

THE northern

The Official Voice of VA NorCal Health Care System

New Chico Clinic Opens Doors to Butte County-Area Veterans page 4

In This Edition...

- » Karen Staats, Voice of Reason for Veterans and Staff, to Retire
- » I Want to Quit Smoking, but How?

Letter from the Director

CONTENTS

3

Veteran Experience Coordinator News

4

New Chico Clinic Opens Doors to Butte County-Area Veterans

5

Karen Staats, Voice of Reason for Veterans and Staff, to Retire

6

Meet Nina Jones: Patient Care Manager by Day and Competitive Bodybuilder by Night

7

Comprehensive Center for Wound Healing and Regenerative Medicine

8

I Want to Quit Smoking, but How?



VA Northern California
HEALTH CARE SYSTEM

About the Publication

Will Martin *Chief Public Affairs Officer*

Jon-Nolan Paresa *Publisher/Photographer*

Produced by Forte Information Resources LLC

The Northern | FALL 2019

The Northern is an authorized publication of the Department of Veterans Affairs.

All photographs are the property of VA, unless otherwise indicated.

This fall, VA Northern California Health Care System (VA NorCal) joined the nation in recognizing Breast Cancer Awareness Month in October. This annual observation is a reminder that screenings and early intervention are critical in addressing one of the most significant health risks for women.

But it also serves to remind us that women's health is a growing emphasis at VA NorCal, and for good reason: women make up our fastest growing patient population. Investing in care that is designed to address women's specific health care needs is essential in fulfilling the VA NorCal mission. Below are a few recent steps in that direction:

First, **Yolanda Hagen** recently joined VA NorCal to serve as manager of our **Women Veterans Program**. Yolanda brings with her significant women's health and leadership experience and is a key to strengthening our care for women Veterans across Northern California.

Second, **Diane Weber** recently became coordinator of VA NorCal's **Intimate Partner Violence Assistance Program**. IPV, often called "domestic violence," can affect anyone, and it disproportionately impacts women.

Third, in September, VA NorCal joined the **Women Veterans Alliance** in hosting its first **Women Veterans Town Hall** at the Sacramento VA Medical Center. The strong turnout and transparent conversation indicated that this will be the first of many town halls of its kind.

These are but a few of the concrete steps we have taken to strengthen our care for women Veterans. We invite women Veterans and their caregivers across Northern California to join us in this improvement process by providing feedback and suggestions to Yolanda Hagen at Yolanda.Hagen@va.gov.

Let me close by circling back to my introductory message, asking each of you to encourage the women in your lives to make appointments for breast cancer screenings. Early detection saves lives.

— David Stockwell



Veteran Experience Coordinator News

VA Northern California Health Care System (VA NorCal) is pleased to welcome Mr. Dedrick Waterford to the Patient Experience team as the Veteran Experience Coordinator and East Bay Division Patient Advocate Supervisor. Mr. Waterford served in the U.S. Army for 21 years and was the Public Affairs Officer for the Veterans Benefits Administration in Oakland before joining the team at VA NorCal.

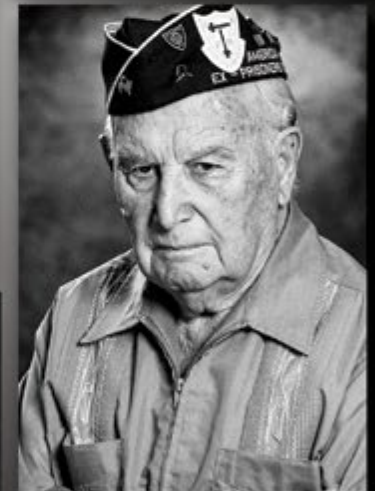
One of Mr. Waterford’s responsibilities is to evolve the Veteran and Family Advisory Council (VFAC) at VA NorCal. This program is a process improvement partnership between Veterans and their families to advance our health care system’s patient-centered care initiatives. VFAC members will partner with staff—in some cases working side by side—to improve the quality of care and services across our twelve NorCal facilities. To make this work, we need your help! We are seeking Veterans who are not current employees of VA NorCal, and family members of Veterans who receive care at any VA NorCal facility.

