



VA New York/New Jersey Health Care Network

2009 ANNUAL REPORT

VISN 3 Transformation Update



VA Hudson Valley Health Care System

- Castle Point Campus
- Montrose Campus

James J. Peters VA Medical Center (Bronx)

VA New Jersey Health Care System

- East Orange Campus
- Lyons Campus

VA New York Harbor Health Care System

- Brooklyn Campus
- New York Campus
- St. Albans Campus

Northport VA Medical Center

*To serve Veterans in the 21st Century requires bold
investments today for a transformed VA tomorrow.*

-- VA Secretary Shinseki



VA New York/New Jersey Health Care Network

Director's message



Dear Veterans, Fellow Employees, Volunteers and Friends of the VA NY/NJ Healthcare Network:

I am pleased to share with you the Veterans Integrated Service Network 3 (VISN 3) 2009 Annual Report. This publication provides a snapshot of the progress VISN 3 has made, in FY 2009, to improve the delivery of health care to the nearly 900,000 Veterans residing

in the New York/New Jersey metropolitan area.

The health care initiatives presented in this report represent local and national priorities critical to transforming VA health care into the 21st Century - initiatives that are people-centric, results-driven and forward-looking. While we still have work to do to achieve our goals, the results presented in this report show that we are well on our way to meeting our Nation's commitment to the men and women who have so honorably served our nation.

I am very proud of our employees and volunteers who have made these achievements possible. Every day, thousands of VISN 3 employees deliver health care, conduct research, help train hundreds of medical residents and allied health professionals, design projects to upgrade our facilities, and diligently maintain a state of readiness in preparation for any emergency.

VISN 3 will continue to pursue health care excellence with the goal of filling President Lincoln's promise - "to care for him who shall have borne the battle, and for his widow, and his orphan." We will continue to honor and serve the men and women who are America's Veterans.

Thank you for your support in 2009. I look forward to an even more fruitful 2010 where we continue to achieve milestones on the journey to "delivering the best care anywhere."

Michael A. Sabo
Director, VA NY/NJ Healthcare Network

VISN 3 BY THE NUMBERS

- VA Medical Centers **8**
- Community-Based Outpatient Clinics **27**
- Prostheses costs **\$49,139,804**
- Total inpatient surgeries **7,246**
- Total ambulatory surgeries **31,222**
- Unique Veterans treated **181,299**
- Outpatient Veteran visits **2,367,521**
- Non-Veteran fee visits **361,487**
- Total discharges **23,919**
- DoD visits (sharing agreement) **1,677**
- Total employees **12,013**
- Total nonpaid (WOC) employees **1,451**
- Total volunteers **5,270**
- Total volunteer hours **610,068**
- Total medical residents **1,772**
- Total VA-funded research **\$24.6M**
- Total non-VA-funded research **\$34.6M**
- Total active research projects **1,308**

VISN 3 health care exceeds Health and Human Services and The Joint Commission scores

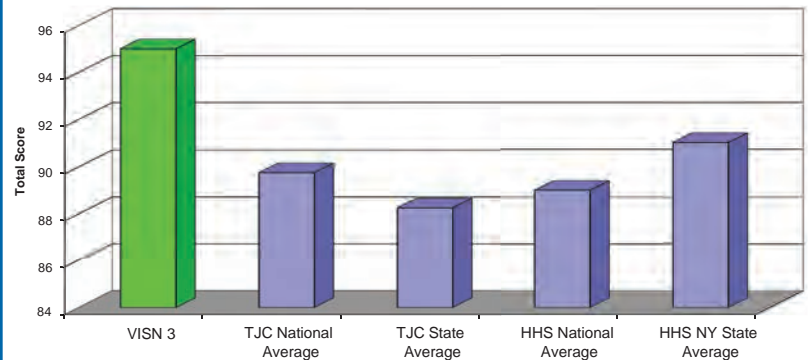
The Institute of Medicine describes quality medical care as “the degree to which health care services to individuals and populations increase the likelihood of desired outcomes and are consistent with current professional knowledge”. It further describes high quality care as one which is safe, effective, patient-centered, timely, efficient, and equitable.

VISN 3 has quietly gone about the business of providing high quality Veterans health care in a convenient, responsive and caring manner. Since the mid-1990’s, VISN 3 has evaluated the quality of care by using performance measures. These performance measures are based upon established standards developed by medical studies and information that indicates specific health care interventions which result in the best outcomes for patients. In 2009, VISN 3 not only compared itself to other VA’s but also compared itself to Medicare/Medicaid and The Joint Commission state and national quality performance scores.

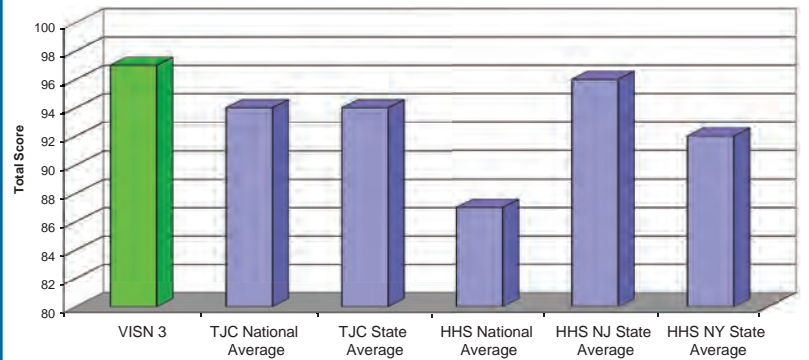
The Department of Health & Human Services (HHS) which administers the federal Medicare & Medicaid Programs required all hospitals to report on the quality of hospital care provided to patients admitted to the hospital for (1) pneumonia, (2) congestive heart failure, (3) acute myocardial infarction/heart attack and (4) major surgery based on quality indicators called ORYX measures. The Joint Commission also uses these reports for hospital accreditation purposes.

► The graphs demonstrate how the quality of care VISN 3 provided to pneumonia, congestive heart failure, acute heart attack and surgical patients compared to non-VA hospitals at the national level and state levels based upon the Medicare/Medicaid and Joint Commission ORYX scores. VISN 3 far surpassed the average ORYX scores measuring the quality of care provided to all four patient groups in non-VA hospitals on both the state and national levels.

