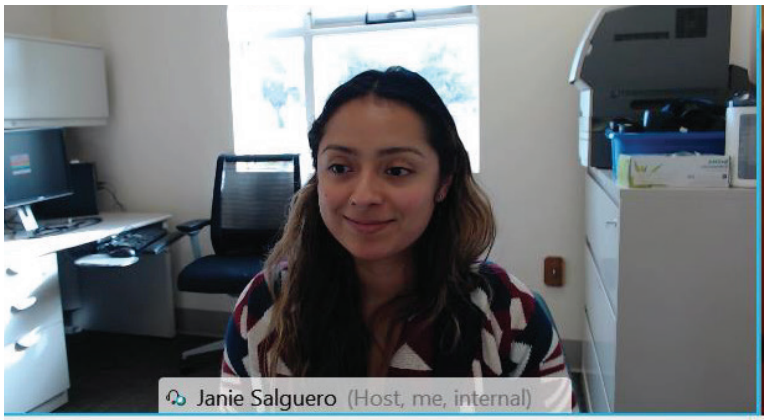
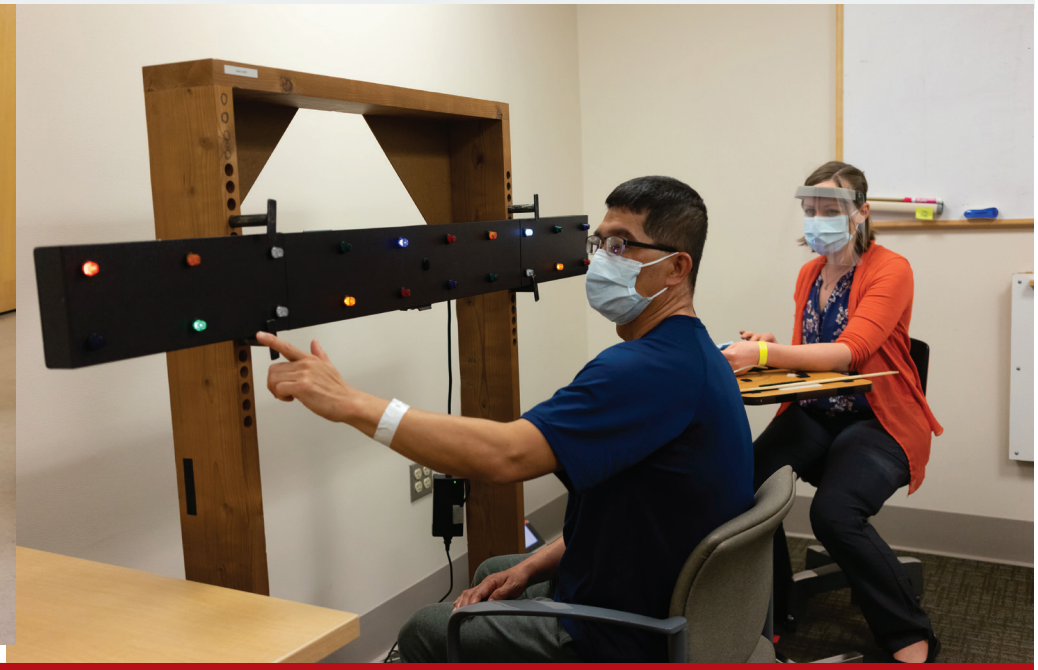
VA Palo Alto Health Care System

Western Blind Rehabilitation Center

WBRC Review





Fiscal Year 2020

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Inside This Issue

The 'WBRC Review' is a Fiscal Year (FY) review of the Western Blind Rehabilitation Center (WBRC) for stakeholders including former and current students, prospective students, family and caregivers, VA staff and volunteers, and anyone interested in learning about low vision and blind rehabilitation services available to Veterans and Active Duty Service Members through the VA Palo Alto Health Care System. Copies of the WBRC Annual Review are available in print as well as on the WBRC website at:

www.paloalto.va.gov/services/wbrc.asp

Instructions for Scanning a QR code

To scan the QR codes in the following articles, follow the steps below:

1. Open the camera on your smart phone
2. Hold your camera facing the QR code
3. A pop-up notification will come out at the top of your phone asking to redirect you to the webpage link
4. Select the notification and the website will open automatically

Photo: Black & White image of the American Flag, California Flag and POW Flag

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What is the WBRC?

The Western Blind Rehabilitation Center (WBRC) is a 27-bed residential facility located at the Menlo Park Division of the VA Palo Alto Health Care System. Approximately two hundred men and women of all ages participate in the program each year. More than three quarters have usable vision for which specialized treatment is provided. Helping participants adjust to and manage their visual impairment is a major objective of the program.

WBRC Mission Statement: To serve Veterans and Active Duty Service Members with visual impairments, along with their families, to improve independence and quality of life through best practices in vision rehabilitation, a patient-centric approach and a supportive environment that fosters competence, confidence and continuous learning.

WBRC Application Process: Application to the WBRC is made through the Visual Impairment Services Team (VIST) Coordinator. If you or someone you know has a visual impairment, please contact the Visual Impairment Services Team Coordinator at the nearest VA Health Care Facility. The Visual Impairment Service Team Coordinator at the VA Palo Alto Health Care System can be reached at (650) 391-3737.

Photo: Outside view of the WBRC Building (T365) with green grass and two trees.

Photo: Inside WBRC Building (T365) where the front desk is. There is staff working on computers and two individuals being helped by staff.

For information about other aspects of the program, please contact (650) 614-9952.

To learn more about Blind Rehabilitation Services available through the VA Palo Alto Health Care System please visit the following websites:

https://www.paloalto.va.gov/services/vist.asp

www.paloalto.va.gov/services/wbrc.asp

If you are interested in a tour of the WBRC or would like to have the WBRC present at an upcoming event or group, please contact us at: (650) 614-9952.

List of Programs

The WBRC offers the following inpatient comprehensive blind rehabilitation programs:

Introduction to Vision Rehabilitation (IVR): Veterans who are either new to vision loss or to Blind Rehabilitation Services may benefit from the IVR program. This group program offers a comprehensive introduction to skill areas and services available at WBRC and can be followed by individualized goal development for future inpatient programs.

Regular Blind Rehabilitation: Patients participate in a comprehensive treatment plan based on patient's expressed goals and clinical assessments, which includes: Orientation and Mobility, Living Skills, Visual Skills and Manual Skills. Program length averages 6 weeks; however this will vary depending on the patient's goals.

Comprehensive Neurological Vision Program (CNVR): CNVR is the first inpatient program within the VA to address visual impairment and associated cognitive disorders caused by brain injury. CNVR specifically addresses neurological visual impairment as a result of brain injury. Causes of neurological visual impairment includes stroke, motor vehicle accidents, gunshot wounds, blast related trauma, falls, brain tumors, and toxic exposure.

Computer Access Training (CAT): The CAT program focuses on training participants to effectively and efficiently operate a computer, using specialized access software and equipment, to meet individualized goals.

Dual Program: A dual program is typically indicated when a patient is admitted with the need to participate more than one program consecutively during a single admission.

iProgram: The iProgram is an advanced technology program which addresses the basic functions of mobile computing needs of the patient by providing training on the built-in accessibility features for a smartphone or tablet computer.

Two Week Vision Rehabilitation Program (TWVRP): The TWVRP allows Veterans to address emergent needs based on their stated goals and assessments in the skills areas of their choice.

Matter of Balance (MOB): Matter of Balance is an evidence-based fall prevention program for older adults which addresses the fear of falling, fall prevention measures, and simple exercises to promote balance and increase activity levels. The program was developed through research by the Royal Center for Enhancement of Late-Life Function at Boston University.

Specialty Programs: Patients admitted for a specialty program may be admitted for one need, such as power mobility, OCR (Optical Character Recognition), personal assistance device (Echo), electronic travel aids and/or GPS.

Telehealth Training Program: The Telehealth Training Program uses virtual health technologies and related devices to increase access to care to Veterans who would benefit from blind rehabilitation services. Patients who are unable to participate in a Blind Rehabilitation inpatient program may be appropriate for virtual training from their home or their local VA outpatient clinics. Services include assessments, individualized training, and/or education in the areas of technology (including CAT and iProgram), Visual Skills, Living Skills, Orientation and Mobility, Manual Skills, and some specialty programs as appropriate. Individual training may also provide instruction on how to access Telehealth services through VA Video Connect. Group training may also be available via Telehealth to address carryover of previously learned skills while facilitating peer support.

