

2013 ANNUAL REPORT



VA PITTSBURGH HEALTHCARE SYSTEM

CONTINUOUSLY IMPROVING





To all our partners:

This past year was one of the most difficult in VA Pittsburgh Healthcare System's history. Yet, the defining theme that persisted—and flourished—in 2013 is one of determination. Innovation. And a distinct pride fueled by our medical center's 89-year legacy of delivering exceptional service to our Nation's heroes.

In 2013, we rebuilt our water treatment and surveillance system from scratch. We opened the largest full-scale residential rehabilitation treatment facility within a community living center. We continued to reduce homelessness among Veterans in the region. We led the way in heart failure care, winning the American Heart Association's Gold award for a third consecutive year. This list goes on and on.

In short, we never wavered in our relentless pursuit of excellence. Even during trying times. And periods of rapid change. While leading, Learning, And healing.

What does this mean for Veterans?

It means that VA Pittsburgh is better than ever before. The challenges of 2013 have made us stronger. Our water system now stands as an industry best practice for Legionella prevention and treatment. Our access to care—in our facilities, your neighborhoods and throughout the greater Pittsburgh community—is expanding. The era of one-stop-shopping for VA services is here. To top it all off, our clinical track record remains one of the best in the VA system.

In 2014, we will advance this relentless pursuit of excellence and continue delivering the very best health care anywhere to our Nation's heroes.

It is our duty. Our mission. And our proud honor.

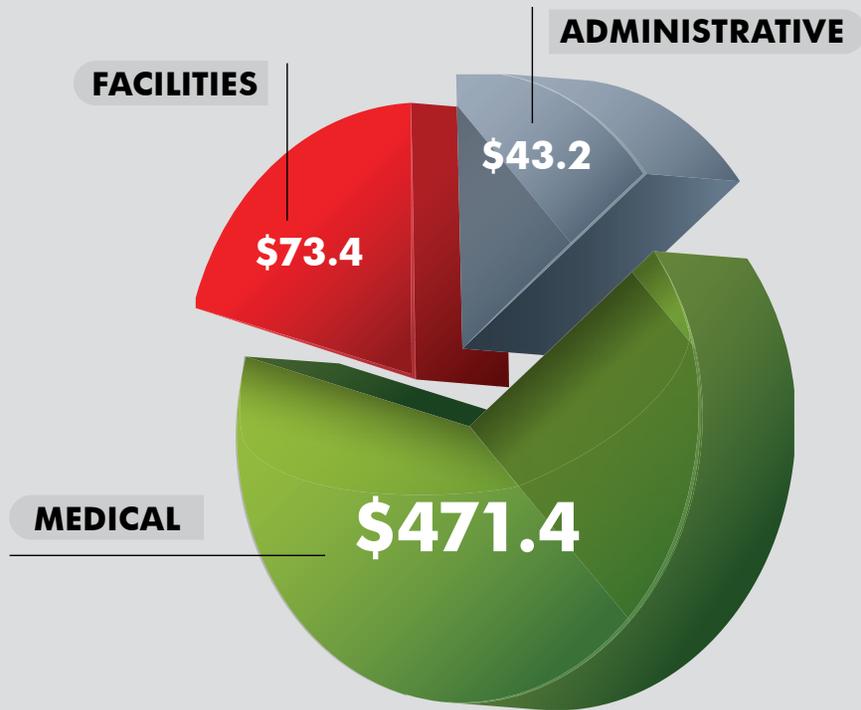
Respectfully,

Executive Leadership Board
VA Pittsburgh Healthcare System



VAPHS Operating Budget

\$588 MILLION



VETERANS SERVED

67,082 Unique Veterans Served

674,776 Outpatient Visits

VAPHS BEDS 582 Total Beds

224 Beds at University Drive Campus

146 operating beds

78 secure, private behavioral health beds

358 Beds at H.J. Heinz Campus

263 community living center beds

65 Veterans recovery center beds

31 behavioral health residential rehabilitation beds

VAPHS Water System

FACTS FOR 2013

- > VAPHS developed an electronic database and a Hazard Analysis Critical Control Point (HACCP) Plan to conduct risk assessments – both to track and guide the monitoring and maintenance of the potable water systems.
- > It is the policy of VAPHS to test every patient suspected to have pneumonia for Legionella bacterium.
- > There were no patient cases of hospital-acquired Legionella pneumonia in 2013.
- > Over 4,500 environmental Legionella samples were collected at VAPHS in 2013. Of those, 79 (1.5%) tested positive for Legionella and were remediated within 24 hours.
- > All plumbing systems at the H.J. Heinz Campus were mapped in 2013. Approximately 240 “dead legs” (areas of water stagnation) were identified and targeted for removal.
- > Over 2,800 mixing valves have been installed across both campuses. These valves allow circulating hot water temperatures to reach levels that prevent growth of Legionella and other harmful bacteria without scalding end users when the water comes out of the faucet.
- > \$12.1 million have been spent on water system improvement efforts.

Addiction Services

Substance Use Disorders (SUDs) have substantial negative consequences on Veterans' mental and physical health, work performance, housing status, and social functioning. The population of Veterans with SUDs is increasing. Clinicians and researchers at VAPHS are dedicated to improving the accessibility, the efficiency, and the quality of treatment of hazardous substance use within all medical settings but particularly, within primary care.

The Substance Abuse Assessment Team (SAAT), a consultation-liaison service, offers comprehensive assessment and diagnosis of SUDs, detoxification and withdrawal management, counseling and support, links to specialty treatment, and initiation and maintenance of office-based pharmacotherapy for addiction.

SAAT's work is complimented by the VAPHS Center for Treatment of Addictive Disorders (CTAD), a division of the Behavioral Health Service Line. CTAD offers three distinct programs. First, a Residential Rehabilitation Program provides addiction treatment on an inpatient basis and is equipped to serve Veterans with a variety of combined medical and psychiatric conditions. Secondly, the Opioid Treatment program is capable of treating Veterans with opioid addiction through pharmacotherapy interventions. Finally, the Outpatient Recovery and Aftercare Clinic offers intensive outpatient programs, contingency management, motivational enhancement, individual and group therapy, behavioral health services, and addiction medication management.

In 2013, the VAPHS Center for Treatment of Addictive Disorders worked with **2,128 Veterans** who had a combined total of 42,266 encounters with the program.

MyHome

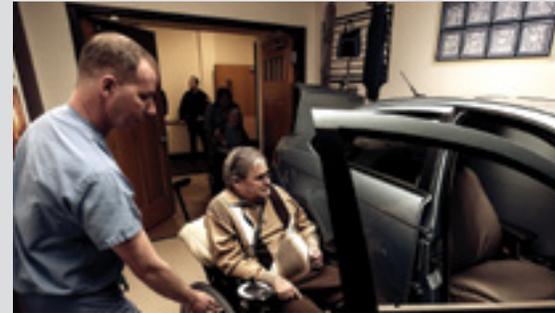
In February 2013, VAPHS dedicated an innovative rehabilitation facility, called MyHome, at the H.J. Heinz campus. Designed to aid Veterans recovering from conditions such as strokes, falls and surgeries, this revolutionary new space is dedicated to helping Veterans rehabilitate better and faster than ever before.