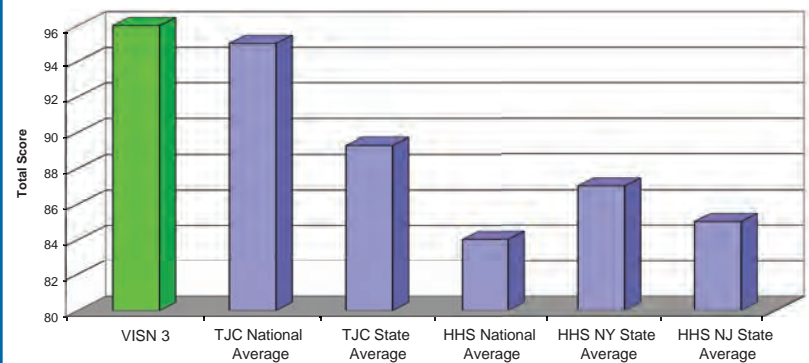
▼ PNEUMONIA CARE



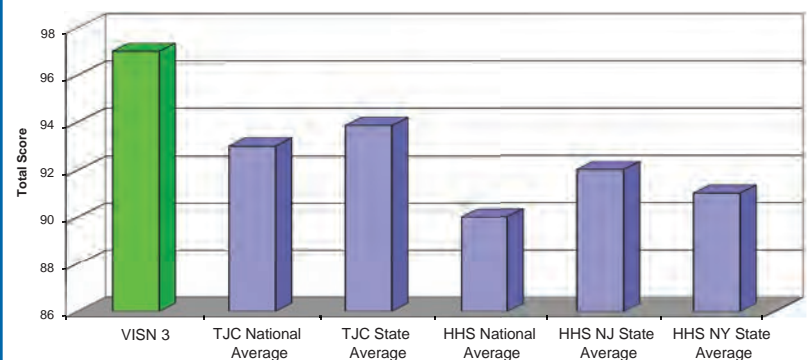
▼ CONGESTIVE HEART FAILURE CARE



▼ HEART ATTACK CARE



▼ SURGICAL CARE



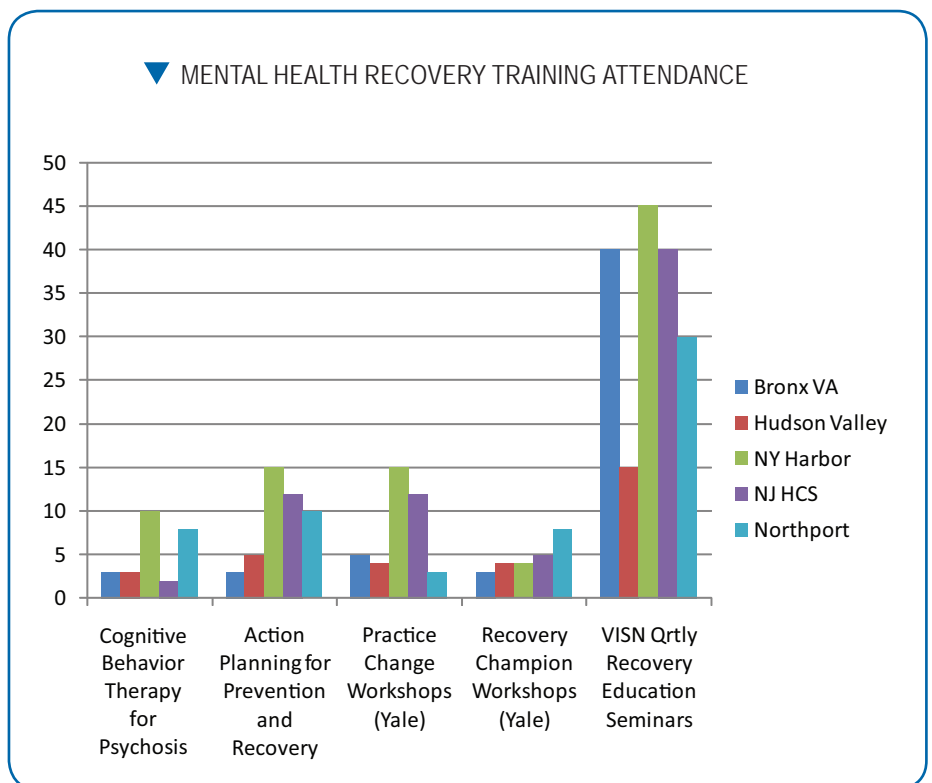
Mental health recovery principles advanced across network

VISN 3 made significant strides in advancing the principles of mental health recovery across the Network in FY09. Mental health recovery is a principle which refers to the journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her full potential.

Most significantly, Recovery Advocates, a group of Veterans, clinicians and administrative staff who introduce and increase recovery based care, developed and implemented a web-based recovery training program for all mental health staff. The final product is the result of effective collaboration between clinicians and Veterans.

Nine training sessions, conducted with our Yale University Recovery consultants, were provided to 63 mental health clinicians and Veterans receiving mental health care. This training focused on the actual recovery transformation process and on identifying staff and Veterans to become practice change agents.

Local Recovery Coordinators also held several educational programs throughout the year. VISN-wide Substance Abuse and Mental Health Services Administration Action Planning for Prevention and Recovery training was attended by 70 mental health staff members. Day-long Peer Support Technician Conferences were held and attended by Peer Technicians. Quarterly Network-wide videoconferences on recovery-focused topics such as clinical boundaries, treatment of bipolar disorder and cognitive training were held for staff psychiatrists, psychologists, social workers and nurses as well as Veterans who received care in VISN 3 mental health clinics.



Staff and Veteran attendance at Mental Health Recovery focused Training in FY09

An important aspect of the Mental Health Recovery initiative involves increasing involvement with community mental health agencies. In FY09, all sites significantly increased their visibility and presence in community organizations, activities and trainings. For example,

- The National Alliance for Mental Illness (NAMI) awarded a VA Local Recovery Coordinator with their Seeds of Hope Award.
- Four out of five VISN 3 sites have either a NAMI Family to Family or Support and Family Education (S.A.F.E.) Group. VA New York Harbor HCS and VA New Jersey HCS have both.
- Several staff and Veterans represented VA at the annual NY City NAMI Walk.
- Three sites have initiated a NY State Wellness Self Management Program.
- Two VISN 3 facilities have representation on the NY City Mental Health Association.

All VISN 3 facilities and the Network Office have active Veterans Advocacy Councils which provide a forum for Veterans receiving mental health services to offer feedback on the various aspects of mental health recovery and care.

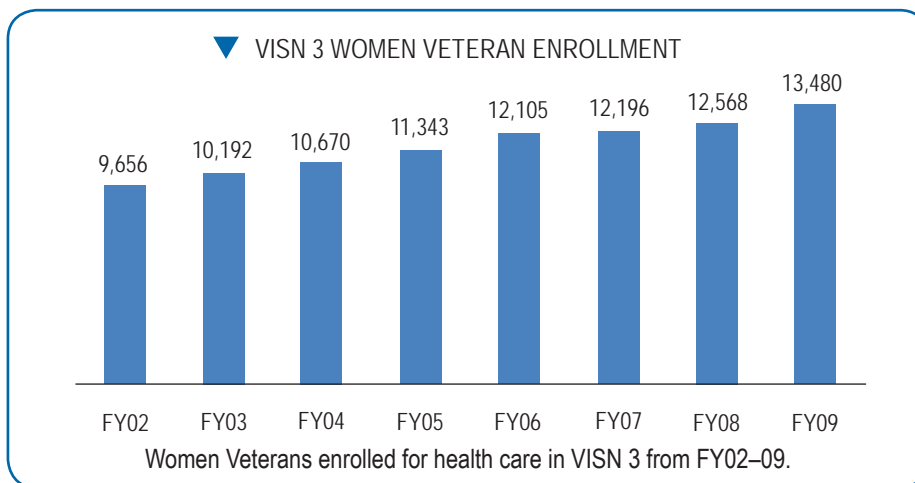
WOMEN VETERANS HEALTH CARE

*You served, you deserve
★ the best care anywhere.*



Women Veteran's seeking care in higher numbers

Women are an increasing population of Veterans and currently make up 1.8 million of the 22.2 million of today's Veterans. In FY09, 13,480 women Veterans were enrolled in VISN 3 facilities, a 10.7% increase from FY08. Women Veterans are relying more heavily on VA to meet their health care needs.



To ensure women Veterans receive quality comprehensive health care throughout VISN 3, a multidisciplinary summit entitled "Breaking New Ground: Planning the Best Care Anywhere for Women Veterans, was held on December 16-17, 2009. The purpose of the summit was to bring VISN and VA medical center leadership and facility implementation teams together to assess care gaps, understand planning needs, create a timeline for development and implementation of necessary services, and identify resources required to provide comprehensive primary care for all women Veterans in VISN 3.

These areas were identified on the Women's Comprehensive Implementation Plan, a national program assessment conducted in the spring of 2009 to improve women Veterans' access to health care. During the summit, participants recognized VISN 3 best practices in women's care, including:

- Comprehensive Women's Health Care: The Women's Wellness Center – Northport, VAMC
- Sexual History Documentation Provider Training Template- Bronx VAMC
- Combat Women Veterans Cultural Sensitivity Training – VA New York Harbor HCS
- Improved scheduling for gender-specific diagnostic tests – VA Hudson Valley HCS
- Women's Treatment Unit – VA New Jersey HCS

Areas needing improvement such as the environment of clinical care, staff education and increasing cultural sensitivity for women Veterans were also identified and will be addressed in FY10 to ensure that Veteran-centered comprehensive care for women is provided in VISN 3.



