



Honoring His Legacy

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CORPORAL MICHAEL J. CRESCENZ
DEPARTMENT OF VETERANS AFFAIRS MEDICAL CENTER

CORPORAL MICHAEL J. CRESCENZ



Michael Joseph Crescenz was born in Philadelphia, PA, on January 14, 1949. In 1962, he graduated from St. Athanasius School in the West Oak Lane section of Philadelphia and from Cardinal Dougherty High School in 1966. He enlisted in the U.S. Army in February 1968, and shipped out to Vietnam in September 1968, the same month that his older brother Charles, a U.S. Marine who had served 13 months in Vietnam, was discharged from active duty. Michael was 19 years old when he was killed in action on Nov. 20, 1968, while charging multiple North Vietnamese machine-gun bunkers during an ambush.

Michael received a posthumous promotion to the rank of Corporal. He was the only Philadelphian to receive the Medal of Honor during the Vietnam War. He was survived by his parents and five brothers.

His Medal of Honor was presented to his family by President Richard M. Nixon in a White House ceremony on April 7, 1970. To respect his parents' wishes, Michael was buried in Holy Sepulchre Cemetery, in Cheltenham Township, PA. In 2008, after the death of his parents, Michael Crescenz was reinterred at Arlington National Cemetery.

Michael J. Crescenz (January 14, 1949–November 20, 1968) posthumously received the Medal of Honor for his actions near the Hiep Duc village of Vietnam on November 20, 1968.



DIRECTOR'S MESSAGE

Daniel D. Hendee, FACHE
 Director
 Crescenz VA Medical Center
 Philadelphia, Pennsylvania

This year, we filled two vacancies on the leadership team, known locally as the Pentad. Patricia O’Kane brings over 25 years of experience here at this Medical Center to her new position as Associate Director for Clinical Operations, and Erik Glover, recently retired from the Army, brings a fresh perspective to his position as Associate Director of Finance. This balance between institutional history and new eyes is helping us move forward and propose creative ideas that provide the best care to our Veterans.

As I look back on 2015, there were some tremendous accomplishments and celebrations, and we continued to move forward in our goal to provide the best possible care to our Veterans.

Like many others in the VA community, we have been working diligently to institute the Choice Program, in order to improve access to care, and I am very proud of the progress our staff has made in this area over the past year.

In late December 2014, President Obama signed Public Law 113-230, officially renaming the facility for Medal of Honor recipient Corporal Michael J. Crescenz, joining one of only a handful of VA facilities honoring this select group of individuals. The immediate impact on the staff was palpable. Not only did the facility bear his name, but the staff, seeing Michael’s face every day as they enter the building, know they have to live up to his legacy. Michael’s sacrifice during the Vietnam War, at a very young age, inspires all of us to be our best in all we do for the Veterans we serve.

We continued to hold quarterly Veteran town hall meetings, alternating between hosting them here at the medical center, and moving into the communities where our Veterans are located. The opportunity to receive feedback, answer questions, and share concerns is invaluable in our commitment to provide the best possible care to all our Veterans. Frequently the issues raised at town hall meetings have resulted in positive change.

The renaming event held on May 2 was a tribute to this hometown hero, the only Philadelphian to serve in Vietnam and receive the MOH. The outpouring of support from the community, fellow Veterans, Michaels’s family members, and staff on that beautiful May day, resulted in an emotional event that will be long remembered.

As we enter 2016 I am optimistic that we will continue to move towards the goal of exceeding the expectations of our Veterans, and that we will continue to grow as an organization, further reinforcing the legacy of excellence set by Corporal Crescenz. Thank you to all the Veterans we serve; you are the reason we are here and my pledge to you is to live up to the example set by our namesake, and honor his legacy.



Erik J. Glover, FACHE
 Associate Director of Finance



Patricia O’Kane
 Associate Director for
 Clinical Operations



Elizabeth Datner, M.D.
 Interim Chief of Staff



Coy Smith, ND, RN, MSN,
 NEA-BC, FACHE, NAHQ
 Associate Director for Nursing/
 Patient Care Services

HONORING VETERANS



Renaming Event

On May 2, 2015, the Philadelphia VA Medical Center held a ceremony to celebrate the renaming of the facility as the Corporal Michael J. Crescenz Department of Veterans Affairs Medical Center, to honor the only Philadelphian who served in the Vietnam War to receive the Medal of Honor. The name change was the result of community support and legislative action taken by Congress. The new name became official when it was signed into law by President Obama on December 16, 2014. Corporal Crescenz was only 19 years old when he was killed in the action that resulted in his name being put in for the MOH.