MyHome is a 1000-square foot functional lab that includes a kitchen, living room, dining room, bedroom, bathroom, stairs with landing, laundry, computer nook, front and side porches, and even has a garage with a real car! Our unique layout promotes performance-based interventions.

MyHome can help Veterans achieve their goals and return home faster. In comparison to the national average of 26 days, the average length of stay for Veterans receiving the benefits of MyHome with intense therapy is 17 days.

This is VA's only full simulation training home within a Community Living Center (CLC). Our goal is to help our heroes thrive in our home so that they can live happily and safely in their home.

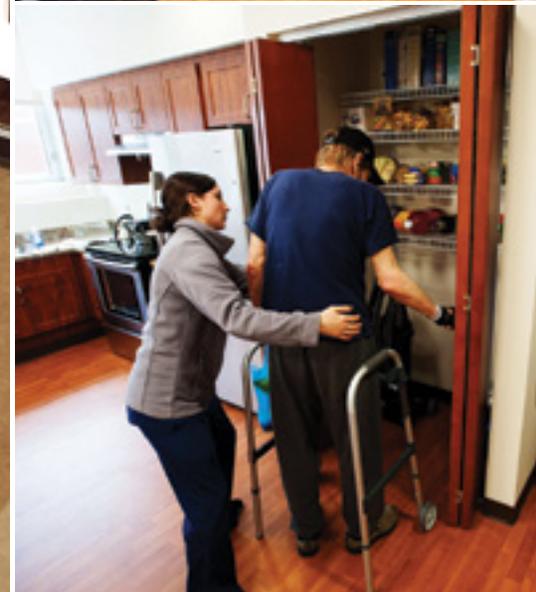
To date, more than **80 Veterans** have benefited from MyHome.



MyHome Helps Veterans:

- > Regain independence
- > Boost quality of life
- > Stay out of the hospital longer
- > Practice solutions to their mobility problems
- > Heal in a supportive setting
- > Involve loved ones in care
- > Participate in cutting-edge research







Patient Aligned Care Teams

Primary Care at VAPHS has been utilizing the Patient Aligned Care Teams (PACT) model since it was first introduced. PACTs work together with our Veterans to promote patient-centered care and life-long health and wellness. Comprised of the Veterans' health care professionals (primary care providers, nurse care managers, clinical associates, and administrative clerks), PACTs put Veterans at the center of their care while emphasizing two-way communication with their healthcare teams. All of this leads to more timely access to personalized care.

After listening to Veteran feedback, in 2013 Primary Care began calling patients to remind them of their upcoming appointments and to provide them with additional clinical reminders.

This has resulted in a reduction in the time that Veterans spend with nursing staff on the day of their appointment and has allowed for more time to be spent with their providers.

Overall, Veterans enjoy taking a more active role in their healthcare and express high levels of satisfaction with care quality, report improved quality of life, and have fewer hospital stays and readmissions.



Meet Marybeth Busbee

"I am so happy that my care is now handled by a PACT team! I can call "my" team and know that they will determine who on the team is best able to handle my question or concern and it will be taken care of. I know the names of my team members and see them when I come to primary care!"

PACT teams have now made it easier for me to have direct contact with members of "my" primary care team who can address my questions or concerns through a call to the call center or utilizing a secure message through MyHealthVet—this is my favorite!"

Highlights from our 2013 PACT Performance Measures:

Primary Care Provider Continuity

77%

77% of our Veterans have the same Primary Care Provider on every visit

Telephone Care

32%

32% of our Veterans receive care by telephone (exceeded VISN 4 and VHA averages by 2%)

Same-Day Access

81%

81% of our Veterans can get a same-day appointment (exceeded VISN 4 and VHA averages by 10 and 17%)

Desired Date

97%

97% of our Veterans get an appointment within 7 days of their preference (exceeded VISN 4 and VHA averages by 2 and 6%)

Primary Care Call Center

In response to feedback from our Veterans, Primary Care has implemented several measures to improve the Primary Care Call Center. A new staffing model and adherence to 44 best practices for the Call Center has reduced average wait times from over 10 minutes to less than 10 seconds and has cut call abandonment rates from over 50 percent to less than five percent. These efforts have also improved the efficiency and appropriateness of call routing and improved the quality of information delivered by Call Center employees. Overall, Veterans have been praising the shorter wait times, fewer busy signals, and the dramatically improved customer service under the new model.

Average Call Center Wait Times

10 MINUTES

in 2012

10 SECONDS

in 2013

Extended Clinic Hours

In 2013, VAPHS improved access for our Veteran patients by opening Primary Care clinics at both University Drive and Heinz campuses on Wednesday evenings and Saturday mornings, achieving high show-rates for appointments and earning compliments from both patients and staff.

In partnership with Primary Care, Behavioral Health has a provider on site for these extended clinics. Additionally, University Drive offers a Behavioral Health walk-in clinic for patients with mental health emergencies. The walk-in clinic operates Monday through Friday, 8 am to 4 pm, and serves approximately 25 Veterans per week. Behavioral Health also offers extended early morning and late evening clinic hours Monday through Friday—making it convenient for Veterans to receive care.



@VAPittsburgh

VAPHS leads VISN 4 with **over 56%** of Veterans enrolled in My HealthVet.

To learn more about My HealthVet, visit www.myhealth.va.gov.

Improving Virtual Care and Technology

Telehealth

Virtual Care at VAPHS reached new heights in 2013. Throughout 2013, nearly 40 percent of VAPHS patients participated in at least one Virtual Care modality. Ten new Clinical Video Telehealth (CVT) and Store and Forward Telehealth (SFT) services were offered from VAPHS, with eight of these new CVT/SFT services being available at our Community Based Outpatient Clinics (CBOCs). And TeleMOVE was added as a new service to the six existing Home Telehealth services.

In addition, the VAPHS Geriatric Research Education and Clinical Center (GRECC) was one of the first GRECCs to pilot a comprehensive TeleDementia CVT program. And in the spring of 2013, VAPHS was the first and only VA Medical Center to open a facility-operated TeleMental Health Hub, which is based out of our new Greentree Annex. Services have been delivered from the TeleMental Health Hub to the Altoona, Butler, and Clarksburg VAs. Expansion continues to other VA facilities!

Also of note, VAPHS continues to serve as part of the VISN 4 Teledermatology Regional Reading Center and has read approximately 1,100 images for other VISN 4 facilities and 1,600 images for VAPHS.

40% of VAPHS patients participated in **at least one** Virtual Care modality.

