

2009-2010 Biennial Report



Caring for America's Veterans.

VA Nebraska-Western Iowa
Health Care System



What We Believe

Mission:

To maintain and improve the health and well being of network Veterans.

Vision:

To be a patient-centered, integrated organization providing excellence in health care, research and education. Be an active federal, state and community partner and a back-up for national emergencies. Be an organization where people choose to work.

Values:

- Trust
- Respect
- Excellence
- Commitment
- Compassion
- Empowerment
- Continuous Improvement
- Collaboration

A Message from the Director

We are proud to continue our goals of finding new and innovative ways to provide high-quality health care services to our Veterans who have served us.

These past two years, we have taken great strides to provide improved access to health care with new community based outpatient clinics in three communities in our service area. We continue to expand our Home Based Primary Care services to offer a more versatile health care experience for our Veterans.

We have also taken the lead in developing a Patient Aligned Care Team (PACT) model that is transforming the way that health care is provided within the Veterans Healthcare Administration. This model involves Veterans in the health care decision-making process for how their care is provided. It provides additional convenience and encompasses multidisciplinary teams of health care specialties.

Our goal is to be a patient-centered, integrated health care organization for Veterans, where we provide excellent health care, research and education. We also want to be an organization where people choose to work, be an active community partner and be a back up for national emergencies.

Thank you for allowing us to serve you, America's Veterans.

Al Washko
VA NWIHCS Director

2009-2010 Executive Leadership Team

From Left:

Nancy A. Gregory, FACHE
Associate Director

Cynthia S. Sestak, FACHE
Assistant Director

Albert B. Washko
Director

Thomas G. Lynch, M.D.
Acting Chief of Staff

Eileen M. Kingston, MPA, BSN, RN, CNA
Associate Director for Patient Care/Nurse Executive



Staff Changes

Assistant Director

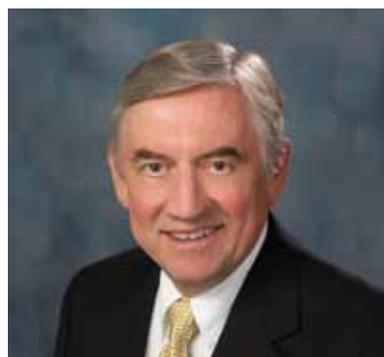
Cynthia Sestak, FACHE (top), left VA NWIHCS November 2010, after serving in various positions since 1991 to become the practice administrator at the Physician Network in Grand Island. She was assigned Assistant Director in June 2005. Ms. Sestak was replaced by Angela Williams (top right), who is serving as interim assistant director at the time of this publication. Ms. Williams is a clinical pharmacist by trade, and also serves as the pharmacy director at the Grand Island VA. Ms. Williams is active with the Nebraska Medical Association Alliance and the Nebraska Pharmacy Association.

Chief of Medicine

Laurel Preheim, M.D., (middle left) retired after serving more than 35 years in the VA health care system, including eight years as chief of medicine. Dr. Preheim was replaced in July 2010, by Gary Gorby, M.D., (middle right) who has been an infectious disease expert and staff physician at VA NWIHCS, Omaha for more than 20 years. Dr. Gorby will also serve as the associate chairman of medicine for Veterans Affairs at the University of Nebraska Medical Center and the Creighton University School of Medicine.

Chief of Staff

Rowen Zetterman, M.D., (bottom left) left VA NWIHCS to accept a position as the dean of medicine at Creighton University Medical Center. Thomas Lynch, M.D., (bottom right) is the acting chief of staff at VA NWIHCS.



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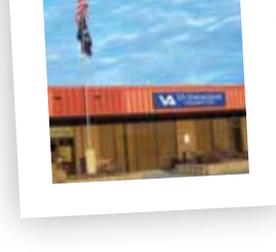
Lincoln CBOC
600 South 70th Street
Lincoln, NE 68510
(402) 489-3802



Grand Island CBOC and
Community Living Center
2201 North Broadwell Avenue
Grand Island, NE 68803
(308) 382-3660



Bellevue CBOC
2501 Capehart Road
Bellevue, NE 68113
(402) 591-4500



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(308) 995-3760

Norfolk CBOC
710 South 13th, Suite 1200
Norfolk, NE 68701
(402) 370-4570

North Platte CBOC
600 East Francis, Suite 3
North Platte, NE 69101
(308) 532-6906

Shenandoah CBOC
512 South Fremont
Shenandoah, IA 51601
(712) 246-0092

Defining Excellence in 2009

Canteen Awards

The Veterans Canteen Service (VCS) recognized VA NWIHCS's Canteen Service (top left) with the "best" in VA for 2007 and 2008. (From left) Bob Harris, Chief, Canteen Service at VA NWIHCS; Flishia Bailey, regional manager for Region 8, VCS; and Roy Mills, chief, Food Services at VA NWIHCS; were presented with the award during a ceremony in June 2009. In 2008, the VA NWIHCS Canteen Service increased its sales by 14 percent, which benefited its customers because profits are returned in the form of promotional funds used for special events. The VA NWIHCS staff operates canteens at its medical center in Omaha and the clinics in Lincoln and Grand Island. VCS operates retail stores, food services, vending services and barber shops for America's Veterans, families, caregivers, VA employees, volunteers and visitors.

