



# Community Engagement Quarterly

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## Feature Introducing VHA's Center for Compassionate Innovation

There are some conditions that have relatively straightforward treatment plans. Prescribing antibiotics for pneumonia or the new direct-acting antivirals for hepatitis C are two examples where a simple drug regimen will often result in a positive outcome for the patient. However, other conditions with varied, complex symptom presentations require more nuanced and creative treatment approaches.

The Department of Veterans Affairs (VA) launched the Center for Compassionate Innovation (CCI) to explore emerging therapies that may enhance Veterans' physical and mental well-being. "VA is unique in our approach to health care," said Veterans Affairs Secretary David J. Shulkin. "We are committed to offering Veterans cutting-edge and innovative care. That means carefully exploring every avenue that will promote well-being."

CCI will explore emerging therapies that are safe and ethical after traditional treatments have not been successful. It has a keen interest in innovative treatments or therapies that address PTSD, chronic pain, TBI, and other difficult to treat health conditions. Each proposal will be evaluated through a rigorous algorithm that critically assesses safety and efficacy of the innovation. The CCI is not an implementation office intended to conduct research, clinical treatment, or establish a vendor relationship. However, it is strategically positioned to spotlight cutting edge therapies and treatment modalities that are emerging in private industry and to collaborate with VA officials on a path forward.

CCI has a thorough and thoughtful review process in order to identify proposals that are appropriate for implementation. It also creates an entry point for the private sector to share new treatments or therapies with the VA.

One of CCI's initiatives involves partnering with Mental Health Services and Prosthetic & Sensory Aids Services to lead VA's efforts to extend the veterinary health benefit for service dogs. VA has a long history of providing this benefit to Veterans who require and use a service or guide dog to mitigate their hearing, vision and/or mobility limitations. With this initiative, the benefit is being extended to Veterans with a chronic impairment that substantially limits mobility associated with a mental health disorder for whom the service dog has been identified as the optimal way for the Veteran to manage their mobility impairment and live independently.

Veterans have begun to receive the veterinary benefit for service dogs to assist them with their mental health mobility limitations. The initial responses have been positive. During this ongoing initiative, CCI will gather information about Veterans' quality of life and satisfaction with the service dog benefit.

Veterans who believe they may be eligible for the veterinary benefit for a mental health mobility service dog should make an appointment with their VA mental health provider to discuss. For additional information regarding the VA service dog veterinary benefit, please visit: <http://www.prosthetics.va.gov/ServiceAndGuideDogs.asp>.

## Office of Community Engagement

The Office of Community Engagement (OCE) serves as a trusted resource and a catalyst for the growth of effective partnerships that benefit Veterans and their families.

OCE is a facilitator and an entry point for public and private entities interested in partnering with VHA in the service of Veterans.

## Center for Compassionate Innovation

The Center for Compassionate Innovation (CCI)'s mission is to enhance Veterans' health and well-being by exploring emerging therapies that are safe and ethical after traditional treatments have not been successful.



## Medical Legal Partnerships



Legal problems can have a domino effect on a Veteran's health and well-being. Many have reported that they felt overwhelmed and even paralyzed at times by their legal obstacles. An Army Veteran, who was a fuel supply specialist during Vietnam, was faced with imminent eviction. Thanks to the help of a Connecticut Veterans Legal Center pro bono attorney, the landlord's actions were thwarted when it was discovered that the grounds for eviction were illegal. The attorney also assisted the Veteran by expediting his VA disability compensation determination for post traumatic stress disorder (PTSD). This resulted in the Veteran's monthly income increasing by \$2,800 giving him enough to afford a new place to live.

The Office of Community Engagement learned about the VA Connecticut Healthcare System's Medical Legal Partnership (MLP) when the facility won the 2015 VHA National Community Partnership Challenge. At that time more than 1200 Veterans had benefited from the partnership in the span of five years, helping 65% of participating Veterans facing eviction improve housing stability and their financial status by more than \$700,000. Now this MLP has served more than 2000 Veterans.

MLP is care delivery collaboration between the medical and legal practitioners. VA medical providers work directly with on-site pro bono attorneys and are trained to identify and address Veterans' legal needs. The healthcare team refers the Veteran to the legal team, whose attorneys provide advice, intervention, and representation. The result is improved medical and legal outcomes.

MLPs are a patient-centered approach to care by integrating legal services into the network of VA healthcare services provided to Veterans. Although VA does not have statutory authority to fund legal services, community partnerships like these help address this need for Veterans. VA currently has 16 mature MLPs and quite a few in the pipeline. For more information or assistance in starting a MLP at your facility, contact the VA Medical-Legal Partnership Taskforce at [VAMLPTaskForce@va.gov](mailto:VAMLPTaskForce@va.gov).

