



STATE VETERANS' COMMISSION MEETING
February 2, 2018



VISN 4 Access – Fiscal Year 2017 Wait Times



Clinics	Number of Appointments	Wait <30 Days	Wait <30 Days	Average Wait
ALL	2,354,623	2,299,759	97.6%	3.5
Mental Health	335,310	329,989	98.4%	2.8
Primary Care	526,126	519,045	98.7%	3.3
Specialty Care	896,199	861,218	96%	5.2

VISN 4 Access – Current Average Wait Times



VISN 4 Facility	Primary Care		Mental Health Care	
	<i>New Patients</i>	<i>Returning Patients</i>	<i>New Patients</i>	<i>Returning Patients</i>
James E. Van Zandt VAMC	14	4	11	2
Abie Abraham HCC	9	No wait	6	1
Coatesville VAMC	14	1	7	2
Erie VAMC	25	6	8	1
Lebanon VAMC	21	5	10	2
Corporal Michael J. Crescenz VAMC	27	3	15	1
VA Pittsburgh Healthcare System	18 (Hz) 25 (UD)	4 (Hz) 8 (UD)	9 (Hz) 9 (UD)	2 (Hz) 1 (UD)
Wilkes-Barre VAMC	21	3	15	8
Wilmington VAMC	21	2	13	2

Data updated 1/8/18 with for last 30 days.

[accesstocare.va.gov](https://www.accesstocare.va.gov)

VISN 4 Trust Data – Inpatients



<i>Statement for Response</i>	<i>All of FY16</i>	<i>All of FY17</i>
"I got the service I needed" <i>(Effectiveness)</i>	88.1	87.8
"It was easy to get the service I needed" <i>(Ease)</i>	83.4	83.5
"I felt like a valued customer" <i>(Emotion)</i>	84.3	84
"I trust VA to fulfill our country's commitment to Veterans" <i>(Trust)</i>	83.6	84

% of responses with agree or strongly agree

VISN 4 Trust Data – Outpatients



<i>Statement for Response</i>	<i>All of FY16</i>	<i>All of FY17</i>
"I got the service I needed" <i>(Effectiveness)</i>	85.9	86
"It was easy to get the service I needed" <i>(Ease)</i>	79.1	80.2
"I felt like a valued customer" <i>(Emotion)</i>	80.5	81.7
"I trust VA to fulfill our country's commitment to Veterans" <i>(Trust)</i>	75.3	77.7

% of responses with agree or strongly agree

VISN 4 Trust Data – Specialty Care Outpatients



<i>Statement for Response</i>	<i>All of FY16</i>	<i>All of FY17</i>
“I got the service I needed” <i>(Effectiveness)</i>	84.2	84.8
“It was easy to get the service I needed” <i>(Ease)</i>	75.8	77.9
“I felt like a valued customer” <i>(Emotion)</i>	79.2	79.3
“I trust VA to fulfill our country’s commitment to Veterans” <i>(Trust)</i>	73.9	76.2

% of responses with agree or strongly agree

VISN 4 Care in the Community



Provider Agreements	
October 2016	789
December 2017	1,617

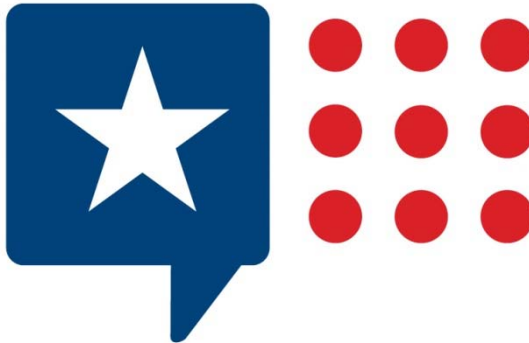
Care in the Community Consults (Scheduled and Completed)	
Fiscal Year 2016	64,013
Fiscal Year 2017	70,193

Veterans Crisis Line



Sunday, Jan. 7 through Saturday, Jan. 13	7	8	9	10	11	12	13
Offered	1,735	2,151	1,994	1,994	1,950	2,055	1,776
Abandoned	46	102	66	96	92	113	91
Abandoned % (Industry Standard: 5%)	2.7%	4.7%	3.3%	4.8%	4.7%	5.5%	5.1%
Total Rollover	0	2	0	1	1	0	1
Rollover % (Industry Standard: 1%)	0%	.09%	0%	.05%	.05%	0%	.06%
Request for Emergency Dispatch of Services	99	103	88	80	93	85	88

Veterans Crisis Line



1-800-273-8255

PRESS 1

Current Licensure Status

Regulatory Agency	DVVH	GMVC	HVH	PSSH	SEVC	SWVC
Date of Last Inspection - Status						
PA Department of Health	01/20/2017 Full Standard Licensure Status	12/08/2016 Full Standard Licensure Status	12/15/2017 Full Standard Licensure Status	11/02/2017 Full Standard Licensure Status	10/11/2017 Full Standard Licensure Status	09/15/2017 Full Standard Licensure Status
PA Department of Human Services	03/2017 Full Standard Licensure Status	License Vacated on 11/27/2012	11/2017 Full Standard Licensure Status	08/2017 Full Standard Licensure Status	03/2017 Full Standard Licensure Status	License Vacated on 01/16/2015
US Department of Veterans Affairs	04/2017 Full Standard Licensure Status	03/2017 Full Standard Licensure Status	01/2017 Full Standard Licensure Status	03/2017 Full Standard Licensure Status	02/2017 Full Standard Licensure Status	05/2017 Full Standard Licensure Status

Update for Veterans' Homes

GMVC- The Center held an open house on 1/7/2018 to show of the newly renovated facility. The renovation and general repairs project had a completion date of 1/27/2018, the facility was able to hold the Department of Health Occupancy Inspection on 01/24/2018 obtaining regulatory approval to place residents in the last renovated nursing unit.