Communications Awards

Public affairs was honored for two of their news media outreach initiatives at the 2009 Veterans Health Administration Communications Excellence Awards competitions. Will Ackerman, public affairs officer (top right) and Maggie Oldham, deputy public affairs officer, earned first place in the Media Division-Print Journalism category for a story that was published in the *Omaha World-Herald*, "Serving those who served U.S." They earned third place in the Media Division-Broadcast category for a program called "Not Alone," which is a one-hour program that airs on a local radio station.

Grand Island Pharmacists Recognized

Three VA NWIHCS, Grand Island pharmacists were honored by the University of Nebraska Medical Center College of Pharmacy. (Left to right) Drs. Lourdes Heuermann, Janelle Sellers and Jeremy McIntyre (bottom) were presented the distinguished honor of Preceptor of the Year Award for the 2008-2009 academic year.

The award is presented by the senior class each year to a volunteer faculty member who, in the opinion of the students, contributed significantly to their practical and experiential education and training. In addition, the award recognizes the recipients for exemplifying the professional values and standards of a model pharmacy practitioner.



DAISY Awards

VA NWIHCS became the first health care system within the Veterans Health Administration (VHA) to bestow the DAISY Award to exceptional nurses. Kami Willett, RN, MSN (middle left) and Tysa Ferguson, RN, BSN (middle right) took the initiative to implement the program at VA NWIHCS, Omaha. They hosted the award's founders, including Bonnie Barnes, in September 2009 at the first award presentation to Dean Degner, RN (bottom right) in Omaha. Kami and Tysa also worked with Walter Reed Army Medical Center in Washington, D.C., to implement the program there in 2010.

Defining Excellence in 2009



Patient Safety Honored with Cornerstone Gold Award

The National Center for Patient Safety (NCPS) recognized VA NWIHCS with a Cornerstone Gold Award for 2009 (top). (From left) Dawn Moore, Venkata Andukuri, Ann Polich, M.D., Mary Elbert and Lara Colton received the award on behalf of VA NWIHCS. The Gold Award is the highest honor bestowed by NCPS. Only facilities that have significantly exceeded required standards for root cause analysis (RCAs) focused on quality, timeliness and quantity are recognized with this award.



Combined Federal Campaign Record

VA NWIHCS had a record-breaking year for Combined Federal Campaign (CFC) contributions in 2009, raising more money than any previous year. Omaha employees were recognized for donating \$77,524, Lincoln \$15,166, and Grand Island \$17,198. These donations help millions of Americans through private organizations that are funded partially through the CFC.

H1N1 Preparedness

The H1N1 flu (Swine Flu) took America by surprise in April 2009. This novel strain was different, because unlike the seasonal flu, the most susceptible were younger people and those with preexisting conditions.

VA NWIHCS had the first confirmed H1N1 case in Nebraska and VHA. Within a few days of a patient showing symptoms during a visit to VA NWIHCS, Omaha Emergency Department, the patient's diagnosis was confirmed. Staff implemented the Hospital Incident Command System to respond to the novel strain, and took steps to preclude its spread within the medical center (bottom). Since this was the first case in VA, staff at VA NWIHCS established a benchmark for responding to the challenges of this new flu strain within VHA. Many of the communication products and processes were used as templates for VHA at other VA facilities.

Rapid Process Improvement Workshops

Through the use of rapid process improvement workshops (RPIW), VA NWIHCS staff have been able to increase overall network awareness and education in areas, including fall prevention and hand hygiene.

These workshops are useful because they allow a quick way to target specific areas without placing them in an improvement plan with a much greater scope, which could lead to certain areas not receiving proper attention.

VA Police Officer of the Year

In April 2009, then officer Jason Brdicko, was named 2008 VA Police Officer of the Year for medium-sized departments. The award nomination stated Brdicko demonstrated exceptional professionalism serving and protecting Veterans and staff.

Increasing Access in 2009

Welcome Home Event

Reaching out to increase awareness of the VA's health care services is a key goal of the Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) Returning Veterans Outreach program. One of the tenets of this is an annual event called Welcome Home. The 2009 event was held at Mahoney State Park in Ashland, Nebraska (top). The 2010 event was held in Grand Island, Nebraska, at the Fonner Park Event Center.

