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1	**COMMENTS / QUESTIONS**	Response
2	I waited 2 months with new lung cancer to get help. I went to the Director's office to request assistance. I want to thank Kathy Nagy and her 2 assistants for helping me get things rolling and some help.	
3	I am extremely happy with the NAVAHCS	
4	MyHealtheVet "secure Messaging" is really helping Veterans stay connected with their team. Susan Gladstein is doing a great job!	
5	Thanks to Paula Moran and the Volunteer staff, for the recent "Volunteers Recognition" brunch!	
6	I'm very satisfied with my VA medical care at NAVAHCS, especially with the Cardiology Dept.	
7	How did the Prescott VA fair with the National VA inspection? With the JCAHO inspection?	The National VA review did identify some additional training opportunities for staff who schedule appointments. Training has been made available to all staff who schedule appointments. NAVAHCS continues to perform well on all outside regulatory reviews, including Joint Commission and OIG. These are very important reviews that are very comprehensive and cover all aspects of care and safety.
8	Why are we limited with 20 minutes with our doctors when we have more than 1 issue to be addressed?	The time alloted with providers for both initial and follow-up visits is typically longer than in the private sector. If there are multiple questions which require more time, the provider may request additional face to face appointments or utilize other options such as telephone clinics with their providers. Veterans with MyHealtheVet Secure Messaging may also securely email their teams.
9	I have had immense trouble contacting the social worker in charge of admittance at the inpatient PTSD program at the Tucson VA. I call, leave a message and she never calls back. What can I do to improve communication with this individual?	Thank you for your feedback. Your concerns have been shared with the Tucson VA Executive Leadership staff. In the interim, please work with your local provider to assist you with your needs.

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10	Mental Health feels like an assembly line. They bring you in and out and as fast as they can. It is almost impossible to get an appointment within a reasonable time frame. I know we're building a new Mental Health building. But what are we going to do about this problem in the meantime?	We have had some open positions which had caused some scheduling delays. For new patients we are able to schedule with medication providers within 2-3 wks. The medication providers do not provide psychotherapy, only medication management, so the sessions are generally less than 30 minutes. If the Veteran is requesting psychotherapy, staff turnover has made such scheduling problematic; however, we are actively recruiting for more professionals who can provide this service. Referral to a non VA provider in the community is an option when we cannot serve a Veteran's need in a timely way. We have been in the process of hiring several new psychologists which will enhance the timeliness of these services and anticipate that our access will be improving this month.
11	Safety inspection shows a write up every year after 2010 regarding potable water, hand washing, etc. Veteran Cemetary / potable water/drinking fountain, public restrooms.	Response received from Jerry Rainey, Director, National Memorial Cemetery of AZ. Potable Water - are currently in the construction phase of the cemetery project where we are hoping to connect to city water. We have applied to the city of Prescott for a water meter. The cemetery in the past was connected to the VA Hospital for water. We do have two field employees who work at the cemetery and they have transportation to the VA Hospital to meet their needs. We also have a porta potty at the maintenance area; we do have hand sanitizer there for the employees. We do not have a public restroom at the cemetery; visitors are encouraged to go to the public facilities at the VA Hospital which is a short distance away.

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12	I was given authorization for physical therapy and received treatment in Dec & Jan. My provider submitted a consult in January but was told it was lost so it had to be resubmitted (on new required form) in June. After 11 wks that was rejected for different reasons. How can we get resolution or help?	The Non VA Care Department has and will continue to work with the Vendor to resolve the coding and vendor information issues. If needed, the Non VA Care Department will consult with the staff from VISN 19 Consolidated Payment Center to resolve the issues. Any questions can be addressed by calling the Non VA Care Department at (928) 775-5488.
13	What happens when a physician says anybody with PTSD is a druggie or an alcoholic. Talked to patient advocate, VISN and nothing done. Was advised that the physician said the same thing in a facility meeting.	Issues/concerns regarding a Non VA Care Provider should be reported to the Non VA Care Department at 928-776-5488 for review and appropriate action. Issues/concerns regarding VA providers should be reported to the NAVAHCS Chief of Staff for review. Although substance abuse including alcohol abuse is frequently associated with PTSD we do not believe that defines a person. The symptoms of PTSD are severe and Veterans struggle to relieve the emotional pain associated with PTSD and some turn to alcohol and substances. The physician referred to has not been employed at this VA for some years and comments he has made do not reflect our view of PTSD and its symptoms.
14	How does VA determine when cataracts are bad enough to remove? A doctor outside the VA removed mine. He told me the VA waits too long to send Vets. He can't get it all by the time they get to him.	Cataract removal is based on Medicare guidelines and is determined after a VA eye doctor has assessed the patient's vision. Each eye is then judged individually for meeting the Medicare standards.

