Welcome to Our First Newsletter!

Welcome to the first edition of the James J Peters Bronx VA Comprehensive Integrated Inpatient Rehabilitation Program’s (CIIRP) newsletter. We provide state-of-the-art inpatient rehabilitation and are very excited to have the opportunity to share with you everything that is happening in our department.

Our goal is to keep you informed of what we are up to. We will keep you updated and aware of our latest progress, events and projects. We hope you enjoy the read!

The CIIRP Newsletter will be distributed bi-annually in a downloadable PDF file via email. Please share this with Veterans, caregivers and staff in your clinics.

There are so many exciting and interesting events happening in the JJP VA, this newsletter is just one way we share this information. Our website is filled with more helpful information and resources.

http://www.bronx.va.gov/services/Rehabilitation_Medicine.asp

IN THIS ISSUE

Meet the director of PM&R  p2
Who are we and what do we do?  p3
Outcomes: how do we measure our success?  p4-5
Special interest areas:
  • Amputee specialty clinic  p6
  • Spring into physical activity  p7
  • Community resources  p8
  • Pop quiz: nutrition 101  p9
What motivated you to become a doctor?

I always had a fascination with medical procedures. My dad trained dogs for a hobby, and even as a child, whenever they had some kind of veterinary procedure, I always watched and had to have a complete explanation of what the surgery was. I would even assist as well! As a lifeguard during high school, I was actually able to revive a child I had pulled from the pool. That had a tremendous impact on me. I felt that there was nothing more important than caring for people, and knew there was nothing I would ever feel as much joy in doing.

Why did Physical Medicine and Rehabilitation appeal to you?

I chose Physical Medicine and Rehabilitation because I realized that with the great advances in medicine we were saving more people than ever before; however, many were left with such devastating impairments that they would never have much chance of living rewarding lives. I felt that while other specialties were able to save their lives, rehabilitation was what would give them back a life they felt was worth living.

What’s the most rewarding part about working at the James J Peters VAMC?

JJ Peters VA Medical Center, where I have been Chief of PM&R for the past 4 years, has a uniquely energized and dedicated staff; there’s a true sense of community. Our staff demonstrate a level of concern for, and knowledge of our patients that surpasses anything I have seen so far in my career. In addition, our leadership has readily supported innovations and ideas designed to offer the most progressive healthcare. We have launched new programs, such as Robotic Exoskeletons, Back School, and Boot Camp (a functional fitness program to strengthen and prepare the body for the movement patterns we do in daily life) that are at the forefront of developments in rehabilitation technology, methodology, and management.

What do you do when you are not working?

When I am not working, I try to stay in good enough shape to be able to convince my patients I believe in exercise! I think it is important for me to practice what I preach when it comes to adopting and maintaining a healthy lifestyle. My typical training regime includes a couple of Tae Kwon Do classes a week, and at least a session of High Intensity Fitness at my son’s gym.

Is there anything else you would like to share?

Although I grew up in New York City, and attended Bronx High School of Science, I wanted to see something more of the country, and I went to medical school and residency at the University of Colorado. As much as I loved Colorado, I am very happy to have returned to my roots in the Bronx, famous as the home of the Yankee Stadium, Bronx Zoo, Botanical Gardens, Arthur Avenue and, of course, the JJP Bronx VAMC.
All about CIIRP

Who are we?

The James J Peters VA CIIRP is a 5 bed acute rehabilitation program. We are partnered with the Mt Sinai School of Medicine and Hospital for Special Surgery to offer expert, specialized care in a state-of-the-art facility.

Our philosophy is person-centered care. We take a holistic approach to treat the whole person, not just a diagnosis. Our persons served all have customized goals and progress at their own pace. We are here to help our nations Veterans achieve the highest level of independence as possible, rebuild their lives and return back to their community.

Who is eligible for CIIRP?