In addition to VA health care representatives, many other agencies participated including the VA Regional Office, Nebraska Department of Veterans Affairs, and the mobile Vet Center. Many Veteran-service organizations also participated including the Paralyzed Veterans of America (PVA), American Legion, and Nebraska Workforce Development. The goal of the event is to educate OEF/OIF/OND Veterans about the benefits they are entitled to. The event in Ashland attracted about 500 people while the Grand Island event attracted about 150 people.

Stand Down for Homeless Veterans

VA NWHCS staff provided free services for homeless Veterans at annual stand downs in 2008 and 2009 (right middle). These services included health screening, eye exams, drug and alcohol counseling, mental health services and footcare. In addition, Veterans received limited free clothing and a hot meal (both at right).

Homeless Veterans who were not enrolled for VA health care benefits registered and received information about the services available to them through VA NWHCS. In addition to VA, representatives from the following community agencies were present to assist homeless Veterans: county Veteran service offices, the Omaha and Lincoln Vet Centers, Nebraska Workforce Development, the Salvation Army, Nebraska Department of Veterans Affairs, Lions Club, and the Omaha GI Forum.

Veterans also met with representatives from the VA to discuss disability benefits that may be available to them. Stand Down is a military term that means service members are removed from the combat field to receive rest and rehabilitation. It is one of many opportunities for the VA to reach out and connect with homeless Veterans to provide them much-needed rest and rehabilitation.



Increasing Access in 2009



VA Suicide Prevention Campaign

Omaha's Metro Area Transit (MAT) buses carried suicide prevention messages from the Department of Veterans Affairs. In June of 2009, 130 MAT buses in Omaha began carry signage (top left) that read, "It takes the courage and strength of a warrior to ask for help . . . If you or someone you know is in an emotional crisis, call 1-800-273-TALK (8255). Press 1 for Veterans."

The local bus public awareness campaign is part of a national effort in 127 U.S. cities. More than 21,000 buses carried the signs. The campaign was the second phase of a national media advertising effort to reach Veterans. Last year, the Washington D.C. area served as the pilot. VA officials said the educational effort was successful based on the significant increase in callers to the national suicide prevention hotline.



Emergency Department Remodel

The emergency department at VA NWIHCS, Omaha underwent a complete transformation, and reopened in December 2008 as a state-of-the-art facility. The new area features the following: individual private exam, life-support rooms with patient toilets; physiological monitoring systems; patient lift systems in five exam rooms that help decrease nursing staff lifting injuries; two patient rooms that are multifunctional to provide standard patient rooms, and psychiatric patient rooms. These rooms have a garage door that can be lowered to limit patient access to only a stretcher, which decreases potential for patient suicide attempts. In addition, a new patient-simulator room (bottom) was added to provide staff and medical students the opportunity to train using a computer-driven simulator mannequin.



Community Based Outpatient Clinics

VA NWIHCS opened or expanded several community based outpatient clinics (CBOC). New clinics opened in Shenandoah, Iowa, (top right) in February 2009, and Bellevue, Nebraska (middle left) in March 2009 (this is colocated at Offutt Air Force Base's Ehrling Bergquist medical facility as part of a Department of Defense -VA initiative).

A VA-staffed clinic opened in November 2008 in Norfolk, Nebraska (middle right), which provides enhanced access for Veterans from the previous contract clinic that provided services to only 250 Veterans. These CBOC openings are part of the VA initiative to improve patient access to VA health care, especially in rural areas. A major expansion was completed at the North Platte, Nebraska CBOC, which nearly doubled the square footage, which added several exam rooms.

Improving Care in 2009

Ambient Experience Magnetic Resonance Imaging System

VA NWIHCS, Omaha became the first in VHA, and one of the only health care facilities in the region to offer the “Ambient Experience”—an innovative, calming and stress-relieving approach to diagnostic imaging suite design (top). The Ambient Experience is a patient-focused system that is part of VA NWIHCS, Omaha’s first-ever in-house magnetic resonance imaging (MRI) system.

The Ambient Experience reassures, coaches and relaxes patient’s about to undergo a medical scan, such as a computerized tomography or magnetic resonance. It creates a new approach to the scanning room—one that is designed from the patient’s point of view. Diagnostic imaging is inherently anxiety producing. The Ambient Experience distracts the patient with self-selected lighting, images and audio.



Emergency Management Coordinator

VA NWIHCS took a major step toward preparing to respond to emergencies and crises by hiring an emergency management (EM) coordinator in November 2008. The EM coordinator led an emergency management committee of key leadership including VA police, engineering, safety, public affairs and the associate director to develop crisis-response plans.

