

Pushpins

Markets

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CARES DECISIONS FOR VISN 18

CARES Commission Recommendation

Small Facility Phoenix and Prescott VAMCs

The Commission concurs with the DNCP proposal to retain patients at Prescott who would have been referred to Phoenix.

Secretary's Decision

Small Facility Phoenix and Prescott VAMCs

Both the Phoenix and the Prescott VAMCs have experienced workload increases in the past five years and project further increases through 2012. While the Prescott VAMC has a small inpatient capacity of 25, the Phoenix VAMC is rapidly running out of space. With room to expand at Prescott, VA will proceed with plans to more effectively manage care in the region by retaining patients at Prescott who would have been referred to Phoenix. This will enhance services and access for veterans living in the Prescott area and make space available at the Phoenix VAMC to absorb increasing demand. The Prescott VAMC also will increase its out-patient specialty care capability, reducing the need to refer patients to Phoenix.

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

The VISN will submit a plan for this transition in its FY 2005 strategic planning submission.

CARES Commission Recommendation

Mission Change – Study Feasibility of Closing Big Spring VAMC

- 1 The Commission concurs with the DNCP proposal insofar as it relates to studying the possibility of no longer providing health care services at Big Spring. The study should take into account the input of stakeholders regarding access to care.
- The Commission recommends that VA establish a clear definition and clear policy on the critical access hospital (CAH) designation prior to making a decision on the use of this designation.

Secretary's Decision

Mission Change – Study Feasibility of Closing Big Spring VAMC

During preparation of the Draft National CARES Plan, VA found it did not have sufficient information to make a decision about a proposal to close the Big Spring VAMC and develop a Critical Access Hospital (CAH) in the Odessa–Midland area. Recognizing that a satisfactory analysis had yet to be completed, the CARES Commission agreed VA needed to continue to study the potential of closing inpatient beds at the Big Spring VAMC and transferring them to a CAH facility in the Odessa–Midland area.

VA will proceed with a study of the feasibility of closing inpatient care and transferring inpatient services from the Big Spring VAMC to the Odessa–Midland area. Part of that study will include analysis of what type of facility should be developed in the Odessa–Midland area. While the DNCP recommended a CAH, in its report the Commission found that VA needed a more complete definition for the CAH concept. VA is now in the process of developing a "Veterans Rural Access Hospital" (VRAH) policy that will provide a detailed definition and framework for assessing the clinical and operational characteristics of small and rural facilities. This policy will be completed in June 2004. The VRAH policy will be used to determine if the Odessa–Midland area would be an appropriate location for such a facility and what the appropriate scope of practice should be based on projected demand for care. The VISN will consider comments from stakeholders as part of the feasibility study.

The study, including the incorporation of the VRAH policy, will be completed by the end of 2004 and the results will be included in the VISN FY 2005 strategic planning submission (*Reference – Critical Access Hospital: Crosscutting*).

CARES Commission Recommendation

III Inpatient Care

- 1 The Commission concurs with the DNCP proposal to address inpatient medicine access and capacity issues through renovation, reopening closed units, and contracting for care.
- 2 The Commission recommends that VA ensure that it has quality criteria and procedures for contracting and monitoring service delivery, as well as the availability of trained staff to negotiate cost-effective contracts.
- The Commission concurs with the DNCP proposal to meet increasing demand for inpatient psychiatry by expanding services at Phoenix, Tucson, and Albuquerque.

Secretary's Decision

III Inpatient Care

VA will meet the need to enhance access to and expand capacity for inpatient care through renovation, reopening of closed units, and using existing authorities and policies to contract for care where necessary. VA will meet increasing demand for inpatient psychiatry by expanding services at Phoenix, Tucson, and Albuquerque (*Reference – Contracting for Care: Crosscutting*).

CARES Commission Recommendation

IV Outpatient Care

- The Commission concurs with expanding services at existing sites of care, but notes that this is only a partial solution to capacity and access issues in VISN 18.
- 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

IV Outpatient Care

The VISN will meet increases in demand for outpatient care through expansion, renovation, new construction, and use of existing authorities and policies to contract for care where necessary.

VA will develop new CBOCs in coordination with the National CBOC Approval Process. VISN 18 has four CBOCs targeted for priority implementation by 2012:

Parent Facility	Planned New Facility Name	State
Albuquerque VAMC	Albuquerque	NM
Tucson VAMC	Urban 1	AZ
Tucson VAMC	Urban 2	AZ
El Paso OPC	East El Paso	TX

These four CBOCs will enhance services to veterans in VISN 18 by relieving space deficits at crowded VA facilities (*Reference – Contracting for Care*, *Community-Based Outpatient Clinics: Crosscutting*).

CARES Commission Recommendation

V VA/DoD Sharing

- The Commission recommends that there be a clear commitment from DoD to expand the existing VA/DoD joint venture with William Beaumont Army Medical Center. Predicated upon VA having this commitment, the Commission concurs with expanding the VA/DoD joint venture, including inpatient beds staffed and operated by VA and additional outpatient services.
- The Commission concurs with the DNCP proposal to collaborate with DoD in providing primary care services for DoD personnel at the Mesa CBOC.

Secretary's Decision

V VA/DoD Sharing

VA will pursue expansion of the existing joint venture with the William Beaumont Army Medical Center.

VA will pursue a DoD collaboration to provide primary care services for DoD personnel at the Mesa CBOC (*Reference – VA/DoD Sharing: Crosscutting*).

CARES Commission Recommendation

VI Extended Care

- 1 The Commission concurs with the DNCP proposal on the need for renovation of nursing homes in VISN 18.
- The Commission recommends that prior to taking any action to reconfigure or expand long-term care capacity or replace existing long-term care facilities VA should develop a long-term care strategic plan. This plan should be based on well-articulated policies, address access to services, and integrate planning for the long-term care of the seriously mentally ill.

Secretary's Decision

VI Extended Care

VA will develop a long-term care strategic plan based on well-articulated policies. Until VA completes a long-term care strategic plan, it will only proceed with maintenance and life safety projects at existing long-term care facilities that are necessary to ensure the quality and safety of patient care (*Reference – Long-Term Care: Crosscutting*).

CARES Commission Recommendation

VII Enhanced Use

The Commission concurs with the DNCP proposal for the Phoenix and Albuquerque enhanced use leasing projects.

Secretary's Decision

VII Enhanced Use

VA will pursue existing enhanced use lease opportunities at the Phoenix and Albuquerque VAMCs. Decisions made to reuse or dispose of VA property will serve to enhance the Department's mission (*Reference – Excess VA Property: Crosscutting*).

CARES Commission Recommendation

VIII Research

The Commission concurs with the DNCP proposal on the need to improve research capabilities to enhance patient care and physician recruitment.

Secretary's Decision

VIII Research

VA will continue to explore opportunities to enhance research capabilities in VISN 18.

Secretary's Decision

IX One VA Collaboration

VA will evaluate transfer of land from the Prescott VAMC to NCA for expansion of the columbarium. An assessment of the potential for this collaboration will be completed by September 2004 (*Reference* – OneVA *Collaborations: Crosscutting*).