Narrative Supplement to the VISN Summary Report

I. NETWORK POLICIES AND PRACTICES

1. For which *administrative areas* are there VISN-wide policies or guidelines (other than National/VACO directives)?

These responses specify "Other administrative area" in item 1 on the *VISN Summary Report*, for respondents who selected that option.

VISN	Other admin area 1	Other admin area 2	Other admin area 3	Other admin area 4
1				
2	Education			
3	HAS/MAS	Pharmacy		
4				
5		Communication Process with Third Party Payers		
6				
7				
8		Pharmacy Benefits Management	Committee Structure	Patient Advocates
9	Coding			
10				
11	Coding		Capital Investment	
12				
15				
16	Workers Compensation Program	Internet Usage	Professional Standards Board for Pharmacists	Inquiry Routing and Information System (IRIS) Program
17		Strategic Planning		
18	Governance	Customer Service		
19		Decision Support	Communications	
20		Network Operations		
21	Alternate Dispute Resolution	Mediation Program	Emerging Leaders Development Program	
22		HR Pending		
23	COO Policies			

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2. For which *clinical areas* are there VISN-wide policies or guidelines (other than National/VACO directives)?

These responses specify "Other clinical area" in item 2 on the *VISN Summary Report*, for respondents who selected that option.

VISN	Other clinical area 1	Other clinical area 2	Other clinical area 3	Other clinical area 4
1	Geriatric and Extended Care	Specialty and Acute Care	Spinal Cord Injury	
2	Patient Education			
3		Diagnostic	Telehealth	Smoking Cessation
4				
5		VISN 5 Failure to Report for Scheduled Appointments	VISN 5 Care Coordination/Home Telehealth and Care Management Program	
6	Nursing	SCI	Geriatrics	
7	An Array of Other Clinical Guidelines, etc.			
8	Enrollment of New Patients	Homeless Veterans	Telemedicine	Community Care Coordination
9				
10		Pain	Patient Education	Telehealth
11		Maternity Care	Care Management	Acute Coronary Syndrome
12				
15	An array of other Clinical Guidelines, etc.			
16	Telephone Care and Services	Home Care Services	Prevention of Intravascular Device Related Infections	Restraint and Seclusion Use
17				
18	Research		Risk Management	
19				
20	Women Veteran Services; Maternity Care	Research	Resident Supervision	Clinical Appeals
21		VA/DOD C&P Separation Exams	Clinical Appeals	
22		Pain Management		
23	Laboratory	Extended Care	Resident Supervision	Consultation and Specialty Care

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3. List up to six (6) innovative network-wide initiatives implemented within the last three years.

Working to create an integrated health care system across the network offers opportunities to introduce new and innovative ways of doing business, both administrative and clinical.

VISN   Recent network initiatives listed:

VISN	Initiative 1	Initiative 2	Initiative 3	Initiative 4	Initiative 5	Initiative 6
1	VISN 1 Customer Call Center with toll-free number to address veterans calls regarding their MCCF billing statement	Prosthetics standardization throughout the network	Care Coordination/Home Telehealth	VISN 1 Research Investment Fund	Commitment to excellence in diabetes care through: VISN-wide ADA certification of Diabetes Education Programs at all 8 facilities (only VISN to do so) and VISN-wide Program for Excellence in Amputation	Pursuing excellence in patient safety by standardization of all…
2	2004 Planetree Spirit of Caring Program Award	Deployed Six Sigma Quality Initiative	Virtual Learning System, On Demand Technology, Executive Leadership Programs, Data Analyst Training Program, Virtual Learning Academy	2001/2002 VHA Performance Measurement System Best Practices	VHA Best of the Web (2005): 100 Most Wired Hospitals	200, 2002, 2003, 2004: Kizer Quality Award
3	Ongoing integration of three healthcare systems at the VA New York Harbor HCS	Ongoing integration of three healthcare systems at the VA New Jersey HCS	Ongoing integration of three healthcare systems at the VA Hudson Valley HCS	Integration of a VISN-wide Mental Health Product Line	Integration of a VISN-wide Geriatric and Extended Care Product Line	Integration of a VISN-wide Business Office
4	See our Vital Quality Innovations website: http://vaww.irc.visn4.med.va.gov/VitalQualityInnovations/TOPVitalQualityInnovationsProgram.htm					
5	Acute Coronary Syndrome	Care Coordination	Medical Care Cost Recovery	Leadership Development Institute	Chief Logistics Office	Financial Quality Assurance
6	Nurse Staffing Model	Patient Incident Reporting	Advanced Food Preparation	Centralized Logistics	Web-based Employee Education	Monthly Operations Calls
7	VISN-wide Implementation of Baldrige Framework and Council Structure	Advanced Clinic Access Implementation	Daily Bed Utilization Monitoring and Conference Calls	Patient Orientation Benefits Seminar--Customer Service "Best Practice"	Electronic Wait List Blitz Team	Strategic Initiatives in Cancer and Cardiac Care
8	Standardized Cardiac Information Storage System	Assist Teams for MCCF Collections	Treating Veterans With Care Program	VISN-wide Emergency Operations Center	VISN-wide Generic Inventory Management	VISN-wide Chest Pain Center Accreditation
9	VISN 9 implemented a Consolidated Outpatient Coding Unit (CCU) located at VAMC Huntington, WV in 2003. This unit enables all outpatient encounters with insurance to be coded/validated in an efficient..	Improved VISN-wide access to the "Omega Program", which is an outpatient substance use disorders treatment program located at VAMC Mountain Home, TN.	Enhanced access to care through the deployment of the Advanced Clinic Access (ACA) principle of shared medical appointments across all VISN 9 medical centers.	A VISN-level Mental Health Committee was formed and a comprehensive VISN Mental Health Strategic Plan was developed and implemented.	Service Agreements between Mental Health and Primary Care Clinics at most of the facilities, offering group visits other than traditional group psychotherapy, including group medication checks…	Establishment of a data warehouse

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VISN	Initiative 1	Initiative 2	Initiative 3	Initiative 4	Initiative 5	Initiative 6
	Recent network initiatives (continued):					
10	Advanced Clinic Access/Shared Medical Appointments	Goal Sharing	Provider Feedback (Primary Care/Mental Health)	Learning Exchange Centers/Water Cooler Logic	Emerging Technologies	Pharmacy Benefits Management
11	Leadership Development Program	Advance Clinic Access-clinical	Advance Clinic Access-administration	Internal Continuous Readiness Reviews	Cardiology/Radiology Strategic Procurement Plans	Optical Lab
12	Teleretinal Imaging	Utilization Management - Clinic Education	Voice Recognition-PACS Locations	Workforce Improvements		
15	Collaborative NELB Structure	Centralized Teleradiology	Core Lab	Telemedicine/Home Health	VISN LEAD Program/Facility LEAD Program	Teleretinal Cameras for Diabetic Retinopathy
16	Management of Specialty Care	Dare to Dance Customer Service Training	ICU Improvement Project	Leadership Development/Supervisory Training	Process Design with QuadraMed software	Pressure Ulcer Collaborative
17	Centralized Coding Pool	Pharmacy Benefits Management				
18	Lost Time Claims Rate Reduction	Preferred Pricing Program	ACA collaborative	Outreach to American Indian Veterans	Leadership Development Institute	Safety Scorecard
19	Tribal Veterans Representatives and Outreach	Telehealth	Network Accounts Receivable Unit	Expanded RCA Program	BCMA Monitoring	I-25 Corridor-DOD Initiatives
20	ICU Collaborative	Teleretinal Cameras	Primary Care Group Visits	Advanced Healthcare Management Database	VISN Integrated Referral System	VistA CoLocation
21	VISN-wide PC Lease	Pharmacy Benefits Management Clinical and Cost Indicators	Expanded Compliance Index	PICIS ICU System	Nursing Recruitment Initiative	
22	IHI Intensive Care Throughput	Advanced Clinic Access (Clinical, Inpatient and Administrative)	Continuous Readiness Program	Network Transfer Coordinator	Alert and Recall Process-Web-based Documentation	Annual Walk-Around Patient Safety Assessments
23	Strategy 3.3.2 Build a Culture of Continuous Quality Improvement	Performance Excellence Through the Use of Formalized Collaboratives	Organizational Excellence Through the Use of Service Lines in an Integrated Health Care System	Building the Health Care Work Place of the Future	VISN 23 has joined the Institute for Healthcare Improvement Campaign to save 100,000 lives by 6/06 through 6 interventions.	