The renaming event was attended by over 700 people including Cpl. Crescenz's commanding officer, members of his unit, his family, elected officials, Veterans and members of the community.

Our facility is one of only a handful of VA medical centers to be named for a Medal of Honor recipient.



Respect that is given to someone who is admired.

Philadelphia Veterans Parade

On Sunday, November 8, 2015, CMCVAMC participated in the first ever City of Philadelphia Veterans Parade. A part of the planning from the start, CMCVAMC was proud to be a part of this great day. A group of Veterans, employees, and volunteers from the Medical Center, Regional Office and Washington Crossing National Cemetery were proud to march with the hundreds of Veterans, family members and supporters for the first of what promises to be many years of honoring and saluting Philadelphia’s Veterans. Planning is already underway for next year’s parade, and CMCVAMC is right there!



Ending Veteran Homelessness

On December 17, 2015, Medical Center Director Daniel Hendee stood in City Hall at the podium with Philadelphia Mayor Michael Nutter and HUD Secretary Julian Castro to announce the end of Veteran homelessness in Philadelphia. It was truly a momentous occasion, and one to celebrate. The success was the result of an unprecedented partnership and collaboration between the City of Philadelphia, VA, HUD, and the numerous agencies and non-profit organizations that worked together to meet the Mayor’s challenge and effectively end Veteran homelessness in Philadelphia.



Together, the partners worked tirelessly to create a highly developed and coordinated system to quickly meet the needs of Veterans who are at risk of becoming homeless or experiencing homelessness. The partners worked together on outreach activities and used a single list and entry point for their

coordinated process. The Team met weekly to assign newly identified homeless Veterans to an outreach worker and monitored progress toward housing Veterans.

Working together, the team housed 1390 Veterans since August 2013, and allocated 661 HUD-VASH vouchers, 637 of which are currently in use.

Having achieved “functional zero” does not mean that we stop this effort. The homeless outreach team will continue the work to honor those who served by ensuring that all Veterans have access to the support and services they need to sustain permanent housing. One homeless Veteran is one too many.

ACCESS

CHOICE

Launched in the last months of 2014, the Veterans Choice Program allows a Veteran enrolled in VA health care to receive care within the community if he or she meets one of the eligibility criteria. Veterans are eligible if they are waiting more than 30 days from the clinically indicated date for an appointment, live more than 40 miles from a VA facility, or face one of the excessive travel burdens to reach a VA facility. The program aligns with VA's goal to expand Veteran access to timely, high-quality health care.

Here in Philadelphia, the Office of Care Coordination works closely with Health Administration Service and clinicians to ensure a seamless process for Veterans who choose to seek care in the community under the Choice program. Staff has worked with Health Net, the third party administrator, to build the provider network available to Veterans through Choice. As the network grows, we have seen an increase in the number of Veterans exercising their right to choose to be seen in the community. Veterans eligible for Choice are also continuing to see their providers at the VA.

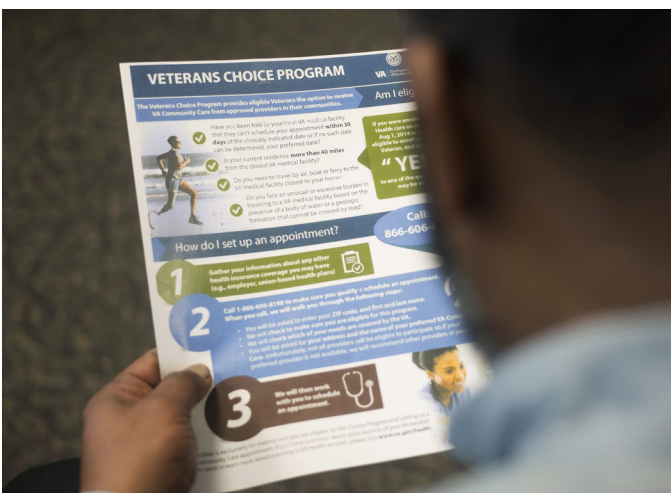


Extended Hours

In order to increase access to Behavioral Health services, we implemented evening and weekend clinics. Evening clinics, on Mondays and Thursdays, are open from 4:30-7:30 p.m., and are staffed by a psychiatrist and psychotherapists of a variety of disciplines, including clinical nurse specialists, social workers, psychologists, and a registered nurse. The Saturday clinic is open from 8 a.m. to 4:30 p.m. and includes the same specialists.

