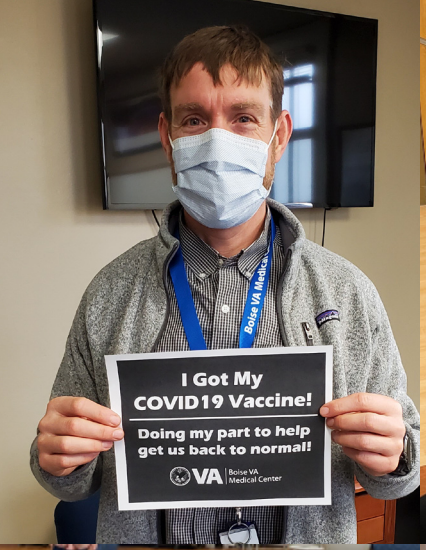
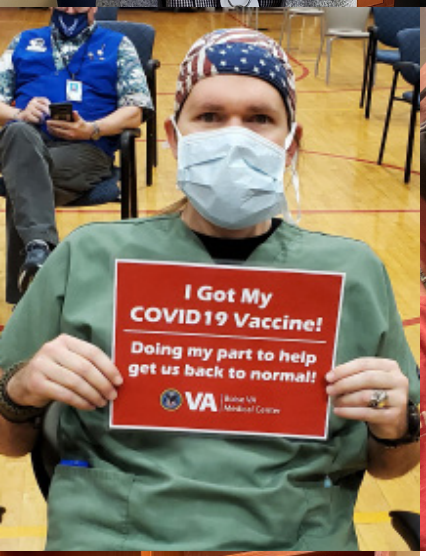
January 2021

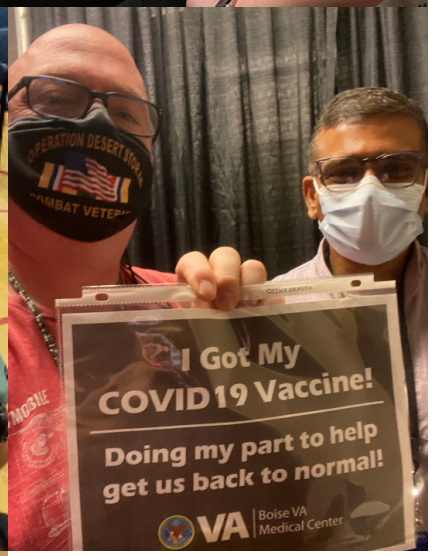
The BOISE FRONT

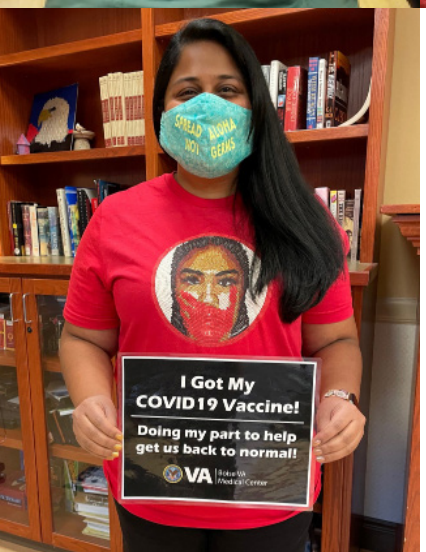
The official newsletter of the Boise VA Medical Center

COVER PHOTO: Boise VA staff are proud to get their COVID vaccine.







