VA’s National Suicide Prevention Lifeline (also called hotline) recorded its 10,000th Veteran suicide rescue on July fourth of this year. Just one call to: 1-800-273-TALK (8255) can prevent a suicide.

It did for a 26-year old Iraq Veteran, who called one evening from the Oakland, Calif. train station. According to Melissa Rath, a Lifeline responder, “He was so distraught; our staff worked with him, but we weren’t able to decrease his panic. He told us he wanted to jump in front of a train. We could hear the trains over the phone. The Veteran hung up on us, stating he had no option but to die. We called the Oakland police, who in turn stopped the trains until they found him and took him to the local hospital.”

Cont. on page 6
VA Health System Shines in Quality-of-Care Study

A report now appearing online in the national publication Medical Care finds that VA generally outperforms the private sector in following recommended processes for patient care.

“This report is strong evidence of the advancements VA continues to make in improving health care over the past 15 years,” said VA Secretary Eric K. Shinseki. “The systems and quality-improvement measures VA actively uses are second to none, and the results speak for themselves.”

A research team with VA, RAND Corp. (a non-profit research institution) and two universities reviewed 36 studies published between 1990 and 2009. While the review did not include studies of surgical care, it did cover a range of studies of diseases common among Veterans, such as diabetes, heart disease and depression.

The study authors, led by Dr. Amal Trivedi of the Providence, R.I., VA Medical Center and Brown University, cite possible reasons for VA’s more positive performance, including integration of health care settings, use of performance measures with an accountability framework, disease-management practices and electronic medical record or health information technology.

VA Begins Paying Benefits for New Agent Orange Claims

VA has begun distributing disability benefits to Vietnam Veterans who qualify for compensation under recently liberalized rules for Agent Orange exposure.

Up to 200,000 Vietnam Veterans are potentially eligible to receive VA disability compensation for medical conditions recently associated with Agent Orange. The expansion of coverage involves B-cell (or hairy-cell) leukemia, Parkinson’s disease and ischemic heart disease.

VA has launched a variety of initiatives – both technological and involving better business practices – to tackle an anticipated upsurge in Agent Orange-related claims. Providing initial payments – or increases to existing payments – to the 200,000 Veterans who now qualify for disability compensation for these three conditions is expected to take several months, but VA encourages all Vietnam Veterans who were exposed to Agent Orange and suffer from one of the three diseases to make sure their applications have been submitted.

In practical terms, Veterans who served in Vietnam during the war and who have a “presumed” illness do not have to prove an association between their illnesses and their military service. This “presumption” simplifies and speeds up the application process for benefits.

The three new illnesses – B-cell (or hairy-cell) leukemia, Parkinson’s disease and ischemic heart disease – are added to the list of presumed illnesses previously recognized by VA. A complete list of these illnesses can be found at www.va.gov/agentorange.

Veterans interested in applying for disability compensation under one of the three new Agent Orange presumptives should go to www.fasttrack.va.gov or call 1-800-827-1000.
VA Launches Vantage Point Blog

Online Communications Tools Between VA and Veterans About to Increase

VA is launching its first official blog, opening a new line of communication between the department and its stakeholders. The debut marks VA’s latest outreach effort aimed at improving the way VA and its clients engage online.

“As methods of communication change and evolve, we don’t just want to keep up at VA. We want to lead the way. This tool will allow us to interact with Veterans, their families, and the public in ways we’ve never done before,” said VA Secretary Eric K. Shinseki. “Instead of waiting for Veterans to find us, we’re going to seek them out where they already are—which is, increasingly, online.”

The blog, called VAntage Point, will be edited by Brandon Friedman, VA’s Director of New Media. The blog will launch with two primary features: a main column of articles written each day by VA staff and a section comprised of guest pieces submitted by other stakeholders including employees and the public. Readers will be able to comment and participate on all articles. To view the blog, please visit www.blogs.va.gov/VAntage. For more information, visit www.va.gov.

New Medical Forms Will Streamline Veterans Claims Process

Physician Questionnaires to Boost Disability Exam Efficiency

VA has released three new disability benefits questionnaires for physicians of Veterans applying for VA disability compensation benefits. This initiative marks the beginning of a major reform of the physicians’ guides and automated routines that will streamline the claims process for injured or ill Veterans.