A Message from the WBRC Service Chief

Photo: portrait of Service Chief smiling, standing under tree

As WBRC's Service Chief, I am honored to share the annual issue of the WBRC Newsletter for the Fiscal Year (FY) 2020. What a year it has been! While the COVID-19 Pandemic upended many of our plans and created a steady stream of challenges to our normal way of doing things, I feel tremendous pride in WBRC's response and innovation in providing needed support to our Veterans during this time.

In the first two quarters of the year, prior to the Pandemic, WBRC had admitted 87 Veterans for a total of 89 training programs. In March 2020 however, all VA Blind Rehab Centers (BRCs) were directed to temporarily suspend their inpatient programs due to the growing threat of COVID-19. Once our physical doors were closed, WBRC had to rapidly shift to virtual care to ensure that Veterans' needs could still be met. We started by supporting an initiative through our National Program Office to provide wellness checks to Veterans with Visual Impairments, while simultaneously developing a plan to for identifying Veterans that were in need of Telehealth training.

Within the space of a few months, WBRC shifted many of our existing programs to virtual care, including iProgram, Regular and Computer Access Training, and created multiple Telehealth groups, such as Fall Prevention, Technology Tips, Neurological Vision Rehabilitation, Weekly Relaxation and Chair Yoga. We also started a virtual "Introduction to Vision Rehabilitation" to introduce Veterans that were either new to Blind Rehab or were interested in learning more about WBRC's comprehensive programs.

By the end of FY 20, WBRC had provided 1120 remote encounters (a 4380% increase from the prior year), completed 154 individual programs and served 107 unique Veterans via Telehealth. During this time, the team also provided training for VIST/BROS throughout the country, to ensure that those providers would have tools to support Veterans remotely, and worked tirelessly to help our staff develop the technical skills needed to provide the best possible care. Finally, WBRC staff completed more than 250 wellness checks for Veterans with Visual Impairments throughout the country and when needed, directed them to appropriate local resources for follow up support.

In November 2020, after months of extensive planning and preparation, WBRC was among the first BRCs in the nation to readmit patients for residential care. In the last two months of the calendar year, we admitted 7 Veterans to our inpatient program, and are looking forward to many more in 2021.

Below are some more highlights of the year:

- WBRC successfully underwent a Commission on Accreditation of Rehabilitation Facilities (CARF) virtual survey in December 2020, resulting in a 3-year accreditation.

- We welcomed 8 new Blind Rehabilitation Instructors, and filled an additional 5 positions over the year, greatly improving our ability to provide care for our Veterans.
- Our VIST Roster expanded significantly in FY 20, following a national effort to merge Low Vision with existing VIST rosters, as well as collaboration with local Veterans Benefits Association to identify Veterans that may be eligible for care. This will enable us to identify and serve a larger population of Veterans in our catchment area.
- WBRC completed 24 outreach events during FY20 to promote advocacy, awareness, and training on various topics that are important to the visually impaired population served by VAPAHCS.
- WBRC's 16th Annual White Cane Awareness Day was held virtually in October 2020 and included more than 100 participants from around the country, representing Veterans, hospital employees, community organizations, and other VA BRCs.
- WBRC collaborated with VA Palo Alto Public Affairs to create simple instructional videos to help supplement remote training for individuals with visual impairments and their families. One video ("How to change a cane tip") was produced and has been made available through WBRC website and VA YouTube site, with additional videos to planned for FY 21.
- WBRC maintained its commitment to innovation in technology by completing 41 product evaluations, and adding nearly 20 new prosthetic devices, ensuring that the WBRC stays current on new technology that can benefit our Veterans.

At the WBRC, we are optimistic about the coming year and the opportunities that it will bring. We have welcomed back Veterans in person, and will continue to expand our offerings for Telehealth, to ensure best possible access to care. Regardless of the mode of delivery, we remain committed to providing the highest standards of quality care, customer service, integrity, and efficiency to the Veterans and Active Duty Service Members that we serve. We will always strive to improve our services to Veterans, Active Duty Service Members, and their families.

With utmost respect and appreciation for your service and sacrifice for our country,

Eve Klein MA CLVT, ATP CCC-SLP
Service Chief for Blind Rehabilitation Services
Veterans Affairs, Palo Alto Health Care System

New Admissions Guidelines During the COVID-19 Pandemic

There are 13 Blind Rehab Centers (BRC) across the country. The Western Blind Rehab Center (WBRC) is one of the three BRCs to gain approval to open and accept admissions. We are following strict re-opening procedures outlined by Hospital Leadership, Infection Control and Prevention, Center for Disease Control and our BRS Program Office.

In order to adhere to the new guidelines our admission process has changed.

Along with our previous requirements of having the following up-to-date and less than 1 year old:

- Physical with your Primary Care Provider
- Completed lab work: Metabolic Panel (MP), Tuberculosis (TB) Test and Complete Blood Count (CBC)
- Annual Review performed between VIST Coordinator and Veteran

Patients must now have a negative COVID Test performed within 72 hours prior to admission. It is encouraged to have the COVID test scheduled through your VA Primary Care Provider and administered at the VA for a quicker turn around on results. Results are often available within 24-48 hours. Once results show negative, travel will be arranged, and Veteran may admit to the WBRC.

Monday	Tuesday	Wednesday	Thursday	Friday
Veteran administered COVID Test	Waiting for Results, Veteran quarantines	If Results show Negative, Veteran admits	If Results show Negative, Veteran admits	Test no longer valid, New Test is needed for admission

Prior to admission, Veterans should be aware of changes to the program. Veterans will have the opportunity to meet their team by video or telephone to ask questions and prioritize goals prior to admission. Veterans will have private bathrooms and training rooms, a change from the shared facilities from previous admissions. Saturday sessions are available to allow for more time spent learning and completing goals. For the time being, the WBRC does not allow passes or visitors, in order to limit any exposure from the community. WBRC will assist in connecting Veterans to their friends and family through video and telephone calling. Admissions are limited to a smaller census as part of the safety precautions.

Above all else, the WBRC keeps safety of our staff and the Veterans we serve as our top priority. As we continue moving forward, these policies may shift based on the most up-to-date safety precautions. Contact your VIST Coordinator or WBRC Admissions Coordinator for the most current information. We will do our best to share updated guidelines in a timely manner to ensure we all remain safe during these trying times.

Written by: Nicholas Smedes, MA, CVRT

VIST Coordinator VAPAHCS

COVID-19 Precautions

During the COVID-19 pandemic, WBRC Nursing implemented precautions to maximize the safety of the Veterans and staff, in addition to proper hand hygiene and wearing a mask. Our goal is to reduce potential exposure to COVID-19.

Precautions include:

- Daily Temperature screenings of all staff
- Prior to admitting, Veterans should avoid any community outings or gatherings after the COVID-19 test
- COVID-19 daily screen of Veterans prior to attending classes
- Use of touchless sanitizers
- Social Distancing of at least 6 feet whenever possible
- Designated rooms for Person Under Investigation (PUI)

Written by: Erika Ashley Banaga, RN, Nursing

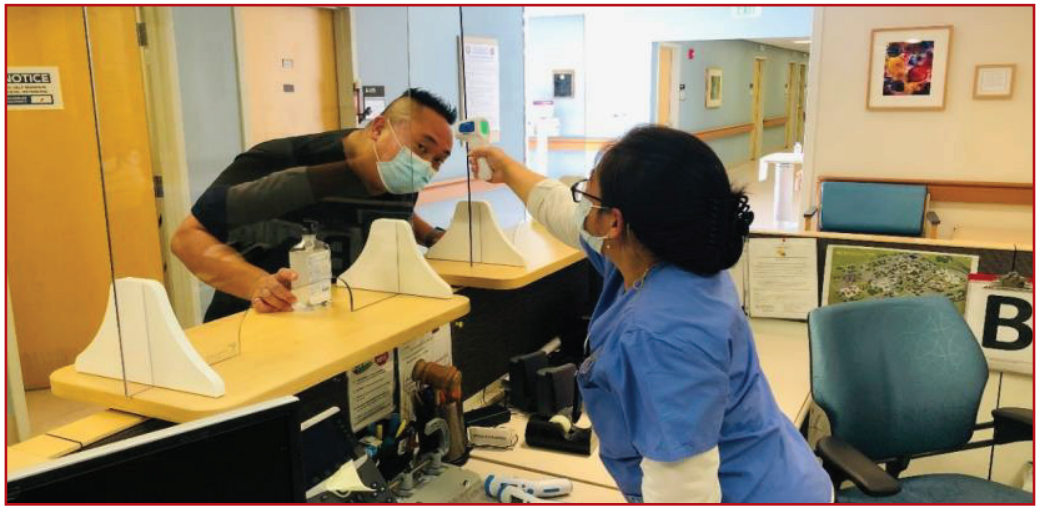


Photo: A staff getting his temperature taken.