The EM coordinator also proactively trained emergency response staff and employees about how to respond to major and minor emergencies through test drills (bottom left) and exercises (bottom right) that included simulated bomb threats, tornadoes, and other disasters.

The EM coordinator was key in enhancing the Hospital Incident Command System, which provides a framework for key decision-makers to coordinate with medical center leadership to effectively manage crises.



Women Veterans Program

The wars in Iraq and Afghanistan have increased the awareness of providing gender-specific health care for the unique needs of women in uniform. To meet this need, a women Veterans program manager (top middle) was hired at VA NWIHCS to develop programs to increase the quality of health care for women Veterans. Some of the issues addressed include privacy, and women’s health needs including obstetrics and gynecology, and military sexual trauma. A women’s health provider is now available at each of the VA NWIHCS facilities.

Expenditures in 2009



Midwest Mountain Veterans Engineering Resource Center

VA awarded a \$4.1 million grant to VA NWHCS in June 2009 to establish the Midwest Mountain Veterans Engineering Resource Center (VERC) as part of its focus on transforming health care. VA NWHCS, Omaha was one of four VA medical centers nationwide that was selected to host the resource centers.

The resource center staff (top and middle) applies industrial engineering tools and principles to improve health care delivery, safety, effectiveness, timeliness and efficiency. VA established and funded the centers following recommendations from the National Academy of Engineering and Institutes of Medicine to apply industrial engineering tools and principles to achieve transformative improvement to health care in the United States. Peter Woodbridge M.D., Associate Chief of Staff of Quality and Medical Effectiveness at VA NWHCS, is the center's director.

American Recovery and Reinvestment Act

VA NWHCS was awarded \$7.5 million in federal dollars from funds allocated under the American Recovery and Reinvestment Act of 2009. The economic stimulus package, enacted by Congress in February 2009, provided major upgrades or improvements to VA NWHCS facilities. Improvements include repair or upgrade of heating, ventilation and air conditioning systems, roof replacements, domestic water repair and the remodel of Omaha's operating room patient care unit.

2009 Operating Expenses

Personnel Services (Salary/Benefits)	\$141,283,450
All Other (Supplies/Services)	\$117,577,476
Equipment	\$5,121,785
State Veterans Homes	\$9,653,290
Non-Recurring Maint. & Repair	\$7,314,644
Community Nursing Home	\$6,863,102
Trainee Salaries	\$167,983
House Staff	\$7,005,336
Information Technology	\$2,346,633

\$297,333,699

Defining Excellence in 2010

Marching Toward Magnet

Magnet status is an award given by the American Nurses Credentialing Center (ANCC), an affiliate of the American Nurses Association, to hospitals that satisfy a set of criteria designed to measure the strength and quality of their nursing. The Magnet designation process includes the appraisal of four areas: transformational leadership, structural empowerment, exemplary practice, and new knowledge. VA NWIHCS is striving to attain Magnet recognition in the coming year.



Joint Commission Survey

VA NWIHCS was surveyed by The Joint Commission in June 2010 and continues to maintain its accreditation. VA NWIHCS's report card and how it compares to other hospitals and medical centers in the region can be viewed at The Joint Commission's website at <http://www.jointcommission.org>.

Network Star Award Winners

The Midwest Healthcare Network (VISN23) Director's Network Star Award Program is a network-wide recognition program to highlight strong practices at the facility level, and serve as a means for broader application of these practices within the network at large.

Category Winners from VA NWIHCS in 2010 are:

Facility Non-Clinical Process: Fee Referral Unit.

Team Members: Nancy Gregory, John Horner, Jennifer Rosenbalm, Jim Ebel, Mary Adams, Steve Fogerty, Greg Shearer, Barbara Fogarty, Lana Gosch, Jan Youngblood APRN, Tammy Walls, Kevin Smith, Laurie Galloway, Judy Hughes, Linda Potter RN, William Boyd, Ralph Bunting Jr., Kim Shambaugh-Miller RN, Donald McAhren, Michael Steinhoff, Mileka Scurlock, James Parker, and Peggy Jacobsen RN.

Spread of Strong Practice: Chemotherapy Safety Initiative submitted by Primary and Specialty Medicine Service Line.

Team Members: Apar Ganti, Peter Silberstein, Edward J (Jim) Easton, Norbert Wenzl and Patricia Steffensmeier.

VA Police Honors

VA NWIHCS Police Chief Dennis Moore (top left), was named the "Chief of the Year" at VA's Law Enforcement and Security annual awards banquet. The chief was recognized for his innovations, which included securing more than \$1.5 million in funding to implement a security overhaul that covered the three geographically separated health care facilities. Moore's leadership gained his police force one of the highest positive results from annual all-employee surveys.