Eligibility for admission is reviewed on an individual basis. The Veteran must meet the following criteria:

- Motivated to undergo an inpatient rehabilitation that provides 2-3 hours of therapy per day
- Medically stable
- Alert, able to follow instructions and learn new skills consistently
- Rehabilitation goals that can be accomplished within a 1-4 week time frame. Most persons served return home within 1-2 weeks.
- JJP VAMC providers may place a consult for CIIRP under the following heading: Rehab Inpatient Unit Eval For Transfer

What do we do?

Utilize both individual and integrated team approaches to create custom tailored goals for each client. Some of our many specialties include:

- Speech Therapy
- Physical Therapy
- Occupational Therapy
- Recreation Therapy
- Nursing
- Social Work
- Medical Specialty Services

We treat a variety of impairments, such as:

- Stroke
- Amputation
- Orthopedic conditions
- Hip/knee replacement

Our goal is to help Veterans develop skills needed to return back to their community more independently by providing support, education and training to Veterans and their families in areas such as:

- Performing activities of daily living (e.g., dressing, bathing, eating, cooking)
- Developing skills needed to walk and transfer, such as balance and endurance
- Psychology counseling to address emotional, illness adjustment and coping needs
- Improve communication skills (e.g., expression, comprehension and written)
- Improve cognitive skills (e.g., memory, money management, and safety skills)

The JJP VAMC is a Clinical Referral Level 1 Facility and teaching hospital, providing a full range of patient care services, with state-of-the-art technology as well as education and research- all under one roof! In addition to the JJP VAMC’s full array of inpatient and outpatient medical and surgical services, some of our many specialty programs include:

- ALS Management
- Adaptive Sports
- Amputee Support Group
- Aquatic Rehabilitation
- Assistive Devices and Technology
- Balance and Vestibular Rehabilitation
- Caregiver Support Group
- Chaplin Services
- Chronic Pain Clinic
- Cognitive Rehabilitation
- Community Integration Programs (e.g., cooking & fitness classes; trips to museums & sporting events)
- Creative Arts & Music Therapy
- Driver Rehabilitation
- Hand Therapy and Upper Extremity Rehabilitation
- Holistic Therapy (e.g., Acupuncture, Reiki, Tai-Chi, Yoga)
- Home Safety Needs Assessment
- Homeless Veterans Services
- Locomotor Training (e.g., ReWalk, ZeroG)
- Low Vision Rehabilitation
- MOVE! Wellness/Prevention Program
- Neurorehabilitation
- Nutrition Counseling
- Palliative/end-of-life care
- Pet Therapy
- Prosthetic and Orthotic Services
- Robotic Rehabilitation
- Spine Rehabilitation
- Vocational Rehabilitation and Counseling
- Wheelchair seating and Mobility

For more information check out our website:

“We understand the diverse needs of our Veterans and offer custom tailored services to help Veterans return to their highest levels of independence”
Functional Outcomes That Exceed Regional and National Averages

Our persons served return home with more independence and express greater satisfaction with their progress and our program, than regional and national benchmarks.

Quick Facts and Outcomes

Measuring Outcomes

To ensure that we provide the highest quality of care, we measure and report our program’s outcomes. One of our indicators used is the standard Functional Improvement Measure (FIM), which quantifies both overall and specific improvements persons in how much assistance is required for the individual to carry out activities of daily living, such as dressing, transferring to the toilet, bathing and walking. Total FIM scores range from 18 (total dependence) to 126 (total independence). MedTel is another indicator we use to assess post-discharge level of function, using FIM and satisfaction surveys. We measure this to ensure our program success is built for sustainability in the community.

We are proud of our quality of care and the accomplishments of our Veterans. The JJP VAMC is thankful to have the opportunity to serve Veterans, their families and caregivers.

Our Effectiveness

100% of persons in our CIIRP program were discharged home, to their community, rather than to long term care facilities or to other rehabilitation facilities. We had zero unplanned transfers to acute medical facilities.