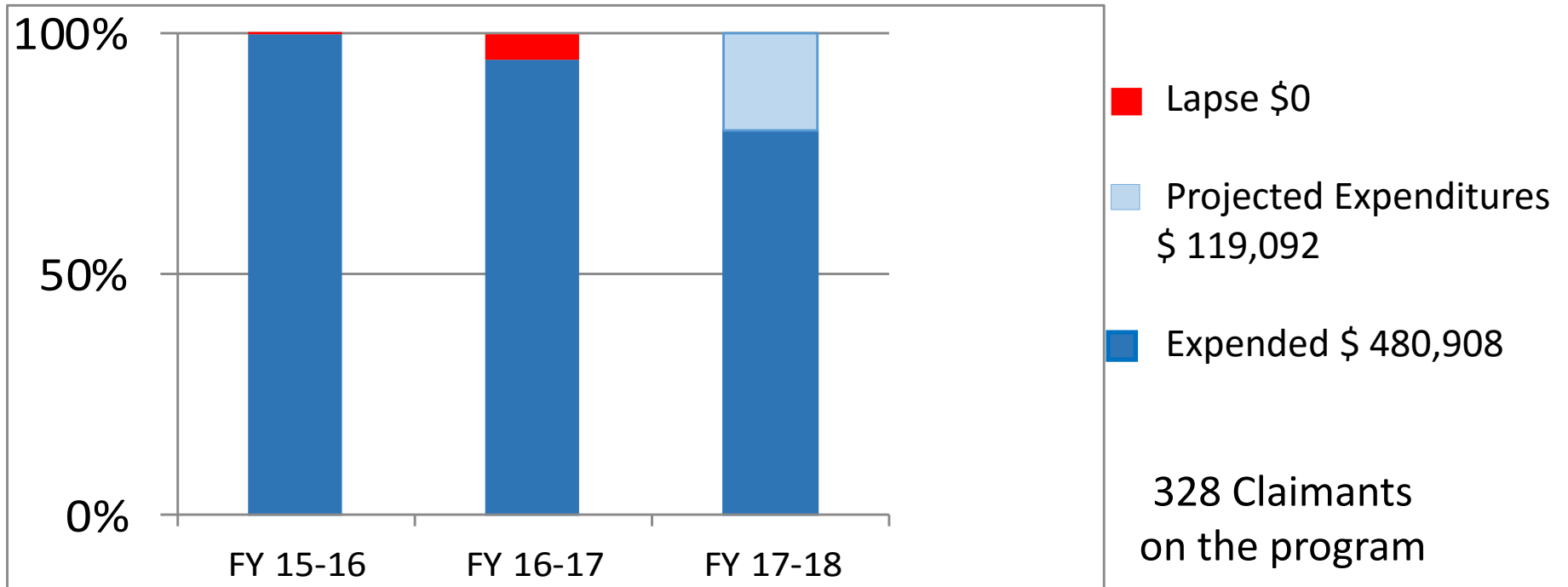
PSSH- The renovation and general repairs project is 23% completed with a scheduled completion date of 03/26/2019. For the displaced residents, there are 6 remaining residents to move back to the facility, they will move back as openings occur at the Home.

DVVH- The renovation and general repairs project is scheduled for construction kick-off in August 2018. 41 residents from the PCU will be relocated and the licensure for personal care will be terminated.

