now provide documentation verifying their status within 90 days of receiving notice from the agency. (1/3/11)

[New Approach to Smoking Cessation Boosts Quit Rates for Veterans with PTSD](#) - Smoking cessation treatment that is made part of mental health care for Veterans with Post Traumatic Stress Disorder (PTSD) improves quit rates, according to a Department of Veterans Affairs (VA) study published in the Dec. 8 Journal of the American Medical Association. (12/8/10)

[Federal Government Holds Forum on Homeless Veterans](#) - More than 400 participants from across the country are expected to take part in a two-day national forum on ending homelessness among Veterans by strengthening preventative measures and collaboration among government and private-sector organizations. (12/7/10)

[National Veterans Golden Age Games Set for Hawaii](#) - More than 700 "golden age" Veterans from the East Coast to the West and from the Pacific islands will travel to Hawaii to participate in the nation's largest sporting event for senior military Veterans. (11/30/10)

[VA Testing Quicker Ways to Access Medical Records](#) - The Department of Veterans Affairs is working to significantly reduce the average time needed to obtain health-care records from private physicians with the help of a private contractor and the Internet to speed claims decisions. (11/29/10)

VISN 19:



Creation of a National Caregiver Support Line

Caregivers are the family members and loved ones who provide care for Veterans who are living with the effects of war, disability, chronic illness, or aging.

They deserve VA's highest level of support. VA values the sacrifices caregivers make to

help Veterans remain at home.

Caregivers are the critical link to ensuring Veterans have the highest quality care and optimal wellness. We want all caregivers to feel supported and have trust in VA to assist them in their caregiving roles.

I am very pleased to announce the national VA Caregiver Support Line, housed at the Canandaigua VA Medical Center, is **opening on February 1, 2011**.



This support line will serve as a resource/referral center for caregivers, Veterans and others seeking caregiver information; provide referrals to local VA Medical Center Caregiver Support Coordinators and VA/community resources; and provide emotional support. It will also be available to respond to inquiries about the new caregiver benefits associated with Public Law 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010.

The Caregiver Support Line will provide a "warm" referral service to VA medical center Caregiver Support Coordinators (CSCs) for call backs to caregivers. The CSCs will provide caregivers support, information, education, and referrals to appropriate VA and community resources. The CSC at your VA medical center plays a critical role to the successful implementation of the national Caregiver Support Line and caregiver support programming at your medical centers.

The National Caregiver Support Line will be open Monday through Friday 8:00 a.m. to 11:00 p.m. and Saturday 10:30 a.m. to 6:00 p.m. Eastern Time. The National Caregiver Support Line Toll-Free number is 1-855-260-3274.

Frequently Asked Questions

What is a Caregiver?

Caregivers are family members, loved ones, or friends who provide care for Veterans who are living with the effects of war, disability, chronic illness, or aging.

What is the National Caregiver Support Line?

The support line serves as a primary resource/referral center to assist caregivers, Veterans, and others seeking caregiver information. The support line will provide information on VA/community caregiver support resources, "warm" referral to dedicated CSCs located in every VA Medical Center, and emotional support for caregivers. The staff of the National Caregiver Support Line is also available to respond to inquiries about the caregiver benefits associated with Public Law 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010.

When is the National Caregiver Support Line open?

The National Caregiver Support Line is open Monday through Friday 8:00 a.m. to 11:00 p.m. and Saturday 10:30 a.m. to 6:00 p.m. Eastern Time.

Who will answer calls at the National Caregiver Support Line?

VA employees who are licensed clinical social workers answer calls to The National Caregiver Support Line and are located at the Canandaigua VA Medical Center campus.

Is there a Caregiver Web site?

Please see VA's updated Caregiver Web site:

www.caregiver.va.gov

New VA Health Benefits Overview Brochure

The new 2010 VA Health Care Benefits Overview brochure has been posted to the web. It is available at the Health Eligibility web site, (under Publications) at the following link:



http://www.va.gov/healtheligibility/Library/pubs/HealthCareOverview/Health_Care_Overview.pdf

Health Net Federal Services Awarded Department of Veterans Affairs Rural Mental Health Contracts

Health Net Federal Services, part of the Government Contracts segment of Health Net, Inc., announced it was awarded a contract by the Department of Veterans Affairs (VA) to provide a network of behavioral health providers to augment VA's outpatient mental health and readjustment counseling services in rural counties within VA's Rocky Mountain Network and Northwest Network in Veterans Integrated Services Networks (VISNs) 19 and 20.