The clinics provide intakes, psychotherapy, and follow-up with medication management. In addition, compensation and pension examinations can be scheduled during evening and Saturday hours.

The extended hours are beneficial to Veterans who work during regular weekday clinic hours, and anyone else who is unable to get to clinic during the workday.





The right or opportunity to approach or see someone.



Access Stand Down

On Saturday, November 14, 2015, CMCVAMC, along with all other VA medical centers across the country, participated in a first ever Access Stand Down. As a part of VA's commitment to provide timely access to Veterans based on their clinical needs, clinicians, administrators, and volunteers were on site to reach out to all Veterans waiting for urgent care and to make sure that VA is meeting their health care needs. We were fortunate to be joined by David Shulkin, MD, Under Secretary for Health.

As part of the access stand down, patient charts were reviewed from Wednesday, Nov. 11 through Saturday, Nov. 14, of patients on the appointment

list greater than thirty days, on the electronic wait list, on the consult list for specialty appointments, or on the appointment list for greater than ninety days.

During the stand down, providers were available in primary care and behavioral health to see both scheduled and walk-in patients. Primary Care staff triaged patients for more serious, but non-emergent needs, and entered consults to specialty care as needed.

Honoring Him

How Do You



CORPORAL MIC

Measure a Soldier's Sacrifice?



HAEL J. CRESCENZ

How do you measure a soldier's sacrifice?
Is it by the number of friends and family left behind?

Is it by the months or years given in service?

How do you measure a soldier's courage?
Is it by the number of objectives completed,
Or by the number of bullets dodged or missions served?

How do you measure a soldier's honor?
Is it by the duty he or she volunteers for,
Or by the number of medals earned?

The simple truth is that these things are immeasurable,
As is this country's debt to all who serve,
And pay the price for freedom in this land.

By Kelly Roper

PATIENT CARE

Wound Care/Pressure Ulcer App

By incorporating a number of important new procedures for the assessment and prevention of pressure ulcers (PUP), staff at the Community Living Center has dramatically reduced the number of pressure ulcers experienced by the residents. The procedures were introduced in the VHA Pressure Ulcer (PU) Handbook, developed by the Office of Nursing Services in 2011, and have relevance to all clinical settings in the medical center, including acute care, inpatient mental health, community living center, home-based primary care and outpatient primary care.

Included among the processes implemented is yearly unit-based education of all Nursing and clinical staff, including hands-on, lecture, videos, virtual and simulation; weekly unit-based wound assessment rounds with wound treatment nurses; purchase of specialty beds for all CLC residents; selection of Medline Remedy skin products for skin hydration, moisture barrier protection and incontinence management; use of underpads on all beds in the CLC to help manage moisture and maintain skin integrity; and a yearly national survey to assess CLC pressure ulcer prevalence.



For the past five years, the CLC has maintained low prevalence rate pressure ulcers for residents in a long term care environment, and has been able to maintain a nosocomial (facility acquired) pressure ulcer rate to less than six for the past four years, and for 2013-2014, the rate was less than, or equal to, two.

In the upcoming months, the CLC and Home Based Primary Care will serve as test sites for a new VA Pressure Ulcer Resources (PUR) mobile application (app). The PUR mobile app was developed as an innovative method to meet the VA's goal of "getting to zero" for PU prevalence. The mobile app

provides Veterans and their caregivers with an easy-to-use resource that focuses on their roles in the prevention and care of PUs, as well as differentiating PUs from other types of wounds. The PUR app includes print aids and videos that provide Veterans and their caregivers with educational information about pressure ulcer prevention (PUP) and treatment. The mobile app also has additional educational tools that can be used to assist Veterans and their caregivers with nutrition management, medication reminders, physical/occupational therapy techniques and a host of other therapeutic interventions.



Providing care that is respectful of and responsive to individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions.