VA HUDSON VALLEY HEALTH CARE SYSTEM

Accomplishments

- Re-surveyed and received full accreditation from The Joint Commission, The Office of the Medical Inspector-Combined Assessment Program, The Commission on Accreditation of Rehabilitation Facilities, System-wide Ongoing Assessment and Review (SOARS) with numerous best practices cited
- Met or exceeded targets for all Patient Satisfaction measures
- Exemplary All Employee Survey results – above the VHA average in 37 of 38 elements
- Exceeded Post Deployment Screens Completed and Traumatic Brain Injury(TBI) screening measure targets for our newest Veterans
- Enhanced Palliative Care Program – Palliative Care Social Worker received National Award for Excellence
- Rural Health initiated in the Monticello VA Community Based Outpatient Clinic
- National Recognition of an OEF/OIF pocket card for first responders
- PTSD program ranked #1 in the nation by North East Program Evaluation Center
- Developing a labyrinth walking path for cultural transformation and a recovery garden for mental health
- Sponsored 7 special emphasis diversity programs
- Graduated 36 employees in career development and leadership programs and 10 employees in scholarship programs
- Major system-wide communications efforts include a published quarterly employee newsletter and small group Director/employee meetings
- Completion of Water Main Intake project at the Castle Point Campus
- New City VA Community Based Outpatient Clinic relocation and expansion
- Montrose Campus outpatient building expansion designed
- Implementation of suicide prevention measures in Mental Health units at the Montrose Campus
- Check point temperature system for refrigerators/freezers installed
- Parking lot including handicapped parking expanded at the Castle Point Campus

Operation Home supports VA's efforts to end homelessness in five years

It was Mayor Bloomberg's and former VA Secretary Nicholson's vision that no Veteran should sleep in the City's shelters or on the street. To achieve that vision, the Mayor and Secretary convened a joint New York City Department of Homeless Services (DHS)-VA Task Force, creating "Operation Home" in December, 2006. VA Secretary Shinseki seeks to end homelessness in five years.

The plan for Operation Home included designing a new service delivery system for homeless Veterans, leveraging existing Federal resources to develop transitional housing, and reinvesting City shelter savings into permanent housing options. The City and the VA agreed to jointly resource the new system and collaborate with community partners to ensure the success of this initiative. In May, 2008 a Multiservice Center staffed by NYC and VA at a VA outpatient clinic was opened.

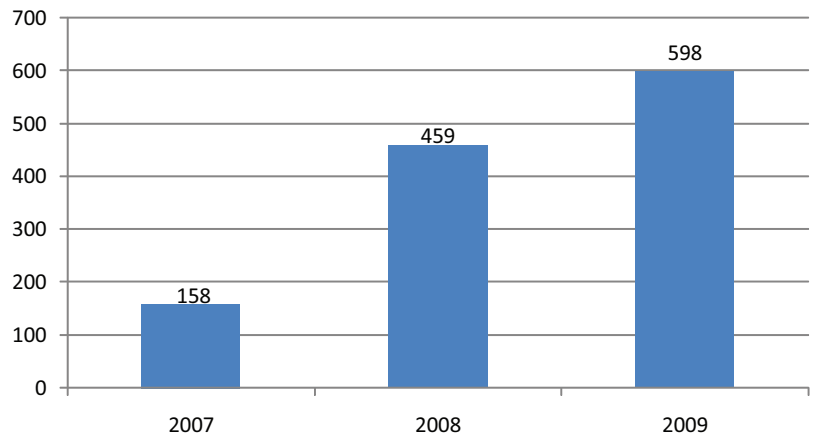


▲ Homeless Veterans treated at Multi-Service Center, Chapel Street CBOC

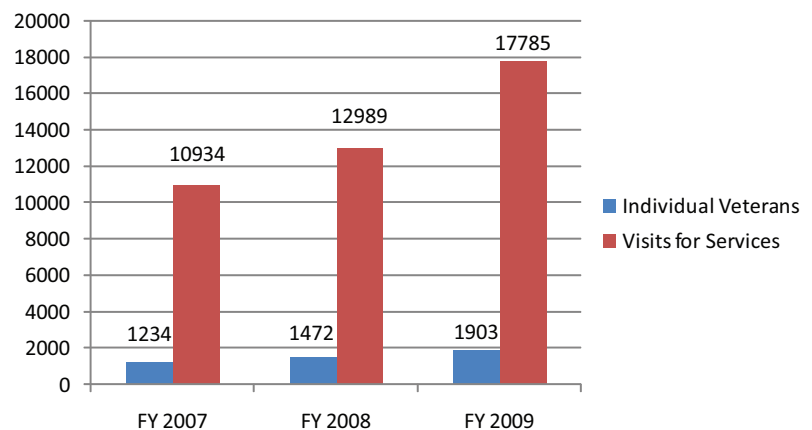
Since then over 4,600 homeless Veterans have been seen and connected to services. Renovations of former homeless shelters and new housing facilities have resulted in 598 additional transitional housing units for Veterans, and over 1,200 HUD-VA Supported Housing permanent housing vouchers have been issued directly to homeless Veterans in 2009.

In a speech on March 16, 2009 President Obama stated, "And we provide new help for homeless Veterans, because those heroes have a home -- it's the country they served, the United States of America. And until we reach a day when not a single Veteran sleeps on our nation's streets, our work remains unfinished." Secretary Shinseki

▼ VISN 3 TRANSITIONAL HOUSING UNITS



▼ HOMELESS VETERANS SEEN AT MULTI-SERVICE CENTER, CHAPEL STREET CBOC

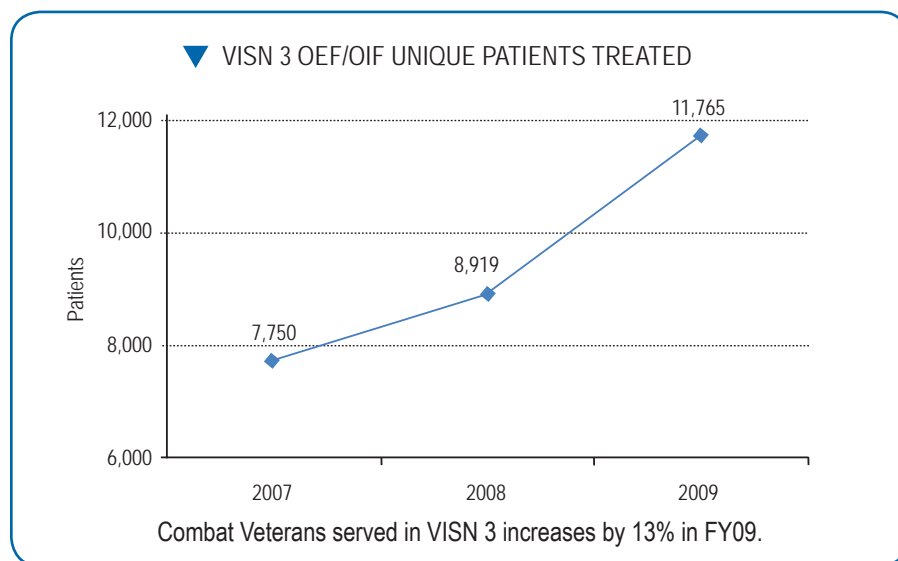


subsequently unveiled an ambitious five year plan to end homelessness among Veterans with six strategic pillars: outreach and education; treatment; prevention; housing and supportive services; income, employment and benefits; and community partnerships. VISN 3 is already working toward meeting this agenda by expanding housing resources through partnering with Jericho Project, a local supportive housing provider, to utilize housing options for Veterans with HUD-VASH Section 8 housing vouchers, and by assisting VA Grant & Per Diem transitional housing providers to operationalize their programs in support of homeless Veterans. Through the Veterans Justice Outreach initiative, VISN 3 is interfacing with local law enforcement, courts and jails to provide treatment alternatives when appropriate. We look forward to expanding our efforts in 2010 and beyond.