The new contract became effective November 1, with a one-year initial term and two additional one-year option periods. Health Net and VA are currently working together to implement the Rural Mental Health program, designated as a voluntary demonstration project for Veterans who served in Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF). Health Net reported that the new contract closely follows another contract award to Health Net effective Sept. 28, to enhance access to behavioral health care services in VA's Mid-Atlantic Health Care Network (VISN 6).

"Health Net is honored to partner with VISNs 6, 19 and 20 to help provide these valuable and needed services to OEF/OIF Veterans within their communities," said Health Net's VA Programs Officer, Donna Hoffmeier. "We fully appreciate and support VA's mission to expand access to health care services for Veterans in rural and very rural areas of the country."

The Health Net contracts are part of a new VA program to enhance access and quality of health care for Veterans in geographically rural areas. The Company said that the program emphasizes the use of the latest technologies, recruitment and retention of a well-educated and trained health care workforce, and collaborations with non-VA rural health community providers.

Health Net partnered with VA to provide health care services serving Veterans nationwide. Health Net noted that it operates several VA Community Based Outpatient Clinics and satellite clinics throughout the U.S., and continuously strives for patient access, quality health care and patient satisfaction.

In addition, Health Net provides national claims repricing services as a subcontractor for five regional VA contracts. HealthNet said that the Preferred Pricing Program helps VA Medical Centers achieve savings available through discount agreements with Health Net's nationwide provider network for a variety of health care services, including hospitalization, outpatient care, ambulatory surgery, behavioral health and ancillary services.

Health Net was recently awarded a VA contract to provide Chief Business Office Outpatient Recovery Audit Services of VA payments made for the Outpatient Non-VA Fee Care Program, the Civilian Health and Medical

Program, and the Spinal Bifida and Children of Women Vietnam Veterans programs. The Company reported that these services help maximize care to Veterans by helping to ensure that payments are reasonable, consistent and proper.

In partnership with Three Wire Systems, a Service-Disabled Veteran-Owned Small Business, Health Net noted that it supports the VetAdvisor Support Program in VA's VISN 12, the Great Lakes Health Care System. This program assists OEF/OIF Veterans in their reintegration to civilian life through mental health outreach and health coaching services.

Health Net Federal Services, a subsidiary of Health Net, Inc., provides quality managed health care programs for government agencies, including the Departments of Defense and Veterans Affairs.

VA's Homeless Intervention Program Nears Roll Out

Provider Groups Sought for Applications, Training

A homeless-prevention program by the Department of Veterans Affairs (VA), which seeks to help Veterans and families who are on the verge of becoming homeless, has moved closer to implementation. The program marks the first time that VA will fund services for the spouses and children of Veterans at risk of becoming homeless.

"The problems that lead to homelessness begin long before Veterans and their families are on the streets," said Secretary of Veterans Affairs Eric K. Shinseki. "By putting more resources into intervention programs for people at risk of becoming homeless, we can reduce suffering and increase the opportunities for turning around these lives."

Shinseki's comments came as VA formally announced that it is taking applications from private non-profit organizations and consumer cooperatives interested in providing needed services to at-risk Veterans and their families.

With funding from VA for the program, called Supportive Services for Veterans Families, community organizations will be better able to provide counseling, training, education assistance, direct time-limited financial assistance, transportation, child care, rent, utilities, and other services to participating Veterans and family members.

In January, VA is sponsoring free grant-writing workshops for community organizations interested in applying for funds under this program. The workshops will be held in Chicago, Los Angeles, Seattle, Houston and New York City.

When the "Notice of Funds Availability" applications are available, they will be posted on the VA Web site at www1.va.gov/homeless/ssvf.asp.

Details about the workshops and other information about the program are available on the Internet at www1.va.gov/homeless.

Community organizations can also contact VA at 1-877-737-0111 or at SSVF@va.gov.

Eastern Colorado Health Care System



Denver, CO – Replacement Medical Center Facility

The Denver VAMC (parent Eastern Colorado Health Care System) is providing monthly updates on the status of the Denver Replacement Hospital. Updates are distributed via e-mail monthly and can be found on <http://www.denver.va.gov/projecteagle/index.asp>.