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15	ARCH-2 has been extended for more years but will this be available at more locations? Currently at limited locations.	Congress approved a 2 year extension of this pilot program which was scheduled to end in September 2014. Humana Veterans (contract provider for Project ARCH) continue to build their Network. Unfortunately, there are limited specialty providers in many rural and highly rural communities. There are some specialty providers not willing to sign up with Humana Veterans (Project ARCH). In these cases, the Non VA Care request will be processed through TriWest, if services are available, or Non VA Care "patient's choice".
16	Why doesn't Fee Basis or the VA pay the outside specialist in a timely manner?	90%+ of Non VA Care Claims are processed within 30 days. If a Non VA Care Provider has a question or concern about their claim(s), they are encouraged to call 928-776-5488 or submit their request for a claim status to 928-775-8666. The Non VA Care Department staff will review the claim and work with the VISN 19 Consolidated Payment Center to address and/or resolve the issue with the Vendor.
17	When can we expect to see the VA buildings re-painted?	A project has been submitted to complete the outside of Buildings 107 (Hospital) and 108 (Physical Rehab). It is currently in as a potential project for 2015 if funding beomes available. Estimated cost for the project is $1.9M due to lead abatement and repair of window sills and ledges.

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18	Can there be a web address that we could use for general questions or complaints? The patient advocate doesn't seem interested.	We are implementing the NAVAHCS Patient Advocate Liaison program where each service/department has a minimum of one patient liaison that can be contacted to discuss a Veteran's concerns related to their respective area. This program will provide much needed assistance for the current Patient Advocate and provide quicker responses to Veteran concerns. Currently there is no facility-specific website that permits Veterans to submit concerns via this avenue. A national website does exist that can also be used: Internet Routing and Information System (IRIS) https://iris.custhelp.com/
19	What are the plans to add more/better accessible parking?	We are actively looking at parking and ways to improve regular and handicap parking access. The current construction projects will create more parking spaces, but in additon to that we are exploring other opportunities to expand parking. Our Parking Committee, which does include a Veteran member with handicap accessible needs, is actively looking at all solutions for FY15.
20	What can we do to get our Vets who need specialists in a more timely manner so their conditions do not worsen, or decline? Why does it take so long to see or get an appointment. Our doctors here seem to minimize the illness our vets who served us so ultimately well. How can we get more continuity between staff and fee basis? What would our ailing Vets do if they didn't have families or friends like myself so they get the care they so desperately need?	Timeliness of processing Non VA Care requests will improve with filling existing vacancies and hiring additional staff. Other process improvements have been discussed and will be implemented. NAVAHCS is recruiting for more specialists in all disciplines and is continually attempting to recruit new specialtists especially in the areas of greatest shortage such as Gastroenterology (GI), Optometry/Opthalmology, Audiology.