Photo: Veteran seated near screen on stand, talking with Telemedicine provider during virtual visit.

National Blind Rehabilitation Services (BRS) Report: BRS Provides Personal Touch to Blinded Veterans During the COVID-19 Pandemic

Everyone in our country has been through challenging and adverse times as a result of the COVID-19 pandemic. The impact may be greater for Veterans who are blind or visually impaired, especially for those with limited transportation options and/or caregiver support. In response, VHA Blind Rehabilitation Service launched a national initiative for Blind Rehabilitation Specialist to begin contacting Veterans with visual impairment previously served by BRS to conduct wellness checks.

VA Secretary Robert Wilke once stated, ***"Listening to our Veteran patients plays an important role in providing world class customer service."*** The purpose of the BRS Wellness Check Initiative was –and is -- to ensure that Veteran's immediate safety concerns are addressed. Blind Rehabilitation Service provided a touchpoint to over **9,115** Veterans to ask about their well-being and confirmed there was access to food, medication and self-care items.

VA's personal touch has been greatly valued by Donald Overton, Acting Executive Director and Director of Government Relations for the Blinded Veterans Association.

"Serving as a Veterans advocate during the COVID-19 pandemic has been both challenging and rewarding," Overton said. "Challenges such as maintaining organizational operations, member services, and stakeholder engagement has required significant adaptation and effort in providing support for an ever-increasing remote work force.

"On a particularly lonely and difficult day in the office, my cell phone rang. I

was pleasantly surprised to hear the voice of a member from the VA Eastern Blind Rehabilitation Service team in West Haven Connecticut on the line," recalls Overton.

"She was calling to check on 'my' wellbeing – and genuinely cared about 'my' responses," Overton said. "The conversation was comforting and reassuring, covering everything from accessing VA care and services, to sharing resources for assistance with obtaining supplies and maintaining overall health.

BRS Continuum of Care programs are continuing to provide access to vision rehabilitation during these challenging times in alternative formats, including VA Video Connect and third-party alternatives, such as Face Time, Skype and Facebook Messenger video chat. BRS Continuum of Care providers have provided over **24,248** clinical video-connect encounters this fiscal year 2020.

BRS staff have implemented innovative virtual care practices that include: Healthy at Home sessions for Veterans to reconnect and reinforce healthy habits, relaxation support groups, adaptive chair yoga, traumatic brain injury and low vision support groups, and Living Well with Low Vision support group focusing on Wellness and adjustment to vision loss.

Our deepest appreciation to BRS staff for being dedicated, compassionate, and pro-active as many of our Veterans are scared, and overwhelmed. A reassuring voice goes a long way to mitigate those fears.

Written by: Ella Hart, COMS, CLVT

Blind Rehabilitation Service

National Program Consultant

Telehealth: Adapting to Continue Access to Care

New opportunities to explore methods of training patients with visual impairments emerged this year following the temporary closure of WBRC inpatient program during the COVID-19 Pandemic. Fortunately the closure did not stop treatment for our Veterans for long. After an initial review of each skill area to determine what was safe and functional for remote instruction, care of Veterans resumed. Accessing Telehealth was first priority to help Veterans connect with providers in our healthcare system. Proficiency in telehealth access then enabled Veterans open the door to video-based virtual training. Goals included manual skills help with measuring assistance. Treatment for glare, scanning, 4- wheel walker & long cane instruction was often the focus for O&M. Visual skills provided support for lighting, contrast and use of devices to better access print. Training Veterans with technology devices and accessibility features was frequently addressed. Living skills improved safety and independence in the home by teaching marking of kitchen tools (microwaves etc.), help with organization, planning, and recording notes or reminders. We are grateful that family or caregivers were able to help at home to make many of these programs successful during this phase of telehealth training.

For Veterans new to blind rehabilitation, the introduction to vision rehab program was expanded. Tours to the center are now replaced by materials describing what WBRC has to offer. This is supplemented by telephone and VVC visits by representatives in each skill area to provide an outline of topics offered in both inpatient and home-based blind rehab. Many Veterans report they appreciate this introduction and have found it easier to identify goals for either VVC or inpatient programs they can then work on.

Written By: Katherine Taylor MS., CLVT, CCC-SLP, CBIS
Comprehensive Neurological Vision Rehabilitation (CNVR) Coordinator

Psychology and Recreation Therapy Response to the Pandemic

In response to the COVID-19 Pandemic, WBRC transitioned from an inpatient program to fully virtual, remote care via VA Video Connect or Telephone VA National Teleconferencing Service. Psychology and Recreation Therapy developed three weekly groups beginning in May, 2020. Veterans are referred by Blind Rehabilitation Staff Members and VIST Coordinators. These groups focus on calm stretching, relaxation and meditation, and chair yoga. By engaging in these groups, Veterans learn skills to help themselves stay calm in the face of a stressful world as well as improve their strength and fitness. To date, there have been 779 visits to the three groups by over 30 unique Veterans. For the last six months during the Pandemic, 96% of Veterans who entered the groups with a moderate or higher stress level, dropped their stress ratings by at least one point, indicating the effectiveness of these interventions.

Recreation Therapy piloted a 4-session Leisure Education Virtual Series as part of the CNVR Program, which included a cohort of Veterans from the program. Veterans were educated on the benefits of incorporating recreation and leisure activities into everyday life, given resources for engagement, and provided an opportunity to discuss and share thoughts and experiences related to enjoyable activity. Veterans provided feedback that they not only benefited from the education, but also from the social interactions with others during a time where many felt isolated due to COVID-19. The Leisure Education Virtual Series will continue in January 2021 with a new cohort of Veterans from the CNVR Program

Written by:
Laura Peters, Ph.D., Staff Psychologist
Lindsay Connor, MS, CTRS, Recreation Therapist
Rachel Smith, CTRS, Recreation Therapist

WBRC Group Classes, a Key to Staying Connected

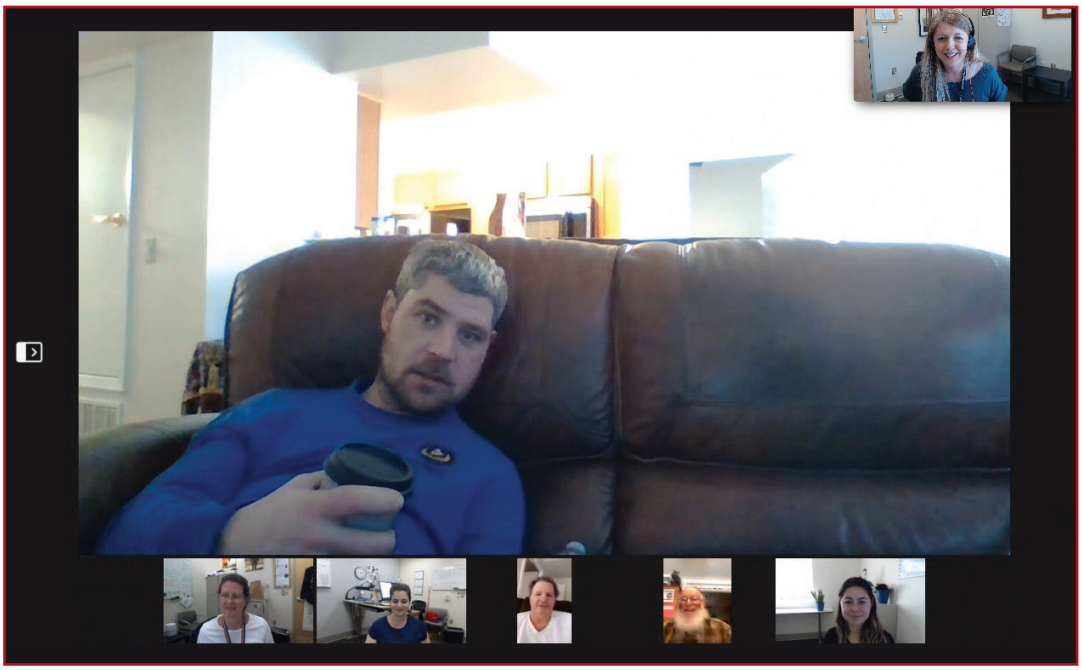


Photo: Screen showing Veterans and WBRC providers participating in WBRC virtual group.

Comprehensive Neurological Vision Rehabilitation Program Overcomes Challenges

Patients admitted to Comprehensive Neurological Vision Rehabilitation (CNVR) training were treated in person during the first few months of FY 20. Care transitioned to Telehealth care following the onset of precautions for COVID-19. A new telehealth group was established for CNVR Veterans. This was a pilot group class that occurred twice a month and alternated between CNVR topics from a WBRC department and a special program presented by Recreation therapy. The group size ranged from 5 to 7 participants. Plans for FY 21 include all three methods of providing training to reach as many Veterans as possible who are in need of this specialty training.