Captain Ray Brantis (bottom left), formerly with VA NWIHCS, was also recognized in 2010, being named a Lead Police Officer of the Year.

Dietetic Technician of the Year

Marsha Sanley, DTR (top right), received the Nebraska Dietetic Association's (NDA) 2010 Recognized Dietetic Technician of the Year award during the NDA annual conference April 30. Sanley works in the clinical nutrition department at VA NWIHCS, Omaha. Her duties include a wide variety of specialties in both inpatient and outpatient areas of care.

Her nomination package stated "compassionate, caring, thorough and appropriate can describe Marsha's beside manner and approach to her job. She will go out of her way to fix an incorrect tray given to a patient or modify a Veteran's diet pattern without notice. Best of all, Marsha always has a smile on her face, which improves the spirits of many Veterans and staff."

Defining Excellence in 2010

Hospital Quality Overview

The Hospital Compare website was created through the efforts of the Centers for Medicare & Medicaid Services (CMS), along with the Hospital Quality Alliance (HQA). The HQA is a public-private collaboration established to promote reporting on hospital quality of care. The HQA consists of organizations that represent consumers, hospitals, doctors, nurses, employers, accrediting organizations, and federal agencies. The information on this website can be used by any patients requiring hospital care.

Hospital Compare displays rates for process-of-care measures that show whether hospitals provide some of the care that is recommended for patients being treated for a heart attack, heart failure, pneumonia, asthma (children only) or patients having surgery. Hospitals voluntarily submit data from medical records about the treatments their patients receive for these conditions. The data include patients with Medicare, those enrolled in Medicare health plans, and those who don't have Medicare.

HOSPITAL COMPARE Data Last Updated: May 25, 2010	United States Average	State Average	VA NWHCS, Omaha	Alegent Health Lakeside	Alegent Health Bergan Mercy Medical Center	Alegent Health Immanuel Medical Center	Alegent Health Midlands Hospital	Creighton University Medical Center - St. Joseph	The Nebraska Medical Center	The Nebraska Methodist Hospital	Saint Elizabeth Regional Medical Center	St Francis Medical Center	Bryant LGH Medical Center
Surgery patients taking beta blockers preop, who were kept on the beta blockers postop	87%	91%	95%	99%	95%	95%	100%	96%	89%	99%	72%	84%	96%
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection	92%	92%	98%	99%	95%	98%	94%	97%	96%	94%	92%	98%	97%
Surgery patients who were given the right kind of antibiotic to help prevent infection	95%	92%	99%	99%	99%	99%	98%	97%	98%	99%	98%	99%	98%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery)	90%	95%	96%	98%	96%	96%	100%	96%	94%	91%	94%	93%	89%
Surgery patients who had hair removed using a safer method (electric clippers or hair removal cream—not a razor)	98%	96%	100%	100%	100%	100%	100%	100%	99%	93%	100%	100%	100%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	88%	89%	99%	94%	98%	99%	98%	92%	93%	94%	77%	94%	92%
Patients who got treatment at the right time (within 24 hours before or after surgery) to help prevent blood clots after certain types of surgery	87%	85%	99%	92%	97%	98%	98%	89%	87%	94%	76%	90%	91%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	87%	85%	100%	98%	100%	98%	100%	98%	84%	93%	93%	91%	96%
Pneumonia Patients Whose Initial ER Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	92%	92%	99%	99%	100%	100%	100%	100%	97%	94%	95%	93%	95%
Pneumonia Patients Given Smoking Cessation Advice/Counseling	91%	73%	100%	100%	100%	100%	100%	100%	85%	100%	96%	99%	95%
Pneumonia Patients Given Initial Antibiotic(s) within 6 Hours After Arrival	94%	93%	98%	100%	99%	100%	100%	95%	92%	95%	97%	97%	99%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	89%	91%	95%	92%	97%	99%	100%	96%	89%	82%	92%	87%	92%
Pneumonia Patients Assessed and Given Influenza Vaccination	85%	81%	100%	99%	100%	98%	100%	96%	74%	91%	87%	80%	94%
Heart Failure Patients Given Discharge Instructions	79%	65%	99%	96%	88%	98%	98%	95%	55%	100%	79%	92%	95%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	90%	78%	100%	100%	100%	100%	100%	99%	100%	99%	96%	95%	100%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	90%	84%	100%	100%	99%	100%	100%	98%	84%	100%	89%	96%	97%
Heart Failure Patients Given Smoking Cessation Advice/Counseling	93%	77%	100%	100%	98%	100%	100%	100%	89%	100%	100%	100%	100%

Improving Care in 2010

Patient Satisfaction

Serving Those Who Have Served

VA NWIHCS uses the Survey of Healthcare Experiences of the Patient (SHEP) to monitor patient satisfaction and drive improvement efforts to enhance the patient experience across our health care system. The SHEP survey evaluates both inpatient (top) and outpatient (bottom) satisfaction in a number of dimensions that are thought to impact overall patient satisfaction.