## Taking Mental Health Care to the Veteran

VA and the national nonprofit organization Project Hero, which helps Veterans and first responders affected by post traumatic stress disorder and traumatic brain injury, have partnered to move mental health care beyond the brick-and-mortar setting. Through this partnership, VA mental health professionals, recreation therapists, kinesiotherapists, and other VA clinicians are participating in Project Hero's cycling Challenges. These multi-day cycling events can be both grueling and invigorating. The noncompetitive rides are designed for all skill levels and range from 10-100 miles.

Veterans who never seek traditional mental health care regularly participate in the Challenges. John Wordin, President and Founder of Project Hero, recognized that if these Veterans will not go to VA then VA must meet them where they are. Both VA clinicians and Veterans who have participated in the rides applaud this Veteran-centered approach and encourage other VA medical center staff to participate.



Shawn Morelli is one of the Veterans pictured on the left. She participated in her first Project Hero Challenge in 2010S after she was wounded in Afghanistan. About Project Hero, she stated, "Project Hero is what saved my life. Having that organization to go to and being around other Veterans going through the same thing I was, saved my life." Shawn is now a member of the United States Paralympic cycling team and won two gold medals in the women's 3,000 meter individual pursuit at the Rio Paralympics and competes on the United Healthcare cycling team.

Project Hero's mission is to help Veterans and first responders affected by PTSD, TBI and injury achieve rehabilitation, recovery and resilience in their daily lives and increasing awareness to combat the national mental health emergency posed by PTSD. For more information about Project Hero, go to <http://projecthero.org/>.

### Medical Legal Partnerships

[www.vapulse.net/groups/va-medical-legal-partnerships](http://www.vapulse.net/groups/va-medical-legal-partnerships)

### VA and Project Hero Memorandum of Understanding

<http://vaww.oce.med.va.gov/MOUs.aspx>

## **Stellage Ganglion Block: An Emerging Therapy Taking a Physiological Rather Than a Psychological Approach to Treating PTSD**

*What is the stellate ganglion? What does it do?*

In the neck there is a collection of nerves called the stellate ganglion that are part of the sympathetic nervous system (SNS) which is responsible for initiating the fight or flight response when we are stressed. As a part of the SNS, the stellate ganglion relays information from the brain to the rest of the body when there might be threats or danger.

When someone experiences trauma, the SNS is stimulated. When a traumatic experience results in post-traumatic stress disorder (PTSD), the SNS is constantly aroused, and people experience symptoms that include hyperarousal, hypervigilance, re-experiencing and avoidance. Chronic SNS arousal also increases the risk of heart disease, stroke and diabetes.

*What are the benefits of blocking the stellate ganglion?*

Researchers believe that by blocking the stellate ganglion, the overstimulation of the SNS that appears to cause many of the symptoms associated with PTSD, will be inhibited, resulting in people with PTSD experiencing less anxiety and hyperarousal. A stellate ganglion block (SGB) is performed by a physician who injects the nerve bundle with local anesthetic and may be helpful in people where more traditional treatments have not been successful. Because this is a treatment aimed at possible physiological rather than the psychological causes of PTSD symptoms, a stellate ganglion block may be perceived by some people living with PTSD as less stigmatizing than more conventional therapies. However, this is still an emerging therapy, Dr. Eugene Lipov is a pain doctor in Chicago who published the first successful treatment of PTSD using SGB in 2008. There are currently only a small number of early studies demonstrating generally positive outcomes.

*Who's doing this research and does it work?*

Dr. Michael T. Alkire, Chief of Anesthesiology Services at the VA Long Beach Healthcare System, is among a few researchers throughout the United States exploring how stellate ganglion block might help to relieve PTSD. He is currently studying the efficacy of a stellate ganglion nerve block in Veterans to reduce the symptoms of PTSD in Vietnam era Veterans as well as Veterans deployed to Afghanistan or Iraq as part of Operations Enduring Freedom (OEF), Iraqi Freedom (OIF), and New Dawn (OND).

Dr. Alkire found that in the small number of Veterans with PTSD and high anxiety levels that he's treated, a majority of them have a positive response to SGB. He and his colleagues presented their data at the American Society of Anesthesiologists meeting during the Best of Meeting Abstract Session in 2015 and they continue to explore how this treatment can best help Veterans.

The researchers at Long Beach have found that in Veterans who respond to SGB, their PTSD symptoms are reduced enough for approximately 2-3 months that there is a window of opportunity to use other treatment modalities to help them further their recovery from PTSD while they are experiencing less anxiety. Using SBG in conjunction with other treatments is how Dr. Alkire and his team envision the future to help Veterans who do not respond solely to other PTSD treatments.



