

Veterans Administration director Washko

by Michelle Leach

In 1998 Al Washko "retired." For the last eight years, he has led a number of initiatives to transform the Veterans Administration health system in our area, as director of VA Nebraska-Western Iowa Health Care System.

"I stayed retired for about four years and came to the conclusion that I retired a little early," said Washko, who at the time had several years with the VA under his belt (including overseeing 23 VA hospitals in the Northeast), and was coming off of work as a CEO for a Harvard University teaching hospital — New England Deaconess of Boston.

It wasn't just Washko's restlessness that led him back into health care, or the world of work again for that matter.

"I was deeply affected by 9/11 and that happened kind of in the middle of my four years in retirement," he recalled. "I was so impressed by how so many Americans gave so much for their country that I decided to come back to do what I could to help veterans again."

Washko found out about the vacancy in Omaha, and for him, it was a little bit like coming home.

"My family heritage is tied to Nebraska," he said. "My grandfather came from Denmark in 1906 to the Norfolk area and my family has been in the state ever since, so I was happy to come here."

Washko was getting back into the thick again during a crucial time period; the VA as a whole was undergoing transformative measures — Nebraska-Iowa was no different.

Washko can rattle off a number of initiatives with major implications; the first, which harkens back to the VA's mission, is to take care of returning troops.

"One of the first things that we undertook was to create a program for returning combat veterans — and I found a wonderful leader to lead that program — Dr. [Ahsan] Naseem who has extensive experience in post-traumatic stress disorder," Washko said.

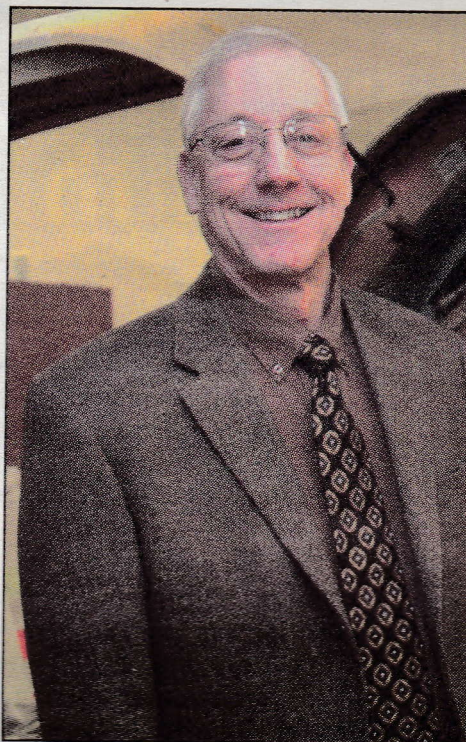
Efforts to address this were put into place in Omaha, Grand Island and Lincoln, and Washko also referenced its work on traumatic brain injuries — a considerable issue given that one of the primary weapons used in modern combat has been roadside (or improvised) explosive devices.

"We put together a traumatic brain injury program," he said. "We have about 6,500 returning combat veterans that we are caring for currently and some of those have traumatic brain injuries."

Another priority initiative has been to bring health care closer to veterans, and in the last few years a number of community clinics (including in Norfolk, Bellevue, North Platte and Holdrege, Neb.) have been opened to bring care closer to the vets who need it.

Another area of emphasis has been tied to "no veteran waiting" — meaning no patient will wait longer than 14 days for an appointment (the prior wait period was 30 days, Washko noted).

"We have less than one-half of 1 percent of our veterans waiting longer than 14 days



Retiring Director Al Washko ... Region director's focus on community, team care service could be one of the larger users of telemedicine — an initiative really rolled out in the past four years — in the country.

He said, for example, a patient in Grand Island may go to a community clinic for a teleconference exam or other pre-surgical appointment with an anesthesiologist based in Bellevue.

He indicated this technology is bridging the great miles in the state between providers and patients.

"We think that's one of the key tools for making health care available to rural populations," he said.

Aside from existing telemedicine equipment, the next big wave for telemedicine will be through an Internet-based program.

"We have a proposal into Washington in which veterans will have an Internet-based teleconferencing system to talk to doctors," he said, noting the proposal is in its final stages and is currently a matter of waiting for funding.

Washko also noted this setup will be easier to use than existing free-standing video conferencing equipment, in that it will be accessed through personal computers and webcams.

Under Washko's leadership, the 2,128-employee strong system has also provided housing to nearly 250 of the state's 1,000 total homeless veterans.

