



Rocky Mountain Connections

Volume 1, Issue 1

June 2007

Message from the Acting Director

Welcome to the VISN 19 VA Rocky Mountain Network Connections newsletter. We value communication with you and look forward to sharing information with you in the future. With the publication of this first issue, I am proud to share various aspects of the care offered to the veterans residing in our network and the people who offer that care.

The articles within speak to our first priority: Providing care second to none to veterans through the promotion of special events, healthier lifestyles, space and pro-gram growth and through the implementation of new initiatives such as Advanced Clinic Access to improve access to care and promoting access to medical information through MyHealtheVet.

Future publications will emphasize areas of high priority for the VA such as prioritizing care for those veterans most in need of our services including a growing population of

elderly and disabled veterans, as well as those veterans returning from service in Operation Enduring Freedom/ Operation Iraqi Freedom (OEF/OIF), veterans with service-connected disabilities, veterans with lower incomes, and veterans with special health care needs. The population of veterans who are enrolled for health care in the VA are, on average, older, poorer, and sicker than the general population. Recently, VA has also begun to care for younger veterans who have sustained polytraumatic injuries during their service in OEF/OIF. While the number of seriously disabled OEF/OIF veterans is relatively small,

The population of veterans who are enrolled for health care in the VA are, on average, older, poorer, and sicker than the general population.



JAMES R. FLOYD

compared to the total number of veterans requiring extended care services, the complexity of care they require is high and their personal and social needs differ from those of older veterans. The VA and VISN 19 are moving to adapt its treatment and services to meet the needs of all veterans.

With this first newsletter, we are pleased to share a snapshot of some of VISN 19's accomplishments and hope you enjoy reading about us.

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John Elway, Secretary Nicholson and Dr. Zach Taylor, Dept. of HHS Regional Health Administrator.



National HUSV Spokesperson, John Elway at the Denver VAMC.



HealthierUS Veterans Booster Event Eastern Colorado Health Care System

DENVER – Over 600 veterans attended the HealthierUS Veterans Booster Event hosted by VA Eastern Colorado Health Care System on its Denver Hospital Campus April 5th. The event was co-sponsored by VA Secretary R. James Nicholson, and Hall of Fame Denver Broncos quarterback and National HUSV spokesperson John Elway. As a former NFL athlete and champion for healthier life-styles, John brought a wealth of knowledge and personal experience to this exciting initiative.

By the start of Healthy Weight Week (Jan. 21-27), more than 41,000 veterans were participating in the HUSV weight management program designed to reduce the high rate of illness among VA's patients caused by obesity. "There is a growing epidemic of obesity and diabetes in the nation,

especially among veterans," said Secretary of Veterans Affairs Jim Nicholson. "Seventy percent of the veterans VA cares for are overweight and one in five has diabetes, both of which increase the risk of many diseases."

VA started HUSV in conjunction with its popular *MOVE!* campaign, which encourages veterans to increase their physical activity and improve their nutrition. Through individual and group counseling, physicians, nurses, dieticians and recreational therapists help enrollees change their eating behavior and increase their exercise. Primary care teams at all VA medical centers stay in touch with participants to track their progress. Increasing numbers of VA community-based outpatient clinics also are enrolling veterans.

The HUSV Booster event activities included a press conference, health fair, and farmer's market. Fitness experts were on hand to challenge veterans to join community exercise programs that partner with VA medical facilities. Dieticians and local chefs partnered to educate and demonstrate the benefits of healthy cooking and eating.

John Elway continues to promote the VA campaign by appearing in television public service announcements (PSAs) nation-wide. In the 15-, 30- and 60-second PSAs, Elway is seen at the playing field of the Denver Broncos, encouraging veterans to become more active and improve their nutrition habits. The Elway PSAs can be viewed at: www.healthierUSveterans.va.gov.

By Christina White

21st National Disabled Veterans Winter Sports Clinic ~ Making Miracles Happen on a Mountainside

Grand Junction VA Medical Center

The 21st National Disabled Veterans Winter Sports Clinic (WSC) held April 1-6, 2007, in beautiful Snowmass, Colorado, is now a wonderful memory for the 370 disabled veterans who participated, as well as for those 500 plus individuals who worked as volunteers. We would like to take a moment to go behind the scenes to see who actually puts it all together and look at those who spent the better part of the year, planning, developing, and coordinating every aspect of this nationally acclaimed event.

The WSC Steering Committee is comprised of thirteen caring and compassionate Grand Junction VAMC employees, and three individuals from the community, who above all else believe and recognize the mission of the Clinic and the role it plays in the lives of the veteran participants. Giving their time and energy, these individuals mix their everyday workload with the demands of preparing for this annual event.