VETERANS TEMPORARY ASSISTANCE



\$800,000



436
Claimants

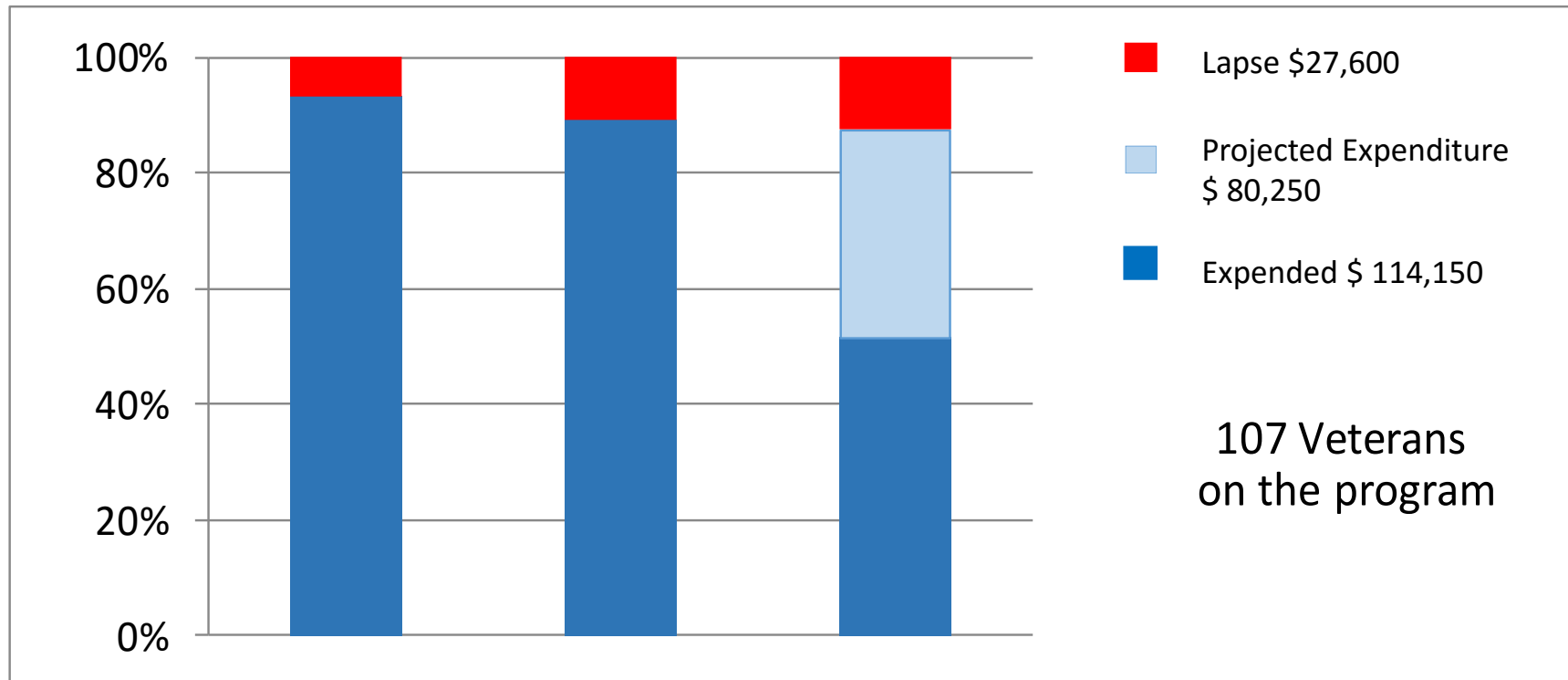
535
Claimants

328 Claimants
on the program

BLIND VETERANS PENSION



\$222,000