“This is a major step in the transformation of VA’s business processes that is yielding improvements for Veterans as we move to eliminate the disability claims backlog by 2015,” said VA Secretary Shinseki.

These new questionnaires are the first of 79 disability benefits questionnaires that will guide Veterans’ personal physicians, as well as VA physicians, in the evaluation of the most frequent medical conditions affecting Veterans.

Accurate and timely medical evaluations are a critical element of VA’s continued commitment to high-quality and prompt decisions about the nature and degree of conditions afflicting Veterans. Streamlining this process by directly involving Veterans’ treating physicians in providing specific information needed to evaluate their claims will lead to completeness in the examination and faster compensation decisions.

VA’s goal is to process all claims in fewer than 125 days with a decision quality rate no lower than 98 percent, a mark Secretary Shinseki has mandated by 2015. The physician questionnaire project is one of more than three dozen initiatives actively underway at VA, including a major technology modernization that will lead to paperless claims processing.
**VA Facility Highlights**

**Palo Alto Health Care System**

**Veterans Give VAPAHCS Top Scores**

In recently released results from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey, VAPAHCS scored significantly higher than the national average on patient satisfaction scores on all 27 items.

These include questions such as: would you recommend VAPAHCS to your friends and family; how would you rate your hospital stay; did your doctors treat you with courtesy and respect, and explain things in a way you could understand?

“I promise we do not take these results for granted,” said Lisa Freeman, VAPAHCS Director. “We will use this survey to guide further improvement in Veteran satisfaction, as well as to identify other quality and safety needs.”

The results came at the same time as VAPAHCS was awarded the Most Customer-Friendly Choice Award from the American Alliance of Healthcare Providers. The award is based on implementing an excellent health care program that successfully results in courteous, compassionate, and caring service for patients, families and the community.

**Sierra Nevada Health Care System**

**Planetree Guides VASNHCS to Better Veteran Care**

Nearly a year ago, VASNHCS partnered with Planetree to move toward a more Veteran-centered approach to health care. The leadership engaged in training and conducted focus groups for both Veterans and staff. The health care system committed to incorporate focus group suggestions and make changes.

With the renovation of the Community Living Center, the Veterans communal living space now looks more like a home living area and Veterans are given choices for their meals. The lobby area of Primary Care was updated to provide a more welcoming feel. Veterans are happier with these new changes.

The newest Community Based Outpatient Clinic in Susanville, Calif. was built and decorated using concepts of Planetree and the healing environment. Also, the Reno VA Environmental Care section launched initiatives to reduce noise throughout the hospital. Prototype “quiet” wheels were put on trash carts and trash can dollies. Other areas, such as Dietetics are targeted for noise reduction in the future. Planetree is helping VASNHCS provide “World Class Care and Service to America’s Heroes” – our mission for our Veterans and staff.

**San Francisco VA Medical Center**

**New Clinic in Clearlake Opens**

After more than a decade of lobbying by local Veterans and leaders, a new VA Clinic, located at 15145 Lakeshore Drive, Clearlake, Calif., opened for patient care on November 1, 2010. About 10 percent of all Lake County residents are Veterans and it is reported to be one of the largest, per-capita Veteran populations in the state. “It’s been a long time coming, but as you can see, it was well worth the wait,” said Lawrence H. Carroll, San Francisco VA Medical Center Director. Speaking at the ribbon cutting ceremony held on October 13, 2010. “This new rural clinic is a perfect example of VA standing by its commitment to ensure health care for all Veterans.” U.S. Congressman Mike Thompson, a long time supporter and advocate for the Clinic, was the keynote speaker to nearly 200 Clearlake community Veterans and leaders.

The building was completely remodeled for its new use as a clinic. It has approximately 8,600 square feet of clinic space and offers primary care, mental health services and limited specialty care through tele-health technology.