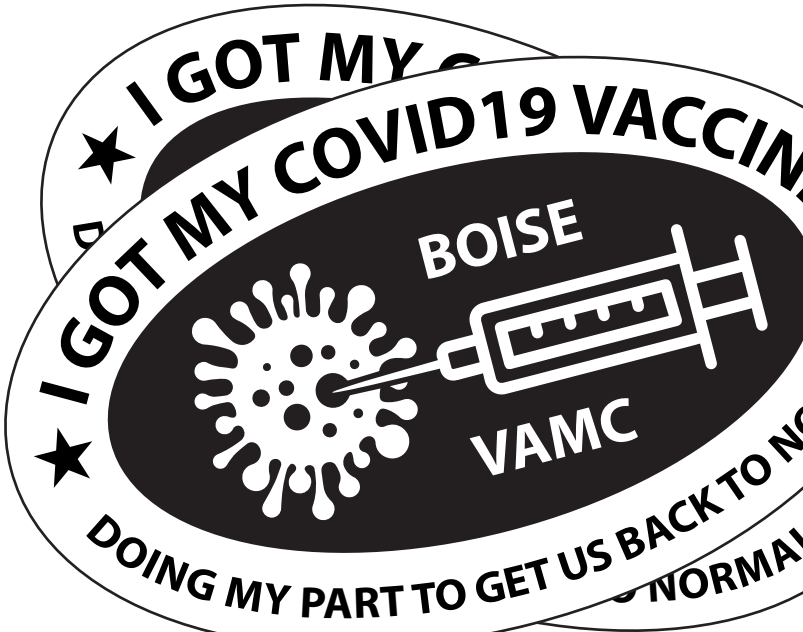


Got Your Vaccine Yet?

Help us promote the importance of getting the COVID19 vaccine by sending us a photo of you wearing your 'I Got the Vaccine' sticker, or holding one of the signs.

Please email your photo to Public Affairs Officer, Josh Callihan at joshua.callihan@va.gov

We will use your photos in future social media posts and Boise Front articles!



Protect your every day.

RECOGNIZE THE SIGNS

OF TERRORISM-RELATED SUSPICIOUS ACTIVITY

EXPRESSED OR IMPLIED THREAT

Threatening to commit a crime that could harm or kill people or damage a facility, infrastructure, or secured site

SURVEILLANCE

A prolonged interest in or taking pictures/videos of personnel, facilities, security features, or infrastructure in an unusual or covert manner

THEFT/LOSS/ DIVERSION

Stealing or diverting items—such as equipment, uniforms, or badges—that belong to a facility or secured site

TESTING OR PROBING OF SECURITY

Investigating or testing a facility's security or IT systems to assess the strength or weakness of the target

AVIATION ACTIVITY

Operating or interfering with the operation of an aircraft that poses a threat of harm to people and property

BREACH/ ATTEMPTED INTRUSION

Unauthorized people trying to enter a restricted area or impersonating authorized personnel

ACQUISITION OF EXPERTISE

Gaining skills or knowledge on a specific topic, such as facility security, military tactics, or flying an aircraft

ELICITING INFORMATION

Questioning personnel beyond mere curiosity about an event, facility, or operations

MISREPRESENTATION

Presenting false information or misusing documents to conceal possible illegal activity

CYBERATTACK

Disrupting or compromising an organization's information technology systems

RECRUITING/ FINANCING

Funding suspicious or criminal activity or recruiting people to participate in criminal or terrorist activity

SABOTAGE/ TAMPERING/ VANDALISM

Damaging or destroying part of a facility, infrastructure, or secured site

MATERIALS ACQUISITION/ STORAGE

Acquisition and/or storage of unusual materials such as cell phones, radio controllers, or toxic materials

WEAPONS COLLECTION/ STORAGE

Collection or discovery of unusual amounts of weapons including explosives, chemicals, or other destructive materials

SECTOR-SPECIFIC INCIDENT

Actions which raise concern to specific sectors, (e.g., power plant) with regard to their personnel, facilities, systems, or functions

If you **see** something, **say** something®

REPORT SUSPICIOUS ACTIVITY TO LOCAL AUTHORITIES OR CALL **9-1-1** IN CASE OF EMERGENCY

dhs.gov/see-something-say-something

"If You See Something, Say Something®" used with permission of the NY Metropolitan Transportation Authority.

Managing Escalated Behavior Triggered by Societal Violence

WVPP Overview

The WVPP promotes a culture of safety and the use of evidence-based, data-driven processes for assessing, mitigating, and managing human behaviors that compromise the safety and effectiveness of VHA health care workplaces.

Promoting patient and employee safety involves reporting events using the Disruptive Behavior Reporting System and using processes for behavioral threat multidisciplinary team review.