Local Steelers fans rally behind family Article reprint by Abbie Burke

COLORADO SPRINGS, COLO. -- Local Steeler fans teamed up with the Dublin House and St. Patricks, a church, to provide help to a family who lost everything in a fire last week. The fire happened last Monday around 3:30 a.m. at a home in the 1500 block of Chesham Circle.

Twelve people were inside the home at the time. All managed to escape, but two remain in critical condition. The home was declared a total loss and the family said they didn't have renter's insurance or health insurance.

James Gasper, a police officer at the Eastern Colorado Health Care System and a local Steelers fan, saw the story FOX21 News ran about the fire and noticed that one of the boys was wearing a Steelers jersey.

He called FOX21 News and was put in touch with the family so he could show them what being a Steelers fan was all about.

"Being a Steeler fan is more than just watching the game and hanging out, it's about, it's a family," Gasper said. Gasper said he just wanted to give the family a break and a chance to enjoy the game.

"Anybody that's a Steeler fan is a member of my family, no matter where you're from, no matter how old you are," Gasper said.

He reached out to the local "Steeler Nation" and the Dublin House, who all rallied behind him.

"It makes me cry," Gasper said. "It's good, it's a good time. I knew they would come through but I had no idea how much."

Daniel Lewis, owner of Dublin House, offered to host the family for the playoff game and started up a collection.

"It's been amazing that a community can come together this fast, this quick, and do something like this for a family that really needs it in times like this," Lewis said.

Lewis said donations starting pouring in, from regulars, Steelers fans, and Saint Patricks, the church across the street.

"We're going through such a hard time, and it's amazing to see just anyone who cares this much. I just don't even know what to say," Christina Cordova, one of the victims of the fire, said.

Cordova said she is overwhelmed by the support they are receiving, and that it is nice to see the kids smile again.

Cordova's fiancé Tom Sabino and his 10-year-old son Tyler are both still in the hospital. Both suffered burns to more than 50 percent of their bodies and will need several surgeries.

Two funds have been set up for the families:

US Bank - "Chesham Fire Relief Fund."
Wells Fargo - "Sabino Family Fund."

Other donations such as clothing and toys can be dropped off at [The Springs Vineyard](#), a church in the 4100 block of Centennial Boulevard or the Dublin House.

VA Montana Health Care System:



Iwo Jima flag raising prints presented to Tribal Council

Article reprint By B.L. Azure



Tribal Council Chairman E.T. "Bud" Moran, a former U.S. Marine and Viet Nam War veteran, checks out the photos presented to the Tribal Council in honor of Louie Charlo, one of the original Iwo Jima flag raisers. (B.L. Azure photo)

PABLO — There were two flag raisings on highest point on the volcanic island of Iwo Jima on Feb. 23, 1945. American Indian hands helped hoist both flags atop the 546-foot Mount Suribachi - one was Pima Indian Ira Hayes and the other was Salish Indian Louie Charlo.

Hayes raised the second flag that was captured in the iconic photo by Joe Rosenthal and he became part of a well-known chapter in American history. Charlo raised the lesser-known first flag that inspired the beleaguered U.S. Marines more so than the second. The first was good for morale, the second was good for public relations.

In early 1945, the United States World War II Pacific Campaign of was closing in on Japan and the military needed the strategic air strip on Iwo Jima as a base to land damaged bombers and to house fighter escorts. It would also deprive Japan of its "early-warning" base that heretofore monitored U.S. Army Air Corps bombers en-route to Japan.

On Feb. 19, 1945 the U.S. Marines, following several days of artillery battering from the sea, and bombing

and strafing from the air landed on Iwo Jima. U.S. Marine Private Louis Charlo was aboard the USS Missoula and was among the first companies of Marines ferried to Iwo Jima to face off against 21,000 well dug in Japanese soldiers.

On Feb. 23, 1945, Charlo and a squad of Marines were ordered to take the high ground and hoist an American flag when they got there. A small flag (28 by 54 inches) was taken from the USS Missoula and the squad made it to the top of Mount Suribachi and raised the flag at 10:20 in the morning. It was the first non-Japanese flag ever raised over Japanese territory.

Secretary of the Navy James Forrestal and U.S. Marine General Holland Smith were on shore to witness the flag raising and Forrestal told the Marine, "Holland, the raising of that flag on Suribachi means a Marine Corps for the next five hundred years."