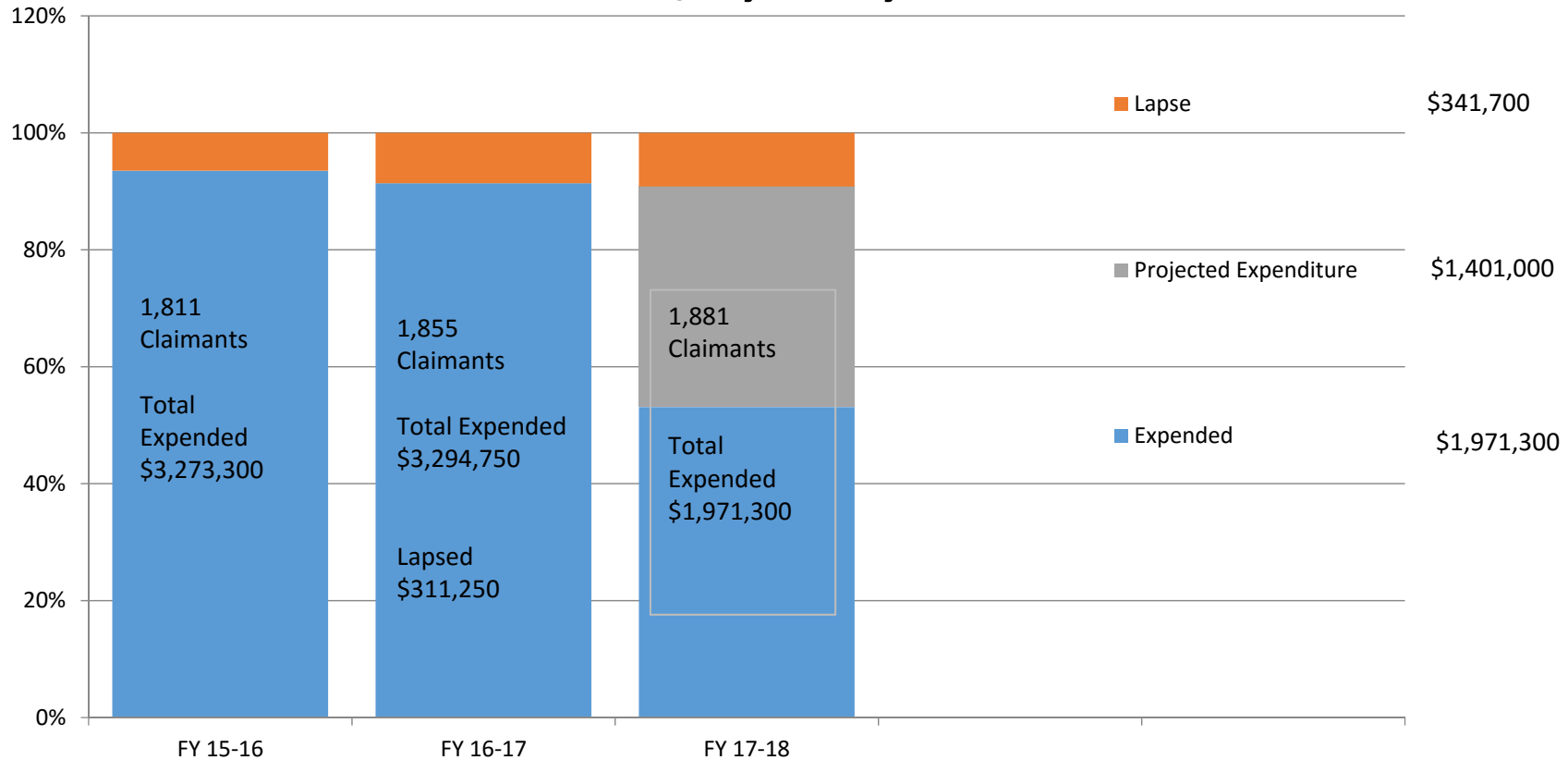
FY 15-16
116 Claimants

FY 16-17
108 Claimants

AMPUTEE & PARALYZED VETERANS PENSION



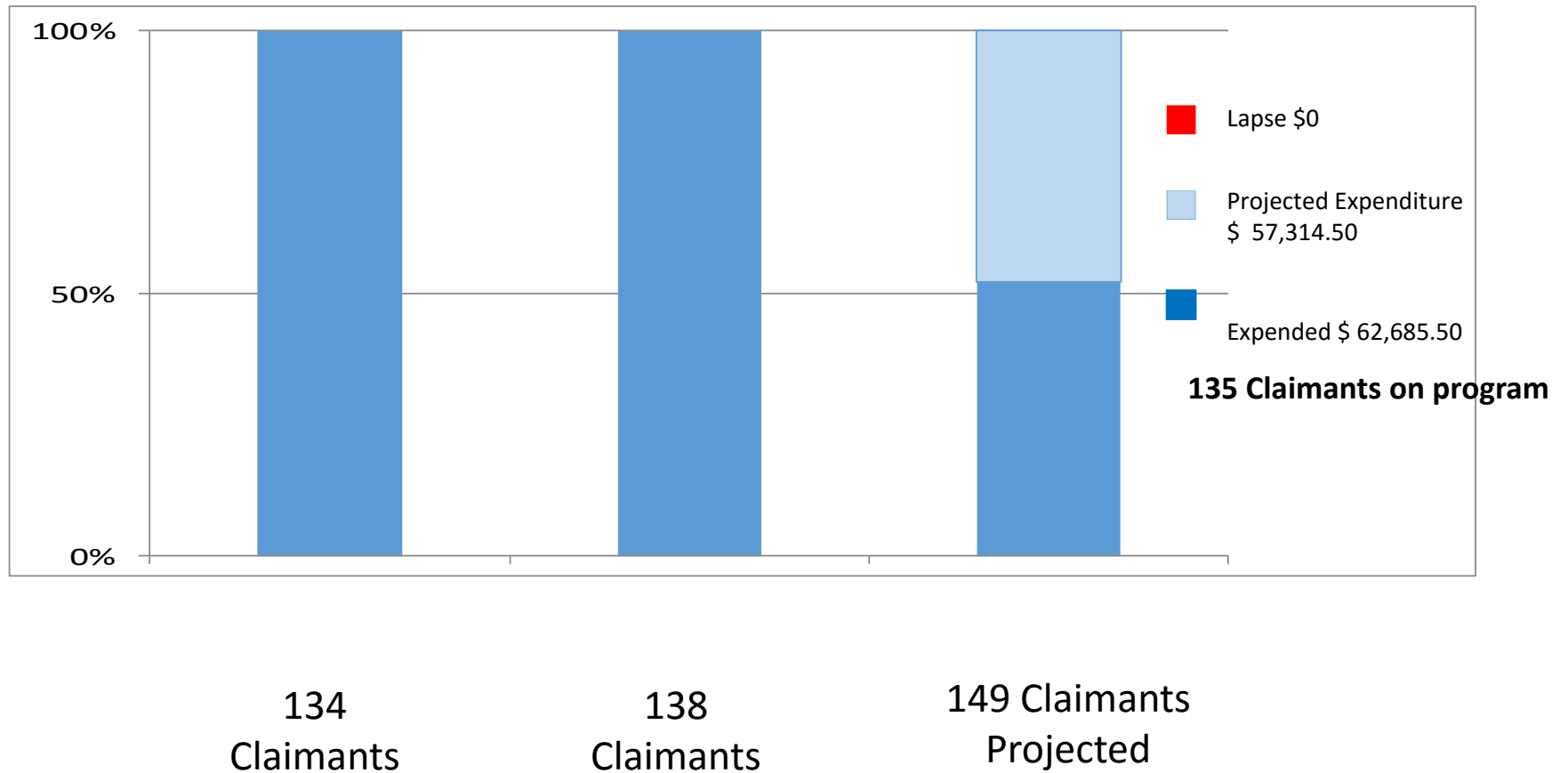