Written by: Katherine Taylor MS., CLVT, CCC-SLP, CBIS
Comprehensive Neurological Vision Rehabilitation (CNVR) Coordinator

In-Home Fall Prevention Program

In response to the COVID-19 Pandemic, the WBRC Matter of Balance in-person group classes shifted to a fall prevention telehealth/telephone group. These sessions included discussion on important topics related to vision loss and fall prevention and presentations by specialists such as; Orientation & Mobility instructors on traveling safely in the home and community during a pandemic, Visual Skills instructors covered the importance of lighting and contrast, Living Skills instructed on safety in the home, Recreational Therapist led discussions on staying active in the home and our Staff Physician lectured on the medical aspects of falls. These sessions were thought provoking and lead to fruitful conversations amongst our Veterans. To date there have been 120 visits by 17 unique Veterans. This program will continue in February 2021 with a new cohort of Veterans.

Some comments from Veterans:

"I appreciated everything that you guys taught us. The materials were not too overwhelmed, and I felt like we had enough time to respond and learn thoroughly."

"I thought the information was great and I appreciate the notes from the sessions. I thought everyone did a great job. It was fun."

Written by: Julie Burdick, MA COMS
O&M Supervisor

Telehealth Tech Tips Group

The WBRC Telehealth Tech Tips group was started in May 2020 to educate Veterans about the many ways to use technology, and provide tips for using a variety of technology devices and software. By hosting a recurring Telehealth group education class, the WBRC hopes to supplement our many individual Telehealth programs and identify additional training needs. Sessions have spanned a wide variety of topics, including:

- Accessibility General Concepts
- Online activities during COVID-19
- Social Media
- YouTube as Learning Tool
- Optical Character Readers
- Voice Commands
- Health Related Uses of Technology
- Online Tech resources
- Online Shopping
- Amazon Echo and the Alexa App
- Recording Devices and Scheduling Assistants
- Seeing A. I. App
- Technology Terminology
- Audio Accessibility
- The Cloud; an overview
- Timer, Alarms, Reminders and Calendar
- Volume Control on Smart Devices

Written by: Daniel Penrod, M.Ed., CLVT, COMS
Technology Coordinator

Photo: Telemedicine provider during virtual visit, standing to the left of monitor showing patient being examined.

Veteran Interviews about Telehealth

As the COVID-19 Pandemic has affected so many in such significant ways, the staff of the WBRC has adapted to offer Telehealth training during the current crisis to keep all Veterans safe. Several Veterans took the time to answer questions about their experiences with Telehealth training. See below for feedback we received from multiple WBRC Telehealth Veterans:

How do you feel about the services you have received from the WBRC via Telehealth or via training over the phone during the current COVID-19 pandemic?

"I think it is extremely helpful that you folks are reaching out about things I previously learned at the center, like group meetings or speaking with fellow Veterans. It got me up on a routine, so my days are longer. And I feel better."

"I really feel it's been outstanding. "I have been on Video Connect for relaxation, yoga, and meditation class." "one of the trainings that I had, WBRC helped me use more functions on my phone including Siri."

"I think that it has been tremendous!" "The services that I received by both phone and video connect were outstanding."

What are the benefits you feel of distance groups and distance learning provided by staff at the WBRC?

"The benefit of telephone and video connect is being able to do it by appointment, and by receiving instructions and or information in timely manner."

"It's great for my mental health and to connect with the staff and other Veterans, so I don't feel so isolated."

"The frequency of the contact and the steady reminders of what's available. The staff contacted me so I did not have to worry about calling, but I know exactly who to call if I need anything." "it's so nice to know that the WBRC is there for me."

What are the challenges you feel of distance groups and distance learning provided by staff at the WBRC?

"In person, I get to practice skills multiple times a day. When, I'm at home I may not have as many opportunities to practice the skills especially because I cannot go out of the house as much as I would like due to travel restrictions."

"At the center, I have more control over the learning environment, but at home people move stuff, and I something cannot find things I need."

"I think the biggest challenge is the lack of face to face, in person, communication." "I miss that."

"One of the challenges is not having an in person, physical contact. "

What, if anything. would you like to say to the staff at the WBRC?

"I was taught how to function differently with tools to accommodate my low vision." "I have been feeling some depression, and the staff at the WBRC has been my support system." "The consistency of the training has been outstanding."

"When I first started to have vision problems, I would not seek help. Throughout my contact with the WBRC, the staff makes me feel that I was extremely important to them, and my needs were important to them. The staff at the WBRC helped with devices and skills that I did not even know were available." "Thank you for your awareness and dedication to the concerns of the Veterans you serve during this time of challenge presented by the COVID epidemic."

In closing, thank you to the WBRC Veterans for your patience and dedication during your Telehealth training during these very challenging times.

Written by: Gary Gintzler, COMS, GDMI

Manual Skills Instructor

NuEyes e2

The NuEyes e2 is primarily a head worn video magnifier and OCR (text to speech) device. It uses MiraCast to share screens with other compatible devices and images are presented on two small screens inside the goggles. The and NuEyes e2 can stream various media such as news feeds, television programming, movies, and games.

The device is well padded and utilizes a headband with an over the head strap for additional support and comfort. The e2 is a self-contained device and is relatively light weight.

As a magnification device, it has controls for size and color contrast. It can be used to magnify at any distance. When being used as an OCR the following can be adjusted: voice, speed, volume, text color, and highlight color. You can read highlighted print visually as scanned material is read aloud.

The company specifically indicates the device is not to be used for mobility or for driving. It is only for use when stationary.

- Magnification up to 18X
- 101 degree field of view
- 4hr Battery Life
- Product Weight: 268g

Photo 1 (Above Left): standalone NuEyes e2 device

Photo 2 (Above Right): Woman uses NuEyes to read can label in kitchen

Written by: Andrew Dadd

Visual Skills Instructor

Daily Organization Through Alexa

The Amazon Echo and the Echo Show have numerous features that benefit Veteran's daily organization. The Amazon Echo can link to your calendar, give reminders and set alarms. The Echo Show has all the benefits of the Amazon Echo with some additional features due to its added display screen.

One of the features of the Amazon Echo is that your electronic calendar can be linked to Alexa. This allows Veterans to update their calendar events using voice commands and receive alerts for those events. Many Veterans use the Amazon Echo to aid in their daily living tasks such as keeping track of their telehealth sessions and groups.

Another easy daily management feature of the Echo is setting an alarm. Alarms can be set for waking up in the morning, as well as checking the mailbox or to calling the pharmacy.

The reminders feature, like the calendar feature, is a great tool for schedule management. Setting a reminder allows for inputting information verbally without going into the electronic calendar. Alexa will announce an alert at the time of the reminder. This can be useful for reminding a Veteran when they have a telehealth session but also for daily tasks such as taking medications, doing laundry and paying bills. Alexa can make daily, weekly, and monthly reminders.

The Living Skills Department recently added the Amazon Echo show to its list of helpful devices. The Amazon Echo Show brings all the great features of Alexa and includes an LCD (liquid crystal display) screen. This allows for new features including video communication with friends and family as well as access to videos on YouTube and streaming services. With the embedded camera, Alexa can be asked to scan products and name items being held up

to the camera. This can be especially useful in the kitchen for distinguishing ingredients. The Show comes with a variety of accessibility features that can be customized to meet the needs of many Veterans.