FY 2010 Performance Measure

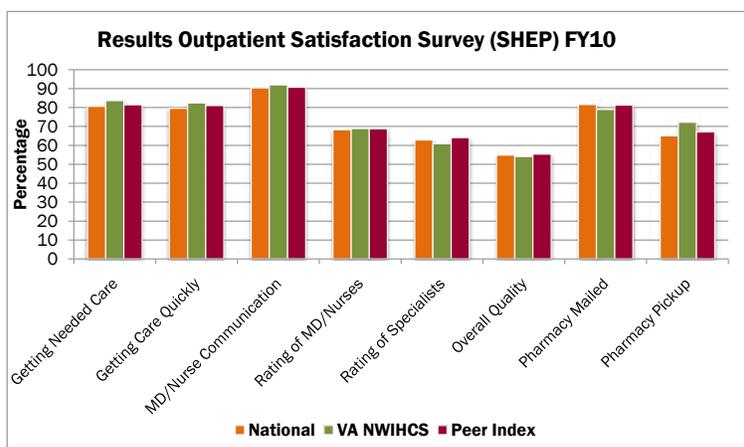
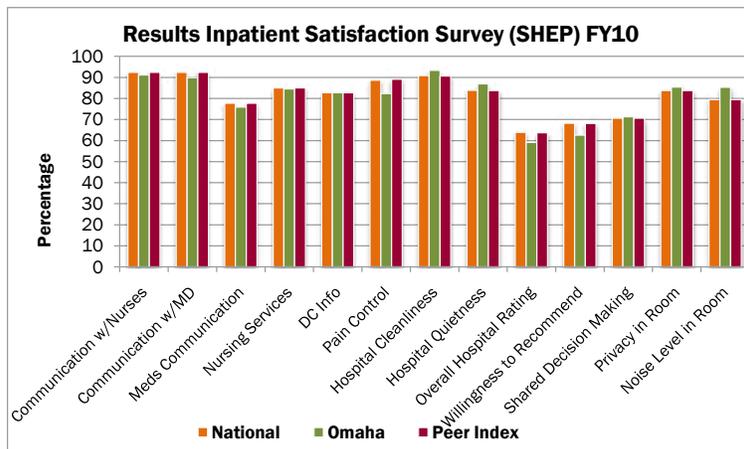
As part of our mission, we continue to find new and innovative ways to provide greater patient satisfaction for our Veterans. In the surveys, we scored well in inpatient dimension of care regarding pain management, shared decision-making, quietness of the hospital environment, cleanliness of the hospital environment, and privacy in the inpatients' rooms.

Outpatient dimensions of care indicate that our patients are very satisfied with accessing care in a timely manner, and the effective communication with doctors, nurses and pharmacy pick-up services.

Our goal is to just not to meet our patients' expectations, but to exceed them. Part of our approach to reaching this goal is through our patient satisfaction committee. This is comprised not only of our staff, but it also includes Veterans who provide insight into what makes for exceptional patient-satisfaction experiences. Our Lincoln VA associate chief of medicine has established a very proactive patient advisory committee that has established a benchmark for the other VA NWIHCS facilities. Veterans and staff have identified key processes that can be improved to increase patient satisfaction, and have implemented them with great success.

Patient Aligned Care Team

The Patient Aligned Care Team (PACT) is a new initiative that is being implemented across VHA. The precursor to this program was pioneered at the Grand Island VA facility by Michael Hein, M.D., who was detailed to VA Central Office to help launch this program throughout VHA. The PACT program is an innovative approach to health care that uses the patient as the focal point for quality improvement.



Research

VA NWIHCS, Omaha Research Service has more than 130 active projects including 12 funded merit review programs, two rehabilitation research and development protocols, four cooperative studies, two clinical science protocols and four research career scientists.

Research programs cover many areas including mental health, liver studies, experimental immunology laboratory, endocrine diabetes studies, pulmonary airways inflammation program, infectious disease group, and rheumatology arthritis investigators network. Research funding for fiscal year 2010 from VA and National Institute for Health and Industry was \$5.7 million. VA NWIHCS, Omaha's Research Service has a not-for-profit research corporation, Nebraska Educational Biomedical Research Association (NEBRA) which are funds donated by private individuals, groups and corporations are now at nearly \$1.2 million.

Improving Care in 2010



Upgrading Facilities

Replacement for VA NWHCS, Omaha

VA NWHCS, Omaha is a grand old lady at 60 years old. However, the engineering staff are working hard to maintain the facility's water pipes, electrical system, and heating, ventilation and air conditioning system.