Sandy Trombetta, WSC Director, says, "If it wasn't for the unselfishness and

generosity of those who serve on the Steering Committee, the clinic just would not work. We are a small office and it takes both the WSC staff and Steering Committee all working together to produce an event such as this. It is often said by others that the Clinic runs like clockwork and that's because of the leadership the Steering Committee provides."

Teresa Parks, Local Site Coordinator, relies on members of the Committee because,

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Grand Junction VA Medical Center (cont.)

“they are my voice and the voice of the Clinic ensuring accurate information is disseminated to the mass number of volunteers we bring in to make this event such a success. Our Steering Committee is the backbone of this event, it’s been an honor to work with the dedicated members of this Committee.”

THANKS FOR A JOB WELL DONE to:

Michael W. Murphy, Ph.D.,
Medical Center Director
Pat Hitt, Associate Medical
Center Director & Host
Room Coordinator
Allen Baugh, Acquisition &
Materiel Mgmt. Service &
Team Leader Coordinator

Henry Bullock, Recreation
Therapy & Transportation
Coordinator
Dr. Mary Clark, Physician &
Medical Team Coordinator
Lori Mead, Registered Nurse
& Medical Team Co-
Coordinator
Wendy Shingleton, Registered
Nurse & Medical Team Co-
Coordinator
Lyndon Fogg, Information
Technology Service &
Technology Coordinator
Richard Wright, Recreation
Therapy & Equipment Truck
Coordinator
Matt Lucas, Recreation
Therapy & Equipment Truck
Coordinator
Mike Tadych, Office of the
Chief of Staff & Alternate
Activities Co-Coordinator
Gena Tadych, Rehabilitation

Medicine Service & Alternate
Activities Co-Coordinator
Pat White, Laboratory Service
& Ski Instructor Coordinator

Community Support:

Mary Lane, The Daily Sentinel
& Food/Beverage Coordinator
Jill Cordova, Mesa State College
& Continuing Education
Gig Leadbetter, Mesa State|
College & Cross Country
Skiing Coordinator

“Let’s face it,” says Trombetta,
“they definitely “Make Miracles
on A Mountainside Happen!”

By Kris Baugh

*“It is often said by
others that the
Clinic runs like
clockwork and that’s
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provides”.*

Expansion, Education and Partnership at the Cheyenne VA Cheyenne VA Medical Center

The Cheyenne VA Medical Center has been very busy over the past several months. Major activities that have taken place include active outreach to a returning unit of the Wyoming Army Guard who was in Iraq, commemorating the new clinical expansion, providing tours of the VAMC & Colorado CBOC’s for Rep. Marilyn Musgrave (R-CO) and her staff and hosting a World War II historical display at the Cheyenne VAMC.

The Cheyenne VA Operation Iraqi Freedom/Operation Enduring Freedom Coordinator traveled to Ft. Lewis, WA to greet a retuning unit of Wyoming Army Guard reservists to inform them of VA benefits and help them enroll for VA healthcare. There will be a follow-up visit with this same unit in Sheridan, WY on June 23, 2007.

A “Ribbon Cutting and Open House” event was held to commemorate the new clinical expansion. A growing demand for outpatient services such as physical, occupational and speech therapy and specialty clinical services including orthopedics, podiatry and urology supported the 10,000 SF addition. This event was covered by local TV and attended by stakeholders throughout the state of Wyoming.

Rep. Marilyn Musgrave (R-CO) and staff toured the Cheyenne VA and CBOC’s in northern Colorado on several dates throughout March 2007. Rep. Musgrave was very complimentary on the facilities she toured as well as the demonstration of the VA’s electronic health record provided to her by Dr. David Kilpatrick, Medical Center Director.

Active community partnership is a goal of this medical center and is reflected through relationships with the local school district and other community organizations. An example of partnership was seen when the 6th Infantry, 20th Regiment, Company “A”, set up a “World War II Living History Display” at the Cheyenne VAMC. Local historians, dedicated to preserving and portraying the history of World War II through a collection of artifacts, public education set up this display as a way of educating youth about war and the costs of freedom. This display was visited by over 300 local students.

By Andy Ruben



Left to right: Mr. James Floyd, VISN 19 Acting Director; David M. Kilpatrick, Director, Cheyenne VAMC; Debbie McCann, Field Rep. (ENZI); Julie Schaub, Field Rep. (THOMAS); Erin Begeman, Field Rep. (CUBIN).



Living Historian Lou Janack, explains life as a World War II American aviator to a class from Henderson Elementary School, Cheyenne, WY during the World War II Living History event.



Capt. Martha Swatt-Robison with local children.