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21	Why do I have to pay for wrongly supplied meds and botched co-paid dr. visits? Why are some visits a co-pay of $13.68 to $50. The eye doc mis-diagnosed what the problem was with my eye. I need to speak to someone. Between meds and eye I have shelled out over $1000 for the wrong meds & misdiagnosis.	We would like to take the opportunity to discuss issues brought to us at any time, especially when a Veteran is concerned about the quality and/or cost of care. Without knowing the particular issues in this case, it would be difficult to express an opinion about this case or any potential solutions. We would encourage all Veterans to contact the provider and/or the provider's service line administration when issues such as these arise. Co-pays vary based on the various clinic/services where the Veteran is receiving care (Pharmacy co-pay $ 9/Rx; Primary Care $15/visit; Specialty Care $50/visit).
22	10 years ago I was incarcerated in Yavapai Co Prescott. After I got out, I experienced difficulties with care at the Prescott VA and Tucson VA and had issues with VA communicating with the DAV. Does NAVAHCS still act contrary to DAV wishes. I was an officer cmmder Chapter 25 now no more because of this. Am still a DAV sec officer, etc.	We have specific guidelines that we are expected to follow as a Federal Agency. If the guidelines did not allow us to send someone to Tucson vs. another location, DAV does not have jurisdication over Federal Law and cannot be considered. Without specific information as to why this occurred, it can only be assumed that it was meeting the guidelines as set by the VA. We would be glad to review the events of this case if the Veteran wishes to call our office to discuss further.
23	How can the VA better publicize the "Sports Court"?	There was an event scheduled on Friday, October 3, 2014 at the Sports Court for Veterans to help advertise the new resource. The hope is that Veterans will come together, form teams and use the new Sports Court on a regular basis. Staff are encouraging Veterans to take advantage of this program to further engage Veterans in their health care promotion. Information has been widely distributed at US Vets, Domiciliary, and in the clinics.

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24	How often can we expect to have Veteran's Town Hall Meetings in the future?	There is another Town Hall scheduled for Oct. 9, 2014 at 3:30 pm in the Theater on the Prescott campus and one scheduled for Cottonwood on Oct. 23, 2014 from 3 p.m. - 4:30 p.m. NAVAHCS will continue to host Town Hall Meetings to answer questions for the Veterans and to allow them to be heard both at the main facility and, as feasible, at other locations around NAVAHCS.
25	Have we had any "whistle blowers?" If so, how are they being treated?	We do not consider "Whistle Blowers" to be anything more than an employee bringing forward an issue that needs to be resolved. If someone brings an issue to the forefront, we address the issue and thank the employee for being dedicated enough to say something.
26	Aftr 10 years they charged me $114 for bifocal (glasses) Why?	Regulations, established at a national level, inform all facilities of the changes in charges and co-pays for prosthetic items such as bifocals and/or special lenses.
27	Is there any funding in the near future for Basic Dental Care?	Dental receives VA funding through various Dental programs. Services are offered based on eligiblity. We are in the process of boarding 2 Dentists which will improve access timeliness for eligible Veterans.
28	How is the MD, PA and NP recruiting coming along?	Recruitment is coming along with high quality providers being recruited. While we wish that we could bring a new provider on board within a week or two, there a multiple processes that must occur to ensure that the individual meets VA standards. New National changes with increased pay support and the use of recruitment options have allowed us to attract good candidates.

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29	1. Continuity of womens care 2. Timely care - "desired date" 3. Non va PC3 program not patient centered 4. Limits care 5. Access to WH at Prescott barriers among providers 6. Protest not being able to speak at Town Hall	The goal of asking Veterans what their desired date to be seen is to ensure we are meeting their needs. If we are unable to make an appointment within a certain number of days around the Veteran's desired date, it shows us we have access issues needing to be addressed. PC3 TriWest has been contracted to process Non VA Care requests. In cases when a Non VA Care request cannot be provided by TriWest due to lack of specialty providers or when they can't provide the service timely, then it is processed through Non VA Care. This allows the Veteran to seek care and services at their provider of choice. If a Veteran has concerns regarding their TriWest referral, please call the staff in the Non VA Care Department at 928-776-5488. We continue to review the women Veteran needs, but currently don't have sufficient female Veterans to create a separate clinic exclusively for women Veterans. In the meantime, we're working to have clinic providers and space oriented toward meeting women's healthcare needs. For women Veterans who require specialty gynecologic services we have a couple of options: refer to the Phoenix VAMC or to a non-VA community provider. Due to the time constraints of the Town Hall meeting, additional Town Hall meetings are being scheduled that will serve as listening sessions. The next Town Hall at Prescott is scheduled for Thursday, October 9, 2014 @ 3:30pm; followed by a Town Hall at the Cottonwood CBOC on October 23, 2014 @ 3:30pm.
30	I've been waiting from Aug 2013 to now to have a co-pay of $1154 to be paid to me after USAA insurance sent the VA the money in March 2014.	Any questions regarding reimbursement of co-pays need to go through Eileen Madden, revenue coordinator. She can be reached at (928) 776-5311.