Combat Veterans seeking VA health care rises in FY09

VISN 3 Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF) Programs continue to expand and staff are working hard to meet the growing needs of our newest Veterans and their families.

Since FY02, 29,256 OEF/OIF Veterans left active duty and become eligible for VA health care services in VISN 3. A total of 19,301 (60%) of these Veterans have received health care services. Of this number, 2,482 are female Veterans, which is 69% of the total number of OEF/OIF female Veterans in the VISN 3 catchment area - one of the highest utilization rates in the country.



OEF/OIF Programs have implemented Post Deployment Clinics to ensure Veterans receive their care through a clinical team approach. Post Deployment Clinics, lead by a Primary Care Provider, include an OEF/OIF Case Manager and a Mental Health clinician.

Access to health care during evenings hours is now provide at the Brick New Jersey CBOC; VA Hudson Valley HCS Castle Point campus and Goshen CBOC; Community Living Center in St. Albans, Queens and Staten Island CBOC; and Yonkers and White Plains CBOC. The Northport VA Medical Center provides weekend primary care.

VISN 3 Outreach activities are a top priority for all OEF/OIF programs, and this is happening through various joint DOD/VA initiatives such as demobilizations events, Yellow Ribbon Reintegration programs, and reconstitution events. In addition, programs have successfully outreached through creative initiatives including job fairs, alternative criminal justice programs, college support programs and first responders training.

Compassionate quality care for Veterans and their families is the focus for 2010 as VISN 3 strives to become the health care provider of choice for our newest Veterans and their families.



JAMES J. PETERS VA MEDICAL CENTER Accomplishments

- Re-surveyed and received full accreditation from The Joint Commission, the Commission on Accreditation of Rehabilitation Facilities, URAC (Telephone Triage), Paralyzed Veterans of America, The American Legion, The American College of Medical Education and The Food and Drug Administration
- Hosted a visit by First Lady Michelle Obama and Vice President's wife, Dr. Jill Biden
- Selected as the host site for the development of the VISN 3 Bariatric Surgery Program
- Initiated first of 5 American Recovery and Reinvestment Act projects which will total more than \$8.5 million dollars
- Completed renovations of the OEF/OIF program suite and added program staff
- Achieved highest national enrollment percentage (66%) of OEF/OIF Veterans Surpassed the national average by more than 20%
- Completed renovations of the Retail Store and Cafeteria, adding additional space, providing updated décor and equipment
- Established a convenient, first floor Flu-Shot Walk-in Clinic
- Installed a new Linear Accelerator and renovated the entire Radiation Oncology Suite
- Hosted annual OEF/OIF Welcome Home and Career Day
- Hosted a community health fair featuring participation from federal, state, local and private entities
- Became a host site for the "Million Trees" campaign and provided green space for the planting of more than 60 young trees
- Launched a cultural transformation program in the Community Living Center
- Approved to utilize Transcranial Magnetic Stimulation for the treatment of depression
- Initiated a Tai Chi program for patients at the Yonkers Community Based Clinic



Providing the right care at the right time in the right place

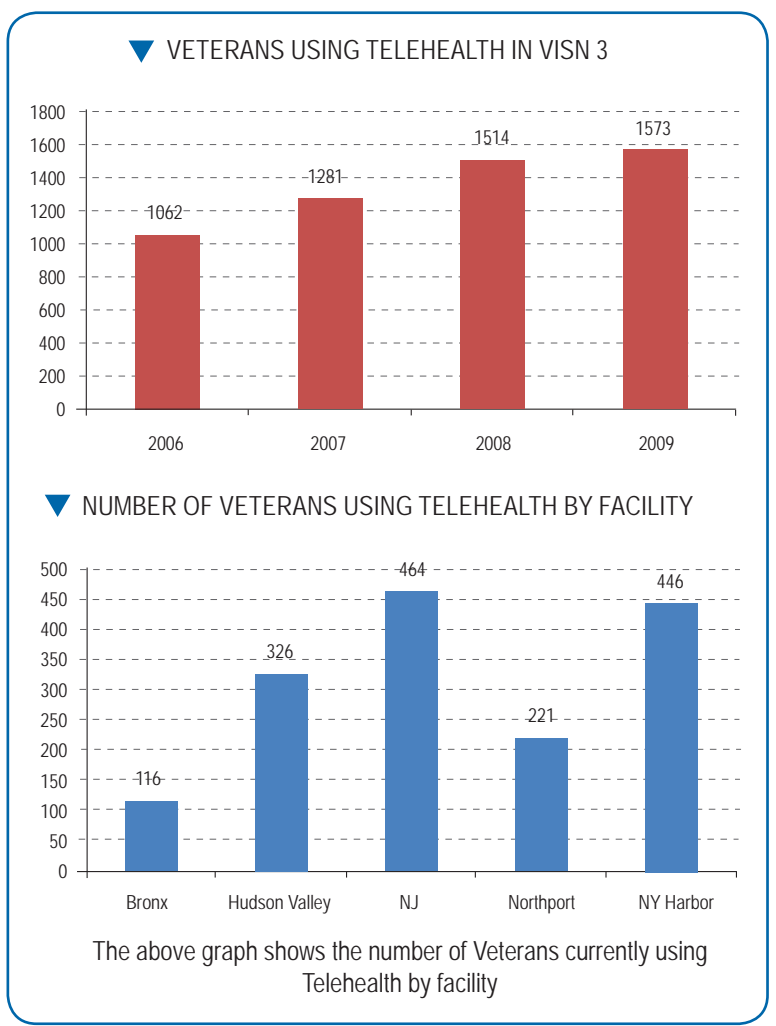
VISN 3's telehealth program provides increased access to care for veterans in and close to their homes through the use of telehealth technology. In-home messaging devices connect veterans with chronic health conditions to providers in the Medical Centers, and Clinical Videoconferencing Units connect veterans in Community Based Outpatient Clinics to main Medical Center campuses. Additionally, Teleretinal cameras allow screening for diabetic retinopathy to occur at the time of a veteran's Primary Care visit.

Veterans with chronic health conditions benefit from using in-home messaging devices which connect to VA providers over regular telephone lines. Veterans transmit information about their health status each day and receive important education about their condition. Various devices offer unique features for different veterans, and blood pressure cuffs, blood glucose meters and scales may be connected as appropriate to meet the veterans' needs.

Veterans in Community Based Outpatient Clinics receive Mental Health counseling by connecting to providers in main Medical Center campuses in New Jersey and the Hudson Valley through Clinical Videoconferencing units. This allows the veterans to remain close to home where they are able to fulfill family, work and educational commitments while obtaining the ongoing counseling they need.

Through the use of Teleretinal Imaging cameras, veterans may have pictures taken of their retina when visiting their Primary Care provider in the Community Based Outpatient Clinics, allowing valuable screening for retinopathy due to diabetes and other conditions. If retinopathy is suspected, the veteran is referred to the Eye Clinic for further evaluation.

Veteran being instructed in use of messaging device to monitor health at home. ▶





Patient-Centered medical home implementation plans

VISN 3 has begun the journey to transition to the Patient-Centered Medical Home as the system whereby our VA medical centers and community based outpatient clinics will provide care to our Veterans. The “Patient-Centered Medical Home” represents a transformation of Primary Care to a more comprehensive, coordinated and team-based approach, designed specifically to meet the needs and expectations of each individual Veteran.

The Patient Centered Medical Home Model of health care is a patient-driven, team-based approach that delivers effective, comprehensive and continuous care through active communication and coordination of health care services. Essential features of the Patient Centered Home are:

- it is patient-centered (incorporating patients’ values and enhancing access to care)
- the care is delivered by a team, with all members of the team working collaboratively
- the care is coordinated (all transitions - specialty care, hospitalizations, dual care, telehealth)
- quality measure is improved health care for ALL of our Veterans (incorporating prevention, chronic disease management, population health, safety, quality measures)

VA staff are planning diligently to bring the Patient Centered Medical Home to reality in the coming years. Clinic space is being evaluated to ensure the necessary treatment rooms and support space is sufficient to support this new approach to care, and the environment is conducive to patient-centered care. The number of our physician, nurse, social workers and other clinic staff are being reviewed to ensure that we have the optimum mix of health care staff. Recruitment of new staff is underway, as are plans to organize into highly effective teams to deliver care. Strategies to enhance access to Veterans are being assessed, including improvements in the phone systems, increasing telehealth opportunities, and piloting systems of Secure Messaging – safe, private, email communication between Veterans and their health care staff.