In a spat over who would get to keep the first flag, the Marines or the Secretary of the Navy, the U.S. Marines raised a second and much larger flag to satisfy both the wants of Forrestal and the Marines. Ira Hayes was among those who raised the second flag that was captured in a Pulitzer Prize winning photograph by Joe Rosenthal.



W.J. "Buck" Richardson (left) and Ken "Rosy" Rosenbaum present to the Tribal Council a framed and matted set of photographs showing the two Iwo Jima flag raisings and a group photo of the flag raisers, one of whom is Louie Charlo. (B.L. Azure photo)

On March 2, 1945 Louie Charlo was killed by enemy fire while assisting a fellow Marine who was wounded. He was 18 years old and among the 6,821 American killed in action; 20,000 Japanese died on Iwo Jima.

Louie Charlo was the great-grandson of the Bitterroot-Salish Chief Charlo, who adamantly opposed the federal government's reneging on its promise to establish an Indian reservation in the Bitterroot homelands of the Salish. In the early 1890s, after years of opposition Chief Charlo and the remainder of the Bitterroot-Salish holdouts were marched under military escort from the Bitterroot Valley through Missoula onto the Jocko Valley of the present Flathead Reservation.

Last week a group of veterans and veterans' advocates presented the Confederated Salish and Kootenai Tribal

Council with a framed and matted print of three photos taken Feb. 23, 1945 on Iwo Jima.

Ken "Rosy" Rosenbaum, a former U.S. Marine and Viet Nam War veteran from Helena and W.J. "Buck" Richardson, Department of Veterans Affairs Rocky Mountain Network Minority Program coordinator, told the Tribal Council that the prints - because of Louie Charlo - belonged to the Flathead Nation.

The three prints belonged to Richardson and he pondered for some time about their spiritual connection to the Flathead Indian Reservation. In July, following the dedication of the CSKT Veterans Monument the spiritual connection was solidified in Richardson, who was in attendance.

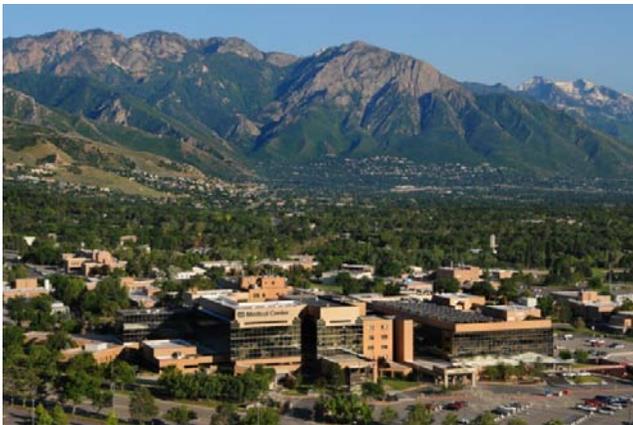
Richardson along with wife Grace commissioned Rosenbaum to mount, matt and frame the photos in one display. They include photos of both flag raisings and a group photo of the flag raisers and other Marines following the second raising.

The Tribal Council graciously accepted.

"Thank you, very much. There are some of us here on the Tribal Council who are related to Louie Charlo," said Tribal Council Chairman E.T. "Bud" Moran. "We remember this young warrior who gave his life for this country."

The framed prints will be hung and displayed in the tribal complex to remind all of the sacrifices of war which members of the Salish, Pend d'Oreille and Kootenai tribes have given over time in service to America, their aboriginal homeland

VASLCHCS



Fledgling veterans court deals with 'root of the problem'

Reprinted article By Dennis Romboy

Deseret News

Published: Sunday, Jan. 2, 2011 12:26 a.m. MST

SALT LAKE CITY — Magistrate Judge Paul Warner and the man standing in his courtroom before him talk like two old friends who haven't seen each other for awhile. "You're looking as fit as a fiddle," the judge says to Gordon Gleason. "I feel good, your honor," the white-haired, white-bearded man replies.

As they talk, Gleason, a 55-year-old Army veteran, says he's doing well in his drug and alcohol treatment program. His medication seems to be working, though he allows he's always had a problem with anger.

A fight over the telephone in the Veteran's Administration hospital psychiatric ward six months ago landed him before the federal judge on a simple assault charge. But Warner seems inclined to give Gleason a break provided he stays clean. "Hopefully, we can work out something that makes some sense," Warner tells him before moving on to the next case on his monthly veterans calendar.