Veterans interested in receiving care at the Clearlake VA Clinic should call (707) 995-7200.
Northern California Health Care System
Suicide Prevention – Be a Lifesaver

In September 2004, Joshua Omvig returned home after being deployed to Iraq with the 339th Military Police Company. Like many Veterans, Joshua had difficulty adjusting to civilian life. He remained vigilant and had trouble letting down his guard. One night, he went out drinking – unusual for Joshua according to his family. Before arriving home, he was stopped and received a DUI. The next day, Joshua turned his handgun on himself.

Joshua’s death weighed heavily on his parents. They vowed that other returning Soldiers would get the help they needed. In 2006, the Joshua Omvig Suicide Prevention Act was signed by Congress. This bill mandated that the VA develop a Suicide Prevention Program, including a 24-hour crisis line for Veterans.

Since the program began in 2006, NCHCS has hired two Suicide Prevention Coordinators and a Suicide Prevention Case Manager. The team’s primary duty is to identify and monitor Veterans at high risk for suicide. The Suicide Prevention team provides training in the warning signs of suicidal thinking to VA staff, as well as to community organizations because Veterans do not always come to the VA for their care. Also, the Suicide Prevention Coordinators inform community organizations of services available to Veterans at the VA.

For more information about the Suicide Prevention Program or to have a Suicide Prevention Coordinator speak to your group, call Janet Lial, LCSW at (916) 923-4545.

Central California Health Care System
Front and Center for Diabetes Boot Camp

When the doctor first tells you that you have diabetes, you are faced with many important questions and concerns. The doctor’s time is limited so where can you go to get the expert guidance you need?

The answer for hundreds of VACCHCS patients is our Diabetes Boot Camp, which is held the first Wednesday morning of EVERY month. A small support group of newly diagnosed Veterans and their families meet with key VA experts in diabetes, who can answer all their questions.

NO APPOINTMENT IS NECESSARY...just come! The group meets next to the Primary Care check-in desk on the first Wednesday of every month from 8:00 a.m. to noon. Hundreds of your fellow Veterans have attended and rated Diabetic Boot Camp, “Outstanding!”
10,000 Suicide Preventions and Counting

(Cont. from page 1)

The Lifeline number and an on-line chat service at http://suicidepreventionlifeline.org/Veterans/ can be accessed 24 hours a day, seven days a week.

According to Fred MacRae, Suicide Prevention Coordinator at the VA Palo Alto Health Care System, “When Veterans call the hotline and dial 1 at the prompt ‘dial 1 if you are a Veteran,’ they are routed to the VA National Call Center where the call will be directly answered by a licensed mental health professional (Psychologist, Clinical Social Worker, or Psychiatric Nurse). These clinicians have had additional specific training in helping Veterans in the midst of an acute suicidal crisis. Emergencies are handled immediately, with police rescue if necessary. Support staff also help to quickly locate local resources for the Veteran. Within one business day, the local Suicide Prevention Coordinator follows up with the Veteran and provides him or her with appropriate resources.”

Although the 1-800 Lifeline has helped thousands of Veterans reach someone who will listen and care, VISN 21 has implemented additional initiatives for Veterans. Janet Lial, VISN 21 Suicide Prevention Coordinator gives these examples:

- Additional staff for all VISN 21 facilities. Some added Suicide Prevention Coordinators. Most received a Suicide Prevention Case Manager. (See a complete list for them on page 7.)
- Training to VISN 21 staff about the warning signs of suicidal thinking and behavior
- Community outreach programs
- Assistance to primary mental health care providers to give the kind of support the Veteran needs. “In one unusual instance,” states Janet Lial, “the Suicide Prevention Case Manager for NCHCS was asked to call an OEF/OIF Veteran and leave a message with a positive, supportive thought each week. It was an unusual request but the provider found that it really helped the Veteran. And that’s what it’s all about!”

Suicide Prevention is Everyone’s Business

Learn the Facts

- Between 30,000 and 32,000 suicides occur within the general population in the U.S. each year.
- About 20% of U.S. suicides occur in Veterans.
- About 18 deaths from suicide per day are Veterans.
- More than 60 percent of suicides among utilizers of VHA services are among patients who have already been diagnosed with a mental health condition.
- Veterans are more likely to use firearms as a means for suicide.
- Substance abuse increases the risk of suicide in depressed Veterans.