An effective VFAC Advisor is someone who:

- Can give constructive feedback
- Is excited to look at system improvements beyond personal need
- Will help find solutions to bring about meaningful change
- Can commit to monthly meetings

If you or someone you know is interested in joining us as an Advisor on our VFAC, please contact Dedrick Waterford at **925-372-2071** or email him at dedrick.waterford@va.gov for more information. We look forward to having you join us on this journey as we work to ensure VA NorCal provides the best care anywhere for the Veterans we are honored to serve.

As We Approach Veterans Day, Recognizing Former POWs Is a Most Hallowed Duty.



Top to bottom:

Spec. Robert "Bud" Bouressa, U.S. Army
2nd Lt. Leonard John Kovar, U.S. Army Air Corps
Eldon Francis Koob, U.S. Army
Will Hureauux, U.S. Army
Chief Warrant Officer 3 Mike O'Connor, U.S. Army



A 'Significant Step Forward'

New Chico Clinic Opens Doors to Butte County-Area Veterans

By Will Martin

Chief of Public Affairs

Butte County was due for some good news. Less than a year removed from the devastating Camp Fire, local Veterans and residents got some inspiration on August 21, when around 200 VA employees, Veterans, and their supporters gathered for a ribbon-cutting ceremony at the new Chico VA Outpatient Clinic (OPC) on Concord Avenue.

"Today is the day we finally get to celebrate having our own dedicated clinic in Chico," said VA NorCal Director David Stockwell. "We're not using somebody else's space; we're not trying to make it work. We've literally designed this clinic specifically for Veteran care."

At 42,000 square feet, the new facility is double the size of the previous Chico clinic, and, as a LEED (Leadership in Energy and Environmental Design) silver-rated building, includes energy-reducing and cost-saving features. Staffed by over 150 personnel, the clinic employs about 50 more than the previous clinic. More space and more staff translate to better Veteran care.

"We have upgrades on all of our equipment, we have the latest and greatest that is out there in the health care space," said Ryan Schiel, the Chico VA OPC site manager. "And we're also adding new services for patients, so they no longer have to go to

Redding for physical therapy, occupational therapy, chiropractic services...and also an eye clinic. A lot of our patients get new glasses up in Redding; they can do that now in Chico."

Although it took roughly two years to complete the building, project managers were able to do so for far less than planners anticipated, a fact not lost on local elected officials.

"This project has been underway for some time, at a projected cost of \$43 million—and it came in under cost at \$30 million," said Randall Stone, Chico's mayor. "That's exactly the kind of thing we want to do in the city of Chico."

The clinic will serve approximately 9,000 Veterans from across the region surrounding Chico, and its expanded telehealth services will empower more Veterans to attend virtual appointments via computer, tablet, or smartphone from the convenience of home.



Karen Staats, Voice of Reason for Veterans and Staff, to Retire

In January 2020, Nurse Practitioner Karen Staats will retire from the Chico VA Clinic after more than 20 years of service. An employee there since June 1998, Staats has been a dynamic health care provider with an extensive panel of patients. She is regarded by her peers as both a “rock star” and a voice of reason for Veterans and her fellow employees.

Earlier this fall, Staats penned a letter stating her intention to retire—a process which stirred many memories and emotions about her years at the clinic and her career as a whole.

“When I first walked through the doors of the new Chico VA Clinic in June 1998, I could never have imagined the day for this letter would come,” Staats wrote. “I certainly had no idea what I was about to experience. And to think that we will soon be moving once again to a wonderful new building!”

“I have been very fortunate in my career,” she continued. “I am grateful for so many opportunities, and I have been humbled to watch the perseverance of all those dealing with the challenges life has presented to them.”

In her letter, Staats expressed her heartfelt appreciation of all the clinic staff and patients that she has had the opportunity to serve.

“I thank everyone,” she concluded. “This time and these people will live on in my heart as I move forward in a new direction.”

Thank you, Karen! Staats’ last day will be Friday, January 31.





Meet Nina Jones: Patient Care Manager by Day and Competitive Bodybuilder by Night

By D. Penman

VA Employee

“We all deserve to feel good. No matter what age we are, we can accomplish anything we set our minds to.” So says Nina Jones, Patient Care Manager for the Gastroenterology Department at the Sacramento VA Medical Center.

“When people choose, at any age, to become or continue to be active,” Nina says, “it’s important to have a plan.”

Nina certainly had a plan.