Christina Rivera, MOT, OTR/L

Living Skills Department

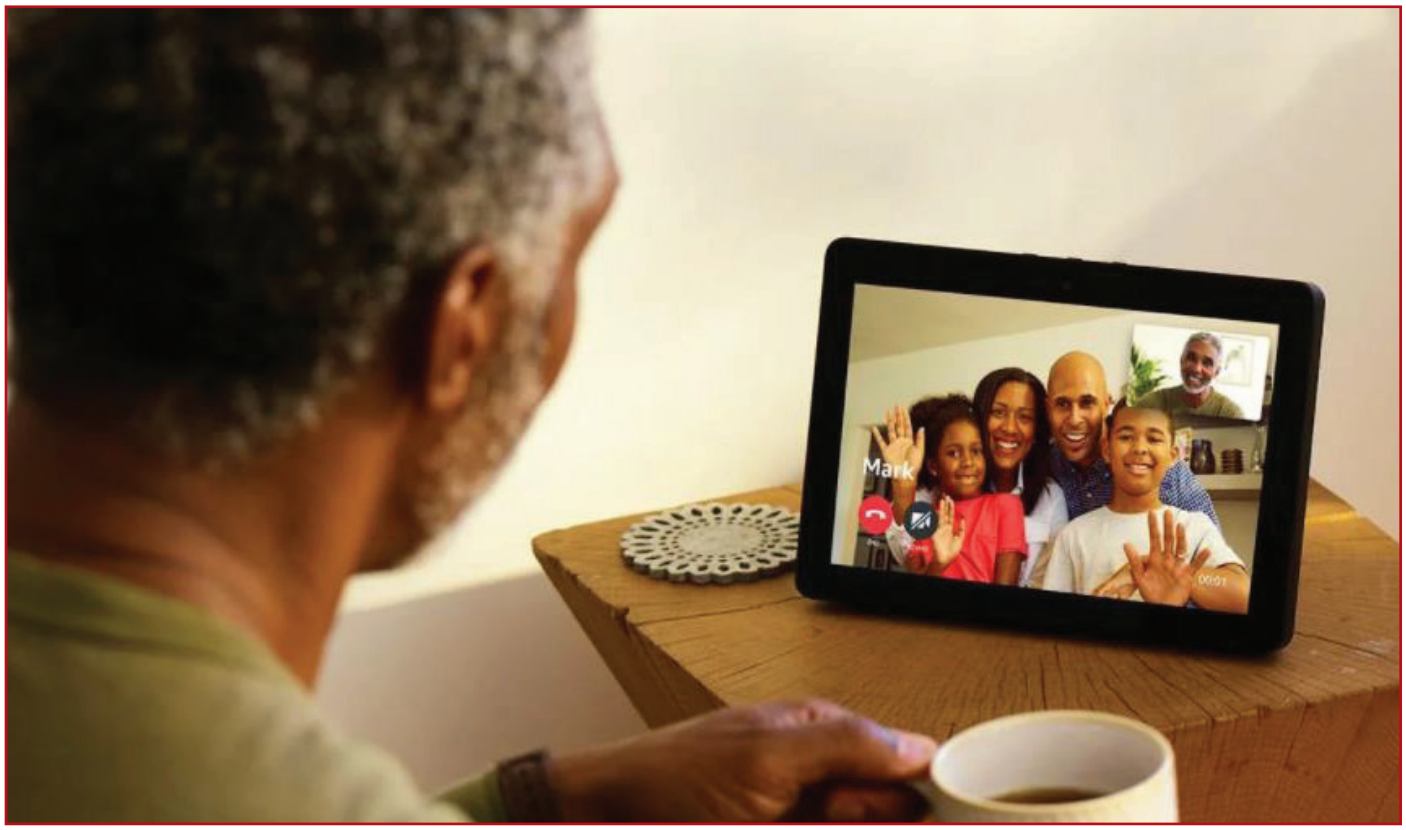


Photo: Over the shoulder view of man using the Amazon Echo Show to participate in a video call with his family.

Electronic Travel Aids (ETA's)

The WBRC's Orientation and Mobility Department offers training on three sonar devices. A sonar device can be used as a secondary mobility aid to complement a primary mobility aid such as a long cane or 4 Wheel Walker. A sonar device sends out sonar sound waves. The sound waves hit objects and are reflected back to the device. The device then gives auditory or vibratory feedback to the user. Sonar devices are appropriate for people who are blind or functionally blind; they are used primarily for obstacle detection without making physical contact with the obstacle. Sonar devices let the users know whether their path is clear or not. They must always be used in conjunction with a primary mobility aid such as a long cane.

The first and most longstanding sonar device is the "Miniguide." The Miniguide is a small handheld device that fits in the palm of your hand. It is approximately 3" x 1.5 " x 1 " It is designed to offer vibratory feedback, though it can be set up to provide auditory feedback. It can detect obstacles at different distances and if pointed slightly up it can detect overhangs. It can be used to identify open doorways or hallways, or to follow a line of customers.

The "Sonar Guide" attaches to a four-wheel walker and should be used in conjunction with standby assistance. It provides auditory feedback only. The Sonar Guide is used for obstacle detection and detection of upward or downward elevation changes. "Sonar Glasses" are a good hands-free option and are good for overhang detection.

WBRC offers assessment and training to help Veterans learn to use these devices for traveling in a straight line or avoiding overhanging obstacles and more. The WBRC has a well-developed ETA curriculum to meet the specific

individual needs of each Veteran. Please talk to your VIST coordinator about your interests in being evaluated for any of these devices at your next stay at the WBRC.

Rasán Gray, MA, COMS, CI, CT

Western Blind Rehabilitation Center

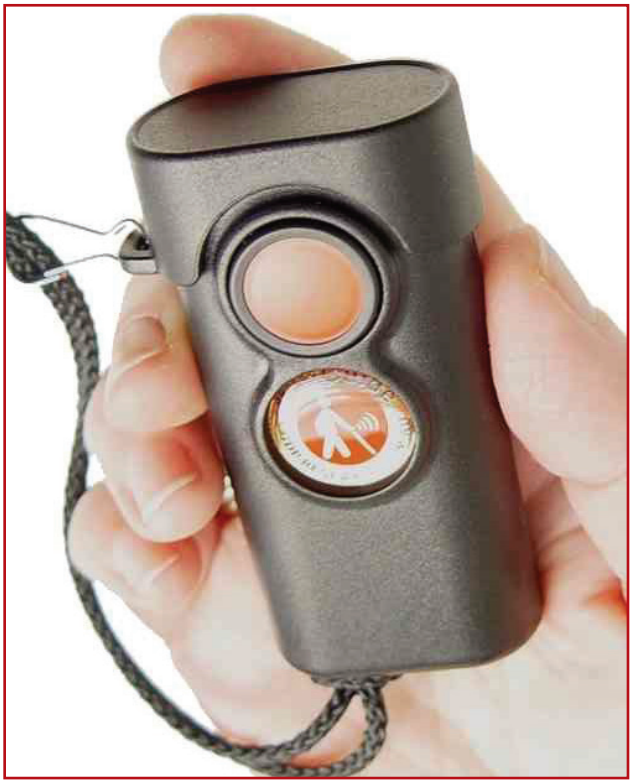


Photo (Above): close up of Miniguide being held in hand

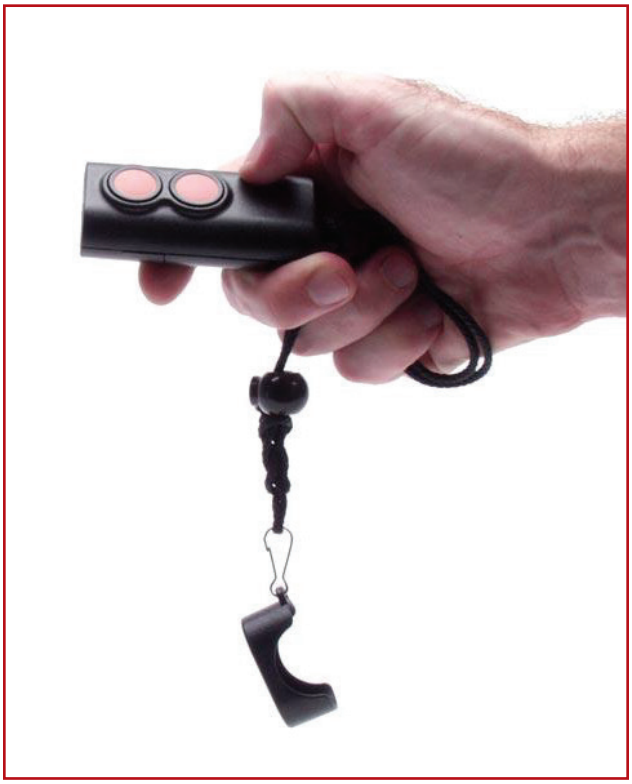


Photo (Above): Close-up of Miniguide with cord wrapped around hand in use.

Measure Up

In Manual Skills we often need to take or set measurements. How long is a piece of wood? How wide is this window? Is this picture centered? Let's set the fence at five and a half inches.

With low vision or no vision these tasks can be challenging and frustrating. There are adaptive tools that can make it easier to measuring independently. The new Tape King is a talking tape measure that tells you what you have measured, from the end of the tape to the body of the case, in a clear voice with volume control.

Photo 1 (Left): Tape King with the tape extended about two inches to the left with measurement displayed in large print on screen.

The low vision tape with a brand name of Lee Valley--The Blindman's Tape, is a bright yellow tape measure with big black numbers, making it easier to see and take measurements. The measuring marks for inch and half inch are diamond shaped with the point at the edge of the tape making it easier to be accurate.