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31	What is an expected due date after being told you must see outside doctor for medical treatment? 3 months, etc. (voucher) Who do you contact to make formal complaint?	Non VA Care should process a request within 10 days. Unfortunately, due to the increase in volume of Non VA Care requests, it has taken longer to process these requests. Filling vacancies and hiring additional staff will improve processing times. Any concerns or questions, please contact the Non VA Care staff at 928-776-5488.
32	What are you & NAVAHCS personally going to do to effect change.	We are looking at all options to make improvements in staffing, organization of services, space, construction, and costs to ensure we are aligned with VA Secretary McDonald's strategic plan. However, we are also focused on improving customer service as well as access to ensure the highest quality care to our Veterans. We will continue our focus on improving access in our rural and highly rural areas in northern AZ, optimizing resources (space, staff, equipment) and improving customer service for our Veterans. We had 4 highly dedicated teams this year focusing on development of an interdisciplinary Pain Management Program for Veterans, including staff education; development of an indepth staff training program for our new and existing staff that schedule appointments (MSA University); ensuring that our workload was captured completely and accurately to optimize our budget for future years; and a Veteran Centered Care team focused on improvements in how we deliver care and services to our Veterans.
33	Why not use an urologist to conduct a compensation evaluation exam for a urological problem? (The internist didn't get it)	The national exams required by the VA have been developed so that any physician (Medical or Osteopathic Physician) or Advanced Practioner (Nurse Practitioner or Physician Assistant) can appropriately and safely perform the exam within their licensed scope of practice.

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34	When will our VA be appropriateley staffed? (nurses)	As we continue to hire, unfortunately we also continue to lose staff through retirements, resignations, and promotion opportunities at other VA and non-VA facilities. Nurse recruitment will continue to be an ongoing process, but with the current active hires underway, we anticipate that by November our staffing numbers will be significantly improved.
35	What is TriWest?	On a national level, VA contracted with TriWest Healthcare Alliance (PC3) to provide eligible Veterans coordinated care from a network of Non VA Care specialty and primary care providers.
36	The Blue Team was cancelled 2 years ago. No Vet was notified, Why? Sick call was established then stopped. No notification to Vets.	The Blue Team hasn't been cancelled, but has continued with different providers. Sick call has been modified, as the Blue Team was overloaded with walk-ins. Patients now call all PACT teams for triage for Same Day Appointments.
37	Submitted a letter of complaint to Donna Jacobs on July 7, 14. As of this date, I have not received a response. Can I expect a respone? No response seems like very poor customer service.	We are very sorry that you have not received a response and would appreciate an opportunity to address your concerns. We make every effort to respond to each and every letter we receive. Because you have not received a response, please feel free to resend your concern to us or contact the Director's office at 928-445-4860, ext 6552.
38	Who do we address a problem of false entry of information into a medical file?	This would depend upon what type of information is being entered. If there is an issue with demographics such as incorrect name, spelling or incorrect date of birth, then enrollment and eligibility would be able to correct that. They can be reached by calling 928-445-4860, ext. 6235. If there are notes from a provider that you believe were entered erroneously, you can contact the Privacy Officer, Tony Destin at 928-445-4860, ext. 6218.

