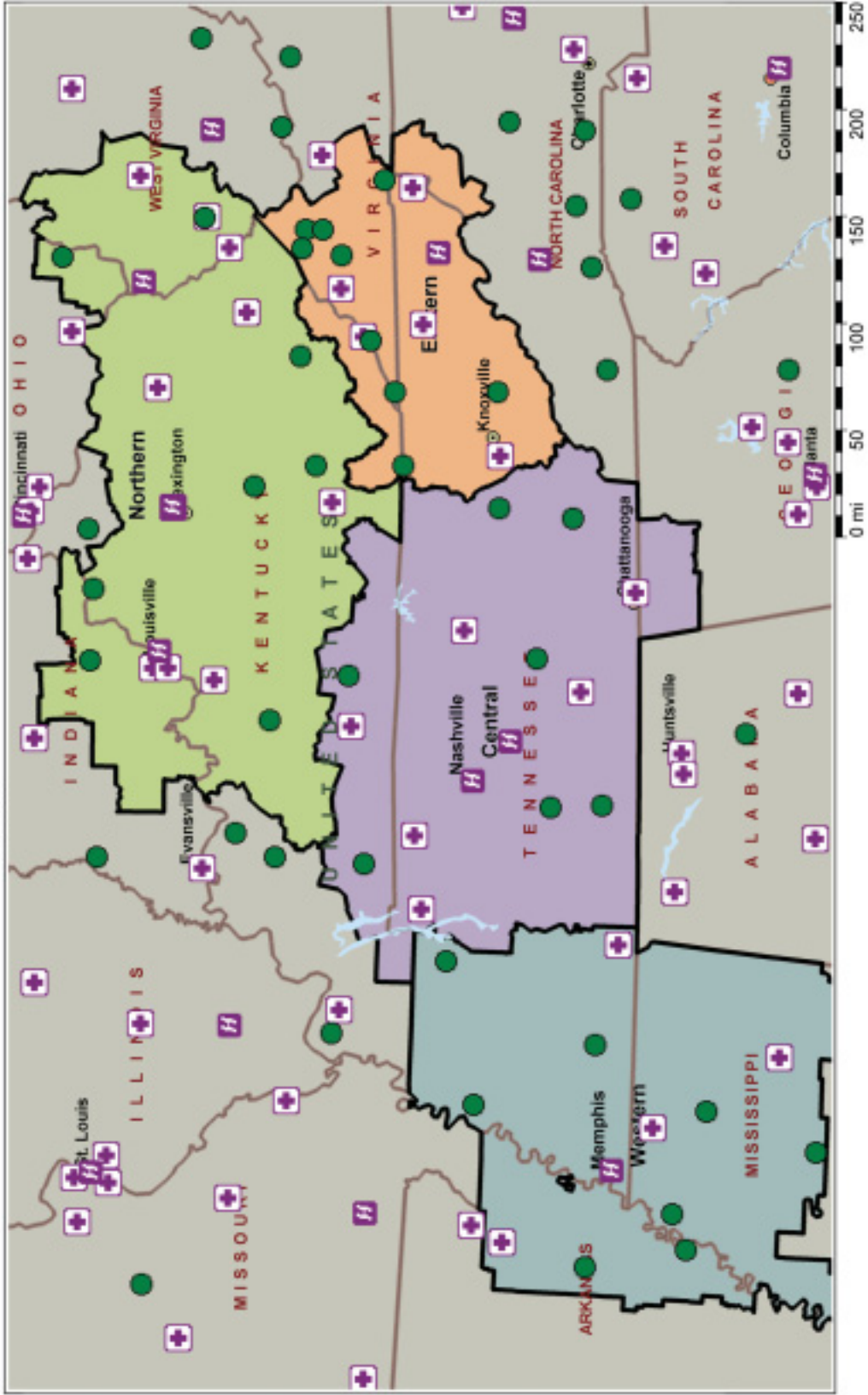


VISN 9



- Pushpins**
- VA Clinic
- VA Hospital
- Planned New CBOCs
- Markets**
- Central
- Eastern
- Northern
- Western

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CARES DECISIONS FOR VISN 9

CARES Commission Recommendation

I Evaluate Building a Replacement Hospital

Louisville VAMC

- 1 The Commission concurs with the DNCP proposal that VA study the feasibility of building a replacement medical center for the Louisville VAMC in proximity to the University of Louisville, including the possibility of shared infrastructure with the medical school and the VBA office.
- 2 Due to the poor environment of care and overcrowding at the current medical center, the Commission recommends the study commence immediately, focus on building a replacement hospital near the University of Louisville, and be completed within a short time so that corrective actions can begin in the very near future.

Secretary's Decision

I Evaluate Building a Replacement Hospital

Louisville VAMC

VA will study the need for a replacement hospital for the Louisville VAMC. The Commission recognized that the Louisville VAMC is in need of renovation, that there is an opportunity to partner with the University of Louisville, and that there is additional potential for collocation of a VBA presence at a new Louisville facility.