WVPP Consultation

VHA Workplace Violence Prevention Program Consultation Team
WVPPConsultation@va.gov

U.S. Health Care Workplace Violence

https://www.osha.gov/Publications/osha3148.pdf

Relevant Legislation, Regulatory Requirements, and Standards

- Public Law 112-154, section 106, "Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012"
- 38 Code of Federal Regulation, section 17.107, "VA Response to Disruptive Behavior of Patients"
- Occupational Safety and Health Act, section 5(a)(1) (aka "General Duty Clause")
- The Joint Commission's Environment of Care and Leadership Standards

For More Information

https://dvagov.sharepoint.com/sites/VHAWVPP/SitePages/Home.aspx
https://dvagov.sharepoint.com/sites/VHAPMDB/default.aspx

Behavioral Agitation and Societal Violence

Veterans may display increased behavioral agitation around violence in society (e.g., mass shootings, violence related to political events, etc.). Such behavior may include stating a continued duty to protect and defend the US against violence, at any cost, despite no longer being in active US military service. This resource page provides an overview for interactions with individuals whose behavior may cause safety concerns during periods of societal violence.

Managing Behaviors During an Appointment

- **Use** customer service and verbal de-escalation skills to assist anxious, worried, tired, and/or scared people.
- **Be respectful** when engaging with Veterans who express views that may be counter to your beliefs or lived experiences.
- **Avoid engaging in political discussions** that attempt to "correct" the person's thinking.
- **Encourage patients to limit media contact** and identify alternative ways to support their community/country that do not require taking up arms or engaging in violent behavior.

Training and Local Resources

- **Ensure Prevention and Management of Disruptive Behavior (PMDB) course(s) are complete.**
- **Disruptive Behavior Committees at every VHA facility are trained** in evidence-based, data-driven risk assessment to evaluate the risk posed by patients making threats and/or engaging in threatening behavior. Please consult the DBC to assess patients that indicate that they plan to engage in any violent behaviors.
- **Refer to Behavioral Health Care**, as indicated, to address patient's concerns and enhance protective factors to reduce violence.
- **Employee Assistance Program (EAP) resources are available to aid staff in** addressing distress related to escalated behaviors.
- **Take care of your health needs** (mental and physical).
- **Get Support**: talk with your supervisor, treatment team, take a break.

Managing a Crisis and Accessing Support

- Refer to local safety procedures
- Remain calm
- Access relevant assistance from staff or community emergency services
- Maintain contact while assistance responds

Report Behavioral Safety Concerns

Report behavioral safety concerns in the Disruptive Behavior Reporting System (DBRS) Any VHA employee may enter a report in the DBRS.

PMDB Training Opportunities

Workplace Violence Prevention Program (WVPP)

VA is a place for healing.
Everyone's Safety is Everyone's Responsibility.

VA | U.S. Department of Veterans Affairs

Prevention and Management of Disruptive Behavior (PMDB)

Verbal De-Escalation Techniques

Prevention and Management of Disruptive Behavior (PMDB) Program

PMDB is the employee education arm of the Workplace Violence Prevention Program in Veteran's Health Administration (VHA) Central Office.

The purpose of the program is to train employees to recognize, prevent, manage, and report incidents of workplace violence and disruptive behaviors that occur in VA healthcare settings, ensuring America's Veterans can receive safe and effective healthcare services in a culture of safety, civility, and respect.

PMDB has continually evolved and improved since the late 1970's, in an ongoing commitment to ensure the skills are simple, safe, and easy to use.

PMDB Mission: To train employees of the department in best practice methods of preventing and managing workplace violence, ensuring America's Veterans can receive safe and effective healthcare services in a culture of safety, civility and respect.

PMDB Consultation and Questions

VHACOPMDBOffice2@va.gov

For more information:
https://dvagov.sharepoint.com/sites/VHAPMDB/default.aspx

For information about how to sign up for PMDB classes, please contact your local PMDB coordinator.

In PMDB,

Prevention is the Key!

Normal Level of Stress and Customer Service

- Able to process information from the environment.
- Responds well to directions or questions.
- Use active listening and a shared problem-solving approach.
- "Let's look at this together and see if we can work something out."
- "You seem frustrated. Can you tell me what happened?"
- "I am sorry there was a miscommunication".
- "What are some options that might work for you?"

Moderate Level of Stress and Verbal De-Escalation

- Information processing is reduced.
- Small nervous habits are present.
- Easily distracted by environmental triggers.
- Challenges with expressing concern or issue.
- Voice volume increases, rate of speech accelerates.
- Verbal de-escalation is focused on listening to the concern and associated feelings.
- "Feeling upset about this is understandable, can you help me understand what happened?"
- "What would you like me to know about that?"
- "What do you wish had happened?"
- "Feeling upset about this is understandable."