Know Suicide Warning Signs

- Talking about wanting to hurt or kill oneself
- Trying to get pills, guns, or other ways to harm oneself
- Talking or writing about death, dying or suicide
- Hopelessness
- Rage, uncontrolled anger, seeking revenge
- Acting in a reckless or risky way
- Feeling trapped, like there is no way out
- Saying or feeling there’s no reason for living

If you are at risk of harming yourself, or fear a loved one may be at risk, or feel overwhelmed, call 1-800-273-TALK (8255). According to Janet Lial, “For some of our younger Veterans just coming out of the service and recently returned from war, the VA system can seem daunting. Once they call the Lifeline, they find they have an advocate within the system who can point them in the right direction and help them get the services they deserve. It’s very gratifying to be able to help in this way.”
## VISN 21’s Suicide Prevention Case Managers and Coordinators

### VA Northern CA Health Care System

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<thead>
<tr>
<th>Name</th>
<th>Title/Position</th>
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<tbody>
<tr>
<td>Janet D. Lial, LCSW</td>
<td>Lead Suicide Prevention Coordinator</td>
<td>(916) 923-4545</td>
<td>(916) 825-7983 (Cell)</td>
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<tr>
<td>Kevin Wright, LCSW</td>
<td>Suicide Prevention Coordinator</td>
<td>(925) 372-2091</td>
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<tr>
<td>Kelley Huddleston, LCSW</td>
<td>Suicide Prevention Case Manager</td>
<td>(916) 923-4539</td>
<td>(916) 206-4890 (Cell)</td>
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### VA Central CA Health Care System

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<tr>
<td>Susan Basmajian, LCSW</td>
<td>Suicide Prevention Coordinator</td>
<td>(559) 225-6100 ext. 5939</td>
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<tr>
<td>Lawanda Roper, LCSW</td>
<td>Suicide Prevention Case Manager</td>
<td>(559) 225-6100 ext. 5885</td>
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### San Francisco VA Medical Center

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<tr>
<th>Name</th>
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<tr>
<td>Megan McCarthy, Ph.D.</td>
<td>Suicide Prevention Care Manager</td>
<td>(707) 569-2392</td>
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<tr>
<td>Dr. Mark Stalnaker, Ph.D.</td>
<td>Suicide Prevention Coordinator</td>
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<tr>
<td>Thais Williams, LCSW</td>
<td>Suicide Prevention Case Manager</td>
<td>(415) 221-4810 ext. 3531</td>
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### VA Pacific Islands Health Care System

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<th>Name</th>
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<tr>
<td>Susan Bass, RN, MSN</td>
<td>Suicide Prevention Coordinator</td>
<td>(808) 433-1695</td>
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<tr>
<td>Michael Kestner, MSN, RN-BC</td>
<td>Suicide Prevention Case Manager</td>
<td>(808) 433-0007</td>
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### VA Regional Office & Outpatient Center Manilla

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<tr>
<th>Name</th>
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<tr>
<td>Dr. Eleanor Ronquillo, MD</td>
<td>Suicide Prevention Coordinator</td>
<td>011-632-833-4566</td>
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### VA Palo Alto Health Care System

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<tr>
<td>Nadine Shirley, LCSW</td>
<td>Suicide Prevention Coordinator</td>
<td>(925) 373-4700 ext. 35540</td>
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<td>(925) 449-6519</td>
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<tr>
<td>Fred MacRae, LCSW</td>
<td>Suicide Prevention Coordinator</td>
<td>(650) 493-5000 ext. 63337</td>
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<td>(650) 444-7320 (Cell)</td>
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<tr>
<td>Kristen McDonald, Ph.D.</td>
<td>Suicide Prevention Coordinator</td>
<td>(650) 617-2691</td>
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### VA Sierra Nevada Health Care System

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<th>Name</th>
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<tr>
<td>Andrea Wicker, LCSW</td>
<td>Suicide Prevention Coordinator</td>
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<td>(775) 842-7674 (Cell)</td>
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<tr>
<td>Marilyn Scholl, LCSW</td>
<td>Suicide Prevention Case Manager</td>
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<td>(775) 686-9154 (Cell)</td>
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