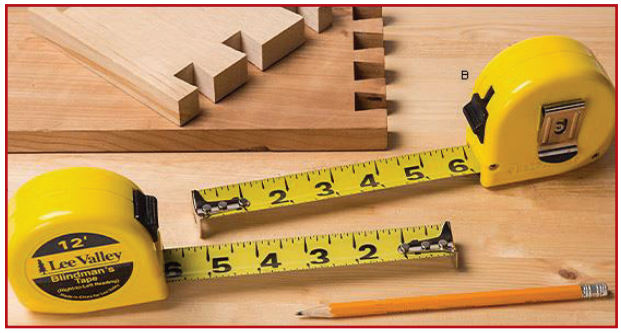
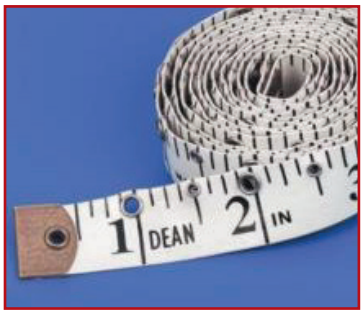


Photo 2 (Left): Two Low Vision Tapes, both extended six inches facing each other on a work bench surrounded by pencil and wood boards

The cloth tailors tape has tactile grommets that can be counted by feel every inch, half inch, and foot markings.

Photo 3 (Right): Against a blue background, a neatly coiled Tailors Tape



The Click Rule is a woodshop favorite. The Click Rule has a metal tube with a threaded rod that slides in and out with half inch tactile marks that are easy to feel and count. When you set the rule longer or shorter you can hear and feel the ruler click every time it moves a sixteenth of an inch. Count these clicks from the half inch marks and you can measure without vision accurately by a sixteenth of an inch up to four feet with three one-foot extensions. Lock your measurement in and set a guide fence; or compare the set measurement to see if it is bigger, smaller, or just right compared to the Click Rule.

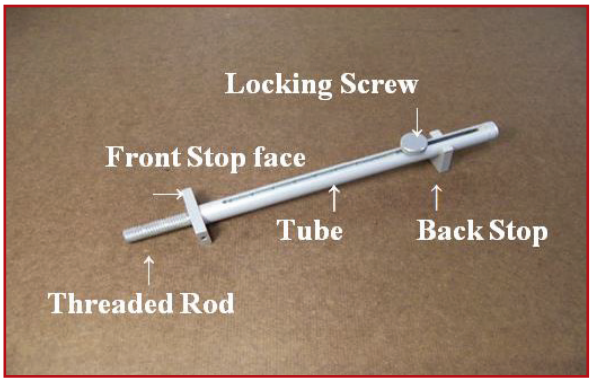


Photo 4 (Left): Against a brown background, Click Rule displayed with threaded rod extended. Each part of the click rule is labeled in white print with an arrow pointing to each part: The Locking Screw, the Front Stop face, the Threaded Rod, the Tube, and the Back Stop.

Whether you are pushing a button and listening, feeling a tactile mark, or using magnification to view large print, you will measure up! When it comes to measuring with tools you learned about and practiced during Manual Skills training, you will measure up!

Written by: Ron Roderick

Manual Skills Supervisor

Guide Connect

The makers of the Accessible software Dolphin Guide have released a new and innovative product: Guide Connect software.

Designed for people with sight loss, Guide Connect uses simple step-by-step menus walk and talk you through every task. Text and icons can be enlarged as needed. User-friendly text to speech software guides you at a pace that suits you. Use the remote control, touch, mouse or keyboard – or add text with your voice.

A new method for access to Guide Connect's features, is the Dolphin remote control. The Dolphin Remote can be paired with a laptop or desktop computer running Guide Connect. The remote allows the use of simple tactile buttons that feel instantly familiar. Guide Connect is equally intuitive with your favorite keyboard and mouse.

Written by: Daniel Penrod COMS, CLVT

Technology Coordinator

Photo: Guide Connect displays Today's Events on a tablet with keyboard

WBRC Social Media and Outreach FY2020

WBRC'S 16th Annual White Cane Day

This year, the WBRC hosted its 16th Annual White Cane Day as a virtual event. Though our Veterans were unable to gather together physically due to COVID restrictions, the WBRC made this virtual event possible for everyone! The Director of VAPAHCS was our guest speaker and Veterans shared what the white cane means to them. Scan the QR below to see the video from this event!

QR CODE 1 (Below):

Photo 1 (Above): White Cane Day 2020 logo "Walk Proud with a Veteran," graphic with one person with a long cane and one person with dog guide, both walking in front of the American Flag.

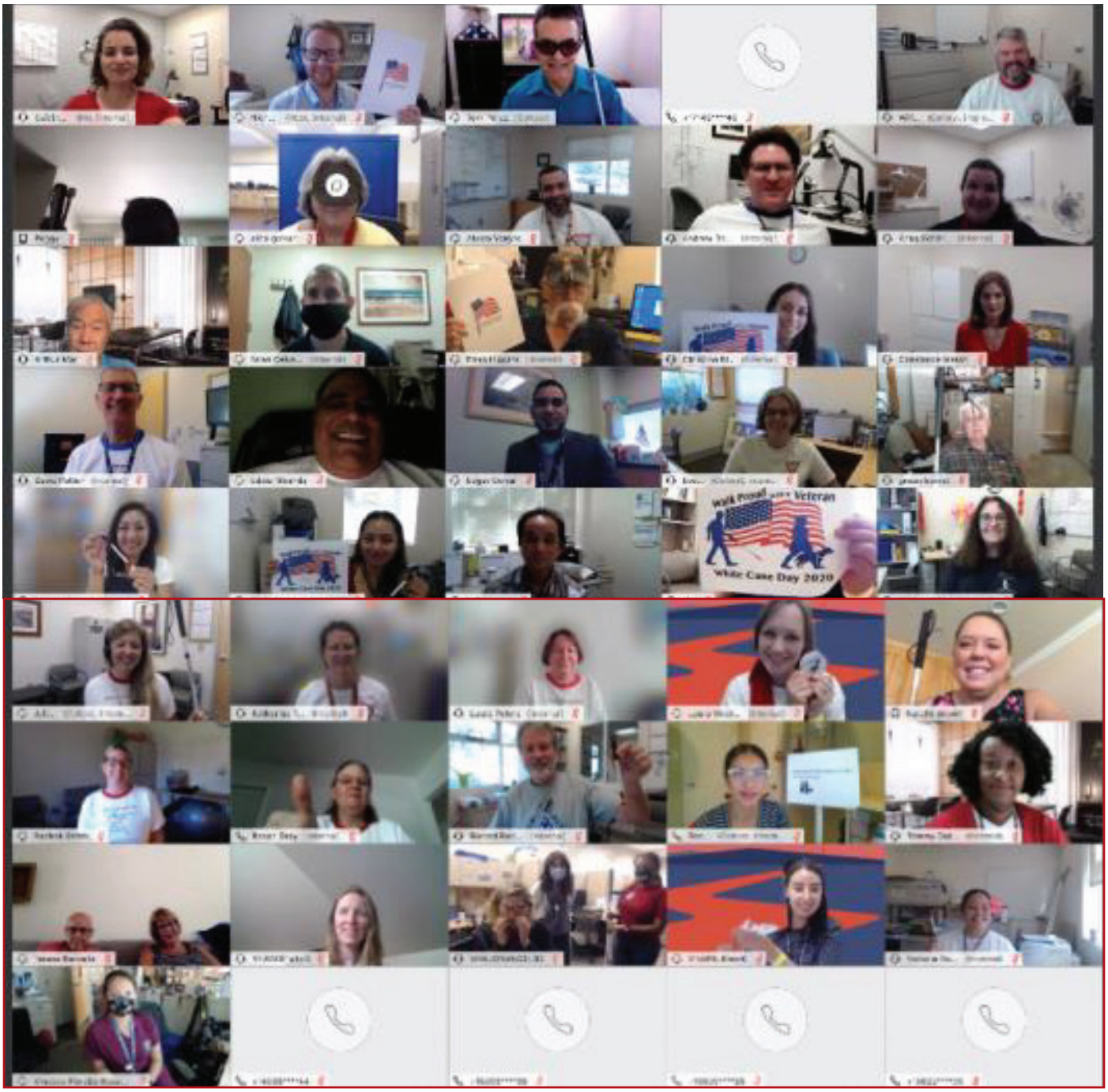


Photo 2 (Above): A photo mosaic screen shot of 45 individual celebration participants, Veterans and Staff.

WBRC on Social Media

The WBRC shares information with our Veterans and their families through social media posts on the VAPAHCS Facebook page. Some examples include links to articles written by WBRC alumni and announcements about upcoming WBRC events. Our staff will be posting on the VAPAHCS Facebook page once a month to keep you up to date!