Severe Level of Stress and Limit Setting

- Information processing is significantly reduced.
- Tunnel vision is present.
- Problem-solving ability is reduced.
- Use of verbally aggressive language or making threats.
- Suggestive comments or lewd behavior.
- Behavior may interfere with service provision.
- Limits are simple and describe desired behavior.
- "Please lower your voice"
- "Please slow down."
- In some instances, ending the appointment and rescheduling may be required as a limit.

PMDB Training Opportunities

2 of 3

Delivering Virtual Healthcare: Managing Disruptive Behavior

VHA Workplace Violence Prevention Program (WVPP)

The WVPP promotes a culture of safety and the use of evidence-based, data-driven processes for assessing, mitigating, and managing human behaviors that compromise the safety and effectiveness of VHA healthcare workplaces.

Promoting patient and employee safety involves reporting events using the Disruptive Behavior Reporting System (DBRS) and using behavioral threat multidisciplinary team review processes.

WVPP Consultation

VHA Workplace Violence Prevention Program Consultation Team
WVPPConsultation@va.gov

U.S. Healthcare Workplace Violence

Healthcare workers face significant risks of job-related violence

https://www.osha.gov/Publications/osha3148.pdf

Relevant Legislative, Regulatory Requirements, and Standards

- Public Law 112-154, section 106, "Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012"
- 38 Code of Federal Regulation § 17.107, "VA Response to Disruptive Behavior of Patients"
- Section 5(a)(1) of the Occupational Safety and Health Act (aka "General Duty Clause")
- The Joint Commission Environment of Care and Leadership Standards

For More Information

https://dvagov.sharepoint.com/sites/VHAWVPP/SitePages/Home.aspx
https://dvagov.sharepoint.com/sites/VHAPMDB/default.aspx

Preparing for Virtual Appointments

- Review VA Video Connect (VVC) guidelines, appointment reminders VVC Individual Intro for Veterans
- Review the Veteran's medical record for behavioral flags, past violent behavior, current treatment issues including active substance use/abuse, changes in mental status

Initial Point of Contact

- Use a friendly, respectful greeting
- Review informed consent and expectations for appointment

Managing Behaviors During the Appointment

- Watch for changes in how the Veteran is speaking or behaving
- Use PMDB skills for Customer Service, Verbal De-Escalation or Limit-Setting, as needed
- **Customer Service -** Includes active listening and a shared problem-solving approach, allow time for expression of the concern.
- **Verbal De-Escalation -** The emphasis is on listening to the concern and associated feelings. Respond by presenting reality in a supportive manner. Remember to maintain eye contact and open body language.
- **Limit-Setting** - Limits are simple, describe desired behavior, and are progressive. Requires a keen awareness of self and responses.

Managing a Crisis and Accessing Support

- Refer to VVC and Telehealth protocols
- Remain calm, maintain a neutral tone of voice
- Access relevant assistance from staff or community emergency response services
- Maintain contact while assistance responds

After an Event

- Take care of your health needs (mental and physical)
- Get support: talk with supervisor, treatment team, take a break, Employee Assistance Program (EAP)
- Report the event in Disruptive Behavior Reporting System (DBRS)

PMDB Training Opportunities

3 of 3

THE CODING CORNER

COVID19 Vaccines

With the COVID-19 vaccination being used on patients, more attention is being paid to all vaccinations. Below are the documentation requirements and codes for common vaccinations

Required Documentation:

- Date of Administration
- Body area where vaccine was administered
- Vaccine Manufacturer and Vaccine Lot Number (and NDC if available)
- Name and title of the person who administered the vaccine and address of the facility where the permanent record will reside
- Vaccine information statement (VIS), including date printed and date given to patient

Coding Vaccinations: For administering a vaccination, you will use code 90471 for the first vaccination, for each additional vaccination 90472 for each additional vaccine given.

Example: A patient come in for his shingles vaccination and a flu shot. You would code 90471 and 90750 for the shingles shot, and 90472 and 90686 for his flu shot.