Paralyzed Veterans Pension \$3,714,000



EDUCATIONAL GRATUITY



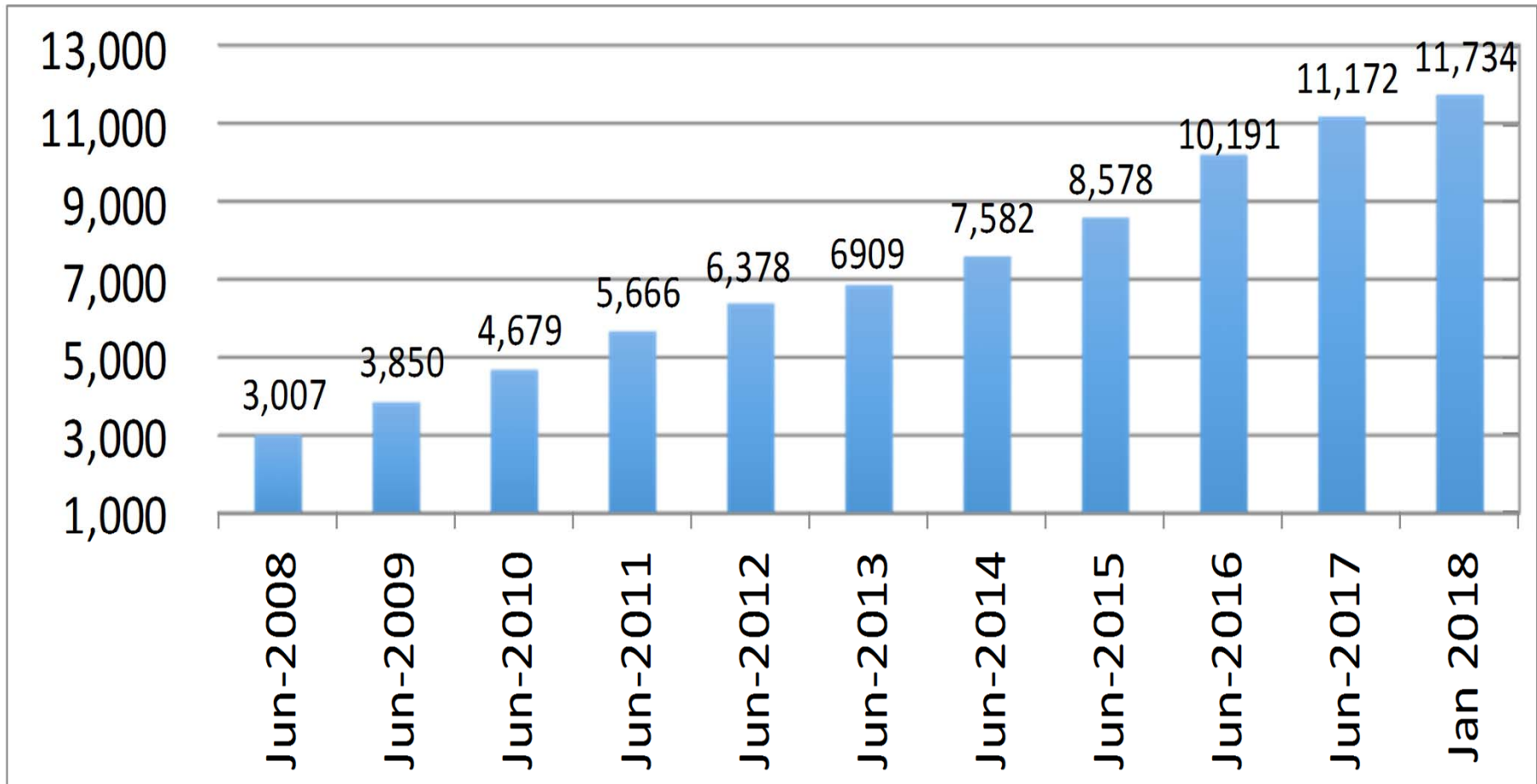
\$120,000



As of 16 Jan 2018

[> community](#) [> commonwealth](#) [> country](#)

