

**STATEMENT OF  
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DIVISION  
DEPARTMENT OF VETERANS AFFAIRS  
BEFORE THE  
SENATE AGING COMMITTEE  
July 3, 2007**

Thank you for this opportunity to share the strong work of our employees to improve Mental Health services for our veterans. My comments will focus on efforts in the catchments area of Portland VA Medical Center (Portland VAMC) and on behalf of our Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) returning veterans who have served in the National Guard.

**OEF/OIF**

**Partnering with the National Guard**

Portland VAMC plays a significant role in co-leading Oregon's Post Deployment Reintegration effort with the Oregon National Guard. We worked cooperatively with the Oregon National Guard to compile a comprehensive resource directory website and to orient them to our services and materials.

Semi-annually, we have co-led Summits for 85 leaders of various agencies and organizations to help in all aspects our veterans' reentry into civilian community life. This model has received national recognition in both VA and the Oregon National Guard.

Moreover, we will have a physician provider at the Anderson Readiness Center in Salem to provide needed services more readily.

**Providing Training for Families and Professionals**

Here at the Portland VAMC, we've held training conferences that highlight community reintegration processes with family organizations and with veterans themselves.

Portland VAMC also shares in 90 day Post Deployment Health Reassessment sessions. Specifically, at a conference center in Canby, we've held 2 family weekend retreats, complete with child care, focusing specifically on the impact of combat service as it relates to family issues. This includes the impact in multiple aspects --spouse, parent or child.

The Military Sexual Trauma program here in the Portland VAMC is coordinated through our Primary Care Service and is led by our Psychiatric Nurse

Practitioner. We have presented training on this and other reintegration issues for 200 community Mental Health and Primary Care providers.

### **Traumatic Brain Injury Care**

Most of our knowledge on this subject has been gained from sports injuries and auto accidents. Now, however, we're learning more as we treat injuries received in concussive blast events in combat. These injuries may be coupled with other traumatic injuries. To deal with these specialized injuries, Portland VAMC has added an additional Neuro-Psychologist on staff. The clinical identification and management of these cases are challenging and something that we are continuing to explore.

### **Rural Mental Health Care**

Portland VAMC has been meeting the mental health needs of rural veterans for more than ten years through our services at Outpatient Clinics in Salem, Bend, and Warrenton. We have recently added a part time therapist at the Warm Springs CBOC. In addition, a new initiative involving telepsychiatry will provide our outlying clinics with the ability to pull in subspecialty expertise for Substance Abuse and Post Traumatic Stress Disorder in these locations.

We are pleased to share that the VISN has received funding for 100 home based video -teleconferencing set-ups so patients who either live in rural areas or are incapacitated, can video conference with their provider and obtain mental health care.

### **Suicide**

Suicide has always been a major concern of the Portland VAMC due to the demographic of our veterans. Suicide increases with age and our veterans average age is 55 years old. We know that increased awareness of the possibility of suicide will lead to better identification of those who are at risk and improve our ability to implement appropriate suicide prevention treatments.

We have five geriatric-psychiatrists on staff. This year, we hired a full time Suicide Prevention Coordinator. With great pride, we can say our suicide screening program has been implemented nationally in the VA.

### **Access**

VA has mandated ready access to mental health treatment for our veterans. Portland VAMC has 24 hours, seven days a week emergency coverage, a phone triage system, an acute interim care provision, immediate OEF/OIF access, and an evening clinic. We are restructuring to meet the Department's mandate to provide full diagnostic and evaluation and treatment for all patients requesting or referred for mental health or Substance Abuse treatment.

### **Hope for Veterans with Bi-polar Disease and Schizophrenia**

For the last four years, Portland VAMC has been a national leader in the Recovery model. Our veterans have recovered from what they were told would be a chronic and debilitating mental illness. As a result of treatment received at the Portland VAMC, these veterans go on to become productive members of society, living the life of their choosing. The Recovery model sends a message of hope. Our Veterans are no longer hiding in their homes. They are employed and active. One veteran recently said, "I am going on a date for the first time in 18 years."

The Portland VAMC has a large task ahead. Awareness, training, and access to appropriate mental health care continues to be the major components of our multi-faceted approach to reaching out and helping veterans while we continue to refine our treatment strategies.

Thank you again Mr. Chairman for inviting me today. At this time, I will be pleased to answer any questions you or other members may have.