Low Mortality Rate

CMCVAMC has one of the lowest mortality rates of any VA medical center. This success is the result of a proactive medical emergencies team put in place that prioritizes proactive identification and treatment of hospitalized patients exhibiting warning signs before they develop a severe life threatening illness (rapid response programming), as well as early resuscitation of patients experiencing cardio-pulmonary arrest (code blue programming). The interdisciplinary team includes physicians, ICU nurses, nurse practitioners, pharmacists, occupational and respiratory therapists, social workers, and ancillary staff, working with the patient and their family members.

Patients who need intensive care following an intervention by the medical emergency team are transported to one of our two intensive care units (medical or surgical), where experts in critical care oversee complex interventions to sustain life and restore equilibrium, thereby enabling patients to recover organ function and survive hospitalization to discharge. These efforts demonstrate our collective desire to support our nation's Veterans and provide the very best care to those who have bravely served their country.



Patient Safety Award

In Fiscal Year 15, the CMCVAMC earned the “Gold” level Cornerstone Recognition award, which is the highest level for Patient Safety. Patient Safety managers and their hospital-based Patient Safety Programs are reviewed based on staff-reported adverse events and close calls which represent the foundation of a robust and effective Patient Safety program. The Cornerstone program draws strong attention to this premise. In addition to event reports that are reviewed as Root Cause Analyses and close call reports that are reviewed in the Aggregated Categories (falls, medication events and elopements), the National Center for Patient Safety aims to support each facility in capturing additional reporting designated as Safety Reports in the SPOT data base. This is intended to inspire the culture of open communication toward reporting, and for use in identifying system issues related to patient safety. This past year, Patient Safety had the highest number of VISN 4 patient safety event reports and the highest number of Root Cause Analyses/Aggregate RCA Reviews.

Behavioral Health Lab Triage of Mental Health Patients

The Behavioral Health Interdisciplinary Program team nursing staff at the CMCVAMC is calling all patients about a week after their initial intake appointment to improve their ongoing access and to follow-up on their experience with their intake. This initiative helps staff in measuring care, addressing side effects of medications, and promoting return to care for Veterans. Since its implementation, staff has noticed an increase in clinic attendance after intake appointments.

BUILDING COMMUNITY



MY VA

MyVA is about putting the needs of Veterans first, and putting the Veteran at the center of everything we do. By putting service to Veterans first, a high-performance culture follows. That is the kind of organization that builds pride and satisfaction in the workplace, and one which empowers the workforce at every level. The Blueprint is VHA's framework to rebuild Veterans' trust and become a truly Veteran-centric health care system. It sets high expectations for health care innovation and a positive culture of service.

There are five primary focus areas to MyVA:

- Improving the Veterans Experience
- Achieving support services excellence
- Establishing a culture of continuous performance improvement
- Enhancing strategic partnerships
- Improving the employee experience and focusing on people and culture

As part of the MYVA initiative, a new regional alignment was created. Philadelphia is part of the North Atlantic District, which is the first one to get up and running. At the September employee town hall meeting, the new district director for Veterans Experience addressed staff about the new organization and its goals.

Communication Focusing on Veterans

Town Hall meetings are an important communication tool for leadership at the medical center to hear first-hand from Veterans in an open, public forum. CMCVAMC continues to hold quarterly Town Hall meetings for Veterans, and always includes leadership from the VBA Regional Office and VA National Cemetery Administration. Meeting locations are alternated between the community and the medical center. Thank you to the Veterans Service organizations that have co-hosted the town halls with us in their posts.

Another important communication tool is the Veteran Boards that meet regularly at the CBOCs with the Nurse Managers and at the main medical center with the Director. During these informal meetings a positive and constructive exchange of ideas frequently results in improved services and care to Veterans.

Leadership values the input that they regularly receive from Veterans through these on-going avenues of communication.





The creation or enhancement of community among individuals within a regional area or with a common interest.

Summer of Service

In the Spring of 2015, VA recognized that there is more work to do to serve Veterans and that VA cannot do it alone. VA unveiled the “Summer of Service” encouraging all VA facilities to hold an open house in late June, providing an opportunity to invite Veterans, Congressional partners, key stakeholders and the community-at-large to learn more about the services offered by the VA. The Summer of Service focused on building key relationships to renew the commitment to serve Veterans: increasing the number of volunteers, recruiting clinical specialists and other health care providers, engaging with Congress, and enhancing community partnerships.