The VA New York New Jersey Healthcare Network is committed to enhancing the way health care is provided to Veterans and their families. The Medical Home Model of care is Veteran-Centered and is just one way VA is changing to deliver health care in the 21st century.



VA NEW JERSEY HEALTH CARE SYSTEM

Accomplishments

- Re-surveyed and achieved full accreditation by The Joint Commission, Commission on Accreditation of Rehabilitation Facilities, College of American Pathologists and Association for the Accreditation of Human Research Protection Program
- Cited as a National Best Practice for the Operation Enduring Freedom/Operation Iraqi Freedom Care Management Program, System-wide Ongoing Assessment and Review Strategy Program, and Purchased Skilled Care Program
- Partnered with a local church to provide permanent housing to homeless Veterans—a collaboration described as a Best Practice redeveloping unused church property to provide services for homeless Veterans
- Began the Veterans Directed Home and Community Based Service Program
- Opened a new Hospice and Palliative Care Unit
- Extended hours in Primary Care
- Introduced Schwartz Rounds, a multidisciplinary forum where caregivers discuss difficult emotional and social issues for patients
- Initiated Literature and Medicine Program, a scholar-led humanities reading and discussion program for health care professionals benefitting both caregivers and patients
- Reopened the Women’s Treatment Unit
- Initiated the Spinal Cord Injury/Disease Service Horticulture Therapy Program in collaboration with Rutgers University
- Received the 2009 Under Secretary for Health National Award for Customer Service for the Oak Leaf Awards Program
- Received the National Spirit of Planetree Animal Therapy Award
- Received the VHA Communications Third Place Honor Award in Innovation for the Planetree Affiliation and Multimedia Promotion
- Received the 2009 National Center for Patient Safety Bronze Medal for the Root Cause Analysis Program
- Won the Top Poster Presentation Award for Culture Change in the Methicillin-Resistant Staphylococcus Aureus Prevention Initiative
- Increased satisfaction in the Veterans Health Administration All Employee Survey in 37 out of 38 categories
- Partnered with the New Jersey Higher Education/Hospital Association/Department of Military and Veterans Affairs, providing post-deployment services for returning Veterans
- Co-sponsored a full-day conference with the Mount Sinai School of Medicine entitled, “Exposure Concerns of Returning Veterans”

Safe Patient Handling increase Veteran safety and decrease staff injuries

In mid-2005, VISN 3 began to address the high number of staff injuries related to patient handling. VHA Occupational Health and Safety conducted a comprehensive, unit-based, ergonomic hazard assessment of all inpatient units including clinics, diagnostic, inpatient and community living center units in VISN3. At that time, only 25% of patient care areas were equipped with lifting aids. A VISN-wide initiative began to change this and by 2008, VISN 3 was well on its way to improving patient and staff safety.

In mid-2005, VISN 3 began to address the high number of staff injuries related to patient handling. VHA Occupational Health and Safety conducted a comprehensive, unit-based, ergonomic hazard assessment of all inpatient units including clinics, diagnostic, inpatient and community living center units in VISN3. At that time, only 25% of patient care areas were equipped with lifting aids. A VISN-wide initiative began to change this and by 2008, VISN 3 was well on its way to improving patient and staff safety.

The VISN Safe Patient Handling program is designed to prevent nurses, nursing assistants, technicians and others who work with

patients from injuries related to patient handling. By equipping inpatient units, laboratory, diagnostic and outpatient areas with lifting aids such as ceiling/overhead lifts, transfer devices and mobile lifts, both staff and patients are safe from injuries.

Each VISN 3 facility now has a dedicated Safe Patient Handling Coordinator who conducts staff training, ergonomic and hazard assessments, monitors equipment and promotes injury prevention. In addition, Safe Patient Handling Coordinators are members of key facility work groups such as the Environment of Care Committee, Accident Review Boards, Network Commodities Committee and V03 Engineering Council. Safe Patient Handling Coordinators review all facility renovation and expansion projects related to direct patient care. By consulting directly with the Project Engineer, they ensure that lifting equipment is incorporated in to the project. Additionally, the VISN Safe Patient Handling initiative has received national VA recognition for program implementation and development, and outcomes achieved. The program was highlighted at both national and international Safe Patient Handling training conferences. (See graphs ►)

Workforce development programs meet future needs

By FY15, more than 43% of VISN 3's workforce, including 61.5% of supervisors and managers will be retirement eligible.

To meet the health care needs of today's and tomorrow's Veterans, VISN 3 is investing significant resources to develop employee knowledge, skills and abilities to fill anticipated work force vacancies.

FY09 marked the second year of the School at Work (SAW) program which is provided at each VA medical center campus. The program is designed to develop reading, writing, math and medical terminology skills for employees in the GS 1-5 and equivalent wage grades. Approximately 75 VISN 3 employees graduated from this program in FY09. This program is conducted over an eight month period in weekly two-hour sessions.

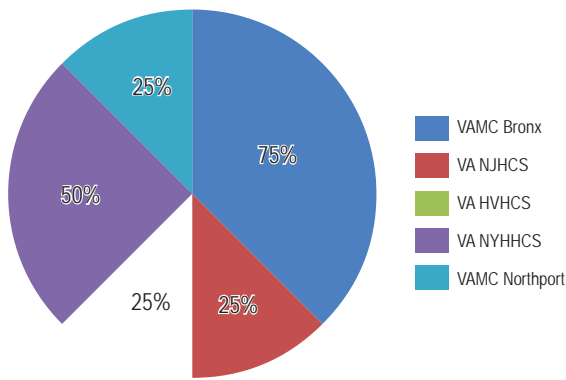
Local facility based development programs graduated 65 employees in FY09. These programs are designed to enhance individual competencies and develop a greater operational understanding and mid-level organizational competencies. These employee development programs are designed for GS-6 and equivalent wage grade and above employees.

Bridges to the Future is the Network's premiere leadership development program for GS11 and above and equivalent employees. To grow the succession pipeline, Bridges to the Future graduation rates rose from 14 employees in FY08 to 24 employees in FY09. The FY10 class enrolled 38 employees! Bridges to the Future students join a VISN-level council and conduct a stretch project related to VISN 3's mission critical strategic plan.

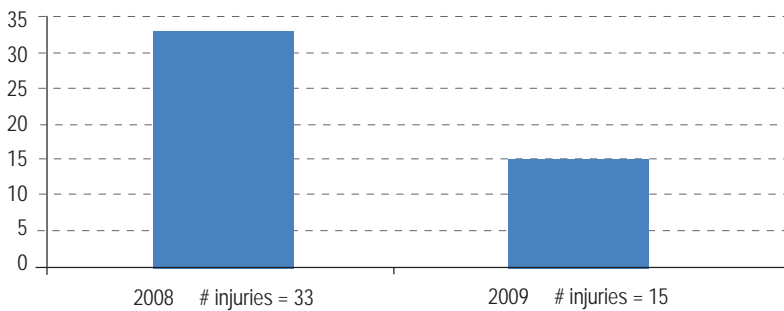
VISN 3's employee development initiatives reflect VISN 3's investment in the future and provide the opportunity to diversify VA and medical center leadership ranks. (See graph ►)



▼ % COMPLETION OF INSTALLED LIFTING EQUIPMENT BY FACILITY

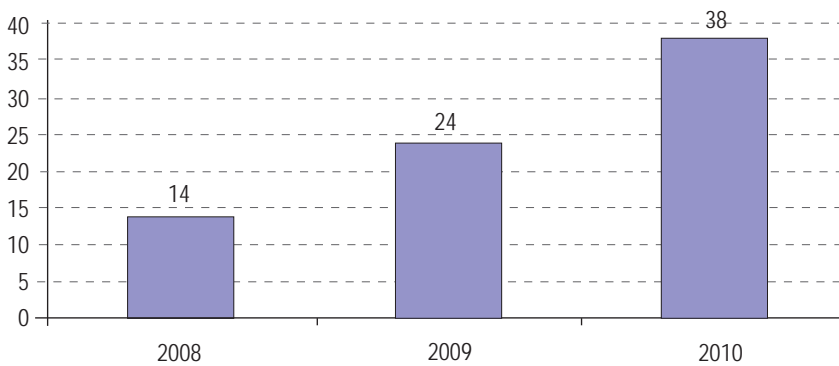


▼ DECREASED STAFF INJURIES ON ONE COMMUNITY LIVING CENTER PATIENT UNIT



Lifting equipment installed in April 2009 resulted in a significant decrease of staff injuries.