Telehealth Services

VAPHS, in coordination with other federal partners, offers a total of 22 telehealth services, with 15 available at our CBOCs. Ask your provider or telehealth coordinator/technician about the telehealth services that might be available to you.

- TeleAudiology Group Education
- TeleBariatric Surgery Group Education & TeleBariatric Nutrition Education
- TeleCKD (chronic kidney disease) Group Education
- TeleDementia
- TeleDermatology Imaging
- TeleDiabetes Group Education
- TeleDiabetes Individual Follow-ups
- TeleInsomnia
- TeleMOVE Group Education & TeleMOVE Group Exercise Education
- TeleNeurosurgery
- TeleOrthopedic Surgery
- TelePalliative Care
- TelePhysical & TeleOccupational Therapy
- TelePsychiatry MD
- TelePsychiatry CRNP
- TelePsychology
- TeleRetinal Imaging
- TeleSleep
- TeleSpeech & TelePIRATE
- TeleSuboxone
- TeleSCI (Spinal Cord Injury)
- TeleVascular Surgery

Understanding the 6 Components of Virtual Care

Virtual Care is used to define clinical aspects of care that are typically conducted remotely through the use of various forms of technology.

Clinical Video Telehealth: uses real-time interactive video conferencing and other technologies to assess, treat, and provide care to a patient remotely.

Store and Forward Telehealth: uses technologies to acquire and store clinical information, such as data, images, sound, and videos, that is then forwarded to or retrieved by a provider at another location to be evaluated.

Home Telehealth: uses appropriate technologies, health informatics, disease management, and case management to facilitate access to care from home.

Secure Messaging: uses encrypted and confidential emails that can be sent between a patient and their care team through MyHealthVet.

E-Consults: uses technology for electronic consultations between a primary care provider and a specialist in order to obtain specialist recommendations for patient diagnosis or management.

SCAN-ECHO: uses video conferencing for medical specialists and primary care doctors to collaborate about patient care.

VIRTUAL CARE BY THE NUMBERS

24,277

Virtual Care Users

7,278

Telehealth Unique Users

18,771

Telehealth Encounters

15,705

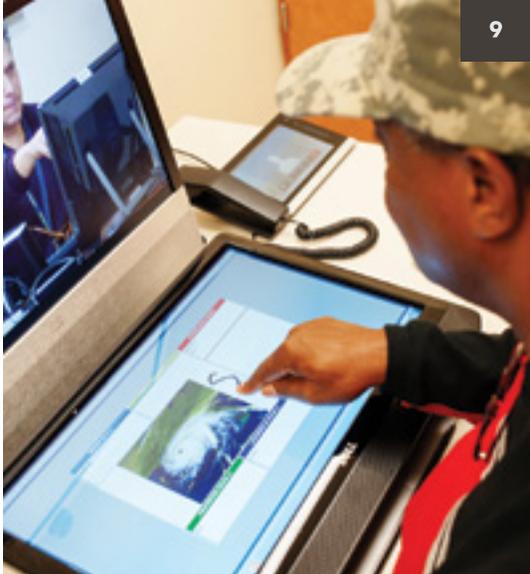
Secure Messaging Users

42,475

Secure Messages Sent

4,424

E-Consult Users



Veterans Engineering Resource Center (VERC)

As one of four VERCs throughout VHA, the mission of VERC is to develop and implement solutions for major healthcare problems and to provide education and training in Health Systems Engineering and Systems Redesign. The Pittsburgh VERC has worked on the following for 2013:

- > TeleAphasia Assessment tool for PIRATE
- > Game-based learning focused on teaching strategies to improve patient access and reduce missed opportunities
- > A pilot lung cancer screening program for Cancer Coordinators

PIRATE

The Program for Intensive Residential Aphasia Treatment and Education, also known as PIRATE, is an intensive and comprehensive aphasia program. Since its launch in 2009, PIRATE has served 76 Veterans and active duty personnel from across the country. PIRATE participants reside in community-based lodging facilities during their participation. The four-week program provides five hours of daily evidenced-based aphasia interventions delivered by speech language pathologists experienced in the assessment, diagnosis, and treatment of aphasia. The program also includes weekly social and therapeutic group activities focused on community reintegration and aphasia advocacy.

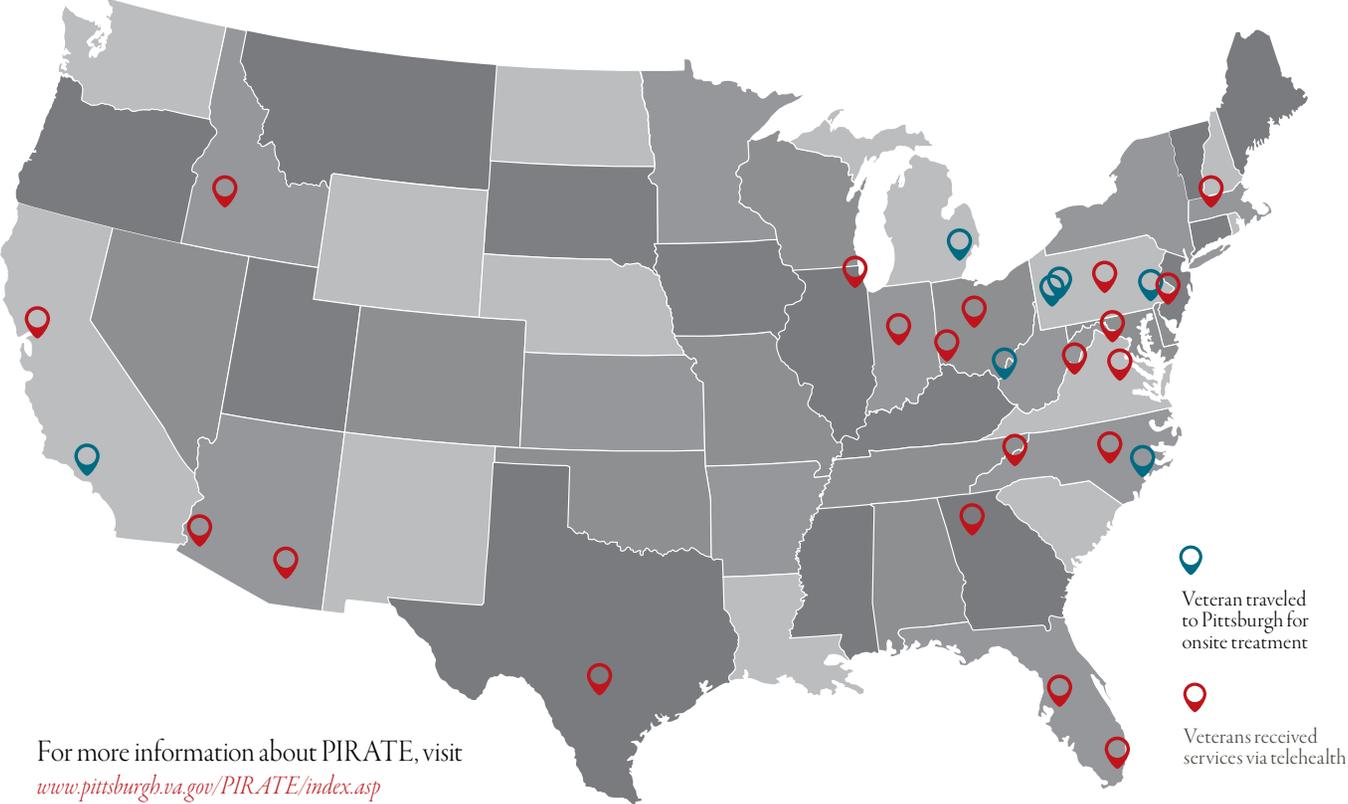
In 2013, PIRATE and Veterans Engineering Resource Center (VERC) team members collaborated to develop a tool box of software programs that permit VHA speech language pathologists to access and administer speech, language, and quality of life assessments from their desktops. These programs capture, record, and automatically score patients' verbal and motor response to assessment items,