Here in Philadelphia, we held a combination Information Fair and Town Hall with focused break-out topics. Representatives from the VBA Regional Office, National Cemetery Administration and Vet Centers also participated with a claims clinic, information tables, and focused break-out sessions.

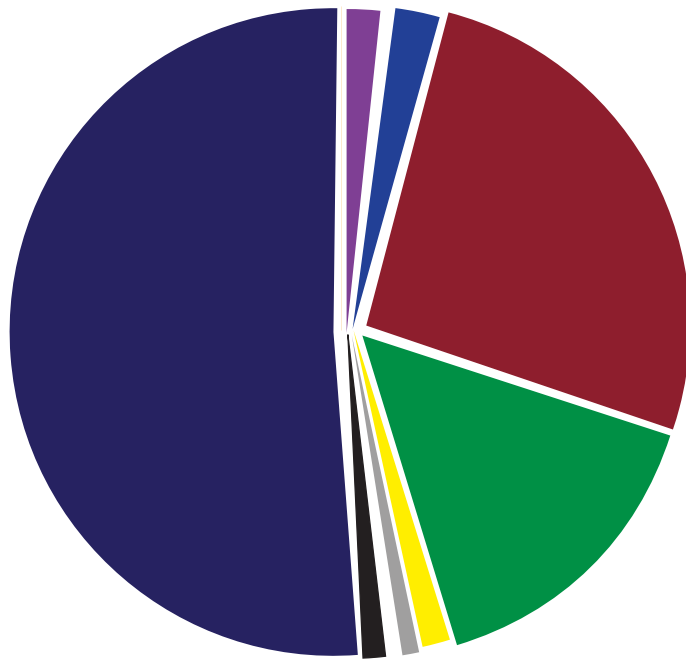
This year, CMCVAMC expanded its community partnerships with organizations including Bristol-Myers Squibb, Preferred Automotive, University of Pennsylvania, Drexel University, University of the Sciences, Amerihealth, and over 40 Veteran service organizations. We are especially proud that over one-third of our volunteer workforce is made up of area college students, and that our holiday adopt-a-family program nearly doubled from 23 Veterans/families in 2014 to 43 Veteran/families in 2015.



Volunteer Statistics:

- **570** *Regularly Scheduled Volunteers*
- **34,734** *Total Hours of Service*
- **174** *New Volunteers in 2015*
- **60** *outreach initiatives Adopt-A-Veteran-Holiday program Veterans/families (2014) Increased from 23 to 43 (2015)*
- **Over \$100,000** *in donations (monetary and gift-in-kind) received in December 2015*
- **\$251,233** *received in donations (monetary and gift-in-kind) FY 2015 only (10/1/15)*

Statistical Information



- Personnel and Services: \$273,125,000
- Travel and Transportation: \$6,562,000
- Land and Structures: \$3,829,000
- Equipment and Interior Design: \$7,272,000
- Supplies and Materials: \$81,971,000
- Contractual Services: \$138,576,000
- Rent and utilities: \$12,031,000
- Grants, Subsidies, Contributions: \$9,797,000
- Other: \$89,000

2015 Annual Budget: \$533,252,000



Collections

\$25,091,000

13% increase over
Fy14 amount of
\$22,177,963

Fee Basis

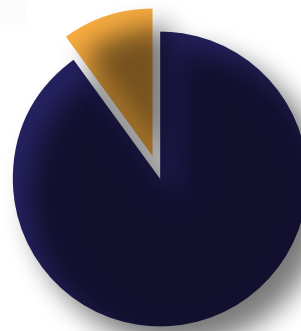
\$35,652,000

11% decrease from
FY14 amount of
\$40,006,298



- Philadelphia 40,806
- Gloucester 28,862
- Fort Dix 23,198
- Saracini 27,403
- Camden 9,282

Total number of out-patient visits at main medical center and each of the CBOCs: 129,551



- Female Veterans
- Male Veterans

Percent male Veterans/percent female Veterans:
90.1% male Veterans - 9.9% female Veterans

In-patient admissions: 4,925 • Total number Veterans served: 57,867

Academic Affiliations:

Provided training to Students at over 32 colleges, universities or other academic institutions in areas including medicine, dental, mental health, nursing, pharmacy, optometry, physician assistant, podiatry, rehabilitation, and social work.