Questions:

Michelle Gauron – Coding Auditor
Michelle.Gauron@va.gov
Aleah Bennet – CDIS Specialist
Aleah.Bennett@va.gov

Vaccine	Codes
TDAP	90715 – TDAP Vaccine
Shingles/Zoster	90750 - Zoster (shingles) vaccine (HZV)
Pneumococcal	90670 - Pneumococcal conjugate vaccine, 13 valent (PCV13), or 90732 - Pneumococcal polysaccharide vaccine, 23-valent (PPSV23)
Flu Shot (2020-2021 Flu Season)	90662 – Fluzone High Dose (High Risk Patients) or 90686 – Fluzone Quadrivalent
COVID-19 (Moderna)	First Dose 91301 – Moderna COVID-19 Vaccine **and** 0011A – Moderna Vaccine, First Dose Second Dose 91301 – Moderna COVID-19 Vaccine **and** 0012A - Moderna Vaccine, Second Dose

Hello's Goodbye's

The Boise VAMC would like to welcome our
new employees who came aboard:

Corrin Collins
Whitney Jensen
Catherine Owen
Christian Westbrook
Harlei Cahill
Jason Frederick
Ted Crawford
Jerred Owsley
Kelly French
Julie Vatel
Samantha Sanchez
Raymond Ramirez
Chantal Tougas
Lessie Schoenfelder

Mary Shaw
Ashley Freeman
Anita Primrose
Karlyne Morawe
Svetlana Leake
Michael Kepler
Jana Danielson
Rebecca Godwin
Cheryl Williams
Samantha Lavis
Donna Mykytiuk
Dwayne Witherspoon
Peni Valdez
Danielle Anderson

Hello's Goodbye's

The Boise VAMC would like to say goodbye to
the employees who left us:

Lori Smith
Russell Brush
Sandy Piotrowski
Jarred Owsley
Diane Ouellette
Justin Moore
Shawn Nida

EMPLOYEES OF THE MONTH **JANUARY**

Melissa Richards

Melissa has shown herself to be one of the most valued and adored employees on our floor. She comes to work each day ready to work hard. What sets her above the rest is the way she relates to the veterans. She jokes with them, encourages them, actively listens, and provides unbelievable care each day. Melissa works with our quadriplegic resident to fill out forms, fax them out, go thru and organize his mail, and any other logistical support he needs. Melissa shows amazing respect for every one of our veterans in addition to all her co-workers. Her laughter is infectious and her smile brightens the room. She has the ability to connect with even the most withdrawn resident and somehow get that person to smile or laugh. Melissa shows excellence in the quality of care she gives and performance of daily tasks. She understands what is expected of her and goes above the expectations. She is very attuned to the residents and notifies nursing staff if there is anything out of the ordinary. This morning, Melissa went into a veteran's room and informed him that it was shower day per his schedule. He had worked extra hard with therapies and informed her that he would rather take a sponge bath. She respected his request, offered assistance, and let him know that she would change his linens. He seemed appreciative that she respected his request. These are the types of incidents we observe on a daily basis with Melissa. Yesterday, a former resident phoned the unit to say hello and visit with Melissa. He said "Of all the hospital stays I've ever had (and I've had lots) my stay on your unit was by far the best." He reported that he felt like he was part of a home-like environment and he felt truly cared about. This veteran plans to visit our unit when the COVID restrictions lift as we are like a family to him. We could not achieve that home-like environment and loving care without Melissa.

Mr. Snell went (and continues) to go above and beyond with his commitment to serving our veterans by volunteering to work OT on the weekends in the understaffed housekeeping department. He has already worked 3 weekends in a row and is planning to continue to do so as needed. His willingness to help out other departments sets a great example of leadership and being a team player to accomplish the mission of providing our patients with the best possible experience here at the Boise VA Medical Center.

Thomas Snell

EMPLOYEES OF THE MONTH **JANUARY**

Karen Jennings

Karen is the epitome of what a nurse should represent for the VA. As a Veteran herself, she drives to give all Veterans that come into the clinic the attention and respect that they have earned. She truly CAREs about all of them. Integrity: Karen is an employee that others look at for guidance and she feels that doing the right thing even when nobody is looking is an example to bel followed. She goes above and beyond to learn about the Veterans outside of the short amount of time she is with them. Commitment: Karen shows daily that she truly cares for the Veterans in which we serve. Karen took time to speak to a distressed Veteran on the phone for almost an hour until she was able to get a member from the Behavioral Health team on the phone to better help this Veteran with the troubles he was dealing with at the moment. She gave that individual the attention he needed to prove to him that our Veterans are not just a number, but a PERSON! Advocacy: Karen takes the time to explain what is going on with Veterans and pushes to help Veterans get what they need to improve their well-being. Respect: Karen respects the Veterans of every generation and does everything she can to show that in her attitude and work ethic. There is not a person that she works with that she feels is below her and she understands that all coworkers have their strengths and place within the VA family. Excellence: Karen knows that every task she works on has her name on it and the name of the VA and she does not let anything or anyone go out the clinic without knowing that it is of the highest quality and professionalism and that any and all questions were answered to the best of her ability.