significantly reducing the burden of testing for both provider and patient. The tool box may also be used with Clinical Video Telehealth and touchscreen technologies to conduct remote assessments which have demonstrated results similar to face-to-face assessments. Also in 2013, PIRATE staff established Telehealth agreements with 21 VA Medical Centers nationwide and used this technology to conduct remote speech language and quality of life assessments to Veterans who were unable to access these services at their local VA Medical Centers.

A•pha•sia

Common in adults who have had a stroke, aphasia is a disorder caused by damage to the parts of the brain that control language. It can make it hard for individuals to read, write, and say what they mean to say.

NIH: National Institute of Neurological Disorders and Stroke.



For more information about PIRATE, visit www.pittsburgh.va.gov/PIRATE/index.asp

Improving for Veterans, Families and Caregivers

No Veteran Dies Alone



As part of the recently launched No Veteran Dies Alone (NVDA) Program, volunteers give their time to Veterans who may not have anyone to be with them in their last hours. NVDA is a one-of-a-kind program in which volunteers provide companionship and assistance to Veterans who are entering the final stages of life. NVDA volunteers “fill-in” and provide comfort at the bedside at times when family and friends are unable to be present. When end of life is imminent, volunteers are contacted to initiate a “vigil” at the patient’s bedside.

These vigil volunteers receive comprehensive training and are part of a team that works in shifts throughout the day and night to be there to serve Veterans in their final hour.

Volunteer responsibilities include: holding the Veteran’s hand, talking to the Veteran, assisting the family by giving them rest breaks, reading to

the Veteran, playing music, notifying the nursing staff of any concerns or changes in the Veteran’s condition, and assisting in making the Veteran comfortable. The volunteers are on-call when needed and often stay longer than required – because they want to. The first class of NVDA training graduates completed the program in August. These dedicated individuals allow each Veteran to die with respect, comfort, and dignity.

We invite you to spread the word about this program and support the mission “No Veteran Dies Alone” at VAPHS. Those who want to be on the NVDA team must first interview with the chaplain, become a registered VAPHS volunteer, and train in the hospice or palliative care functions at the hospital before receiving additional NVDA training.

For more information about the No Veteran Dies Alone program, contact Deborah Goral, Palliative Care Coordinator at *(412) 360-1984*.



VAPHS VOLUNTEERS BY THE NUMBERS

881

Regular Volunteers

139

Youth Volunteers

110,516

Volunteer Hours

\$2,446,824

Value of Volunteer Time

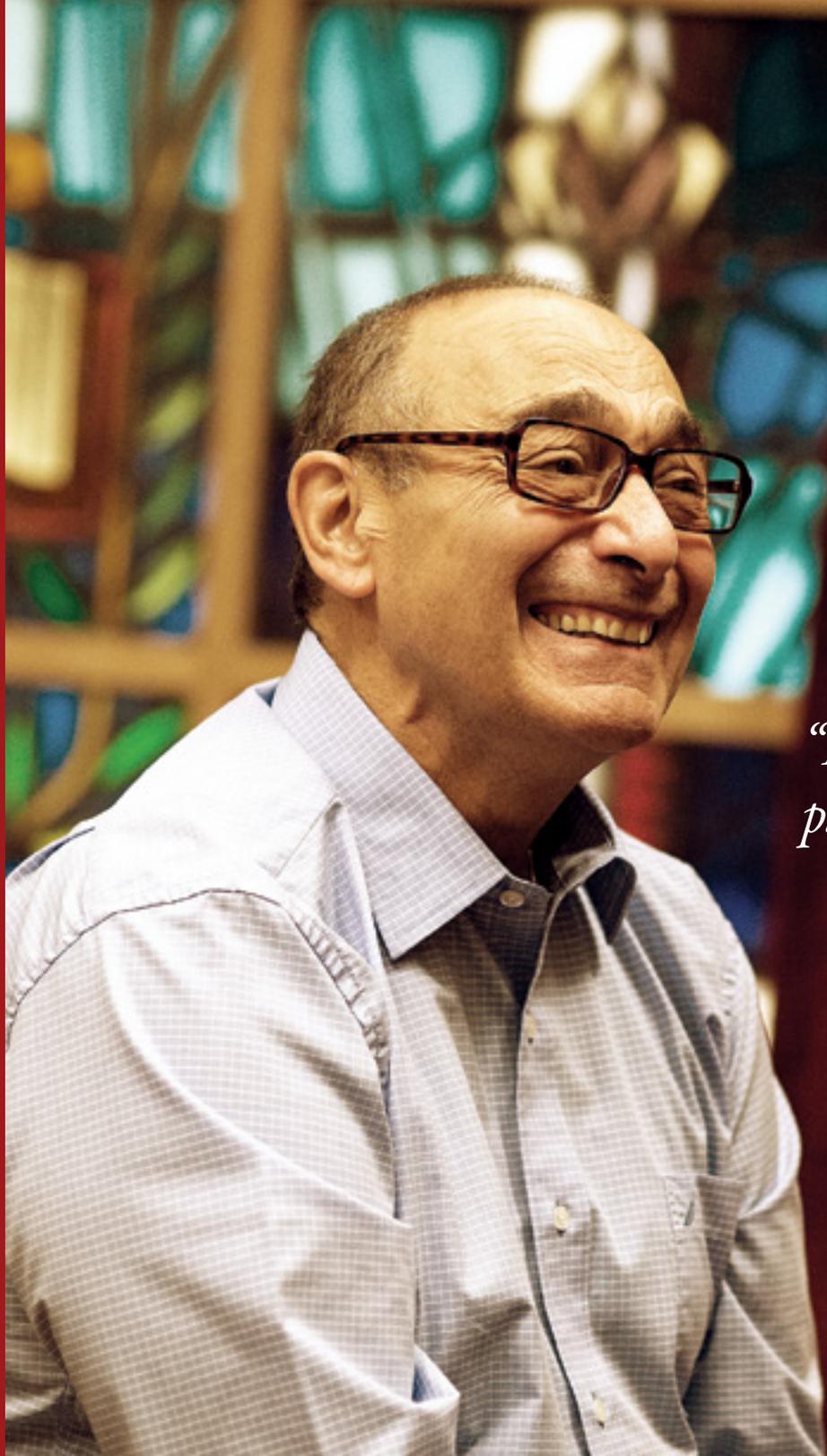
A Passion for Volunteering

Meet George P. Coppola, a 66-year old Vietnam Veteran who has an amazing spirit and whose effusive positive energy is immediately contagious. George has been volunteering at VAPHS for a little over a year with the *No Veteran Dies Alone* program. During the more than 300 hours that George logged in 2013, he spent much of his time speaking and educating outside organizations about the program.

