“What Was Once Impossible, Is Now Possible”

Abdul Pearson smiles proudly as he demonstrates how he has once again become a “righty”. For the first time in 7 years, he regained the use of his right hand. “I went from not being able to move my right arm off my chest or stomach to being able to feed myself and write my name with both hands.”

A spinal cord injury (SCI) in 2007 left Abdul with paralysis of his right arm and both legs. This required him to re-learn how to do everything using his strong left arm and hand. The fingers of his right hand were clenched into a fist, and his elbow was stuck in a bent position. This was caused by lack of movement combined with increased muscle tone and spasticity on that side. This loss of function did not halt Abdul’s persistence, however daily activities such as feeding, brushing teeth, using a joystick on his power wheelchair, and writing with his non-dominant left hand presented quite a challenge.

Last year, Abdul was evaluated in an SCI Hand/Tendon Transfer program being offered at the VA Boston Healthcare System (VABHS). Its goal is to improve function of paralyzed arms and hands using a combination of elective surgical procedures and rehabilitation as appropriate. The team includes hand surgeons working with SCI physicians, nurses, and occupational therapists to evaluate and advise about possible options.

Tendon transfer surgery can be very helpful in some people with C5-C8 SCI. It gives them increased ability to straighten and bend the elbow, ability to bend and straighten the wrist, and/or ability to grip or pinch with the hand. This can greatly enhance quality of life by enabling these individuals to do many more tasks for themselves.

Matching appropriate candidates with the right procedure is critical. Not everyone with hand weakness due to SCI is a candidate for such surgery. There are important considerations to determine suitability for such procedures. These include the number and type of working muscles in the arm, the time course of any natural recovery after SCI, medical stability, status and satisfaction with current function, and the individual’s goals. Ability and motivation to participate in the needed rehabilitation and re-training after surgery is also important and is essential for optimal outcomes.

Abdul’s surgery included release and lengthening of several muscle tendons around his right elbow and fingers. This was followed by weeks of rehabilitation. “After the surgery I needed to re-train my brain to use my right hand again after 7 years. It was kind of like riding a bike, but a bit more frustrating. I turned my frustration into energy and have achieved my goals.”

Abdul has experienced improved self-confidence and independence after his arm surgery. After a dedicated rehab process, he is once again using his right arm and hand. “I am still learning, but I can tell you writing my own signature again is such a joy!”

Working Together to Improve Patient Safety

A column focusing on safety issues is being started on page 3 of this newsletter, and additional items on emergency preparedness are included on page 2 of this edition. People with SCI can be especially vulnerable to certain safety concerns at home as well as in the hospital. SCI increases risk of pressure ulcers, falls, burns, and infections. Impaired sensation and neurological function can cause illness symptoms to appear differently, increasing the chance of a delayed or wrong diagnosis. Medications for SCI-related conditions may interact with each other. Power outages can pose unique risks.

The VA is taking many steps to improve patient safety, but there are important actions that you should take yourself. Becoming involved, informed participants with your health care team reduces risk of health care errors. Ask questions. Tell your doctor about all medicines you are taking. Come prepared to appointments with information and questions. Ask for a checklist for safety at home. Together we can work to keep you, our Veterans, safer.
Our goal to provide exceptional health care for America’s Veterans requires a disciplined, systematic approach to continuously improve performance. This approach involves analysis and design of processes to ensure that patients are receiving the care and services they want and need. To support ongoing improvement efforts in SCI, an industrial engineer joined the team in July as part of a two-year pilot program. This program embeds engineers in select Service Lines in VA New England Health Care System; SCI was one of the four chosen. Tim Schmoke is the systems engineer who is embedded in the SCI Service. Tim graduated from Rochester Institute of Technology with a Master’s Degree in Industrial Engineering. Upon graduation, he moved to Boston to work for the New England Veterans Engineering Resource Center (VERC). The VERC team applies engineering and improvement methods to important healthcare problems in the Veterans Health Administration.

Tim’s role in SCI is to identify key opportunities for improvement within our programs based on performance metrics, observations and discussions with staff, and patient feedback. Once opportunities for improvement are identified, projects are then initiated to address those opportunities. Ongoing project work includes improving the discharge process to ensure coordinated care, enhancing communication during handoffs of patient care from one resident to another, and making the SCI annual evaluation process more efficient.

If you have any questions about Tim’s role or the work he is doing, please contact him at timothy.schmoke@va.gov.

The VABHS SCI staff give a recurring “SCI Patient Education Series” to educate new and current patients with SCI. Emergency Preparedness is a topic that we recently added to the series. The goal is to prepare patients and families for emergencies that may arise after discharge. Discussions include what to do if there is a fire, loss of power or a natural disaster as well as how to organize an Emergency Preparedness Go Bag. The Heartsaver Program, outlined below, is an example of one of the initiatives to help prepare for emergencies. If you would like information on emergency preparedness, please call the SCI Office at 857-203-5371 for information.

The SCI Center at VABHS is always looking for ways to help our Veterans remain safely in their homes. The Heartsaver Program is a free course that teaches CPR, heart defibrillator use, how to relieve choking in an adult, and other lifesaving skills. This course was provided to family members/caregivers of spinal cord injured Veterans with limited or no medical training on Monday, September 22, 2014 at the VABHS. Lunch was provided to the attendees. Stay tuned for future training dates.
Install **smoke alarms** on every level of your home, inside bedrooms and outside sleeping areas. If a smoke alarm sounds, do not attempt to put out the fire. Exit your home **IMMEDIATELY** and **CALL 911**.

Install **carbon monoxide alarms** in central locations on every level of your home and outside sleeping areas. Carbon monoxide is an odorless gas. If the carbon monoxide alarm sounds, exit your home **IMMEDIATELY** and **CALL 911**.

Replace **batteries** in alarms **twice a year** when you change the clocks for Daylight Saving Time. Immediately change the battery if an alarm chirps, warning that the battery is low.

Know the difference between the **sounds** of smoke alarms and carbon monoxide alarms.
Learning to Honor Veterans as Partners in Health Care

Recognizing that Veterans are the most important members of the health care team, the SCI Service at VABHS has set a priority goal to enhance staff knowledge, skills, and attitude to honor Veterans as partners in their health care. This past year, SCI staff were provided the opportunity to voluntarily participate in a specific training program called “TEACH for Success”. This included an interactive all-day training that educated participants on the following 5 areas, based on the acronym “TEACH”:

T = Tune in to the patient
E = Explore the patient’s concerns, preferences and needs
A = Assist the patient with changes
C = Communicate effectively
H = Honor the patient as a partner

Ongoing initiatives and identified Service Champions are in place to help staff sustain and reinforce these skills.

The figure below shows the high percent (88%) of SCI staff who completed “TEACH” training last year. This highlights the emphasis that staff put on improving their patient-focused skills to improve health outcomes by better understanding what is truly important to each Veteran with SCI.