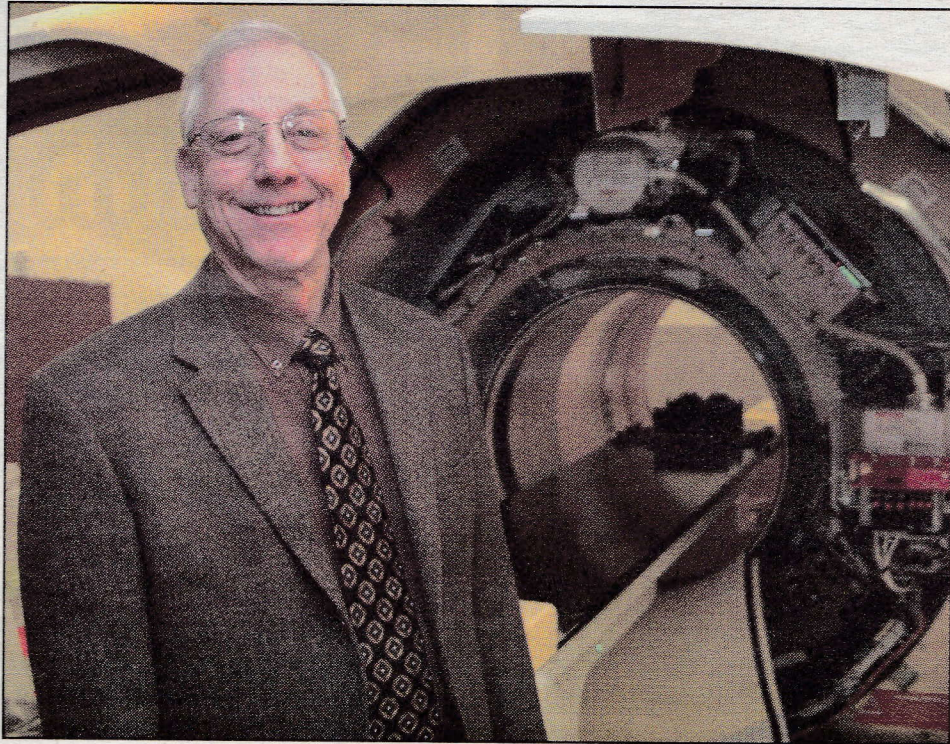
He said there is a variety of ways housing has been provided, with the most common being the use of a voucher for a veteran to find accommodation in the Omaha Housing Authority's area.

He stressed these are independent living situations, whereby rent is based off of income.

"We're working on creating more living situations," he said, noting the Veterans Village of Omaha proposal near the hospital, which would accommodate another 75 homeless vets.

It has also been at the fore of efforts to reform care approaches, in that it is build-

Health care system director Washko retires after leading system transformation



Other impacts will be felt with growing rural initiatives — efforts to partner with existing providers in clinics outside of rural areas or the “usual suspects;” in O’Neill, Neb., for example, 300 to 400 veterans are being treated through a contract/partnership with physicians out of an existing practice.

But the long-time hospital leader, who retired in late March, is particularly proud of the VA’s use of electronic medical records, as a type of “quality control.”

“We have an enormous amount of patient data, so we can measure the patient quality here,” Washko said.

For example, if a patient is diabetic, its medical team can track how well said patient is maintaining his diet or controlling his blood sugars.

“Our nurses or doctors on a regular basis can look into our databases to see which patients might be outliers,” Washko said.

There are 200 quality indicators, he noted, and each of these indicators has a “clinical owner” who works around improving these indicators.

According to Washko, the goal is to be in the top quartile in “every single one of them.”

Unlike in the late 1990s, Washko indicated that this retirement will stick. Though it’s unlikely the VA vet (since 1985) will “fully retire.”

“I’ll still do a little volunteer work and consulting work, like with our homeless effort,” he said.

More than 50,000 veterans are enrolled in the health care system.

Retiring Director Al Washko ... Regional health care system to build upon outgoing director’s focus on community, team care and tracking health indicators for quality.

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and others) to coordinate care.

The hospital hopes to better facilitate this approach in a new facility; the current hospital has been in existence since 1950.

“Medical care is very much a team effort these days and we’re looking to build lots of open spaces, open offices and exam rooms,” he said. “That’s a wonderful opportunity to leave a long-lasting impact with a facility.”