Scan the QR code below to read a recent Facebook Post that features an article written by a WBRC Veteran from Fairfield, CA who shared his experience attending the Matter of Balance program.

QR CODE 2 (Below):

A MATTER OF BALANCE

MANAGING CONCERNS ABOUT FALLS

Photo 3 (Above): Logo "A Matter of Balance: Managing concerns about Falls" with a symbolic graphic of a person standing and stretching.

Scan the QR code below to read an article written by a WBRC Alumnus who continued his passion of bicycling and completed a 50-mile tandem bike ride and shares tips to regaining independence after sight loss.

QR CODE 3 (Below):

Photo 4 (Above): Two images: first one is two people in racing gear pedaling on a tandem racing bike. Second is an image of one of the racers with a long cane standing on a second- place podium. Standing on the podium are the first and second place racers with their captains standing behind them. All four people are waving and smiling.

To read more content from the WBRC, check out the VAPAHCS Facebook page and scan the QR code below. Be sure to like the page to receive the latest updates!

QR CODE 4 (Below):

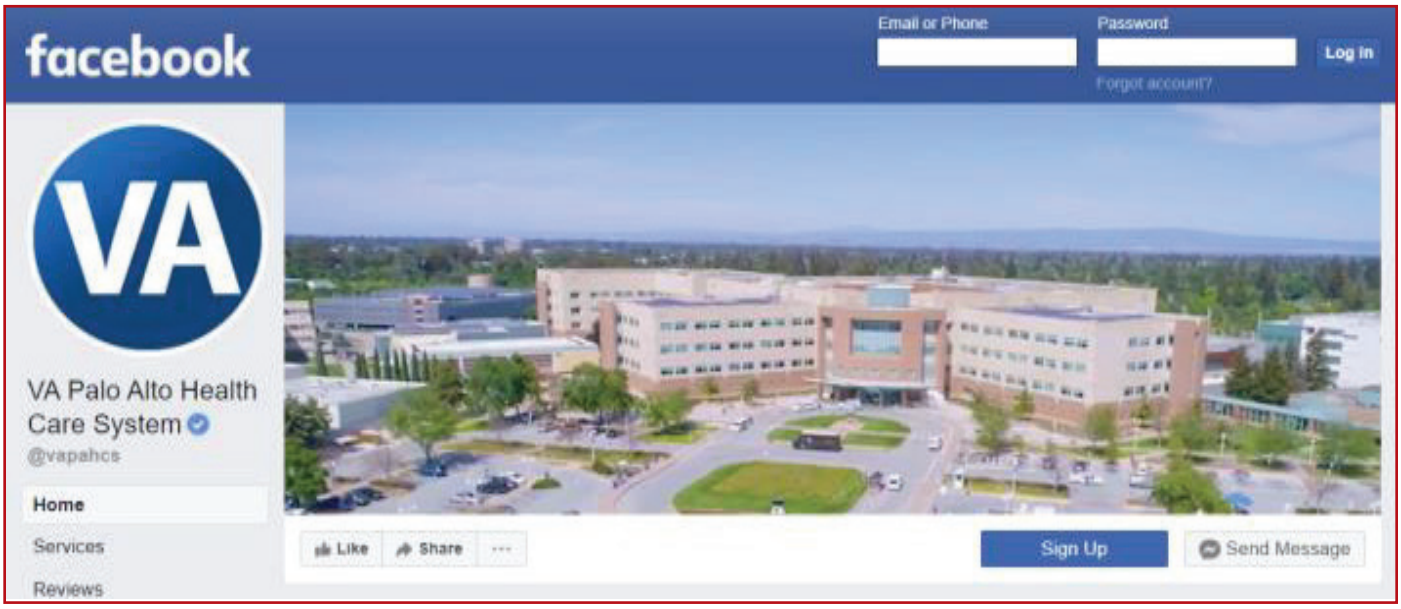


Photo 5 (Above): Screenshot of the VA Palo Alto Health Care System Facebook login page depicting the Palo Alto campus

The WBRC also has a website where you can find the instructional video "How to Change a Long Cane Tip," with more videos to come soon. Scan the QR code below to be taken to the WBRC website.

QR CODE 5 (Below):

Photo 6 (Above): Screenshot that reads "This cord lock prevents the elastic cord from sliding into the cane," and depicts hands in the process of removing the cane tip and engaging the cord lock.

Written by Janie Salguero, COMS
Blind Rehabilitation Specialist

Low Vision and VIST Roster Merger

At the 2019 Blind Rehab Service (BRS) Conference in Tulsa, Oklahoma, BRS Program Office outlined several initiatives to expand access to care and enhance service delivery for Veterans with a visual impairment. These FY20 BRS Program Initiatives included creating a consolidated roster for streamlined care coordination and ensuring a VIST Review is offered, at least annually, to all identified Veterans experiencing functional difficulty due to visual impairment.

On September 1, 2020, BRS Program Office made the merger of our Low Vision Roster with our Visual Impairment Service Team (VIST) Roster.

This has been and continues to be a massive undertaking that has taken great coordination on all levels.

Ultimately, this means that more Veterans will be eligible and have access to Blind Rehab Services and its continuum of care. Simply put: the following Veterans may benefit from Blind Rehab Services:

- Veterans that are diagnosed legally blind
- Veterans that are diagnosed low vision
- Veterans that have functional vision loss

As long as you meet one of these criteria and are enrolled in the VA Healthcare system, you are eligible for Blind Rehab Services. To find out more , check in with your local VIST Coordinator.

As a reminder it is still important to contact your local benefits and billing office to check on potential co-payments for services 866-347-2353. VIST Coordinators are available to help facilitate these calls as well.

We look forward to the coordinating additional services and providing access to care for more Veterans. Welcome aboard!

Written by: Nicholas Smedes, MA, CVRT

VIST Coordinator at VAPAHCS

Smart White Cane for the Blind

WBRC's Technology Consultant, Brian Higgins was one of a small group of recipients of a VA Spark Seed, Spread Innovation Program, for his Smart White Cane for the Blind iNet Innovation Network Spark, Seed, Spread Program This device utilizes sensor technology for object detection and avoidance which can be added to a standard white cane.

Eventually, the technology will get to a point where a small smart sensor package can be added to any mobility device such as white cane, four-wheel walker, scooter, wheelchair, etc. to offer extra sensory input for the visually impaired. This sensor package will have between two to three high tech sensors in addition to a bracket for iPhone and a light.

Currently, this is not a prosthetics item for Veterans, but will hopefully be available in the future!

Written by: Brian Higgins, CCAI-ATI
Technology Consultant

Spark-Seed-Spread
INNOVATION INVESTMENT PROGRAM
Powered by the VHA Innovators Network

Photo (Above): Logo of the Spark-Seed-Spread Innovation Investment Program, powered by the VHA Innovators Network.

Photo (Above): The front of the VA Palo Alto Health Care System Palo Alto Campus with two rows of the American Flag.

Photo (Above): The Choose VA logo

Blind Rehab Service Exemplifies Excellence During 2020 CARF Accreditation Survey

Photo: Gold circular Seal with text Aspire to Excellence, CARF Accredited

The VAPAHCS Blind Rehabilitation Service (Western Blind Rehabilitation Center) participated in a survey by the Commission on Accreditation of Rehabilitation Facilities (CARF) on December 7th. 2020.

What is CARF?

The Commission on Accreditation of Rehabilitation Facilities (CARF) provides accreditation services worldwide at the request of health and human service providers. Through accreditation, CARF assists service providers in improving the quality of their services, demonstrating value, and meeting internationally recognized organizational and program standards.

The accreditation process applies sets of standards to service areas and business practices, typically during an on-site survey. However, due to the COVID-19 Pandemic, the survey was conducted virtually this year.

Accreditation is an ongoing process, signaling to the public that a service provider is committed to continuously improving services, encouraging feedback, and serving its population. Accreditation also demonstrates a provider's commitment to enhance its performance and distinguish its service delivery.

For more information about CARF International please visit the website: www.carf.org/home/

WBRC Survey Results

The WBRC received a 3-year Accreditation, a testament to our compliance with CARF's high standards.

Congratulations to everyone involved in WBRC's successful accreditation survey!

Photo (Above): Woman typing on a laptop with a virtual meeting on the screen.

2020 WBRC OUTCOMES SUMMARY
Outcome Measures at the WBRC

The Western Blind Rehabilitation Center (WBRC) measures outcomes in several areas each fiscal year (FY) to ensure quality improvement and service delivery excellence. Outcome measures are collected from a variety of sources representing the WBRC's key stakeholders. This summary reflects the FY 2020 annual analysis of the WBRC outcome measures. Due to the COVID-19 Pandemic, WBRC outcomes data were limited to the first two quarters of the Fiscal Year with the exception of u-SPEQ Satisfaction Survey, for which there is data for the entire year.