When asked what his most memorable volunteer moment has been, George answered: “When I was volunteering one day, a WWII Veteran insisted I served with him on a destroyer. I sat there and listened as he recounted the journey of our service together. I had not served with him. I was a Vietnam Veteran, but I knew this man wanted to believe I was there so I sat and listened as he told the story of all we had done together. He passed away shortly after this encounter. I regret not being there when he passed and remember this when I am volunteering with the *No Veteran Dies Alone* program.”

If you ask George what he takes away from volunteering, you might notice a distant look in his eyes that will quickly turn to a look of joy – “I finally found my passion in volunteering” – George will tell you.

For more information about volunteer opportunities at VAPHS, please visit www.pittsburgh.va.gov/giving



“I finally found my passion in volunteering.”

George P. Coppola
Vietnam Veteran

Fisher House

The Pittsburgh Fisher House opened December 4, 2012. Fisher House provides a “home away from home” for families to stay free of charge while their loved ones receive inpatient care at VAPHS. The house has welcomed 329 families during 2013 and provided 2,677 nights of accommodations, saving Veterans and their families more than \$361,000 in hotel expenses. (The average rate per night at a local hotel is \$135.)

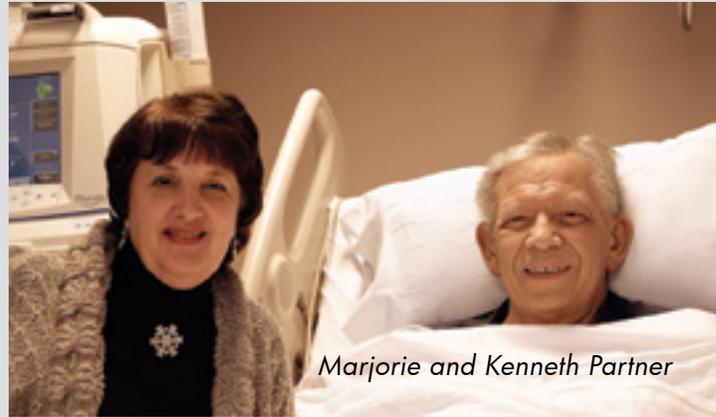
The Pittsburgh Fisher House received **\$84,162 in monetary donations** for 2013.

Ten charitable events were held for guests, including motorcycle runs, cars shows, and dinners. The events were coordinated by local community groups to directly support the Pittsburgh Fisher House, resulting in more than \$20,000 in monetary contributions. Welcoming and checking-in guests, baking and cooking, cleaning and organizing, assisting with office work, and transporting guests from the house to the medical center, ten regular volunteers provided 1,126 hours of service to Fisher House for the year. Community members, Veterans Service Organizations, and local businesses also prepared meals for our Fisher House guests.

For more information about Pittsburgh Fisher House, visit or call:

www.PittsburghFisherHouse.org
412-360-2032.

Meet the Partners



Marjorie and Kenneth Partner

Mrs. Partner has resided at Fisher House since November 2013 when she accompanied her Veteran husband to University Drive from the Altoona VA Hospital. Mrs. Partner recalls her husband’s first admission in May: “I asked my husband’s nurses if they could suggest a local hotel, reasonable in cost. I had no idea what Fisher House was. All I was looking for was a bed and a community bathroom.” She was amazed at what was offered. “I couldn’t believe what I was provided; it is gorgeous. I think Fisher House rivals any 4 or 5 star hotel.” Mrs. Partner described having two double beds in her room, an advantage when out-of-town relatives come to visit. She expressed pleasure in having her own television and a personal bathroom. Mrs. Partner takes her meals to the hospital where she spends her days, 9:30 am to 6:00 pm, with her husband. She acknowledged physical and mental exhaustion at the end of the day, some days needing to be alone, while other days needing to reach out. Mrs. Partner described Fisher House staff as friendly, knowledgeable, and well-trained at listening, “They are not intrusive. The staff offers support when you go to them.” Mrs. Partner is grateful for the many opportunities afforded her through Fisher House. She noted,

“My husband and I have been married for 44 years. We’ve done everything together. Fisher House allows us to continue to be together, and it is free!”

Mrs. Partner takes one day at a time with regard to her husband’s recovery, recognizing that Fisher House, the staff of Fisher House, and fellow occupants are there to support her through the process.

FISHER HOUSE BY THE NUMBERS

329

Families Served

1,000

House Guests

2,677

Nights Stayed

\$361,000

Savings in Hotel Expenses for Families



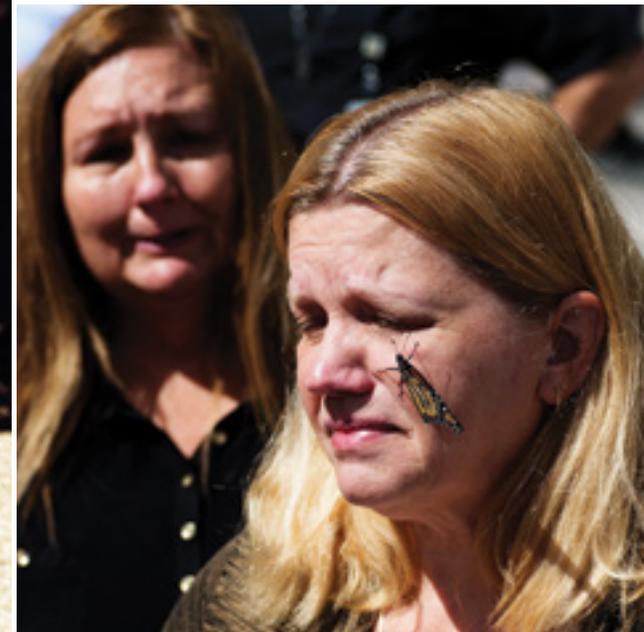
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VAPHS conducted 5,711 surgeries. 44 Liver Transplants and 44 Kidney Transplants in 2013.



Veteran and his family enjoying their stay in the Fisher House.