Our average discharge FIM scores for 2015 were 116.7, which exceeds regional and national averages, which were 106.2 and 93.2, respectively. This means that persons in CIIRP return home with greater independence than regional and national averages.

Sustainability

Our results are sustainable. Our average FIM scores, measured at the 3 month post discharge follow up, remain 116.7. This score is equal to the FIM scores measured at the time of discharge from CIIRP.

Satisfaction

Our goal is to provide an exceptional rehabilitation experience. We compare ourselves to national satisfaction scores based on factors such as “were you satisfied with the care of your rehab team” and “were you and your family involved in the planning or rehab treatment and discharge planning”. These are rated on a scale of 1-4 (“very dissatisfied” and “very satisfied”). We proudly rated a general satisfaction score of 3.64, exceeding the national benchmark of 3.53.

A high number of persons discharged from CIIRP meet their predicted outcomes and, when asked on satisfaction surveys, agree that “the progress I made in rehabilitation met my expectations”. This is also rated on a scale of 1-4. Our total 2015 score ranked 3.45 and exceeded the national benchmark of 3.31.

Service Access

As an acute medical center, where surgery and rehabilitation are provided under the same roof, we are able to admit persons to rehabilitation more quickly after initial injury onset, which has been shown to optimize recovery. Persons with orthopedic surgeries are admitted an average of 5 days, post-surgery, compared to the regional and national averages of 6 days. That’s 17% faster.

* All data is from FY 2015

100%
Of persons in CIIRP were discharged home to their community

90%
Of persons discharged from CIIRP maintained their ability to perform self-care, at 3 month follow up

91%
CIIRP satisfaction rate of those served
2015 Facts and Figures

- 28 Veterans chose us for their care, in 2015
- A majority of our persons served came from the greater NY area
- We treated a wide variety of ages, with an average age of 61
- 97% of our persons served were male; 3% of persons served were female
- Persons in CIIRP received 6 days per week, an average of 3 hours a day
- 82% of our case mix had an orthopedic diagnosis (e.g., hip and knee replacements), 14% were persons with amputation and 4% were persons with stroke. There were zero unplanned transfers to acute medical facilities.
- In 2015, there were over 200 outpatient visits to our amputee clinic. For most cases, outpatient rehabilitation is a great alternative for the individual allowing them to remain living in their home while receiving the same high quality of supportive and dynamic care from the CIIRP program. For more information about our Amputee Program, please see page 6.

<table>
<thead>
<tr>
<th>FY 2015</th>
<th>General Total</th>
<th>Ortho</th>
<th>Amputation</th>
<th>Stroke</th>
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<td>Patient Number (discharges)</td>
<td>28</td>
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<tr>
<td>Average Age</td>
<td>61</td>
<td>62</td>
<td>56</td>
<td>55</td>
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<tr>
<td>Average Length of Stay (days)</td>
<td>8</td>
<td>6</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Discharges to the Community</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Satisfaction Rate with Rehab Experience</td>
<td>91%</td>
<td>90%</td>
<td>100%</td>
<td>92%</td>
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</tbody>
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Goals

We are honored that our Veterans have chosen us and it’s our mission to uphold these high standards and trust that our Veterans and families have been placed in us, throughout their continuum of care. We want to share our goals with you:

- Continue to achieve satisfaction rates that exceed benchmarks
- Improve persons served satisfaction with community participation measured at post-discharge follow up
- Increase CIIRP service utilization for persons with amputations, stroke and other rehabilitation needs
- FIM scores that exceed benchmarks, at discharge and 3 month post-discharge follow up, in all diagnosis categories

Our high standards of quality care have earned us accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) and The Joint Commission.
Amputee Care Specialty Clinic

Irina Agranova-Breyter, MPT, Regional Amputation Rehabilitation Coordinator and Christopher Fantini, MSPT, CP, BOCO Prosthetist/Orthotist, Regional Clinical Director share with you more about our program.