WBRC Admissions:

The WBRC is committed to ensuring that all eligible patients, who require blind rehabilitation training, receive access to care in a timely manner. The following demographics are listed for information about the patients who received training from WBRC staff this year, inpatient and Telehealth programs.

Programs Served

Regular	46
Computer	39
Dual	6
iProgram	91
CNVR	14
GPS	7
Personal Assistance Device (Echo)	1
ORCAM	24
Power Mobility	3
Two Week	3
Matter of Balance	9
TOTAL	243

Average Length of Stay/Program

Regular	39 Days
Computer	34 Days
Dual	45 Days
iProgram	28 Days
CNVR	18 Days
GPS	31 Days
Personal Assistance Device (Echo)	8 Days
ORCAM	10 Days
Power Mobility	24 Days
Two Week	14 Days
Matter of Balance	26 Days
AVERAGE LENGTH OF STAY	25 Days

Period of Service

World War II	18
Pre-Korean	11
Korean	38
Post-Korean	20
Vietnam	113
Post-Vietnam	31
Persian Gulf	12
OIF/OEF/OND	0

Eye Condition

Age Related Macular Degeneration	73
Other	71
Glaucoma	53
Diabetic Retinopathy	17
Trauma	5
Retinitis Pigmentosa	6
Stroke	0
Optic Atrophy	11
Retinal Detachment	7

Age

Teens (10's)	0
Twenties (20's)	0
Thirties (30's)	1
Forties (40's)	3
Fifties (50's)	24
Sixties (60's)	43
Seventies (70's)	81
Eighties (80's)	58
Nineties (90's)	31
Hundreds (100's)	2

Branch

Army	102
Marines	24
Air Force	47
Navy	54
Coast Guard	2
Merchant Marines	2
U.S. Public Health Service	2

Photo (Above): Veteran and instructor, wearing masks, seated working at desk on iPhones.

Photo (Above): Orientation & Mobility staff assisting a seated Veteran with sunglasses during a glare assessment.

Effectiveness Measures:

The WBRC developed clinically based 'pre' and 'post' training assessments and surveys to improve the effectiveness of treatment. The following highlights Veteran's improvements in each area for FY 2020:

- **Technology:** iProgram- 80% of participants reported improved levels of satisfaction following training. Accessibility training on technology devices: A majority reported increased ease of use and satisfaction in using accessibility software on a technology device.

- **Orientation & Mobility**- 75% detected drop-down curbs after training, resulting in greater safety for independent travel.

- **Matter of Balance (MOB)**- At the time of program completion, 100% of MOB participants rated themselves "Sure/ Very Sure" to the question, "I can become more steady on my feet."

- **Visual Skills** Participants' most common complaint is difficulty reading. After Visual Skills training, 91% of participants were able to read a street sign at a greater distance and 92% demonstrated improved reading comprehension scores.

- **Manual Skills** - Most Veterans who participated in Manual Skills, reported improved ease at making accurate measurements independently. 91% of Veterans surveyed rated improvements of confidence in their ability to complete manual tasks and use of tools independently.

- **Living Skills**- 88% of participants reported increased ease and satisfaction for with their ability to store and retrieve information such as grocery lists, reminders and phone numbers. The majority of participants reported increased

satisfaction in their ability to manage of activities of daily living, including phone dialing, identify currency, recording information, and meal preparation.

- **Rehabilitative Nursing**- All (100%) Veterans trained by WBRC Nursing Services to use a Pik Stik reported that it was "easy to use" at the end of training. All Veterans who attended the Nursing Education forum also reported increased knowledge in health topics discussed.

- **Recreation Therapy** - As an integral part of the team at WBRC, Recreation Therapy, Psychology and Social Work co-facilitate a relaxation class once a week to address stress reduction in Veterans at the WBRC. 1:1 sessions also assist in community re-entry and quality of life. Of those attending, 88% reported reductions in their stress level at the end of the session.

- **Satisfaction Survey Information**- The WBRC uses a variety of measures to ensure individualized expectations of each participant and stakeholder are met, including the u-SPEQ Satisfaction Survey. According to Q1-2 survey results, 100% of participants stated they would recommend the program to others, and 99% that their goals were met and enabled them to do things better. Q3-4 results (reflecting remote care via Telehealth only), revealed 100% of participants stated they would recommend the program to others, and 96% stated that their goals were met and enabled them to do things better.

Written By: Katherine Taylor MS., CLVT, CCC-SLP, CBIS

Comprehensive Neurological Vision Rehabilitation (CNVR) Coordinator

Staff Updates

- **Daniel Penrod,** M.Ed., CLVT, COMS started his new role as WBRC Technology Coordinator in March 2020.

- **Erika Ashley Banaga** joined WBRC as a Registered Nurse on December 2019. She obtained her Bachelor of Science in Nursing at Western Governors University in March 2020. Prior to working at WBRC, she worked in Sub-acute and Skilled Nursing Facility as a licensed nurse for 8 years focusing mainly in acute on chronic medical conditions.

- **Charles N. Davis III** joins the WBRC as a part time Recreation Specialist. His starting date was in May 2020 but he didn't officially begin duties due to COVID until October 2020. Charles previously worked as a Recreation Therapy Assistant for 360 CLC from 2009 - 2020, and as a Recreation Therapy transportation driver from 2007 - 2009.

- **Caitlin Curtis** joined the Visual Skills department at WBRC in June of 2020 after completing an internship at the VA. Caitlin studied Orientation & Mobility as well as Low Vision Therapy at San Francisco State University.

- **Anna Schirripa** joined the WBRC in June of 2020. She came from a Lighthouse in Florida where she worked for several years. Anna graduated from Florida State University in 2015 with a degree in Visual Disabilities.

- **Tamika Meade** joined the WBRC in March 2020 as a CATS instructor. She graduated from the University of Massachusetts

- **Kelby Klein** joined the WBRC as a Visual Skills instructor in June 2020. She graduated from San Francisco State University where she received her Masters in Special Education and studied Orientation & Mobility and Low Vision Therapy.

- **Christina Rivera** joined the WBRC as a Living Skills Instructor in May 2020. Christina graduated from the University of Florida with a Masters in Occupational Therapy in 2017.

Farewells- thank you for your dedicated service to WBRC

- **Rachel Smith** has taken a new position with the Alcohol and Drug Treatment Program and Mental Health Outpatients at the Reno VA Medical Center in Nevada. She worked as a Recreation Therapist at the WBRC for 8 years and prior to that at the Menlo Park Division CLC. She also coordinated the VAPAHCS Golden Age Games Veteran Team for 11 years, which included several blind Veterans.

- **Caitlin Ewing** transferred to a new position as Social Worker in the Transition and Care Management Clinic. Caitlin was a part of the WBRC for a number of years, including as a Social Work Intern, as VIST Coordinator, and most recently as WBRC Social Worker.

- **Frederick 'Freddy' Nethercott** has transferred to another department within the VA. Freddy started at the WBRC in 2010 as an LVN. During his time at WBRC, he supported wound care, was a champion for flu and COVID vaccines, unit safety, and prosthetic devices, and was a preceptor to new nursing staff.

- **Marverick Mallari** has moved on to a different specialty within the VA. He has been with the WBRC for 4 years, where he started out as a new grad RN.

- **Chris Kliks** retired from the WBRC in October 2020. He was a technology instructor for 7 years.

- **Alex Gabel** moved to a new position as the Admissions Coordinator at Central Blind Rehabilitation Center at Hines VA in Illinois. Alex began his WBRC career as an CVRT intern in in 2016, joined the staff as a Living Skills and Technology instructor, and then as WBRC Admissions Coordinator.

Veteran's Voices

"The groups were the highlight of my week." - Navy Veteran

"For the first time in a long time, I feel like I understand what's going on my computer and I can navigate pop ups." –Marine Veteran

"The instruction by my Living Skills and Visual Skills were outstanding and I am very appreciative of the assistance, training and care that I received."
–Army Veteran

"I am so excited by the Amazon Echo that I have already self-purchased other Echo Dots for other rooms, as my wife and I love it so much!" -Navy Veteran

"During this pandemic, Telehealth has kept me positively learning something. Even if it is things that I am reviewing, it is keeping me with things to do. Being a part of the virtual group sessions have had an absolutely positive impact for me!" – U.S. Public Health Service Corps Veteran

"Sure, I'll endorse it. I don't think I'm qualified to say this, but this allowed me to learn new things that I never imagined that I could. I'm still learning, but this opened the door for me to do it." – Army Veteran

VA Palo Alto Health Care System

Western Blind Rehabilitation Center (124)

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