Remembering Our Heroes



Butterfly Ceremony

This September, VAPHS held the second annual Butterfly Ceremony in memory of the Veterans cared for in their final days at VAPHS. The purpose of the ceremony is to offer family members an opportunity to grieve, reconnect with staff, and honor their loved one. A live butterfly, the symbol of transformation, is given to each family to release at the completion of the service. In an emotional ending, upon release, some butterflies linger for a bit while others fly away.

VAPHS was honored to host the friends and family members of the 234 remembered Veterans at this year's ceremony.



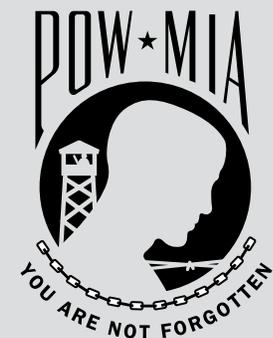
Prisoner of War, Missing Man Ceremony

On September 20, National POW/MIA Recognition Day, VAPHS Veterans, staff, and volunteers honored those still missing from our Nation's past wars and conflicts.

The ceremony included the Missing Man Table where each item laid on the table holds special significance.

A round table representing everlasting concern is set for one to show the frailty of each isolated prisoner. A white table cloth adorns the table to symbolize the

purity of the servicemen's intentions when answering the call to duty. A single red rose is displayed in a vase to signify the blood shed ensuring the freedom of our country and to remind us of the friends and family who keep the faith. A red ribbon is tied around the vase to represent the continued determination to account for our missing. A slice of lemon is a reminder of the bitter fate of those captured and missing in a foreign land. The salt symbolizes the tears shed by those missing and their families who seek answers. An inverted glass upon the table symbolizes the servicemen's inability to partake. The empty chair represents all who are missing. The candle reflects the light of hope and illuminates the way home.



Primary Care for Homeless Veterans

VAPHS believes that no Veteran should ever be homeless and is committed to helping those who are homeless or who are at risk of homelessness to find their way to a safe, stable living situation. VAPHS offers a wide range of resources, including transitional and permanent housing, case management, dental and medical care, and other supportive services that aim to meet Veterans where they are and guide them to where they want to be.

It is estimated that close to 200,000 Veterans will experience homelessness at some point throughout a single year. Homeless Veterans often struggle with post traumatic stress disorder, substance use issues, or other psychosocial issues. VAPHS has implemented a Homeless Patient Aligned Care Team (HPACT), which provides primary care for homeless Veterans and Veterans at-risk of becoming homeless. The HPACT focuses on improving access to care, coordination of care, and offering treatment of alcohol and other substance use disorders in a non-specialty setting and was established to serve as one of 36 initial demonstration sites in the U.S.

The Pittsburgh HPACT completed its first full year of operation in 2013. Pittsburgh's HPACT will continue to expand in the upcoming year and hopes to make a lasting difference in the lives of homeless Veterans.

more than

100

Veterans enrolled through the Pittsburgh Homeless PACT

The Pittsburgh Homeless PACT reduced emergency department use by 40% (7th among HPACTs) and inpatient admissions by 64% (1st among HPACTs). Estimated savings from these reductions **totaled almost \$500,000.**

Stand Down 2013

Hosted by VAPHS, the Allegheny County Department of Human Services, and many other community partners, Stand Down 2013 served over 350 local Veterans. Held in August at Shepherd's Heart Fellowship in downtown Pittsburgh, Veterans were treated to a barbeque cook-out and free haircuts while also having the opportunity to learn more about VA eligibility and registration, primary care, behavioral health, suicide prevention, homeless program services, Veterans Justice Outreach program, and vocational and rehabilitation services.



Veterans Justice Outreach Program

The Veterans Justice Outreach Program for VAPHS had a busy year. With a growing caseload, and the launch of new Veterans Treatment Courts, the program is pleased to be able to assist Veterans with their justice-related issues and provide them with the needed mental health, substance use disorder and medical treatment they deserve.

With a purpose of addressing the intricate needs of our Veterans, enhancing public safety, and reducing recidivism by connecting Veterans with treatment, Veterans Treatment Courts follow a problem-solving court model and are specifically designed for Veterans involved in the criminal justice system. As part of a collaborative process, the Veterans Justice Outreach Program maintains a focus on the most critical component of the program, which is to educate offending Veterans on the treatment options available through the VA and community partners in the surrounding areas.

The Veterans Justice Outreach program has allowed Veterans to successfully complete treatment and discover a new road in their journey, to reconnect with loved ones and avoid wrongful incarceration.

This year the Allegheny County's treatment court had 20 Veterans graduate from the program, including its first female. In honor of their accomplishments, the Veterans were given "challenge" coins to represent the commitment and resilience demonstrated through their participation in the program.



Improving Research and Simulation



New Research Office Building

The September opening of a cutting-edge Research Office Building at the University Drive campus in Oakland allows VAPHS to offer Veterans expanded programs, innovative therapies, and improvements in care. The 100,000-square-foot, \$32-million-dollar building was designed and built to qualify for silver certification from the Leadership in Energy and Environmental Design (LEED) green building rating system. It is home to the local Office of Research and Development, Clinical Trials Center, Center for Health Equity Research and Promotion (CHERP), Mental Illness Research Education and Clinical Center (MIRECC), and the Geriatric Research Education and Clinical Center (GRECC). Co-locating most of VAPHS's research functions provides a rich, collaborative environment for researchers seeking to improve Veterans' health and quality of life.

"Research helps define what VAPHS is. This facility will improve the efficiency of our research operations and will provide state-of-the-art space to make our investigators even more productive."

Dr. Ali Sonel
VAPHS Chief of Staff

RESEARCH BY THE NUMBERS

\$34,800,000

Research Dollars

334

Active Research Studies

119

Researchers

Center for Health Equity and Promotion (CHERP)

The Center for Health Equity and Promotion (CHERP) was transformed in 2013 into a Center of Innovation (COIN) after successfully competing for renewed funding. CHERP focuses on improving the quality and equity of health and health care for vulnerable Veterans, including racial and ethnic minorities, women, homeless, and others. CHERP also concentrates on improving the quality, safety, and value of clinical therapeutics. The VAPHS CHERP-affiliated homeless primary care clinic is featured on page 16.

Mental Illness Research, Education and Clinical Center (MIRECC)

As one of 10 MIRECCs across the country, the VISN 4 MIRECC focuses on treatment and prevention of patients who experience co-occurring psychiatric disorders and physical health or substance use disorders. This year, the VAPHS MIRECC helped create and distribute The Peer Specialist Toolkit. The toolkit is intended to help VHA medical centers and CBOCs deploy an additional 800 Peer Specialists within VA clinical care. These Peer Specialists are VA employees in recovery from mental illnesses and substance use disorders who help other Veterans to successfully engage in mental health and substance use treatment.