▼ BRIDGE TO THE FUTURE STUDENTS



The table shows the increase in employee participation from FY08 to FY10

◀ BRIDGES CLASS of 2009 Group Photo

Seated: Salvatore Tatta (Bx). Front Row, L to R: Kamesha Scarlett (Bx); Alba Lopez (NYH); Ellen Trbovich (Bx); Carol Robinson (HV); Octavia Bullock (Bx); Sharon Kearney (NYH); Gina Seto (NYH); Liezl Intatano (NYH); Sandra Paez (NJ); Gulab Vuppala (NJ); Kimberly Burton (Npt); Lisa Swain (Npt); Pat Tompkins (Npt); Susan Spector (VISN – Bridges Coordinator).

Back Row, L to R: Cheryl Bucknor (NJ); Ron Brattain (HV/VISN 1); Kenneth Johannesen (Npt); Christopher Hanson (NYH); Michael Bergen (NJ); Willie Carley (VISN); William McDougall (NJ); Kenneth Chapman (NJ). (Missing: Angeli Medina NYH).



VA NEW YORK HARBOR HEALTHCARE SYSTEM
Accomplishments

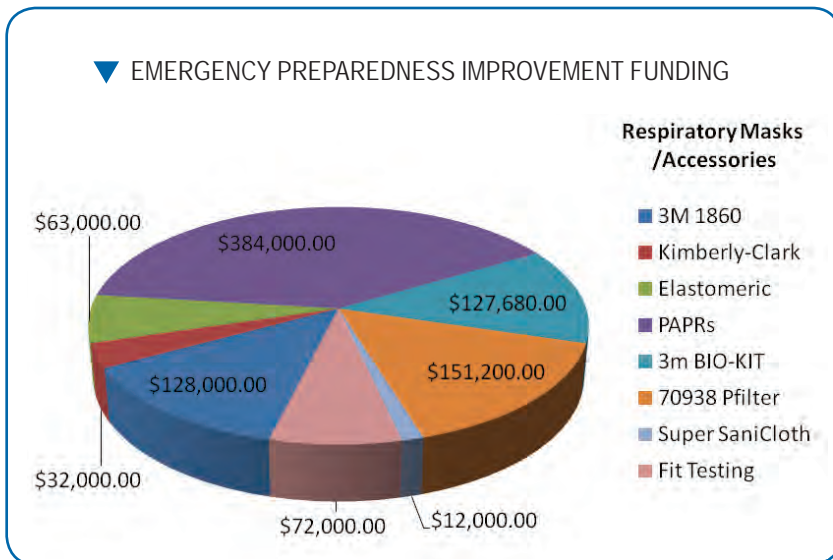
- Re-surveyed and received full accreditation from The Joint Commission, the College of American Pathologists, the Commission on Cancer of the American College of Surgeons, Commission on Accreditation of Rehabilitation Facilities, American College of Radiology and Clinical Pastoral Education (CPE) Program
- Won the Beacon Award for Critical Care Excellence - second time in three years
- Partnered with Pace University and selected as one of 5 VA nursing school collaborations to be awarded a VA Nursing Academy grant for 2009-2010
- Awarded a grant by the National Hospice and Palliative Care program as part of the comprehensive end-of-life care initiative
- Awarded VA Nursing Academy status-one of only 15 VA sites
- Won the Patient Safety Bronze Cornerstone Recognition Award
- Won the FY09 VISN Systems Redesign Award for Outpatient Clinical Care for Centralized Scheduling
- Implemented the HowRWe Doing program to help address patients' concerns before leaving the facility
- Graduated 27 students from the School at Work program and nine students from the LEAD program
- Developed a joint Veterans Justice Outreach Initiative with the Chief Judge of the State of New York and the District Attorney's from Kings, Queens and Nassau Counties
- Hosted a visit by His Royal Highness Prince Henry of Wales who was given a tour of the Virtual Reality Therapy Lab and a briefing on the new prosthetic DEKA arm
- Hosted a national education program for nurses and nursing supervisors on the preparation for H1N1 Influenza A virus, which was broadcast to VA health care facilities in all 50 states

Emergency preparedness response to the H1N1 influenza pandemic

On April 24, 2009, the World Health Organization and the Center for Disease Control and Prevention elevated the level of H1N1 exposure in the United States and throughout the world to level six indicating a world-wide pandemic of the H1N1 Influenza Virus. In response to this threat, the VISN 3 Director activated the VISN Command Center to facilitate command and control of personnel and resources to assure the continuity of care for VISN 3's patients, volunteers, staff and visitors.

VISN 3's launched critical incident response committees such as the H1N1 Advisory Committee with members from Infection Control, Laboratory services, Emergency Management, Public Affairs, Strategic Planning, Pharmacy, and leadership representatives from each VA medical center. A H1N1 Reporting Group was established to monitor the inventory of vaccine received and distributed within each facility.

The Network's external response consisted of the Command Center staff working closely with the Office of the Deputy Under Secretary for Health for Operations and Management Office of Patient Care Services, and the Office of Public Health and Environmental Hazards, to facilitate a coordinated VA response. VHA provided \$1.7M to assist the Network for the respiratory protection program.



In addition the VISN 3 Command Center collaborated with various local and state agencies such as the New York State, New York City and New Jersey Departments of Health and Federal Executive Boards to facilitate a coordinated medical response to veterans, federal first responders, and the surrounding communities. These activities were accomplished to support readiness, to provide services and protect people and assets continuously in time of crisis.

VISN3 goes Green

“Go Green” Team

VISN 3 launched a “Go Green” initiative to focus on operational efficiencies, improve the environment and reduce costs. A “Green Team”, with members from all VISN3 facilities, was launched and held its first meeting in December. The “Green Team” will focus on reducing the environmental impact of materials, medical and regular waste, water consumption and improving the indoor environment and energy performance. The Team is currently evaluating operations VISN-wide to develop a healing and healthy environment.

Slogan Contest



VISN 3 conducted a “Go Green” slogan contest, which was won by the VAMC Northport Privacy Officer Steven Wintch. The Green Team reviewed 105 submitted slogan entrees and selected Mr. Wintch's slogan as the one that best captures the spirit of the VISN-wide “Go Green” initiative.

▼ 2009 “GO GREEN” ACCOMPLISHMENTS:

- VISN 3 has met the FY09 Performance Monitor of 3% energy reduction over FY08 energy use
- One of three VA Networks that meet the FY09 Energy Intensity Performance Monitor resulting in approximately \$900,000 energy cost savings
- The Bronx and East Orange VAMCs met or exceeded the FY09 mandated energy intensity target of a 12% reduction over a 2003 energy consumption baseline
- The Bronx VAMC received a 2008 Department of Energy Federal Energy and Water Management Award
- The Brooklyn VAMC received the Green Globe (green building certification) “Three Globes” Certification.