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39	One of the big complaints is phone calls…either not answering or not returning calls.	This is an accurate statement that we are actively addressing and we apologize for the delays. As a facility, our staffing numbers presented challenges in managing this issue. However, we recently approved additional team support that is being actively recruited for and we hope this will help in supporting improvements in answering the phone. However, if you are not using MyHealthyVet to communicate with your provider/team or for medication refills, we encourage all of our Veterans to try this approach since it offers a more efficient and customer service friendly approach for all Veterans.
40	When are they going to start listening to Vets? Why is the Pharmacy "messed up"? Why is no one there when you go to call or talk to someone? Why are the attitudes so bad?	These are all areas we are currently addressing for improvement. Telephone calls are our #1 concern in our Pharmacy. We have committed additional staff to the Pharmacy and recruitment is underway. The new staff will be dedicated to answer incoming telephone inquiries. We continue to hire staff to improve customer service and have been working on using Veteran feedback to make improvements in our staff responsiveness to Veterans. We are also actively encouraging Veterans to enroll in MyHealtheVet and communicate with their healthcare team(s) through secure messaging, decreasing reliance on telephone communication. The Town Halls, Truth point (interactive customer service feedback tool), and SHEP (a facility survey sent to Veterans) are all tools we use to review and make improvements in our services and to identify staff training needs. We will continue to make customer service a primary goal and provide adequate staffing to support care and improved communication.

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41	Need to have nurses and dr. assigned to teams to put on their voice mail if they are gone with a # to call. MyHealtheVet Secure Message does not work all the time. Was told it was not a high priority. Parking? What are we doing? Shuttles need to go to all late! Blood work needs more staff in the AM!	Teams should have backup support when not available and that includes having their voice mail listened to by others. A reminder to staff will be sent out because we do not want patient care issues to be ignored because someone is not on site. When the MyHealtheVet messaging is not working, please contact Susan Gladstein at 928-445-4860, ext. 6859 when it does not work. We are currently evaluating parking to find solutions and increase Veteran Parking options (increased parking lot space, move staff parking, move government parking, etc).
42	What is the status of new hires to replace the shortage of providers?	Recruitment is coming along though we have experienced some difficulties with attracting qualified providers to NAVAHCS. New national changes with increased pay support and the use of recruitment options have allowed us to attract good candidates.
43	Why does "controlled substance" mean you cannot pick up your meds on Wed but its OK to come back for them on Friday?	We ask that you please give us a 48 hour lead for pick ups at the window for refills of controlled substances. Controlled substances are filled every 30 days so there is a chance that an item may not be due to be released yet. There is little room for allowing it to be released early since it is a controlled substance.
44	Is there a complaint form for Team NP? How do I change Teams? Do you have licensed doctors if you don't agree with team NP assessment?	In Primary Care we have paper Complaints & Kudos forms available at all of our clinics. In addition, volunteers circulate with electronic tablets with questionnaires to seek Veteran feedback after their visit that day. We are also developing a standardized process for patients who wish to change teams/providers and ensure that such changes occur as seamlessly as possible.

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45	I came to the VA hospital on 8/18/14 to see Dr. Farris on the Gold team for severe sciatica in my left leg and saw RN who merely triaged me out with a 30-day script for soma & no pain medicine and told me I would get a call for physical therapy in a couple of days. The call came over two weeks later on 9/8/14 and I told them I saw a chiropractor and bought a TENS machine and had the problem taken care of after two weeks.	This case was reviewed with the Gold Team after the patient's concerns were reported. A request has been placed to consider coverage for the non-VA care received by the Veteran.
46	About 8 years ago the news program 60 minutes compared the VA & Medicare Health systems. At that time a band aid cost 4 cents at the VA and $2.80 through Medicare. VA by law had to take competitive bids. Medicare by law could not take bids. What has changed in regard to purchasing in 8 years?	The VA has improved its contracting and national purchasing through contracts called "Prime Vendor" contracts that are national and help reduce cost by purchasing volume. While we cannot speak of how Medicare purchases items, the VA continues to find cost cutting measures to provide the highest care with reasonable costs.
47	What is being done to be certain that patients requests for testing is no longer ignored and/or denied for a year & a half to the point that there is a new permanent damage & a shortened life that would not be the case had the testing been done when requested and proper treatment ensured?	We have invested effort, time and dollars into ensuring that any appropriate testing is promptly ordered and performed. However, we do have some prolonged wait times for certain tests given the high volume of requests we've recently experienced.We encourage patients to contact their provider/team if they feel that they are undergoing long delays in obtaining critical testing. The VA can consider non-VA sources for certain tests if the wait times for such tests are unusually long within VA.
48	Does the VA have Dr.'s familiar with soft tissue sarcomas and the recognition of a sarcoma tumor prior to surgery?	NAVAHCS has recently added the services of a staff oncologist and support staff to assist with the diagnosis/treatment of such tumors.
49	Referral: Aug 13 approval, Sep 10 place call saying it's in the mail. After many phone calls to Referral office. Each VA is an island. Why?	A Non VA Care Consult should be processed within 10 days. Unfortunately, due to the increase in volume of Non VA Care requests, it has taken longer to process a request. Filling vacancies and hiring additional staff will improve processing times.