Geriatric Research, Education, and Clinical Center (GRECC)

The VAPHS GRECC aims to enhance the care of elderly Veterans via research focused on musculoskeletal disorders, communication disorders, neurological dysfunction, brain injury, disabilities due to aging, and rehabilitation outcomes. See page 8 to learn more about GRECC's important work with TeleDementia.

Human Engineering Research Laboratories (HERL)

HERL is a collaboration between VAPHS, the University of Pittsburgh, and UPMC Health System. HERL is dedicated to wheelchair and mobility research, specifically by improving the mobility and function of people with disabilities through advanced engineering in clinical research and medical rehabilitation.

This year HERL received a \$100,000 grant from Highmark Blue Cross Blue Shield and a \$150,000 grant from the Mitsubishi Electric America Foundation (MEAF) for its Advancing Inclusive Manufacturing (AIM) Program for Wounded Warriors which is designed to aid in the transition of rehabilitating active-duty Wounded Warriors and rehabilitating Veterans to potential careers in machining.

Simulation Center

In 2013, VAPHS saw significant growth and development of its simulation program.

Programming continues to expand in order to meet the goal of advancing clinical education and research in the service of excellent patient care through simulation-based learning.

Temporary space for simulation was activated, allowing the simulation program to expand in advance of the construction of a dedicated simulation center. Equipment and simulation devices, ranging from simple task trainers for practicing starting an IV to sophisticated virtual reality devices that simulate a cardiac catheterization procedure or a colonoscopy, have been received, installed, and are available for use.

Simulation use in clinical education at VAPHS increased more than 650 percent over the previous year. In 2013, 604 learners benefited from 1,579 simulation learning hours utilizing a variety of clinical simulation modalities. These included task trainers, standardized patients (an actor portraying a patient in an interaction designed to improve diagnostic or communication skills), virtual reality devices, and a robotic surgery simulator.

Through a competitive process, VAPHS was also selected by the Office of Academic Affiliations and SimLEARN as one of only two sites nationally for the new Advanced Interdisciplinary Fellowship in Clinical Simulation. As a result, VAPHS recruited two fellows who will be working on developing simulation scenarios, with particular emphasis on teaching clinical ethics.

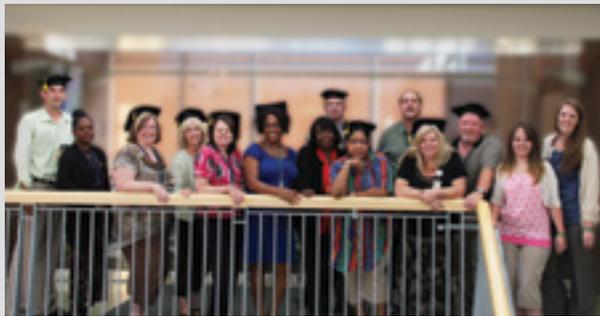


C.R.E.W.

Civility, Respect, and Engagement in the Workforce, or CREW for short, is a VA-wide culture change initiative that aims to improve the work climate through civil and respectful interactions. CREW is led by trained facilitators who lead team meetings, encourage problem-solving efforts, and conduct activities that can help improve how participants relate to one another. Nationally, CREW has been shown to improve patient outcomes and improve workforce engagement.

For 2013, CREW was implemented in nine VAPHS work groups. Based on surveys completed before and after the launch of CREW, these groups have experienced statistically significant improvements in workforce civility. At the same time, 20 new facilitators were trained and are now equipped to teach and spread the key messages of CREW.

“Now in its third year at VAPHS, I’m beginning to see CREW’s ripple effect. The kinder, more respectful behavior demonstrated in CREW meetings has spread to other employees and workgroups not participating in CREW. When we are treated better, we treat our coworkers better too. In many areas we’ve seen a reduction in conflict and negativity. This positive behavior even spreads to Veterans in the form of improved patient care and better customer service,” says VAPHS CREW Coordinator Lindsay Weissberg.



Workforce Development

The Workforce Development and Career Services Center offers current employees career counseling, resume and interview coaching, assistance with crafting individual development plans, and support in navigating USA Jobs. The Center launched in May 2012 in response to the All Employee Survey feedback indicating that there were not enough opportunities for promotion. With 174 employee consults in 2013, the Workforce Development and Career Services Center has worked to give employees the tools and confidence needed to pursue promotional opportunities within VAPHS.

Leadership Development

In 2013, 21 employees at all levels of the organization graduated from workforce development programs and were provided with opportunities to develop technical and leadership skills and to fill vital roles within VAPHS. These programs included the Leadership Development Institute (LDI), the Leadership, Effectiveness, Accountability, and Development Program (LEAD), and the School at Work Program (SAW).

VAPHS 2013 WORKFORCE BY THE NUMBERS

3,372

Employees

496

New Hires

1,050

Veteran Employees

155

New Veteran Hires

586

Physicians

892

Nurses



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The Highland Drive closure relocated 770 employees: 457 to University Drive, 254 to H.J. Heinz, 59 to the new Greentree Annex.

Special Emphasis Committees

AFRICAN AMERICAN COMMITTEE

The mission of the VAPHS African American Special Emphasis Committee is to build a more inclusive working environment grounded in equality, mutual respect, and understanding of diversity that reflects the demographic diversity of our staff and the Veterans we serve. The Committee is dedicated to exploring and appreciating the history, opportunities, and challenges of African Americans, while striving to make a positive impact on our campuses and local communities.

Started in October 2013 with less than 10 members, the committee has grown to over 70 members. Recent activities include attending the Tuskegee Airmen dedication in Sewickley and marching in the African American Heritage Parade in downtown Pittsburgh.

HISPANIC COMMITTEE

The Hispanic Committee's mission is to help identify and eliminate recruitment and employment inequities, if any exist, which may negatively affect Hispanic employees and applicants, and to identify areas with less than expected participation and under-utilization of Hispanics in VA's workforce.

The program also assists in helping Hispanics develop professionally and is dedicated to working with community groups and universities in order to learn about Hispanic history.

LGBT Committee

With 20 employee members, the LGBT (lesbian, gay, bi-sexual, transgender) Committee's main purpose is to bridge diversity and educate VAPHS employees about the LGBT community. "Our proudest moment was when we participated in Pittsburgh's first Pride event. We had a really positive response from event participants," says committee chair Matt Uchaker.

The LGBT Committee also celebrated the National Coming Out Day at the Out for Equality event held in October. At the event, the committee unveiled artwork that represented "the closet" which most LGBT people "come out" of. The door was painted in camouflage to represent the LGBT Veterans in our community and also included dog tags affixed to the door with space for people to write personal messages.