“What was most amazing to me is the hardiness of the people. We saw people who had walked for hours, often barefoot, to get to our clinic.”

Martha Swatt-Robison about the Panama experience.



VASLCHCS's Colorectal Cancer Care Team (left to right) Eileen Canzonetti, GI Lab Manager; Bona S. Wong, Registered Nurse; Jerry Adamson, Patient Services Assistant; Susan Lamphier, Registered Nurse; and Mae F. Go, M.D., Chief GI Service.

Extreme Healthcare Sheridan VA Medical Center

We all hear about or watch people going on extreme vacations. Television is rampant with travel reality shows, families switching places, and even young executives compete in Donald Trump's extreme interviewing to vie for a chance to work for the real estate developer. But what we don't see or hear about is the extreme adventures of every-day people like your health-care providers. One such individual recently returned from a humanitarian mission to Panama as part of an ongoing project called "New Horizons".

A typical day for Martha Swatt-Robison begins with a long run followed by breakfast with two rambunctious little girls and an equally rambunctious husband. Swatt-Robison

is a mother, wife to Sheridan VA Medical Center Chief of Staff Wendell Robison, an extreme marathon runner, a healthcare provider for the VA, and a Captain in the Wyoming Army National Guard Medical Corp. The extreme running may be the easiest thing she does. Not only does it keep her in great physical shape but it keeps her mind focused and motivates her on her extreme missions. On March 13, 2007 the Wyoming ARNG Medical Command based out of Cheyenne, Wyoming left for Panama to spend two weeks providing medical care. "I was primarily a general medical provider," Physician Assistant Swatt-Robison says as she prepares to see veteran patients at the VAMC in Sheridan. "A typical day would include

unloading a five ton truck with our supplies, setting up the exam rooms and seeing patients. I often saw a mom and 4-6 kids at one time." Swatt-Robison would typically see 75 to 100 patients a day. Early each morning the providers set up their make-shift medical clinic in a school or any place that could accommodate them. The conditions were primitive. "What was most amazing to me is the hardiness of the people. We saw people who had walked for hours, often barefoot, to get to our clinic." Swatt-Robison recalls treating a grandmother and four of her grandchildren who had walked four days to get to the clinic. "That is more extreme than any marathon I've ever run."

By Jackie VanMark

2006 ACA Champion Awards Recognize VA Salt Lake City Health Care System's Colorectal Cancer Care Team

VA Salt Lake City Health Care System

An access problem is a delay problem. The goal of the Veterans Health Administration's Advanced Clinic Access (ACA) Initiative is to build a system in which patients have the opportunity to see their own providers when they choose.

This is a fundamental shift from the past. Traditionally, health care organizations have viewed the demand for health care as insatiable. The typical approach to access was predicated on the false belief that barriers needed to be constructed in order not to be overwhelmed by patient demand.

Advanced Clinic Access seeks not to control the daily patient demand for care, but rather to predict it and respond to it. This model is based on the principle that when supply and demand are in balance (or equilibrium) there is no need for waits in the system.

If the demand is greater than supply, there is a delay in providing care. If the supply is greater than demand, then resources are being wasted. When supply and demand are matched, there is no delay in providing care.

One way to increase a clinic's ability to absorb more demand

is to make the clinic more efficient. This doesn't necessarily mean working faster, but working smarter.

It doesn't mean less time with patients; it means more quality time with patients.

The VA Salt Lake City Health Care System's (VASLCHCS) Colorectal Cancer Care Team worked diligently to reduce the delay for patients scheduled for colonoscopy procedures. Utilizing ACA Strategies and principles, the GI team evaluated supply and demand, and then developed a backlog reduction plan that included

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VA Salt Lake City Health Care System (cont.)

the review of more than 3,000 paper consults for colonoscopy. After the review of these pending consults, the volume was reduced to 1,200 through deleting duplicates, consults already completed and inappropriate consults. The 1,200 patients still identified as needing colonoscopy were placed on

the electronic wait list. The team drafted a letter to send to each of these patients to explain their four different options for colorectal cancer screening and obtain their written consent if they opted to have the colonoscopy procedure. Approximately 625 patients returned signed consents for a colonoscopy. The additional resources needed to complete these 625

procedures were added through use of contracts and dedicating additional time of VASLCHCS providers. After flow mapping the process of consult, handling the GI team has also eliminated non-valued added steps and now acts upon consults for all GI procedures within seven days.

By Susan Huff

It doesn't mean less time with patients; it means more quality time with patients.



“I believe America's best days are ahead of us because I believe that the future belongs to freedom, not to fear.”