The Amputee Clinic at the James J Peters VA Medical Center (VAMC) is designed to meet the needs of every veteran who has undergone an amputation. We are a part of the VA Amputee System of Care (ASOC) and serve as one of seven, national, “Regional Amputee Care” centers. The amputee program at the JJPVAMC is the hub of all amputee related care in the Northeast Region. We offer the full continuum of medical, surgical and rehabilitation needs, including pre-operative, acute post-operative, inpatient and outpatient rehabilitation and long term care, all under one roof.

Outpatient Clinic:

Our clinic, which receives very high patient satisfaction ratings, is staffed with a physiatrist, prosthetist, orthotist, physical therapist and podiatrist, as well as various medical team members as needed such as wound care specialists, surgeons, dieticians, wellness experts and psychology to address the mental health challenges faced by veterans with limb loss. However, the most important team member is the Veteran; we work closely with each individual and their family throughout the full continuum of care, to provide the skills needed to live an independent and fulfilling life.

Inpatient Clinic:

The James J Peters VA was the first VAMC to implement the Comprehensive Inpatient Rehabilitation Prosthetic Training Program (CIIRP), designed to provide intensive prosthetic training in an inpatient rehabilitation setting for Veterans with limb loss who have recently been fit with a prosthesis.

Amputee Support Group:

Our Amputation Rehabilitation Coordinator hosts a popular amputee peer support group on the third Friday of each month from 11am to noon. We have been meeting for more than 6 years and connect with veterans at other VAMCs via video teleconferencing. Presentation topics are selected by feedback from participating veterans, through questionnaires. Presentations, based on this feedback, have focused on a wide variety of topics including how to maintain a prosthesis, tips to manage pain, adaptive sports programs, emotional and psychosocial adjustments after amputation, and VA benefits such as clothing allowance and home modifications.

Prosthetics Service:

The prosthetics/orthotics lab provides the most advanced technologies available to return veterans to the highest functional level possible. Our practitioners have been involved with fitting components prior to commercial availability, such as the Deka arm, the “BiOM” foot, & the “X2/X3 knee”. This is accomplished with the expertise of 2 full time Board Certified Prosthetists/Orthotists (CPO’s), Christopher Fantini MSPT, CP, BOCO and Dan Burgos BOCPO. With over 40 years of combined experience in Rehabilitation and Prosthetics/Orthotics, their artistic and clinical talents make them valuable assets to our Amputee Care Team and our veterans. Our prostheses and orthoses are often produced on site. We are accredited by the American Board of Certification on Orthotics, Prosthetics and Pedorthotics. Among the services and products available are:

- Comprehensive, multidisciplinary assessments
- Specialized training for functional orthotic/prosthetic use
- Use of new, lighter, stronger materials
- Custom solutions to unusual cases
- Use of computer aided design (CAD)
- Various advanced technologies, such as:
  - Powered prosthetic feet/ankles
  - Microprocessor controlled knee joint
  - Microprocessor controlled upper limb
  - Powered orthoses
Beat The Winter Blues By Staying Active!

by Maureen Fitzpatrick MS OTR/L

Maureen is an occupational therapist at the JJPVAMC and in the CIIRP unit. She is an avid rock and ice climber; competed in many triathlons (3 time Ironman Lake Placid finisher), marathons, and the TransRockies Run, a 120 mile race through the Colorado Rockies; and summited Mt. Kilimanjaro. When not working at the VA, she spends her time with her husband, two year old daughter and two Labrador Retrievers enjoying the great outdoors as much and as often as possible. She incorporates her love of goal setting and physical activity into her daily work; helping Veterans establish obtainable goals and keep moving forward in the marathon of life.