Warner quietly started "veterans court" in March, and it is believed to be the only one of its kind on the federal level in the nation. It is similar to longstanding mental health and drug courts that give defendants a chance to avoid jail or get reduced sentences if they adhere to specific conditions such as undergoing treatment.

Veterans courts are a recent phenomenon, popping up around the country at the state and city levels, including on a limited basis in Salt Lake City. The idea is to treat the underlying causes of criminal behavior rather than just put veterans, many of whom return from service with post traumatic stress disorder, behind bars.

"Unfortunately, we're learning that a lot of these kids come back with pretty serious issues," he said. Amy Earle, a social worker who serves as the veterans justice outreach coordinator, said soldiers often have difficulty readjusting to life after war. "They're not quite certain how to do it," she said.

Veterans may suffer from PTSD, depression or anxiety. They self medicate with excessive drugs and alcohol. An inability to mesh with family members may lead to violence in the home. Some wind up homeless. And they'll do something that drops them into the criminal justice system.

"By the time we get them, they are tangled balls of yarn, if you will," said Scott Hill, VA chief of mental health services in Salt Lake City. "We know that early intervention works. Sometimes the court system is the first opportunity we've had to interact with them." Earle said the system can be "so cold" for those who have served their country. "They need and deserve these services," she said.

One of the challenges is finding out who the veterans are. They need not have gone to war to qualify as a veteran. "If I was running for Miss America, my platform would be asking, 'Have you served in the U.S. military?'" said Earle, who coordinates treatment for veterans in federal court and Salt Lake City Justice Court.

City prosecutor Sim Gill is trying to train social service providers, law enforcement and prosecutors to ask that question. He recently expanded the criteria for the city's mental health court to include PTSD, which often nets veterans who don't know VA treatment services are available to them.

Gill, who was elected as the new Salt Lake County district attorney, hopes to carry the effort into his new job. "The goal is to continue to expand that partnership and collaboration," he said, adding he fears there will be an increase in veterans entering the criminal justice system in the next few years.

Warner struck upon the notion for veterans court while thumbing through a magazine at the VA hospital on Foothill Drive as he waited for his father to get some medical care. His own military background also figured into his decision. He served six years active duty in the Navy and later joined the Army National Guard, retiring as a colonel.

Other than the getting approval from chief U.S. District Judge Tena Campbell, Warner hasn't obtained any special permission to hold veterans court. He just asked other judges in the federal courthouse to watch for veterans and send them his way. Defendants span the Vietnam era to the current wars in Iraq and Afghanistan.

Most of are charged with misdemeanor crimes such as simple assault, drug possession and theft. Typically, the alleged offense has occurred on the VA campus. Veterans court is not designed for those charged with serious crimes such as murder or rape.

"We're not claiming great turnarounds, but we're seeing some differences in people's lives," Warner said. Former servicemen in his court show him proper respect as a judge, he said. "But they really listen to me much better when they find out I'm colonel." Hill said Warner has as special relationship with veterans who come into his court.

"We have high hopes for this because it is another way that we can deal with the root of the problem," he said. "It's diverting them to treatment rather than incarceration."

Warner, a former U.S. attorney for Utah, is a no-nonsense jurist who expects the defendants in his court toe the line. He's not one to mollycoddle even fellow servicemen. "I believe in choices and consequences," he

said. "If they want to follow through, great. If they don't, I just put them in jail."

Roger Mortensen almost got off on the wrong foot with the judge when he wasn't in court when his name was called this past week. Magistrate Judge Brooke Wells ordered him to report to veterans court as a condition of his release from jail. Not showing up could have put him back there.

Mortensen, 48, faces federal charges for being a felon in possession of a firearm. He was convicted of felony theft in the mid-1990s.

He is the same man who spent nearly five months in jail this year wrongfully accused of killing his father. During a search of Mortensen's house during the homicide investigation, detectives found seven guns hidden in his garage, according to court documents.

When Mortensen finally arrived in Warner's court, the two quickly found they had something in common: Mortensen also served in Navy. He worked as an electronics technician for eight years, earning the rank of petty officer second class.

Warner probed Mortensen's background, learning the Payson man 16 years ago suffered a broken back and neck, and a brain injury in an ATV accident that left him in a coma for a few months. "Then I woke up and they told me I was disabled," he said.