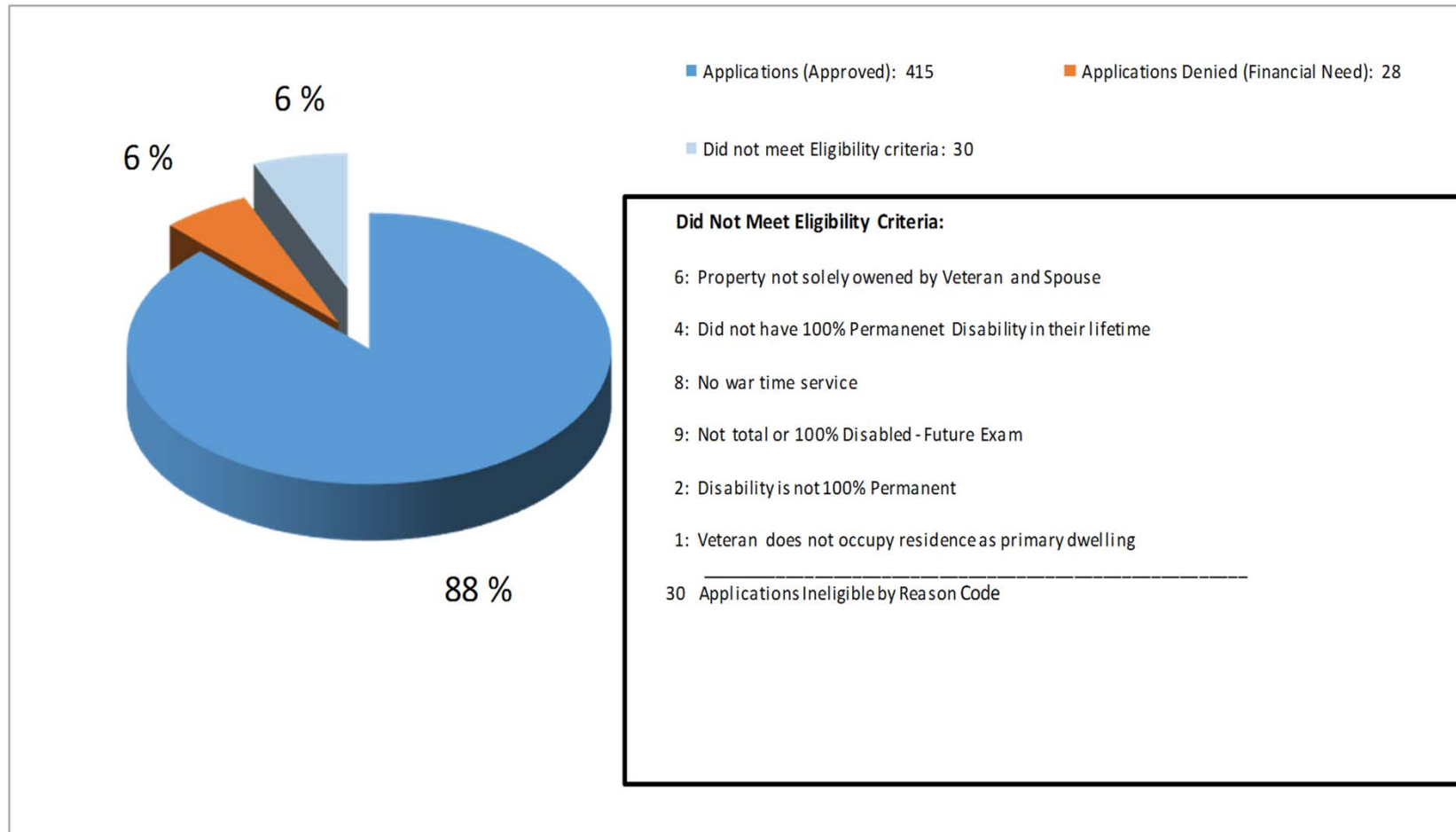
DISABLED VETERANS TAX EXEMPTION PROGRAM



As of 16 Jan 2018

> [community](#) > [commonwealth](#) > [country](#)

DISABLED VETERANS' RETX PROGRAM



*519 Applications Received since 8 November 2017

PERSIAN GULF VETERANS BENEFIT PROGRAM



Total Applications: 12,281

Payments Sent: 9,494

Total Payments: \$ 4,022,412.50

Average Payment: \$423.68

Average Processing Time: 6.12 days

MILITARY FAMILY RELIEF ASSISTANCE PROGRAM



OVERALL MFRAP CONTRIBUTIONS - FY 2005 THRU 17 JAN 2018

TOTAL PRIVATE CONTRIBUTIONS	\$ 124,353.94
DEPT OF REVENUE - PIT DONATIONS	\$ 1,656,785.42
TOTAL ALL CONTRIBUTIONS - PRIVATE & PIT DONATIONS	\$ 1,781,139.36
APPROVED GRANT APPLICATION PAYMENTS	\$ 811,642.86
ACCOUNT BALANCE	\$ 969,496.50

As of 17 Jan 2018

> community > commonwealth > country

PENNSYLVANIA VETERANS MEMORIAL



Pennsylvania Veterans Memorial Trust Fund

Beginning Trust Fund Balance (July 1, 2017)	\$437,082.29
Grants Received	0
Public / Private Donations	\$3,826.50
Interest	\$2,577.92
Refunds of Expenditures	\$0
Total Receipts	\$6,404.42
Expenses	(\$67,880.40)
Ending Balance	\$375,606.11

As of 31 Dec 2017

> community > commonwealth > country

ODAGVA / ACT 66 SUMMARY



FY 17 - 18	
Claims, Compensation and Pension Summary	
Year to Date Claims Submitted	Year to Date Value of Awards
17,268	\$39,813,772.00

FY 16 - 17	
Claims, Compensation and Pension Summary	
Year to Date Claims Submitted	Year to Date Value of Awards
40,818	\$179,368,987.00