Clients have asked, “It’s really hard to be physically active this time of year. The days are shorter, commutes are longer, and I’m so busy with errands. How can I find time to squeeze physical activity into my day?” Physical activity is especially beneficial this time of year. As winter sets in, our days are shorter, darker, colder and wintry which can lead to the winter blues. Physical activity can help chase those blues away and boost energy levels and your immune system! A 30 minute walk during your lunch break may improve your energy and focus when you return to work and is a great way to squeeze activity into your day. If you don’t have 30 minutes, it’s ok to break it up and walk for 10 minutes, three times a day. Here are some other tips for finding opportunities to fit activity into your day:

- Sign up for a local walk/run event. Many of these benefit local charities. What a great way to give your heart a work out, build camaraderie and connect with your community!
- When shopping, or visiting the JJP VAMC, sneak in some extra walking by parking in a spot furthest from the entrance. Every little bit counts. It adds up over time.
- Step right up – take the stairs. Hey, did you hear the JJP VAMC now has music playing in the main stairwell? What a great way to squeeze in some cardiovascular activity and listen to some good tunes at the same time!
- Let someone know your plan. Avoid isolated, poorly lit areas.
- Get a head start on spring cleaning. Yes, really! Household chores, such as vacuuming, carrying laundry & sweeping count as physical activity.
- Turn off the TV and tune into activity. Instead of sitting and watching television, play an active game with the family like charades, hide and seek, set up a scavenger hunt, or have a dance party.
- Dance! Salsa, fox trot, swing- it doesn’t matter, just shake those hips!
- Take a stroll around the neighborhood! Get together with friends and check out holiday decoration and local festivals.
- Play! Have some good old fashioned fun! Go sledding or snowshoeing, build a snowman, build a snow fort or have a snowball fight. Game on!
- Try something new that you can continue for years to come. Keep moving, keep learning and have fun! Learn to cross country ski, join an adult sports league or strap on a pair of snowshoes. Getting outside in the fresh air and sunlight can also help improve your mood and make you feel good.
- Keep warm. Stay safe. If outdoor conditions are not safe, now’s the time to try a new indoor fitness class, like spinning or Zumba, or, take a walk around the VA corridors, a museum, art gallery or the mall to do some window shopping.
- Most importantly, have fun, find joy in what you do, and BE SAFE!

References: MOVE! www.move.va.gov ; The American Heart Association www.heart.org
Check Out These Local Resources to Help You Get Active and Stay Active

VA Adaptive Sports Programs "Mission Redefined"
A study by the VA found "results identified significant pre and posttest differences in psychological health, overall quality of life, mood states including tension, depression, anger, and vigor, and sports related competence" The VA offers information on adaptive sports, clinics, Wheelchair Games, grant programs and other benefits. www.va.gov/adaptivesports/

MOVE! Weight Management and Wellness Program
MOVE!® is a national weight management program designed by the VA National Center for Health Promotion and Disease Prevention (NCP), a part of the Office of Patient Care Services, to help Veterans lose weight, keep it off and improve their health.
www.move.va.gov/WhatMoveCanDoForMe.asp

Wounded Warriors "It's About What You Can Do"
Wounded Warriors helps “achieve independence and pursue an excellent quality of life through adaptive sports, health, nutrition and recreational activities.” WWP provides technology and programs so everyone can enjoy the same or similar activities they did before they were injured, with a few adaptations. Some of the many sports include adaptive skiing and snowboarding, water sports, wheelchair fencing and adaptive flying. Veterans who incurred service-related injuries on or after September 11, 2001 are eligible for the program.
www.woundedwarriorproject.org/programs/physical-health-wellness/inclusive-sports.aspx

Achilles International “To bring hope, inspiration and the joys of achievement to people with disabilities”
Achilles Track Club’s mission is to bring hope, inspiration and the joys of achievement to people with disabilities. Within this community, runners gain measurable physical strength and build confidence through their sense of accomplishment, which often transfers to other parts of their life. The Freedom Team of Wounded Veterans program brings running programs and marathon opportunities to disabled veterans returning from Iraq and Afghanistan.
www.achillesinternational.org/chapters/national/nyc

New York Road Runners “To inspire and change lives through the power of running and shared fitness experiences”
The New York Road Runners Club is the “world’s premier community running organization” with over 40,000 members. To accomplish their goal of “helping and inspiring individuals and communities through running” they host running events throughout all 5 boroughs. One does not need to be a member to take part in in more than 100 running and walking events in and around New York City, from weekly races to community health events, group workouts, youth programs, and more. www.nyrr.org/
How Much Do You Know About Calories, Nutrition, and Portion Sizes?