The judge learned that doctors at the VA and elsewhere have prescribed Mortensen various psychotropic drugs over the years, including anti-depressants during his time in jail this year.

Warner explained to Mortensen that he has been charged with serious gun crimes. He ordered him to undergo a mental health assessment at the VA hospital.

"We want to be fair to you, but at the same time we have to ensure everyone's safety is taken into account," the judge told him.

Mortensen will return later in January, along with Gordon Gleason and half-dozen other regulars in the fledgling veterans court. How Mortensen performs may factor into the outcome of his case, which will be heard by a judge other than Warner.

Gleason said the program has worked for him so far.

"The punishment is basically the same as you'd get in regular court, but here they check up on you more," he said. "If you show you're doing your own footwork and staying on what they tell you to do, you're OK. ... It kind of keeps me honest."

Grand Junction VAMC:



Grand Junction VAMC, Utah will test exchange of rural veterans' health data

Article reprint from Government IT by Mary Mosquera

Utah's state designated health information exchange will connect healthcare providers in a rural region of the state with the Veterans Affairs Department so they can share patient records of veterans and service members who receive treatment outside of the VA.

It's the fifth in a series of demonstration programs across the nation in which VA and private sector providers coordinate services to veterans through access to the nationwide health information network (NHIN), a set of standards and services that enable healthcare organizations to securely exchange patient data through the Internet.

The pilots are part of VA's virtual lifetime electronic record program (VLER), which seeks to develop a single electronic system to track the medical, benefits and administrative records of service members from their induction into the military throughout their lives as veterans.

The Utah Health Information Network will test the exchange of patient records between Allen Memorial Hospital in Moab, Utah, and its participating physicians with VA medical facilities, said Jan Root, president of UHIN. The network serves all the hospitals, ambulatory surgery centers, national laboratories and approximately 90 percent of the medical providers in Utah.

Seven out of 10 veterans receive some portion of their healthcare from private sector hospitals and clinics, such as those represented by UHIN, said Dr. Tim Cromwell, director of standards and interoperability for the Veterans Health Administration. VA is "pleased that UHIN's clinical health information exchange is joining the NHIN, providing an opportunity to extend services to veterans, especially those in rural areas of Utah," he said.

The Utah network and its partner Axolotl Corp., a provider of exchange technology and services, will use the vendor's Clinical Health Information Exchange (cHIE) to connect to the VA via the NHIN.

Authorized physicians will be able to query and view documents from the cHIE or VA-participating physicians located in the rural community. Axolotl's online gateway will enable the bi-directional exchange of documents between the cHIE and NHIN partners in the area, including the VA.

Sheridan VAMC:

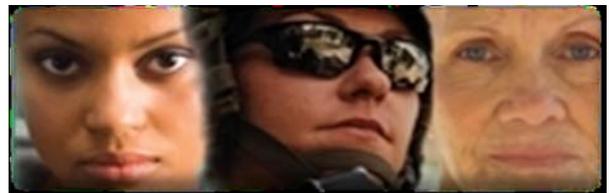


Progressions: The Women Veterans Treatment Program at the Sheridan VAMC

The Sheridan VAMC is a state of the art medical center that is located on 300 acres of land at the base of the Big Horn Mountains in Northern, Wyoming and serves as the Rocky Mountain Regional referral site for mental health.

The Women Veterans PTSD Cohort is offered as part of their Mental Health Services. It focuses on delivering clinical mental health care to women Veterans suffering from:

- Military sexual trauma
- Childhood physical abuse
- Combat trauma
- Childhood sexual abuse
- Civilian rape
- Domestic Violence



The program was developed for women and delivered by women in a healing environment. This Residential PTSD program is an intensive 7 week program providing assessment and treatment of PTSD.



Once Veterans are formally accepted into the program, trauma issues are addressed through Cognitive Processing Therapy in group and individual therapy sessions. Additional groups offer

education on topics such as distress tolerance, interpersonal effectiveness, grief education, military sexual trauma, women Veterans support group, mindfulness and health issues. Equine therapy is also conducted once a week in a group session working on trust and boundary issues.

Women Veterans of all eras are eligible for this cohort. Groups of 10 women are admitted for each cohort. To be considered for admission to this program, Veterans must be willing to actively participate in their treatment.