VA will undertake a comprehensive study of the feasibility, cost-effectiveness, and impact of replacing the current Louisville VAMC with a new state-of-the-art medical center. The study will focus on access to and quality of care as well as referral patterns with other regional medical centers, the potential for collaboration with the University of Louisville, and collocation with the Veterans Benefits Administration.

VA will begin development of a template that will define the considerations and parameters of the study and act as a guide for the study process. Upon completion of the template, VA will assign a multidisciplinary team with appropriate skills and experience to conduct the study. The team will use support from outside contractors and other subject matter experts as needed to ensure it has access to all of the skills necessary to complete the study effectively and efficiently. The study will include collaboration with stakeholders to ensure that their comments are solicited and included in the process.

VA will complete this study by the end of 2004.

CARES Commission Recommendation

II Campus Realignment

Lexington VAMC

- 1 The Commission does not concur with the DNCP proposal on transferring current outpatient care and nursing home care services from Leestown to Cooper Drive. The Commission recommends that the Lexington-Leestown campus remain open and continue to provide nursing home, outpatient care, and administrative services.
- 2 The Commission recommends that the VA move swiftly to secure an enhanced use lease with Eastern State Hospital and/or the Kentucky Department of Veterans Affairs, as VA would not have to move from the Leestown campus in order for Eastern State Hospital to begin using this space. The Commission recommends that plans be developed to make the footprint of the Leestown campus smaller, making most of the campus available for disposition and/or enhanced use leasing.

Secretary's Decision

II Campus Realignment

Lexington VAMC

The Secretary will not consider consolidation of the Leestown campus at Cooper Drive, but VA will pursue opportunities to reduce the footprint of the Leestown campus.

To ensure that VA makes most effective use of existing buildings and land, VA will develop a Master Plan for the Leestown campus. While the mission of the Leestown campus will remain unchanged, the Master Plan will propose an efficient, cost-effective, and appropriately sized footprint that will reduce vacant and underused space on the campus. The Master Plan will consider enhanced use lease opportunities and will ensure that any plan for alternate use or disposal of VA property serves to enhance the Department's mission.

VA will continue to work closely with its stakeholders to ensure that development and implementation of the Master Plan is managed effectively.

VA will complete the Master Plan by the end of 2004 (*Reference – Excess VA Property: Crosscutting*).

CARES Commission Recommendation**III Campus Realignments*****Nashville and Murfreesboro VAMCs***

The Commission concurs with the DNCP proposal to consolidate services at Murfreesboro and Nashville, and recommends that the VISN proceed with its plan for providing outpatient surgical services at both campuses.

Secretary's Decision**III Campus Realignments*****Nashville and Murfreesboro VAMCs***

VA will continue to consolidate services between Nashville and Murfreesboro. Nashville will provide inpatient acute medicine and surgery programs, while Murfreesboro will provide acute and long-term care psychiatry services as well as nursing home services. Both facilities will retain primary care and outpatient surgery. This consolidation will improve quality of care through more effective care coordination and will enhance efficiency by reducing duplicative services between the two sites.

VA is committed to minimizing any impact on patients, employees, and the community as it manages this transition and will continue to work closely with its stakeholders to ensure that development and implementation of this transfer is managed effectively.

The VISN will include a plan for managing the transition in its FY 2005 strategic planning submission.

CARES Commission Recommendation**IV Inpatient Medicine and Surgery**

- 1** The Commission concurs with the DNCP proposals to increase inpatient medicine services in the Central and Western markets through a mix of in-house expansions (Nashville and Memphis) and community contracts (Chattanooga in the Central market and in outlying areas as available in the Western market).
- 2** The Commission concurs with the DNCP proposal on contracting for excess demand, particularly in the Charleston, WV area.

Secretary's Decision

IV Inpatient Medicine and Surgery

VA will meet increases in demand for inpatient medicine and surgery in VISN 9 through use of existing authorities and policies to contract for care in Chattanooga, Charleston, WV, and other areas in the VISN where necessary. VA also will increase capacity through in-house expansions in Nashville and Memphis (*Reference – Contracting for Care: Crosscutting*).

CARES Commission Recommendation

V Outpatient Primary and Specialty Care

- 1** The Commission concurs with the DNCP proposal to expand services at current sites of care, to expand the use of telemedicine, and to use community contracts, but notes that this is not an adequate solution to the substantial access and capacity deficiencies in this VISN, which cannot be met without additional sites of care.
- 2** The Commission recommends that the Secretary and USH utilize their authority to establish new CBOCs within the VHA medical appropriations without regard to the three priority groups for CBOCs outlined in the DNCP.

Secretary's Decision

V Outpatient Primary and Specialty Care

VISN 9 has significant access gaps for primary care. VA will meet current and forecasted access and capacity gaps in the VISN by expanding existing sites of care, increasing use of telemedicine, and using existing authorities and policies to contract for care where necessary.