*John Kerry
Senator, Massachusetts*

Fort Harrison, Montana ~ Changing Landscape

Montana Health Care System

As part of the CARES process, the need for additional ambulatory care space was recognized at the Ft. Harrison division of the VA Montana Health Care System. The space currently in use was last modified in 1974. The new addition would not only increase space for existing space but allow for other clinics scattered throughout the facility to be located on the first floor. It also allowed for the addition of a small lab to do blood draws and specimen collection instead of patients going to the second floor.

Once construction began in the fall of 2005, it required a re-routing of all traffic at the medical center. Patients were required to temporarily use the front entrance as were ambulances. Service traffic had to be re-routed through the

quarter's area. A committee developed a great signage program that helped direct traffic around the facility. There were also interior signs to help people find areas as they were now entering from a totally new door. Staff were encouraged to provide guidance by taking patients and to their destination. To complicate matters, the Veterans Benefits Administration was building their new building at the same time further limiting traffic flow.

As time passed patients reoriented to the new paths. There was noticeable construction going on that reassured them that the new area would be an improvement. The next major challenge that was overcome was opening 15,000 square feet with no activation dollars. The staff

found excess waiting room chairs from Malmstrom AFB. Exam tables that were excessed by the Portland VA became our new ones. With all their creativity and resourcefulness, the VA Montana staff kept new costs to a minimum. As the project nears completion, the area has improved the appearance and flow of our outpatient area. The rooms are located in a such a fashion that facilitates a good functional flow. Patients go directly into the area they will be seen instead of backtracking through corridors. There is very little need for a patient to go above the first floor for outpatient care. The success of this expansion and overcoming challenges is a tribute to the incredible team effort of VA Montana staff.

By Teresa Bell



New Montana Specialty Care Addition.

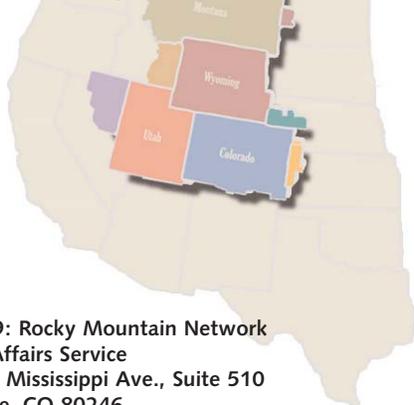


New Entrance to Ambcare North.

The VA Rocky Mountain Network

"To care for him who shall have borne the battle"

VA Rocky Mountain Health Care Network Veterans Integrated Service Network 19



VISN 19: Rocky Mountain Network
Public Affairs Service
4100 E. Mississippi Ave., Suite 510
Glendale, CO 80246



We're on the web!
<http://www.va.gov/visn19>

My HealthVet

My HealthVet has been available to you since 2003. VISN 19 has had 10,787 veterans use My HealthVet since it came on board. The total numbers as shown below.

Cheyenne VAMC	651
Eastern Colorado HCS	5,970
Grand Junction VAMC	699
Montana HCS	1,098
Salt Lake City HCS	1,814
Sheridan VAMC	555
Total	10,787

What is My HealthVet?

- MHV is a web-based application designed for veterans and their families with the goal of optimizing veterans' healthcare.
- MHV is intended for all veterans and offers additional services to those receiving care at VA medical centers. MHV has more than 397,000 registered users and 66% are VA patients.

- MHV is the gateway to veteran health benefits and services. It provides access to:
 - Online VA prescription refill - more than 2.6 million refills have been processed through MHV
 - Trusted health information
 - Personal Health Journals and Health e-Logs
 - Links to Federal and VA benefits and resources
- Using MHV, veterans create and use their Personal Health Record to make informed health care choices, stay healthy, and locate services when needed. Personal Health Record (PHR) features empower veterans to:
 - Request VA prescriptions online.
 - Keep track of personal health information such as emergency contacts, insurance carriers, and treatment providers and locations.
 - Monitor readings for common health metrics such as blood pressure, blood sugar, cholesterol, body temperature/weight, heart rate, and pulse oximetry.



- Store comprehensive family medical histories.
- Track illnesses, accidents, or other events by logging their date, treatment prescribed, and comments.
- Record important events from military service including exposures and assignments related to your health history.
- Record medications, allergies, immunizations, tests, food intake and daily exercise activities.
- In the future, VA patients with MHV accounts will be able to view online VHA health information such as VA appointments, co-pay balances, and select VA electronic health records. They will have the ability to share portions of their Personal Health Records stored in MHV with clinicians and family members. Additionally, the introduction of secure messaging between veterans and clinicians will enhance communication, collaboration, and improve quality of care.

We encourage you to use My HealthVet. Check it out! www.myhealth.va.gov