To acquire more information about this program and obtain an application for referral, please contact the Sheridan VAMC's Women's Health Clinic at 307-675-3694 or by contacting the Mental Health Residential Treatment Program at 307-675-3981.

Sheridan VAMC's Womens Health Services include:



- ~ Women's Health Clinic
- ~ Primary Care
- ~ Medical/Surgical Care
- ~ Emergency Care
- ~ OB/GYN Care with referral to local providers
- ~ Health Promotion, Disease Prevention
- ~ Mental Health Care
- ~ Military Sexual Trauma
- ~ PTSD, Depression treatment
- ~ Long Term and Rehab Care

Cheyenne VAMC:



As 2010 came to a close...

The Cheyenne VAMC and staff looked back at the many achievements that were made at the Cheyenne VAMC. In May 2010, Cheyenne VAMC's surgical program was officially designated as a "Standard" level facility with approval to perform intermediate level orthopedic procedures. This was a significant milestone as it effectively maintained the majority of all types of surgical cases our facility is able to perform.

Additionally, through this process, in the small number of surgeries that require greater degree of support services, Cheyenne VA surgeons have successfully completed more complex surgeries at the Denver VAMC on patients from Cheyenne VA.

The surgical addition project has now moved into the finishing phases. This project, funded by federal stimulus funds, will create two, new, state of the art surgical suites. As these new surgical suites are completed, renovations of the existing surgical suites and recovery areas will follow. This activity fosters the development of an environment of care which supports high quality health outcomes.

With the largest historical deployment of Wyoming National Guardsmen taking place in 2009, 2010 saw the largest return of Wyoming Guardsmen from an active combat zone.

Staff from Cheyenne VA's OEF/OIF program attended numerous demobilization and welcome home events. By far, the largest demobilization and transition occurred in Ft. Hood, TX in May, 2010. Cheyenne VA staff was at the door of the airport to be among the first to welcome back these soldiers. Enrollment in the program grew from 1290 individuals in FY09 to 1658 in FY10.

There were more construction and capital improvements in 2010, including the installation of three new solar arrays, parking lots and groundbreaking on a new clinic expansion. The mobile clinic has become a success in the four communities it serves and goals to deliver more VA care to rural areas supported the development of the new Rawlins (WY) Primary Care Telehealth Outreach Clinic.

Cheyenne VA is working to make more information more available to you, quicker. Our newly redesigned website (<http://www.cheyenne.va.gov>) has the latest information and a place where you can sign up for email notification on the latest news and announcements. We're also on Facebook and Twitter now too, so "friend" and follow us there if you like.

As we enter 2011...

The New Year at Cheyenne VAMC began with the implementation of Patient Aligned Care Teams (PACT), team-based care and a shift in the check in process at the main campus.

Dr. Jerry Zang, the facility's Chief of Staff said, "Consolidating the patient check in process makes it easier for patients as they will only need to go to one spot to check in. This also supports the VA new, team-based approach to healthcare."

The Patient Aligned Care Team (PACT) is the VA's new model of healthcare. This team based approach will result in more coordinated care, streamlined delivery of services, lower costs for health care and in greater patient satisfaction. This model meshes with VA's overriding principles to be personalized and comprehensive, focusing on all aspects of a person's health, emphasizing prevention and health promotion.

Also in January, Cheyenne VA Director and other key staff began a series of visits to the nine communities that are served by Cheyenne VA programs.



This series of community visits will continue throughout the spring; a visit to Greeley, CO is scheduled for March 2, 2011 and will be held on the campus of University of Northern Colorado. If you'd like to join us, contact Cheyenne VAMC Public Affairs Officer Andrew Ruben (307-778-7523) for details on the time and location.



"Cheyenne VAMC Director Dr. Cynthia McCormack addresses a group of Veterans in Wheatland, WY recently. The Wheatland meeting was the first in a series of events across the tri-state service area of the Cheyenne VA Medical Center."

To date, VA staff met with Veterans in Wheatland, Torrington and Rawlins, Wyoming. Turnout in these communities was excellent; VA staff were able to share a cup of coffee with Veterans and listen to the important issues and concerns of Veterans in these communities.

VA staff also provided updates on Cheyenne VA programs and facility information – including the achievements in expanding VA health services into these communities through the Mobile Tele-health Clinic and Primary Care Tele-health Outreach Clinic. Several Veterans were provided the VHA enrollment form, 1010 EZ and contacts for further assistance.