The VISN also will develop new CBOCs through the National CBOC Approval Process. VISN 9 has 32 new CBOCs targeted for priority implementation by 2012:

| Parent Facility | Planned New Facility Name | State |
|-----------------------|---------------------------|-------|
| Mountain Home VAMC | Holston Medical Clinic | TN |
| Mountain Home VAMC | Pennington Gap Clinic | VA |
| Mountain Home VAMC | Thompson Clinic | VA |
| Mountain Home VAMC | Haysi Clinic | VA |
| Mountain Home VAMC | Davenport Clinic | VA |
| Mountain Home VAMC | Davis Clinic | VA |
| Mountain Home VAMC | West Lee County Clinic | VA |
| Mountain Home VAMC | Jellico | TN |
| Mountain Home VAMC | Pigeon Forge | TN |
| Memphis VAMC | Pontotoc County | MS |
| Memphis VAMC | Tunica | MS |
| Memphis VAMC | Grenada | MS |
| Memphis VAMC | Paris | TN |
| Memphis VAMC | Bolivar | TN |
| Memphis VAMC | Phillips County | AR |
| Memphis VAMC | Wynne County | AR |
| Memphis VAMC | Dyer County | TN |
| VATVHS – Murfreesboro | Maury County | TN |
| VATVHS – Murfreesboro | Athens | TN |
| VATVHS – Murfreesboro | Harriman | TN |
| VATVHS – Murfreesboro | McMinn County | TN |
| VATVHS – Nashville | Glasgow | KY |
| VATVHS – Nashville | Giles County – Pulaski | TN |
| VATVHS – Nashville | Hopkins County | KY |
| Huntington VAMC | Gallipolis | OH |
| Huntington VAMC | Logan | WV |
| Louisville VAMC | Scott County | IN |
| Louisville VAMC | Grayson County | KY |
| Louisville VAMC | Carroll County | KY |
| Lexington VAMC | Berea | KY |
| Lexington VAMC | London | KY |
| Lexington VAMC | Perry County | KY |

These new sites of care will help the VISN, which currently is below access standards in all four of its markets, to meet national access standards (*Reference – Contracting for Care, Community-Based Outpatient Clinics: Crosscutting*).

CARES Commission Recommendation

VI Mental Health Care

- 1** The Commission does not concur with the DNCP proposal and recommends maintaining inpatient psychiatric and outpatient mental health services in at least all current locations until mental health services VISN-wide have been reevaluated.
- 2** The Commission recommends that VISN 9 leadership complete a thorough review of mental health services in the VISN, including in CBOCs, and develop and implement a plan to provide an appropriate level of services.
- 3** The Commission recommends that acute inpatient mental health services be provided with other acute inpatient services whenever feasible.
- 4** The Commission recommends that additional enhanced use lease opportunities with the Commonwealth of Kentucky be explored.

Secretary's Decision

VI Mental Health Care

The CARES process identified significant access and capacity gaps for mental health services throughout VISN 9. The Secretary recognizes the importance of availability of and access to mental health services for veterans and is committed to ensuring that all VISNs provide comprehensive and accessible mental health services. This commitment will be reflected in the mental health strategic plan scheduled for completion in August 2004.

In the interim, VISN 9 has developed and is in the process of implementing a plan to improve mental health services. That plan will be coordinated with the VA Mental Health Strategic Plan and incorporated into the FY 2005 VISN strategic planning submission.

The VISN also will maintain inpatient psychiatric and outpatient mental health services in all current locations until mental health services VISN-wide have been reevaluated (*Reference – Mental Health: Crosscutting*).

VA will explore enhanced use lease opportunities with the Commonwealth of Kentucky.

CARES Commission Recommendation**VII VA/DoD Sharing**

The Commission concurs with expansion of space for primary care and outpatient mental health services at the Fort Knox CBOC.

Secretary's Decision**VII VA/DoD Sharing**

VA will work with DoD to expand space for primary and outpatient mental health services at the Fort Knox CBOC (*Reference – VA/DoD Sharing: Crosscutting*).

CARES Commission Recommendation**VIII Special Disability Programs*****Spinal Cord Injury/Disorder (SCI/D)***

The Commission concurs with the DNCP proposal on the expansion of SCI/D beds at Memphis. VA should conduct an assessment of acute and long-term bed needs for SCI Centers to provide the proper balance of beds to better serve veterans and reduce wait times.

Secretary's Decision**VIII Special Disability Programs*****Spinal Cord Injury/Disorder (SCI/D)***

As part of the implementation process, VA will validate the number of SCI/D beds to ensure the appropriate need for and distribution between acute and long-term beds. Validation also will consider referral patterns as well as location and inter-VISN collaboration as appropriate. Implementation plans for expansion of SCI/D beds in Memphis will be included in the FY 2005 VISN strategic planning submission (*Reference – Special Disability Programs: Crosscutting*).

Secretary's Decision**IX OneVA Collaborations**

VA will transfer approximately 50 acres of land from the Mountain Home VAMC to the National Cemetery Administration for cemetery expansion. VA will develop a plan for this transfer by September 2004 (*Reference – OneVA Collaboration: Crosscutting*).