46 Paid students

1,601 Unpaid students



Accreditations and Recognition

In an effort to continuously improve the health care provided to our Veterans, Corporal Michael Crescenz VAMC (CMCVAMC) seeks evaluation from external review program agencies such as: The Joint Commission, (TJC), Commission on Accreditation of Rehabilitation Facilities (CARF), Food and Drug Administration (FDA), College of American Pathologists (CAP), Long Term Care Institute (LTCI), and Office of Inspector General (OIG). These agencies evaluate the care processes of CMCVAMC and inspire the facility to provide excellent, safe, and effective care of the highest quality and value. CMCVAMC has received and sustained number of accreditations and awards.

Some of our notable accomplishments include:

The Joint Commission (TJC) conducted an unannounced triennial visit in July 2014 (to survey the Hospital, Home Care, Long Term Care, and Behavioral Health Programs such as Mental Health Intensive Case Management (MHICM), Residential Rehabilitation Treatment Program (RRTP), Psychosocial Rehabilitation Recovery Center (PRRC), and Compensated Work Therapy (CWT) with CMVAMC receiving a three year accreditation through July 2017.

Commission on Accreditation of Rehabilitation Facilities (CARF): For Medical Rehabilitation-Comprehensive Integrated Inpatient Rehab Program (CIIRP) and Amputee Program-Polytrauma /Amputation Network Site (PANS) accredited October 2014 through October 2017. For Employment and Community Services-Health Care for Homeless Veterans (HCHV), HUD-VASH, and Grant & Per Diem, accredited October 2014 through October 2017, For Behavioral Health-Psychosocial Rehabilitation and Recovery Center (PRRC)-BH Community Integration Standards VEC (Veterans Empowerment Center accredited through September 2016.

The Joint Commission/ VHA Focused Reviews related to Access and Coordination of Care: The Joint Commission surveyed the organization October 7-8, 2015.

Opioid Treatment Center (OTP): TJC conducted an unannounced survey in August 2014; OTP received a 3-year accreditation through August 2019.

Substance Abuse and Mental Health Services Administration (SAMHSA): SAMHSA Certification for OTP, accredited through August 2019.

Research: The Association of Accreditation for Human Research Protection Programs granted full accreditation in re-accredited through September 2016.

Association for Assessment and Accreditation of Laboratory Animal Care: The Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) was onsite July 2015 and awarded accreditation for three years. The Office of Laboratory Animal Welfare accreditation is effective through May 2016.

Commission on Cancer granted three year accreditation in June 2014 accredited through October 2017.

Pathology and Laboratory Service received the College of American Pathologists' accreditation into November 2017.

Commission on Dental Accreditation: Commission on Dental Accreditation (CODA) surveyed CMCVAMC Post –Doctoral General Residency Practice Dentistry Program in June 2015 and awarded accreditation.

American Association of Blood Banks: accredited PVAMC's Blood Bank through August 2019.

Radiation Oncology: Accredited by the American College of Radiation Oncology. Surveyed in October 2014 and accredited through October 2017.

Mammography Program: Accredited by the American College of Radiology into January 2016.

Sleep Program: The VISN 4 Eastern Region Sleep Center was surveyed in August 2014 by the American Academy of Sleep Medicine and was re-accredited through August 2020.

Behavioral Health: The American Psychological Association accredited Behavioral Health through 2020.

Community Living Center: The Community Living Center (CLC) was surveyed by the Long Term Care Institute in May 2015; the CLC is expecting an annual survey sometime between April through June 2016.

American Society of Health System Pharmacist (ASHP): The ASHP Commission on Credentialing accredited through 2017.

VHA National Health Physics (NHPP): Received accreditation through August 2017.

Honoring His Legacy

Ft. Dix Outpatient Clinic
8th & Alabama
Joint Base McGuire-Dix, NJ 08640
609-562-2999

VA Outpatient Clinic Annex
300 Broadway, Suite 103
Camden, NJ 08104
877-232-5240

Gloucester County VA Outpatient Clinic
211 County House Road
Sewell, NJ 08080-2525
877-823-5230

Victor J. Saracini VA Outpatient Clinic
433 Caredean Drive
Horsham, PA 19044
215-823-6050

Snyder House
1425 Snyder Avenue
Philadelphia, PA, 19145
215-222-7440

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