SHOUT OUT!

Nora Osman is one of Idaho's phenomenal home healthcare nurses. She serves both veterans and non-veterans alike. Ms. Osman is being recognized for her outstanding care and consideration she has given to our very own Veteran and his wife. Ms. Osman goes above and beyond to provide care for this family, who lives near Idaho City, and requires Ms. Osman to use her 4x4 or her snowmobile to reach their home. Due to her proximity to this family she is the only home healthcare nurse who was willing to provide the needed care to the Veteran and his family, overcoming the inclement weather to get there. She has provided them meals when needed and continues to help care for and educate them. This commitment and dedication to her patients is what the VA is all about, and we commend her for her service. Ms. Osman, as one of our community partners, helps us serve our mission, which is to fulfill Presidents Lincoln's promise, "To care for him who shall have borne the battle and for his widow and his orphan." Thank you, Ms. Osman for all you do, we could not do it without you.

BOISE is HIGHLY RELIABLE

HRO
PRINCIPLES & VALUES

January 2021 | National Safety Poster

Theme of the Month: Sensitivity to Operations

Focus on Front Line Staff and Care Processes

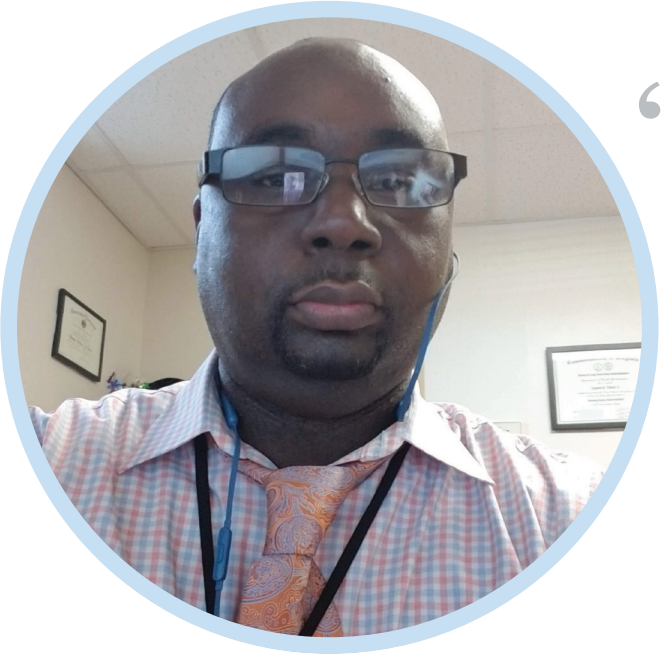
Veteran's health care team examined existing ordering processes and made improvements to prevent harm.

Quality Assurance Check Leads to Operational Improvement

Context: While completing a routine quality assurance check, the Chief of Prosthetics at Carl Vinson VA Medical Center (VAMC) in Dublin, Georgia, noticed a primary care physician ordered a Transcutaneous Electrical Nerve Stimulation (TENS) device for a Veteran. The Chief was concerned about this Veteran using the TENS device with his pacemaker.

Action: The Chief engaged the Veteran's primary care physician and the TENS device manufacturer. Overall, the health care team determined that the Veteran should not use this device in conjunction with his pacemaker.

Results: Exercising *Sensitivity to Operations*, the systems redesign coordinator at Carl Vinson VAMC examined the existing process for ordering TENS devices. As a result, orders for TENS devices can only be submitted with a supporting diagnosis from specialists or primary care physicians. Additionally, before a TENS device is issued, the prosthetics supply department must verify diagnoses and flag any conditions that would make the device unsafe for a patient to use.



"This good catch highlights how High Reliability Organizations are sensitive to operations and identify process improvements that can prevent harm from reaching our Veterans."

Eugene Triplet II
Systems Redesign Coordinator and HRO Lead

VHA'S JOURNEY TO HIGH RELIABILITY
Your Care is Our Mission.