In the early 1970s, the disciplined work ethic of a young girl took hold in the small town of El Cajon, California, in San Diego County. Horses were a big part of Nina’s childhood. She showed and boarded them. There were even more to take care of at home. Nina realized that her commitment to horse care and their training was extremely important. She could not abandon that responsibility. She said to herself, “You are the one that has to do it.” For Nina, finding the dedication inside to follow through each day was key.

“I was extremely successful in the equestrian world and found my love of horses to be never-ending,” said Jones. “I owned horses until 2013 when I had to put my last horse down due to cancer...(their) beauty and strength is amazing.”

After graduating from Granite Hills High School in 1985, Nina continued her passion with horses while attending college. In 1997, she graduated from San Diego State University with a Bachelor of Science in Nursing, and moved to Washington state with her two little girls to accompany her husband, who was working for the U.S. Navy. They relocated to Sacramento in 2004.

Jump to 2013: After a divorce, a slow transition from a Zumba fitness class to bodybuilding started to manifest. Nina felt that something was missing. Cardio kickboxing in Granite Bay was better, but then Nina met a trainer named Angela. Angela suggested that she try some weightlifting to build muscle mass and depth for her 100-pound body. The training took off! Nina fell in love with bodybuilding and is still hitting the gym every morning, every day of the week.

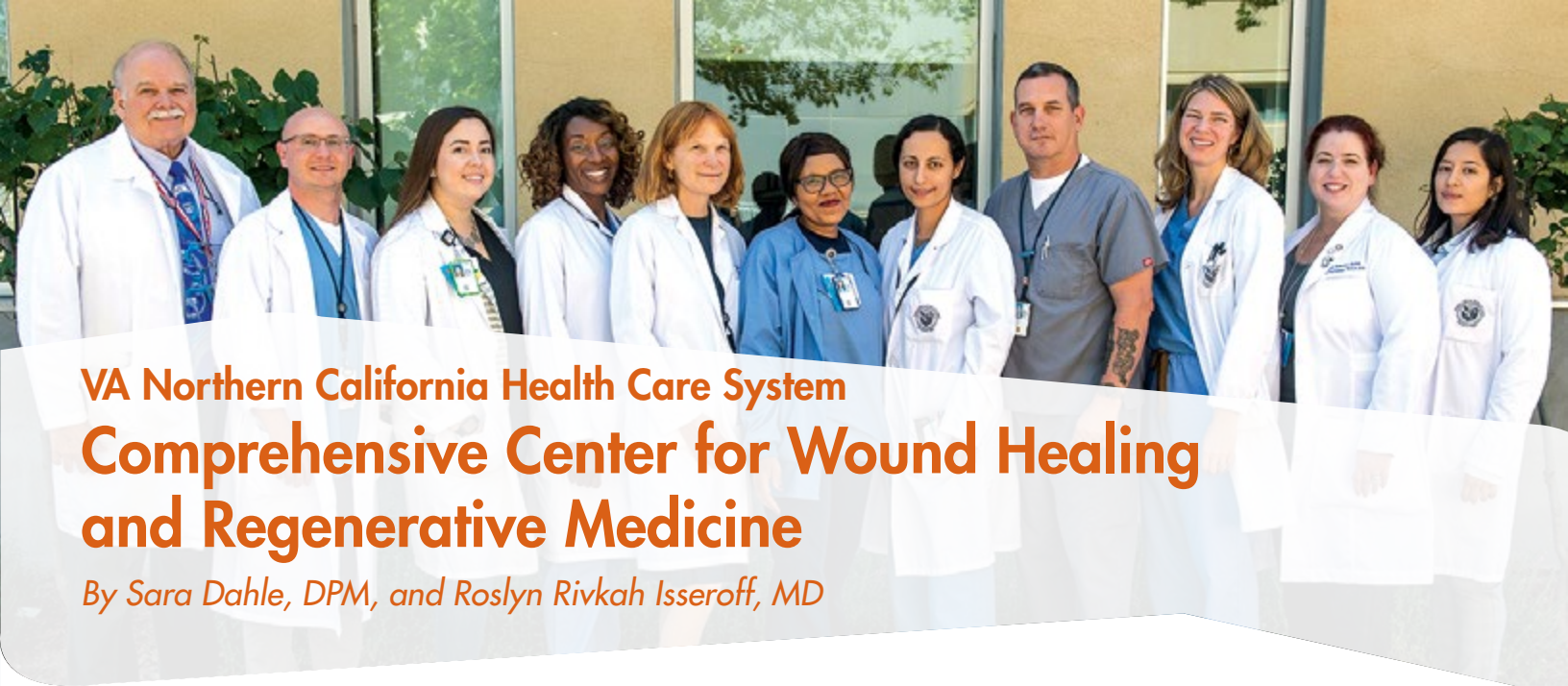
“As I continued to work with my trainer, I found the sport to be very fun,” said Jones. “By August 2014, I decided to compete in a bodybuilding competition. From there I was hooked—the competitive part of me was taking over. I could see the changes in my body and loved it. Being among other competitors was inspiring.”