As of 30 December 17

> community > commonwealth > country

OUTREACH ENGAGEMENTS



Outreach Statistics

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Year to Date
Outreach Events Supported	43	38			81
Mobile Outreach Van Events	40	31			71
Veteran Interactions	695	414			1,109
Claim referrals to County Directors and Service Organizations	111	52			163
Legislator Attended Events	17	16			33

Notes

- Two outreach vans are operational and supporting outreach events

Upcoming Events – February

- **Legislative Events** – None
- **Events** – Monthly Outreach at Cabela’s, Monthly Outreach at Bass Pro Shops
- **Legislators Attending Events** –

As of 30 December 17

> community > commonwealth > country

VETERANS' TRUST FUND



Revenue	Since Last Meeting	SFY 17-18	Cumulative Total
Checkoff & Donations	\$191,685.00	\$908,441.00	\$6,812,350.00
HOV License Plate	\$405.00*	\$2,775.00	\$42,870.00
PA Monuments License Plate	\$138.00*	\$1,035.00	\$16,951.00
Interest	\$2,428.00	\$13,868.00	\$44,329.00
Disbursements			
VTF Grants	\$00**	\$0.00	\$2,112,348.00
VTA	\$86,513.00	\$477,708.00	\$2,495,007.00
PENN DOT Costs			\$776,000.00

•Total number of HOV License plates sold since last meeting = 27 (Total since inception = 2,858)
 *Total number of PA Monuments License plates sold since last meeting = 6 (Total since inception = 737)
 **Awards and distribution of funds are contingent upon the completion of a fully executed grant agreements

Overview

- Objectives
- Facts about suicide
- Myths/realities about suicide
- The steps of S.A.V.E.
- Resources & References

Objectives

By participating in this training you will:

- Have a general understanding of the scope of suicide within the United States
- Know how to identify a Veteran that may be at risk for suicide
- Know what to do when you identify a Veteran at risk

Suicide in the United States

- **More than 42,000** U.S. deaths from suicide per year among the general population^{1,2}
- Suicide is the **10th** leading cause of death in the U.S.³
- Every **12.3 minutes** someone dies by suicide
- It is estimated that close to **one million people** make a suicide attempt each year .
 - One attempted every **35 seconds**

Gender Disparities

- Women attempt suicide **3 times** more often than men
- Men die by suicide almost **4 times** more often than women.

Facts about Veteran suicide

- **18%** of all deaths by suicide among U.S. adults were Veterans⁴
- Veterans are more likely than the general population to use **firearms** as a means for suicide⁴
- On average, **764 suicide attempts** per month among Veterans receiving recent VA health care services⁵
- **25%** of Veteran suicides have a history of previous suicide attempts⁵

Typical myths vs. realities

Myth:

Asking about suicide may lead to someone taking his or her life.

Typical myths vs. realities

Reality:

Asking about suicide does not create suicidal thoughts. The act of asking the question simply gives the Veteran permission to talk about his or her thoughts or feelings.

Typical myths vs. realities

Myth:

If somebody really wants to die by suicide, there is nothing you can do about it.

Typical myths vs. realities

Reality:

Most suicidal ideas are associated with treatable disorders. Helping someone connect with treatment can save a life. The acute risk for suicide is often time-limited. If you can help the person survive the immediate crisis and overcome the strong intent to die by suicide, you have gone a long way toward promoting a positive outcome.

Typical myths vs. realities

Myth:

He/she really wouldn't die by suicide because...

- he just made plans for a vacation
- she has young children at home
- he made a verbal or written promise
- she knows how dearly her family loves her

Typical myths vs. realities

Reality:

The intent to die can override any rational thinking. Someone experiencing suicidal ideation or intent must be taken seriously and referred to a clinical provider who can further evaluate their condition and provide treatment as appropriate.

S.A.V.E.

S.A.V.E. will help you act with care & compassion if you encounter a Veteran who is in suicidal crisis.

The acronym “**S.A.V.E.**” helps one remember the important steps involved in suicide prevention:

- Signs of suicidal thinking should be recognized
- Ask the most important question of all
- Validate the Veteran’s experience
- Encourage treatment and Expedite getting help

Signs of suicidal thinking

Learn to recognize these warning signs:

- Hopelessness, feeling like there's no way out
- Anxiety, agitation, sleeplessness or mood swings
- Feeling like there is no reason to live
- Rage or anger
- Engaging in risky activities without thinking
- Increasing alcohol or drug abuse
- Withdrawing from family and friends

Signs of suicidal thinking

- **The presence of any of the following signs requires immediate attention:**
 - Thinking about hurting or killing themselves
 - Looking for ways to die
 - Talking about death, dying, or suicide
 - Self-destructive or risk-taking behavior, especially when it involves alcohol, drugs or weapons

Veteran-specific risks

- Frequent Deployments to hostile environments (though deployment to combat does not necessarily increase risk).
- Exposure to extreme stress
- Physical/sexual assault while in the service (not limited to women)
- Length of deployments
- Service-related injury

Asking the question

“Are you thinking about killing yourself?”

Asking the question

- Are you thinking of suicide?
- Have you had thoughts about taking your own life?
- Are you thinking about killing yourself?

Asking the question

DO ask the question if you've identified warning signs or symptoms

DO ask the question in such a way that is natural and flows with the conversation

DON'T ask the question as though you are looking for a "no" answer

- "You aren't thinking of killing yourself are you?"