A major project submission was made to VA's Office of Construction and Facility Management for a replacement medical facility. After a visit to the medical center by Senator Ben Nelson (D-NE), Rep. Lee Terry (R-NE) and then Secretary of Veterans Affairs James B. Peake in June 2008, VA commissioned a feasibility study to examine the infrastructure challenges facing the facility and to identify possible options for the problem.

After the study was presented to Congress in the spring of 2009, Senator Mike Johanns (R-NE) hosted a Senate Committee on VA field hearing at VA NWHCS, Omaha in August 2009 (top) to talk to medical affiliates, Veteran organizations, and local community leaders. Current Secretary of Veterans Affairs Eric K. Shinseki submitted a request in the president's fiscal year 2011 budget for \$56 million to design a replacement facility.



Subsequently, the VA NWHCS chief of engineering hosted a series of conceptual meetings called Design Accelerators in 2010, where VA employees discussed ideas about what makes a healing environment and a Veteran-centric facility (middle left).

Grand Island Hospice Wing Addition

In April 2010, one wing of the Grand Island Community Living Center (CLC) was converted to a hospice wing (middle right). The goal of this addition is to allow patients who require continuous care to transfer smoothly from living at home to living at the facility. The transition is facilitated by encouraging patients to bring personal belongings to decorate their rooms, as well as providing several options for visiting family members, including private meeting rooms and overnight accommodations (bottom).

Increasing Access in 2010

Home Based Primary Care

The Home Based Primary Care (HBPC) program (top) aims to provide medical services in patients' homes. The ability to visit patients who may have difficulty traveling or are uncomfortable in the clinical setting allows VA NWIHCS staff to offer a more versatile health care experience and provide care to a greater range of patients.

Telehealth

Telehealth (middle) enables improved health care access for patients without them having to drive to the primary health care facility, which in Nebraska is often hundreds of miles away. VA NWIHCS is increasing its use of telehealth by connecting the CBOCs with the primary facilities at Lincoln, Grand Island and Omaha. Telehealth can be used to provide patient consults with providers and specialists, mental health counselors, and other services that include audiology and ophthalmology.

Outreach Initiatives

A team from VA NWIHCS created a new interagency outreach program that integrated several VA and Veteran-service agencies to reach Veterans in rural areas of Nebraska and western Iowa (middle bottom and bottom). The team includes staff from VA NWIHCS public affairs, OEF/OIF/OND, women Veterans program and eligibility. It also integrates staff from the Nebraska Department of Veterans Affairs, VA Regional Office, Nebraska Guard Transition Assistance Office, and organizations including Military One Source. The team held two-day open houses to assist Veterans with VA enrollment, and to answer questions about VA benefits.

The public affairs office launched an enhanced outreach program designed to increase awareness with Veterans about Veterans' health issues and VA services available to them. The team launched a public Web page that can be viewed at with information about the speakers' bureau program and provided a link to a new informational brochure that doubles as an application. The team conducted presentations at rotary clubs, chambers of commerce meetings, local business associations and local schools. The Web page can be viewed at <http://www.nebraska.va.gov/news/speakersbureau.asp>.





Internet Homepage Makeover

The VA NWIHCS Internet homepage (top) took on a new look November 2009 as part of a nationwide VA roll-out of a new Web template. The new design is aimed at better serving our nation's Veterans, and to establish the one-VA concept. The new look features uniform colors and design, wider columns, and expanded drop-down menus. The conversion occurred on Veterans Day at more than 500 VA Web sites (80,000 Internet pages) nationwide.

Improved Social Media

VA NWIHCS public affairs is at the forefront of social media, maintaining both Twitter and Facebook accounts. These social media formats allow for an even greater outreach to patients, especially among younger Veterans. Twitter allows instant updates to area Veterans regarding important events or emergency situations. Facebook allows a forum for communication between VA and its stakeholders, which gives Veterans a way to make their voice heard. VA NWIHCS was the first in VISN23 to implement a social media program, and was a test site for the network facilities' programs. It was also one of the first VA medical centers in VHA to implement these programs.



Cardiac Imaging

Imaging experts at VA NWIHCS, Omaha are the first in the VHA to perform Cardiac Adenosine Magnetic Resonance Imaging Stress (CAMS) tests. The procedure provides an enhanced image of cardiac diseases and pathology not previously seen by echo or other imaging tests. This process provides a full view of the heart with the capability of imaging real-time blood flow through the valves of the heart, which allows faster and more accurate diagnoses.

SJ4 Implant

A VA NWIHCS physician performed the first implant in the VA and Nebraska of an implantable cardioverter defibrillator (ICD) using a new connector system that minimizes the number of connections between cardiac leads and the ICD.