Nina wants to compete in 2020, but has not decided whether to do local competitions or go to nationals in Pittsburgh, Seattle, or Las Vegas.

I asked Nina for any words of advice for those of us who might think we are “too old” or “too out of shape” to try something new. Here is what she said about going to the gym, and stretching one’s limits, physical and otherwise: “Every day you go gets better. People who go to the gym want to be there. You learn so much (about) who you are. It’s a process. You learn what strengths you have.” She recommends when you find a gym, to work with a trainer to learn the basics. Proper form is critical in avoiding needless injury. Nina adds that an active lifestyle can start “with a simple daily walk alone or with a friend, bike rides, running, even watersports like kayaking. There are so many options, and the feeling achieved when a plan is started and keeps growing is very fulfilling!”

As Nina continues to pursue her plan, she shares her final words of wisdom: “I plan to continue challenging myself, my body, and my soul to be the best that I can be, to empower others, and to be inspired by others.”

We are inspired by you, Nina!



VA Northern California Health Care System Comprehensive Center for Wound Healing and Regenerative Medicine

By Sara Dahle, DPM, and Roslyn Rivkah Isseroff, MD

Veterans who have a wound that won't heal, or that keeps reopening, may need the specialized care available to them at our Comprehensive Center for Wound Healing and Regenerative Medicine (CC-WHARM) at the VA Mather campus. The CC-WHARM team combines years of research, advanced training, technological capabilities, and medical expertise for an approach that helps achieve the best outcome possible.

In the United States, 2 to 3 million older adults are diagnosed each year with wounds that just won't heal (chronic wounds), including weeping/swollen leg wounds (venous stasis ulcers), bedsores (pressure/decubitus ulcers), and diabetic foot ulcers (neuropathic ulcers).¹ Thus, approximately 15 percent of Americans over the age of 65 are suffering from a chronic wound.¹ Having a chronic wound is often associated with pain, loss of function and mobility, depression, anxiety, embarrassment/social isolation, financial burden, prolonged hospitalizations, chronic illnesses, or death.²

Those with diabetes especially need to pay close attention to their feet. Diabetics who develop a foot ulcer—estimated to be between 15 to 25 percent of such patients—are at greater risk of losing their limbs.³ Studies have shown that approximately 85 percent of all leg amputations were preceded by a diabetic foot ulcer.⁴ Also startling: nearly half of patients with a diabetic foot ulcer will die within five years.⁵

The expert staff at the CC-WHARM will help identify the cause(s) of your wound-healing condition so that you can receive the care needed to help prevent future problems.

The CC-WHARM brings together a unique team of physicians under the direction of Dr. Sara Dahle, Chief of Podiatry, and Dr. Roslyn Isseroff, Chief of Dermatology. Our specialists include dermatologists; general, vascular, and plastic surgeons; podiatrists; interventional radiologists; as well as nurses and

therapists who specialize in healing chronic wounds of different etiologies. This includes diabetic foot ulcers; venous leg ulcers; ischemic ulcers; pressure ulcers; acute surgical non-healing ulcers; and traumatic open wounds.

In addition to providing state-of-the-art care for wound patients, the CC-WHARM is also the center for many cutting-edge treatments. Offered are a variety of treatments including medical, surgical, and physical therapy; hyperbaric oxygen; electrical stimulation; physical modalities for healing; tissue-engineered skin therapy; and skin grafting. In addition, an active clinical trial program studying new wound healing therapies is available for selected candidates. Such trials test new pharmaceuticals, unique dressing and delivery systems, bioengineered tissues, and stem cells.

continued on page 8



INTERESTED?