VISN3 Radio Show Launched



Low vision, physical rehabilitation and proper diets are just some of the topics discussed on VA Healthcare Advantage Radio (89.1FM). Launched in May, 2009, the show airs every Sunday morning at 8:30. The show is produced at a studio at Fairleigh Dickinson University and potentially reaches 707,000 Veterans who live in the metropolitan area.

The show is all about educating Veterans, their families and the general public about illness, treatment options and the important part Veterans play in maintaining health. VA physicians, nurses, psychologists, social workers and other clinicians are guests on the show and discuss important information and the VA health care services that are available throughout Network.

VA Healthcare Advantage Radio has been very popular with radio listeners. Radio Research Consortium and WFDU fundraising data found an average listener increase from 1400 to 1900 during the VA Healthcare Advantage Radio 8:30am Sunday morning time slot from September to December 2009. Several hundred “hits” have accrued on WFDU’s Website audio-stream, indicating that listeners are also accessing the show on the WFDU 89.1 Website. VA toll-free comment line listener data reveals that of 22 callers: (1) 82% agreed that they learned something new about health topics; (2) 77% agreed that they learned some new things about VA health care; (3) 63% agreed that they have a changed opinion of VA health care; and (4) 68% agreed that they are more likely to refer a veteran for VA health care.



▲ VISN3 Communications Officer and VA Healthcare Radio Show host John Mazzulla (left) with Dr. Ken Reinhard, Clinical Psychologist, Director of the Anxiety Disorders Clinic, VA Hudson Valley Health Care system Montrose Campus.

VA Healthcare Advantage Radio interviews are posted on the VA Website:
<http://www1.va.gov/visns/visn03/broadcasts.asp>
and Fairleigh Dickinson University Website www.wfdufm.com.

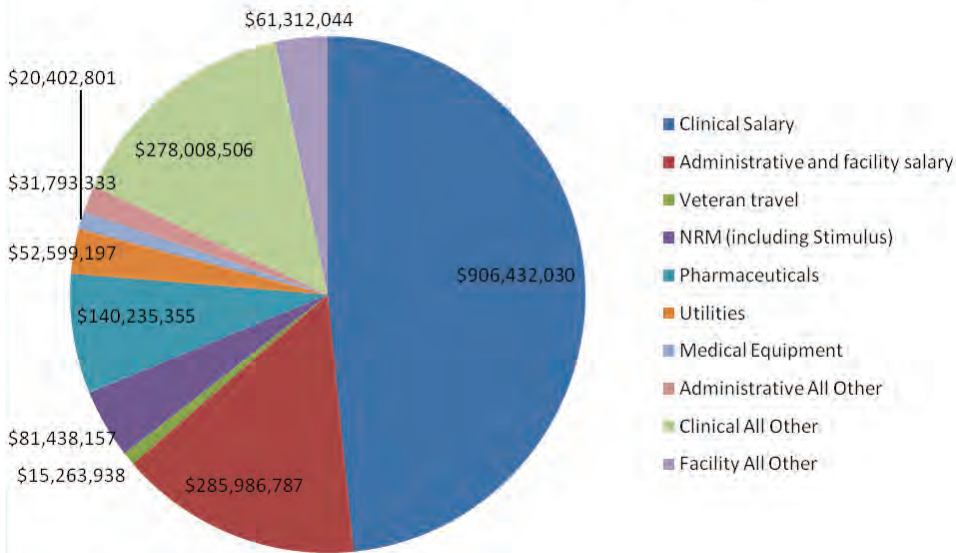


NORTHPORT VA MEDICAL CENTER Accomplishments

- Re-surveyed and received full accreditation from The Joint Commission, American Association of Blood Banks, College of American Pathologists, Food and Drug Administration, Office of Research Oversight and Association for the Accreditation of Human Research Protection Programs
- Won the VA Undersecretary’s Systems Redesign Award
- Received the VA Secretary’s Award for Excellence in Chaplaincy
- Received the VA National Chaplain Center’s Best Practice Award
- Received the VA Secretary’s Labor/Management Award (Honorable Mention)
- Received the VA Diversity Management & EEO Shared Leadership Award
- Received the VA Nurse/Chief of Staff Poster Presentation Award
- Received the Military Chaplains Association Emerson Foundation Award
- Received a National Network of Medical Libraries Grant
- Unveiled a Fallen Soldiers Memorial
- Unveiled a Medal of Honor Memorial
- Unveiled a Walt Whitman sculpture
- Held Veterans Memorial Garden groundbreaking
- Relocated and renovated the Hematology Clinic
- Featured on Fox News story regarding “VA Recreation”
- Featured in Newsday article entitled “VA Model for Government Care”

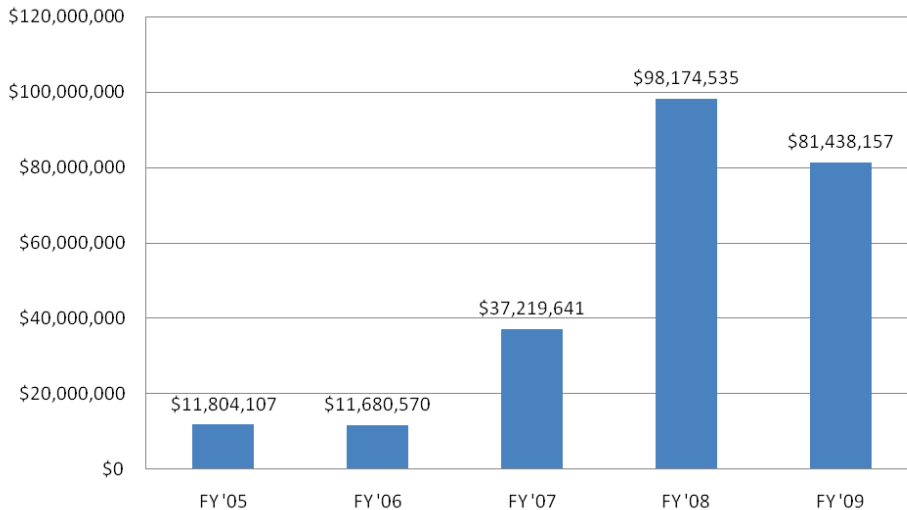
Vital Statistics

▼ VISN3 FY09 SPENDING (OBLIGATIONS)



This pie chart shows the breakout of VISN 3 expenditures for FY09 by major clinical, administrative and facility categories.

▼ VISN3 NON-RECURRING MAINTENANCE (NRM) PROGRAM



Non-recurring maintenance (NRM) projects are facility improvement projects with a long life span, such as patient unit renovations, roof repair and replacement and heating and air conditioning upgrades. This bar graph demonstrates significant funding increases for the NRM program for FY07-FY09. The increase is due to the 2007 supplemental NRM funding package spent in FY07 and FY08 as well as the FY09 Stimulus package. This graph includes \$7.7 million in Stimulus completed in FY09 with a more significant number expected in FY10.

Business Operations Score High Marks

VISN 3 had very successful business operations performance outcomes in FY09, achieving a cumulative result of 96.7% for all financial indicators. The network ranked in the top third of VA Networks country-wide.

In collection activities:

- Sharing collections went from \$12.1M in FY08 to \$15.3M, an increase of 26%
- VISN3 exceeded the Medical Care Collections Fund (MCCF) goal by 2%, collecting \$106,577,179 from health insurance companies and copayments from first party payments. This is also a 4% increase, from fiscal year 2008.
- Gross Days Revenue Outstanding was 51 days, (goal 56 days) exceeding the goal by 10%.
- Accounts Receivable greater than 90 days was less than 23.78% (goal 28%)
- Days to Bill was 52.2 days (goal 59) exceeding the goal by 13%. In financial benchmarks:
- Work-in-Progress and Capitalization Reconciliations exceed the 80% target at 86%.
- VISN3 met the target for Undelivered Orders and Accrued services payable met the 81.54 % target.
- Material weakness measures met the 90% goal
- VISN3 exceeded the 80% goal of construction obligations by June 30, met the 100% NRM obligations by September 30 and obligated 100% of the required facility condition assessment projects identified.