	A	B
50	Why does it take so long for a consult? Is there a plan for transparency??? How far have you gotten?	A Non VA Care Consult should be processed within 10 days. Unfortunately, due to the increase in volume of Non VA Care requests, it has taken longer to process a request. Filling vacancies and hiring additional staff will improve processing times. Non VA Care Department is currently reviewing applications for both the administrative and clinical staff. Transparency is always important to us as a provider of services to our Veterans and we continue to strive to do better at being transparent. The recent town halls are part of that increased transparency and we will continue to work on improved communication as part of being transparent.
51	When might we Veterans be expected to be seen in less than 6 months by our Clinician?	Given recent focus on access, overtime and modifying our clinics, any Veteran in Northern Arizona can see their Primary Care Provider in less than 90 days.
52	Why are RN's triaging patients as outpatients without seeing a doctor to determine patient needs?	RNs are appropriately licensed to triage within their Board and License's Scope of Practice.
53	5+ months for an initial appt to see a Primary Care doc. Dental Hygiene, 1st appt 6/6 and can only clean lowers, 2nd appt 8/29 for uppers. One dental hygienist for all of No. AZ	Given recent focus on access, overtime and modifying our clinics, any Veteran in Northern Arizona can see their Primary Care Provider in less than 90 days. Some patients require a deep cleaning and must be meticulously performed over a 2-3 appointment timeframe.
54	Certain meds are not available here like Celebrex. Why is that?	Celebrex is one of many non-steroidal anti-inflammatories, but it is NOT on the national VA formulary. There is a process to review requests for non-formulary drugs if your VA provider deems this appropriate for your care. Many times, there are other medications that are just as effective.

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55	When a patient is shuttled down to Phoenix or Tucson for care – they see the provider and then they either have to go to lab or Pharm to finish the visit. This delays the person leaving by sometimes hours. This also delays our shuttle drivers by hours. So the question is: Why can't the provider put the order in the system – and we either do the lab or Pharmacy here? This way, they can return as soon as the appointment is done? Then come back here and do Pharmacy or Lab that day.	Phoenix and Tucson providers cannot put orders into the NAVAHCS (Prescott) system. For the lab portion, the ordering provider would need access and notification of results.
56	As a woman Veteran, I would like a separate clinic to handle just women's health care. Is there any program coming for women Veterans?	We continue to review the women Veteran needs, but currently don't have sufficient female Veterans to create a separate clinic exclusively for women Veterans. In the meantime, we're working to have clinic providers and space oriented toward meeting women's healthcare needs. For women Veterans who require specialty gynecologic services we have a couple of options: refer to the Phoenix VAMC or to a non-VA community provider.
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Compliment
Administration
Enrollment and Eligibility
Facilities/Grounds
Mental Health/Homeless Programs
National Cemetery
Native American Outreach/Rural Health
Non-VA Care/Fee basis
Nursing Home/Extended Care/Home Based Care
OEF/OIF/OND Programs
Pain Management
Patient Advocate
Pharmacy
Primary Care
Prosthetics and Sensory Aids
Social Work
Specialty Care
TRI WEST
Veteran Benefits (VBA)
Women's Health