Call **916-216-8194**
for more information
or to participate in
this clinical trial.

I Want to Quit Smoking, but How?

By Sarah Ali, PharmD, and Christine Johnston, PharmD, BCPP

Each of the 12 VA Northern California Health Care System (VA NorCal) sites went smoke-free on October 1, so you might be asking yourself: What are my options if I want help quitting smoking?

Nicotine is one of the most addictive substances known, so quitting smoking can be difficult. Withdrawal symptoms usually appear within the first few days of quitting, then peak in the first week, and gradually subside within two to four weeks. Cravings can occur at any time, but usually last only three to five minutes. The more times you wait out these cravings, the less frequent and intense they become. Here at VA NorCal, we want to ensure that every person who wants to quit smoking knows what resources are available. Though some people may want to quit “cold turkey” (without the assistance of medication), it can be easier to successfully stop smoking if you are not having cravings. You should know that there are products available to help.

Nicotine replacement therapy, or NRT, can help with both withdrawal symptoms and cravings. NRT comes in three forms: patches, gum, and lozenges. The patch allows for a constant release of nicotine throughout the day, while gum or lozenges provide a short burst of nicotine that lasts for 30 to 45 minutes. Although each form of therapy can be used alone, the patch can also be used in combination with gum or lozenges. Additionally, there are two oral medications recommended for smoking cessation: bupropion and varenicline. These also help reduce cravings. To decide which product, or combination of products, is the best fit for you,

have an open conversation with your health care provider. Some people may think that electronic cigarettes (also known as e-cigarettes or vape pens) are a safe alternative to smoking tobacco, or should be used to help quit smoking, but there is little known about their long-term effects. The safer and preferred method is to use one of the approved smoking cessation agents mentioned above.

There are several ways to get access to NRTs or one of the smoking cessation medications. One option is to talk to your doctor to order the products for pharmacy dispensing. Another option is to ask for a referral to the TeleQuit program, a telephone-based smoking cessation program that can provide medication, education, and counseling. You can also come to the drop-in Tobacco Cessation class held every Wednesday from 12:30 to 2:00 p.m. in building 651. This program offers a support group as well, which provides peer support and feedback on effective strategies to stay quit. Finally, VA NorCal employees who do not receive care at the VA but are interested in quitting can contact Occupational Health to obtain access to smoking cessation products.



Comprehensive Center for Wound Healing and Regenerative Medicine (cont.)

Leaders in Wound Research:

Our team includes recognized leaders in wound research. Together we have published more than 200 journal articles in the area of wound healing and tissue regeneration. Research funded by the National Institutes of Health, the Defense Advanced Research Projects Agency, and the California Institute for Regenerative Medicine is carried out by our team members in our affiliated UC Davis Institute for Regenerative Cures. The overall goal of our translational, multidisciplinary program in wound healing is to understand the molecular and cellular mechanisms of tissue repair and regeneration in skin and its pathogenesis, by integrating knowledge at the bench with clinical outcomes at the bedside. The VA Office of Research and Development has awarded our team a grant to carry out a randomized clinical trial testing a novel drug to improve healing in diabetic foot ulcers. Because of our cumulative

expertise, we can offer our Veterans the most advanced wound care treatments and technologies, including hyperbaric oxygen therapy; bioengineered skin substitutes; electrical stimulation; negative pressure therapy; topical oxygen; growth factor therapy; and advanced microsurgical treatment.

Sources:

1. Agale, S.V. Chronic Leg Ulcers: Epidemiology, Aetiopathogenesis, and Management. *Ulcers*, 2013, Article ID 413604.
2. Järbrink, K., et al. Prevalence and Incidence of Chronic Wounds and Related Complications: A Protocol for a Systematic Review. *Systematic Review*, 2016;5(1):152.
3. Sen, K. Human Wounds and its Burden: An Updated Compendium of Estimates. *Advances in Wound Care*, 2019;8(2):39–48.
4. Reiber, G., et al. “Lower Extremity Foot Ulcers and Amputations in Diabetes” in *Diabetes in America*. National Institutes of Health, 1995.
5. Boyko, E.J., et al. Increased Mortality Associated with Diabetic Foot Ulcer. *Diabetic Medicine*, 1996;13(11), 967–972.