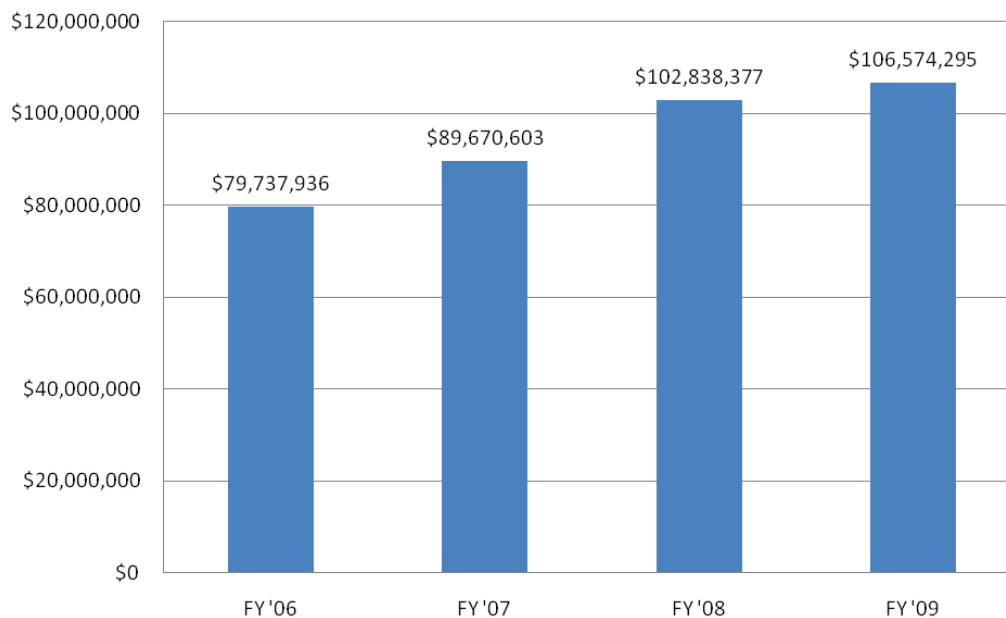


▼ VISN3 BUDGET (IN MILLIONS)



The VISN 3 budget has increased over a four year period. The budget is primarily determined by the clinical complexity of Veteran treatments and funding for special enhancements, medical resident education and non-recurring maintenance and repair, including Supplemental and Stimulus.

▼ VISN3 MEDICAL CARE COST FUNDS (MCCF) COLLECTIONS



This chart demonstrates increasing medical care cost funds (MCCF) collections. MCCFs are reimbursements from third party health insurers and co-payments from certain non-service connected Veterans for the cost of health care provided, as well as pharmacy co-payments from certain non-service and service connected Veterans.

EDITOR

John R. Mazzulla
VISN HSS/Communications Officer

CONTRIBUTING WRITERS

Raymond Aalbue
Public Affairs Officer, VA NYHHS

Catherine Abshire, M. Ed
Network OEF/OIF Program Manager

Jim Connell
Dir Community/Government Relations
JJ Peters VAMC

Cathy Cruise, MD
Lead VISN Care Coordinator

Ann Feder, MSW
VISN3 Service Line Manager

Christine Fox
Acting VISN Chief Fiscal Officer

Ellen Deutsch
VISN Chief Fiscal Officer (Ret.)

Sara Garrison, MD, MPH
Deputy Chief Medical Officer/Patient
Centered Care

Julie Irwin, LCSW
VISN Homeless Outreach Coordinator

Meredith King-Jensen, RN
Occupational Health Program Manager

Frank Napoli
VISN Energy Manager

Miriam Rosa-Cummo, ANP-BC
Lead Women Veteran Program Manager

Michael A. Sabo
VISN Director

Joe Sledge
Public Affairs Officer, Northport VAMC

Susan Spector
VISN Workforce Development
Coordinator

Sandy Warren
Public Affairs Officer, VA NJHS

Nancy Winter
Public Affairs Officer, VA HVHS

Pam Wright, RN
VISN Quality Improvement Manager

PUBLICATION DESIGN

Yang Zhao
Lead Visual Information Specialist,
JJ Peters VAMC

WHERE You Can Find Us – Anytime

VA Hudson Valley Health Care System

MEDICAL CENTERS:

Montrose Campus

Route 9A/P.O. Box 100
Montrose, NY 10548-0100
(914) 737-4400

Castle Point Campus

Castle Point, NY 12511
(845) 831-2000

COMMUNITY CLINICS:

Jefferson Professional Plaza
60 Jefferson Street, Unit 3
Monticello, NY 12701
(845) 791-4936

150 Pike Street
Port Jervis, NY 12771
(845) 856-5396

20 Squadron Boulevard –
Suite 400
New City, NY 10956
(845) 634-8942

30 Hatfield Lane –
Suite 204
Goshen, NY 10924
(845) 294-6927

488 Freedom Plains Road
Poughkeepsie, NY 12603
(845) 452-5151

1875 Route 6
Warwick Savings Bank –
2nd Floor
Carmel, NY 10512
(845) 228-5291

2881 Church Street
Route 199
Pine Plains, NY 12567
(518) 398-9240



VA James J. Peters Medical Center

130 West Kingsbridge Road
Bronx, NY 10468
(718) 584-9000

COMMUNITY CLINICS:

23 South Broadway
White Plains, NY 10601
(914) 421-1951

124 New Main Street
Yonkers, NY 10701
(914) 375-8055

41-03 Queens Boulevard
Sunnyside, NY 11104
(718) 741-4800

953 Southern Boulevard
Bronx, NY 10459
(718) 741-4900



VA New Jersey Health Care System Medical Centers:

MEDICAL CENTERS:

East Orange Campus

385 Tremont Avenue
East Orange, NJ 07018-1095
(973) 676-1000

Lyons Campus

151 Knollcroft Road
Lyons, NJ 07939
(908) 647-0180

COMMUNITY CLINICS:

970 Route 70
Brick, NJ 08724
(732) 206-8900

654 East Jersey Street –
Suite 2A
Elizabeth, NJ 07206
(908) 994-0120

171 Jersey Street –
Building 36
Trenton, NJ 08611-2425
(609) 989-2355

385 Prospect Avenue
Hackensack, NJ 07601
(201) 487-1390

115 Christopher Columbus
Drive
Jersey City, NJ 07302
(201) 435-3055

317 George Street
New Brunswick, NJ 08901
(732) 729-0646

340 West Hanover Avenue
Morristown, NJ 07960
(973) 539-9791
(973) 539-9794

20 Washington Place
Newark, NJ 07102
(973) 645-1441

Patterson Army Health Clinic
Stephenson Avenue –
Building 1075
Fort Monmouth, NJ 07703
(732) 532-4500

275 Getty Avenue
Paterson, NJ 07503
(973) 247-1666



VA New York Harbor Health Care System

MEDICAL CENTERS:

Brooklyn Campus

800 Poly Place
Brooklyn, NY 11209
(718) 836-6600

New York Campus

423 East 23rd Street
New York, NY 10010
(212) 686-7500

VA Primary and Extended Care Center

179th Street & Linden
Boulevard
St. Albans, NY 11425
(718) 526-1000

COMMUNITY CLINICS:

40 Flatbush Extension –
8th Floor
Brooklyn, NY 11201
(718) 439-4300

1150 South Avenue
3rd Floor – Suite 301
Staten Island, NY 10314
(718) 761-2973

55 West 125th Street –
11th Floor
New York, NY 10027
(646) 273-8125



VA Northport (Long Island) Medical Center:

79 Middleville Road
Northport, NY 11768
(631) 261-4400

COMMUNITY CLINICS:

4 Phyllis Drive
Patchogue, NY 11772
(631) 758-4419

1425 Old Country Road
Plainview, NY 11803
(516) 694-6008

Westhampton Air Base
(by appointment only)
150 Old Riverhead Road
Westhampton, NY 11978
(631) 898-0599