The procedure was performed at VA NWIHCS, Omaha by John Scherschel, M.D., an electrophysiologist cardiologist. The SJ4 features a single connection between the device and the defibrillation lead, and a single-set screw. Previous defibrillator lead designs required three separate connections and four set screws. With fewer connections to make, the SJ4 reduces the time it takes to implant the ICD, and thus reduces the risk of infections, abrasions and incorrect connections, Dr. Scherschel said.

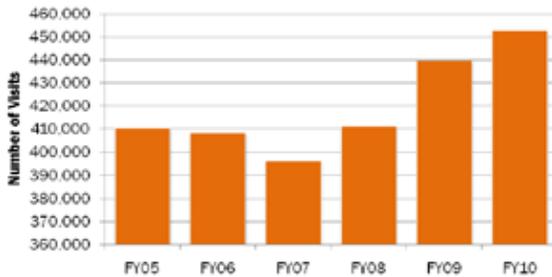
Digital Media Boards

New electronic digital monitors were installed throughout VA NWIHCS's facilities. Public affairs programs information that includes educational offerings, human resources information, upcoming events, and important messages for Veterans and staff. The project was funded as a pilot by the VISN23 Wellness Is Now (WIN) program with the intent to improve employee wellness by providing information that will help them to live a healthier lifestyle. The WIN program coordinators and public affairs partnered to enhance the program's content to not only provide employee wellness information, but public information.

Expenditures in 2010

Total Number of Patients Served by VA NWIHCS

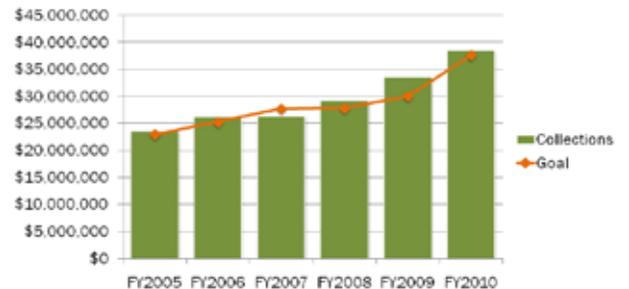
Total Outpatient Visits



Includes: Omaha, Lincoln, Grand Island, North Platte, Norfolk and Holdrege

Source: VSSC NP10

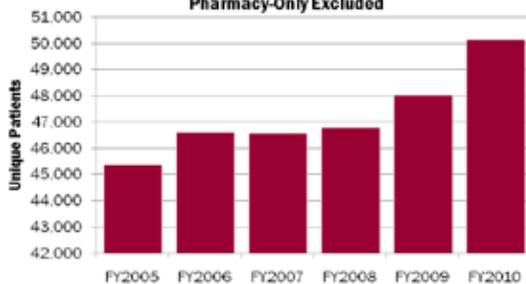
Collections



Collections from Veteran co-payments and insurance payments are managed through the Medical Care Collection Fund (MCCF) and are retained by the Health Care System to enhance our health care services.

Total Unique* Patients

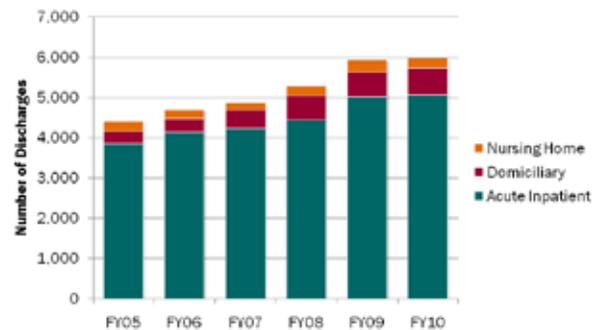
Pharmacy-Only Excluded



* Unique means the patient is only counted once, even if he/she have been seen multiple times or at multiple sites in the health care system.

Source: VSSC Unique

Total Inpatient Discharges



Source: VSSC 005 Discharge Code

VHA Vision

VA NWIHCS will be on the cutting edge of the VA's revised mission: VA Health Care: Defining EXCELLENCE in the 21st Century. In the words of VA Undersecretary for Health Robert Petzel, M.D., this theme is to provide a clear vision of what we should be as an organization in the next five to 10 years.



VA
HEALTH CARE
Defining
EXCELLENCE
in the 21st Century

2010 Operating Expenses

Personnel Services (Salary/Benefits)	\$152,580,569
All Other (Supplies/Services)	\$121,504,019
Equipment	\$9,179,486
State Veterans Homes	\$13,552,650
Non-Recurring Maint. & Repair	\$6,325,401
Community Nursing Home	\$6,808,776
Trainee Salaries	\$237,976
House Staff	\$7,995,443
Information Technology	\$3,587,760

\$321,772,080