Minerva Huang, MS, RD, CNSC, CDN is a Clinical Dietitian at the James J Peters VA Medical Center. She earned her Master's degree in Clinical Nutrition from New York University and completed her clinical residency at New York-Presbyterian Hospital. She is also a certified personal trainer with the National Academy of Sports Medicine. Minerva invites you take this fun nutrition challenge to test your knowledge and see you much you learn! For more information on healthy eating check out the VA Nutrition Education Information website http://www.nutrition.va.gov/veteranNutritionLinks.asp

1.) Which snack has the most calories?
   a. Single serving bag of potato chips
   b. 20 oz bottle of soda
   c. Single serving bag of peanuts

2.) Which are good sources of protein? (more than one answer)
   a. 1 egg
   b. 1 handful of almonds
   c. 1 portobello mushroom

3.) Which sugar is healthier?
   a. Brown sugar
   b. Honey
   c. Table sugar
   d. None of the above

4.) Which products contain unhealthy fats? (more than one answer)
   a. Cheese pizza
   b. Piece of Salmon
   c. Balsamic Vinaigrette
   d. Almonds
   e. Movie popcorn
   f. Mayonnaise

5.) Which foods have great antioxidant properties? (more than one answer)
   a. Blueberries
   b. Kale
   c. Shrimp
   d. Milk
   e. Cold cereal
   f. Tomatoes
   g. Iced tea
   h. Green tea

6.) Which foods are high in iron? (more than one answer)
   a. Beans
   b. Lemons
   c. Cheese
   d. Meat

7.) A bagel 20 years ago was 3 inches in diameter and 140 calories. How many calories do you think are in today's?
   a. 350
   b. 250
   c. 150
   d. 175

Answers

1. B. 1 bottle of soda has about **239 calories**. A single serving of plain potato chips (1 oz) has about 160 calories. A single serving of roasted peanuts (1 oz) has about 166 calories. Beverages have more empty calories than most people think compared to other junk food.

2. A, B, D. Good protein sources come from animal products, nuts, seeds, legumes (e.g. lentils, beans, peas, soy) and dairy. A portobello mushroom, although often treated as a hamburger substitute, has <2 g protein. Regular pasta has some protein, but whole wheat pasta is a better source.

3. D. All forms of sugar, despite change in color or name, are still broken down in your body into simple sugars and share the same molecular formula, so none of the options are healthier or worse than the other. Monitor intake of all forms of sugar.

4. A, E, F. Animal-based fats are high in saturated fats, which can contribute to elevated blood cholesterol. Plant based fats are usually healthier. One exception is omega-3 fats, which are common in fatty fish such as salmon and tuna, and is beneficial in our diets. Quick tip: fats that at room temperature are high in saturation (less healthy), whereas fats that stay liquid at room temperature are more unsaturated (more healthy).

5. A, B, E, F. Colorful fruits and vegetables are higher in antioxidants compared to processed foods. Most cold cereals are often fortified with additional vitamins and minerals, which have antioxidant properties. Unsweetened iced tea has some antioxidant properties, but ones with added sugar displace the benefits of drinking it. Green tea has some antioxidant properties, but is only beneficial in large quantities.

6. A, D. Meat, legumes, nuts, and seeds have high amounts of iron. Lemons, or other citrus fruits, are high in vitamin C, which help improve absorption of iron. Dairy products do not have iron and further reduce the absorption of iron. People at risk for iron deficiency should separate calcium-rich foods from iron-rich foods to maximize absorption.

7. A. Today's 6-inch bagel has **350 calories without cream cheese**! That's a whopping 210 more calories than a 3-inch bagel 20 years ago.