WOMEN'S Committee

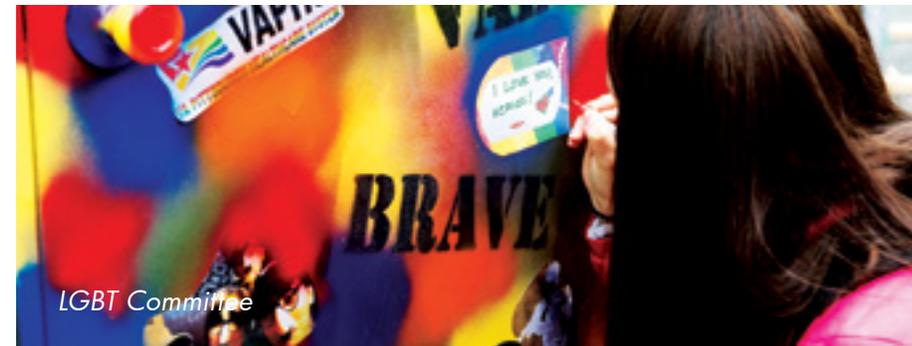
Started earlier this year, the Women's Committee is dedicated to empowering the women who work for VAPHS and advancing the health, welfare, and dignity of female Veterans and employees. The committee established a Woman of the Month recognition program, where women employees are nominated by fellow employees for their outstanding performance and dedication to their job or community as well as their support of women and Veterans. As a result, eight outstanding VAPHS women employees were honored at the Federal Executive Board Women of the Year program.



African American Committee



Hispanic Committee



LGBT Committee



Women's Committee

Improving Our Environmental Footprint

VAPHS: Being green and saving more than 50 trees each year!



Employee Projects

Double-Sided Printing

One of this year's Leadership, Effectiveness, Accountability, and Development Program (LEAD) projects focused on reducing VAPHS' environmental footprint by changing the multi-use printers from a single-sided default setting to a double-sided default setting. Now, when employees print, the automatic setting will print on both sides of a piece of paper. With the project now fully implemented system-wide, VAPHS can expect to:

- See a 23% reduction in total printing.
- See a \$27,817 savings per year based on the price of paper in 2012 at \$3.47 per ream.
- Save 4 million pieces of paper or approximately 50 trees a year!

Other than the time that a few people spent on developing the content, project plan, and changing the settings on all of the printers, there was no cost to this project.

"In using the resources that were already available to us, we will have a major impact on the environmental footprint of VAPHS. Considering that we used the resources already available, this truly is a 'green project'" says John Rupert, LEAD project participant.

Desktop Faxing

Another LEAD project looked at utilizing the VAPHS printers to their fullest capacity. This included the ability to send a fax directly from a computer, eliminating the need to print a document in order to manually fax it.

Computer desktop faxing was piloted in the Prosthetics department, where manual faxing was a common way of doing business. After switching to desktop faxing, there was an immediate reduction in paper consumption. Currently, prosthetics has reduced their paper use by 60 percent due to desktop faxing. Desktop faxing is now spreading throughout VAPHS and is greatly reducing our paper consumption.

"The impact on the medical center is very positive. While the e-faxing system is in use, it not only saves paper consumption, it [also] reduces costs, saves wear and tear on current equipment, reduces our carbon footprint, and saves a lot of time in the process," states Danielle Burton, LEAD project participant.

VAPHS, Recycling and Repurposing

VAPHS leaders continuously assessed ways to save, reuse, and recycle during the massive undertaking of closing our Highland Drive campus. Still-useful items were redirected to other VA facilities and local and federal partners while other materials were recycled – saving them from a landfill. Here is a snapshot of what VAPHS was able to do:

135

Tons of personal property saved and redirected to other local and federal partners

354

Pieces of equipment redirected to 18 other VA medical centers in PA, MD, NY, and states as far away as SC, KS, and TX

60

Tons of electronics recycled through Federal Prison Industries, UNICOR

80

Tons of paper and cardboard recycled

190

Tons of scrap metal recycled

40

Tons of precious metals salvaged



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VAPHS & hazardous waste contractor modified battery disposal process. We redirected 3.5 tons of batteries to more enviro-friendly processes.

Awards

Get With the Guidelines Gold Award—The American Heart Association has again recognized VAPHS as a recipient of their prestigious Get with the Guidelines Gold Award for our success in treating patients with heart failure.

Homelessness—Beverly Vanderhorst received the Unsung Hero Award at the National Coalition for Homeless Veterans Annual Conference.

Diversity and Inclusion—Dr. Rory Cooper received the Secretary's Award for Diversity and Inclusion.

Volunteerism—Mary Connell received the 2013 Volunteer of the Year from the American Legion Auxiliary.

Performance Excellence Proficiency Award—VAPHS was recognized by the Keystone Alliance for Performance Excellence (KAPE) for their commitment to excellence and continuous improvement. This outstanding achievement showcases the hard work of VAPHS employees to create a culture of performance excellence using the Baldrige Criteria for Performance Excellence—a set of questions about critical aspects of managing and performing as an organization to identify strengths and opportunities for improvement. By answering these questions, VAPHS has made substantial improvements in achieving strategic goals, improving communication, and engaging employees in Veteran-centered care.

VHA Nursing Innovation Award— Kayla Vidal, Kathleen Graham, Kim M. Loughry, Margie Claypool, Jocelyn Farley, and Karen Morris received this award for their nursing leadership in quality improvement with their work focused on Strategies to Eradicate Unavoidable Pressure Ulcers.

VA Secretary's Annual Alternative Dispute Resolution (ADR) Award: ADR Committee/Council/Forum Recognition—These awards, coordinated by the Office of Resolution Management (ORM), Workplace ADR Office, are the highest recognition given to any VA employee or program that has made exemplary contributions to creating an environment where employees can effectively address conflict and resolve disputes in a manner that encourages communication, promotes understanding, enhances relationships, and engages employees in problem solving.



VA
HEALTH
CARE

Defining
EXCELLENCE
in the 21st Century

VAPHS Mission

To honor America's Veterans with world-class health care, train their future providers and advance medical knowledge through research.

VAPHS Vision

To partner with Veterans and their families to optimize their health and quality of life through integrated, innovative and compassionate care.

VAPHS Values

I CARE: Integrity, Commitment, Advocacy, Respect and Excellence.

Cover Design by Shawn Fouse

Annual Report Committee:

Kristy René Coie, Voluntary Services

Adam Critchlow, System Redesign

Ken Elshoff, Human Resources, Veteran U.S. Navy, 2001

Melanie Erskine, APN, Veteran and Employee Wellness

Shawn Fouse, Facilities Management, Veteran U.S. Army, 2007

Christina Gerstel-Santucci, MPH, MID, Director's Office, Committee Chair

Tina Howell, Veterans Engineering Resource Center, Veteran U.S. Army, 2003

Jennifer Jenkins, MPH, Center for Health Equity Research and Promotion

Shelley Nulph, Public Affairs

John Rupert, Human Resources, Veteran U.S. Air Force, 2004

Gaetan Sgro, MD, Medical Service Line

Jacquelyn Welker, RN, Patient Care Services