**Lelia Jackson, MS, FAC-PP/M, Director.** Ms. Jackson is the national representative for nongovernmental organizations interested in partnering with VHA to expand healthcare services for Veterans, their families, caregivers, and survivors. Ms. Jackson led efforts to establish the Office of Community Engagement (OCE) in 2012. Prior to joining VHA, Lelia served as a lead for the Secretary of VA's Transformation Initiative Operational Management Review Team. With a career track record of process improvement and business development, she spearheaded the launch of the Center for Compassionate Innovation in spring of 2016. Ms. Jackson is a US Marine Corps Veteran and has a masters in technology management and holds a Mid-Level Federal Acquisition Certification for Program and Project Managers (FAC-P/PM).

**Tracy Weistreich, PhD, RN, NEA-BC, VHA-CM, Deputy Director.** Dr. Weistreich holds a PhD in Health Sciences, a Master's Degree in Nursing Education, and Associate and Baccalaureate Degrees in Nursing. She is a US Army Nurse Veteran. She serves as a peer reviewer and editor of two online professional nursing journals, has mentored several Doctorate of Nursing Practice students, and maintains nursing currency through evaluation of clinical proposals. She joined the Office of Community Engagement in May 2016 and helped establish the Center for Compassionate Innovation.

**Alyssa Adams, PsyD, CNS, Health System Specialist** is licensed as a psychologist in both the District of Columbia and Virginia and is a Certified Nutrition Specialist (CNS). She received her PsyD from Marywood University and completed her predoctoral internship at the VA Medical Center in Washington, D.C. and a two-year postdoctoral fellowship in clinical and research neuropsychology at the War Related Illness and Injury Study Center (WRIISC) at the VA Medical Center in Washington, D.C. Her research and clinical interests include the impact of nutrition on mood and cognition, the use of food in treating neurological diseases, and the application of integrative health modalities in clinical care and preventive health.

**Dorothy Butts-Valentine, MA, MS, CMHC, Health System Specialist** is a retired US Marine and holds two master degrees, an M.A., Human Services Marriage and Family, and M.S., Clinical Mental Health Counseling. She promotes and develops non-monetary public-private partnerships with non-governmental agencies.

**Jamie D. Davis, PhD, Health System Specialist** is licensed as a clinical psychologist. She obtained her PhD at Oklahoma State University and completed her pre- and post- doctoral fellowships at Dartmouth-Hitchcock Medical School. She is a trauma trained therapist and has worked extensively with Indian Health Service and Tribal mental health programs. In 2015, she was awarded the American Political Science Association Congressional Health and Aging Policy Fellowship where she worked on the Department of Justice Elder Justice Initiative.

**Christie Eickhoff, MA, Data Analyst,** holds a bachelor's in psychology and received her master's in psychology from American University. Ms. Eickhoff's work in OCE is focused around identifying where evidence-based innovations may benefit Veteran care and supporting the data collection and analysis necessary to implement and evaluate these innovations.

**Charmagne Gravely, Administrative Officer,** attended Thomas Nelson Community College before starting her government career at the Washington, DC VAMC. She then transitioned to VA Central Office and worked in the Offices of Social Work, Nutrition and Food Services, Chaplain Service, Coordinated Care, Returning Service Members (OEF/OIF/OND), and, most recently, the Office of Interagency Collaboration and Integration before joining the staff of the Office of Community Engagement in the summer of 2016. At present Ms. Gravely has 28 years of government service.

**Fanita Jackson-Norman, LCSW, Health System Specialist** is a licensed clinical social worker in Florida and holds a bachelor's degree in rehabilitative services and a master's degree in social work. She previously worked as a Social Work Supervisor and OEF/OIF/OND Program Manager. Ms. Jackson-Norman has over 15 years of Federal work experience and over 20 years of clinical social work practice and supervision.

**Lauren Korshak, MS, RCEP, Health System Specialist** holds both a bachelor's and master's degree from George Washington University's Milken Institute School of Public Health, where she is also a member of the teaching faculty. She currently explores and has published on the relationship between chronic disease, exercise capacity and mortality and has been interviewed by television news and radio channels regarding the importance of engaging in healthy behaviors.

**Heather Luper, MSW, LCSW-C, Health System Specialist,** is detailed to CCI and is a licensed, certified clinical social worker in Maryland. She holds a bachelor's degree in social work and received her master's degree in social work from West Virginia University. Ms. Luper had been a Social Work Service Chief for eight years prior to joining OCE/CCI and provides mentorship in social work practice and supervision. Her interests include creative services for rural Veterans and ethical clinical practice.