DON'T wait to ask the question when he/she is halfway out the door

Things to consider when talking with a Veteran at risk for suicide

- Remain calm
- Listen more than you speak
- Maintain eye contact
- Act with confidence
- Do not argue
- Use open body language
- Limit questions-let the Veteran do the talking
- Use supportive, encouraging comments
- Be honest-there are no quick solutions but help is available

Validate the Veteran's experience

- Talk openly about suicide. Be willing to listen and allow the Veteran to express his or her feelings.
- Recognize that the situation is serious
- Do not pass judgment
- Reassure that help is available

Encourage treatment and Expediting getting help

- **What should I do if I think someone is suicidal?**

- Don't keep the Veteran's suicidal behavior a secret
- Do not leave him or her alone
- Try to get the person to seek immediate help from his or her doctor or the nearest hospital emergency room, or
- Call 911

- **Reassure the Veteran that help is available**

- **Call the Veterans Crisis Line at 1-800-273-8255, Press 1**

Encourage treatment and Expedite getting help

Safety Issues:

- **Never** negotiate with someone who has a gun
 - Get to safety and call VA police, security, or 911
- If the Veteran has taken pills, cut himself or herself or done harm to himself or herself in some way
 - Call VA police, security, or 911
- Call the Veterans Crisis Line at 1-800-273-8255, Press 1

Encourage treatment and Expedite getting help

- Remember: When a Veteran at risk for suicide leaves your facility, provide suicide prevention information to the Veteran and his or her family
 - Veterans Crisis Line number **1-800-273-8255**
Press 1 for Veterans
 - Veterans Crisis Line brochures and wallet cards

Resources

- **Mental Health**

- VHA provides specialty inpatient and outpatient mental health services at its medical centers and community-based outpatient clinics. All mental health care provided by VHA supports recovery, striving to enable a person with mental health problems to live a meaningful life in the community and achieve his or her full potential.
- For more information on VA Mental Health Services visit www.mentalhealth.va.gov

- **Vet Centers**

- Vet Centers are VA community-based centers that provide a range of counseling, outreach, and referral services.
- For more information about Vet Centers and to find the Vet Center closest to you visit www.vetcenter.va.gov

Resources

- **Make the Connection**

- MakeTheConnection.net is a one-stop resource where Veterans and their families and friends can privately explore information about physical and mental health symptoms, challenging life events, and mental health conditions. On this site, Veterans and their families and friends can learn about available resources and support. Visit www.MakeTheConnection.net to learn more.

- **Post-Traumatic Stress Disorder (PTSD)**

- Each VA medical center has PTSD specialists who provide treatment for Veterans with PTSD. For more information about PTSD and to locate the VA PTSD program nearest you visit www.ptsd.va.gov
- PTSD Coach App: The PTSD Coach application, allows phone users to manage their symptoms, links them with local sources of support, and provides information on PTSD. Visit www.ptsd.va.gov/public/pages/PTSDCoach.asp

Resources

- **Veterans Crisis Line/Chat/Text**

- 1-800-273-8255, Press 1
- <http://www.veteranscrisisline.net/>
- Text to 838255

- **VA Suicide Prevention Coordinators**

- Each VA Medical Center has a Suicide Prevention Coordinator to make sure Veterans receive needed counseling and services
- Resource locator - <http://www.veteranscrisisline.net/>

Remember:

S.A.V.E.

Signs of suicidal thinking should be recognized

Ask the most important question of all

Validate the Veteran's experience

Encourage treatment and Expedite getting help

Suicide Prevention Team at the Lebanon VAMC

- ✓ Lori Warne, LCSW, CAC, CCDP Diplomate 717-272-6621 x4048 Suicide Prevention Coordinator
- ✓ John Lucas, LISW-S 717-272-6621 x4366 Suicide Prevention Case Manager
- ✓ Mary Garcia, Peer Support Specialist (part-time SPC) 717-272-6621 x4040

Collaboration with Your Agency or Service

Having an event? Know a Veteran in need? Need to discuss increasing suicide prevention efforts in your location?

References

- ¹Suicide facts. (2016). Retrieved August 1, 2016, from SAVE Suicide Awareness Voices of Education, http://www.save.org/index.cfm?fuseaction=home.viewPage&page_id=705D5DF4-055B-F1EC-3F66462866FCB4E6
- ²United States Suicide Injury Deaths and Rates per 100,000 in 2014. Retrieved August 2, 2016, from Centers for Disease Control and Prevention WISQARS, <http://webappa.cdc.gov/cgi-bin/broker.exe>.
- ³Suicide Facts at a Glance. (2015). Retrieved August 1, 2016, from Centers for Disease Control and Prevention, <http://www.cdc.gov/violenceprevention/pdf/suicide-datasheet-a.PDF>
- ⁴U.S. Department of Veterans Affairs (2016). Suicide among Veterans and other Americans 2001-2014. Washington, DC: Office of Suicide Prevention. <https://www.mentalhealth.va.gov/docs/2016suicidedatareport.pdf>
- ⁵Based on suicide/ suicide attempts reported within the VA Suicide Prevention Application Network (SPAN) during calendar year 2014.