II. NETWORK INTEGRATION AND CONSOLIDATION

Text items in this section were reported in the *VISN Summary Report*.

III. NETWORK STRUCTURES

Report did not contain any text items in this section.

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IV. DECISION-MAKING AND LEADERSHIP

9a. Additional comments on decision-making processes in the network?

These comments accompany the response matrix in item 9 of the *VISN Summary Report.*

VISN	Comments
1	
2	
3	
4	None of these decisions are made unilaterally--all involve decision making at many levels of the organization. ELC is the policy decision-making body for the VISN; implementation is local, but monitor…
5	
6	
7	The VISN 7 governance structure develops and recommends VISN-wide initiatives and policies for ultimate approval by the VISN Director.
8	Such decisions are presented to the VISN Executive Leadership Board for review and approval; however, ultimate approval resides with the Network Director.
9	
10	
11	
12	For [decision 1, 'Purchase of expensive medical equipment >$1M'], advice from committee is taken but ultimate approval is with the VISN.
15	
16	Final approval for equipment > $1M is at VACO level. Eligibility (for hearing aids) is set by VACO; VISN further defines clinical parameter decisions made at Medical Center, service line, unit or workgroup departments.
17	
18	
19	
20	
21	Quality Management Council provides input on how CPGs are implemented. Facility COS and Director determine how services are delivered to patients. Clinical Practice Council and Strategic Planning Co
22	
23	All levels may have initial involvement in budget elements, but the annual Network operating budget is approved by ELC.

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V. PERFORMANCE AND ACCOUNTABILITY

13. What tools does the network director use if a medical center director does not meet her/his performance goals by the end of the fiscal year?

These responses specify "Other tool(s)" in item 13 on the *VISN Summary Report*, for respondents who selected that option.

VISN	Other tool(s) used
1	Affects rating.
2	
3	Teams in high performing facilities develop assist teams to help the facility to raise their performance - usually before failing to meet the standard when signs are that assistance is needed.
4	
5	
6	
7	Level of improvement is also noted. We work together as a team to support the weak areas and use our governance structure to oversight as well as individual focused discussions.
8	Direct interaction between network director and medical center director; use of assist teams to aid the facility in improving performance.
9	
10	
11	Performance bonuses.
12	Considered in determining performance rating.
15	
16	
17	VISN office provides on-site consultation support, educational assistance, and use of outside review teams to assess problem areas and identify corrective actions, etc.
18	
19	
20	
21	Increased monitoring by network director and/or VISN staff.
22	
23	

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13a. Additional comments about medical center director accountability?

Comments are reported as submitted.

VISN	Comments
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	I try to drive accountability below the director level, e.g., if the budget is not met, I am not likely to concur in a high rating for the AD.
11	
12	If not meeting expectations, the medical center director is put on a performance improvement plan.
15	
16	
17	
18	
19	Performance goals were met last year. Closer supervision and mentoring by the network director were tools used to ensure this occurred.
20	
21	
22	
23	

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VI. ACCREDITATION, QUALITY AND RECOGNITION

19a. If a *Kizer Network Quality Award* application was submitted, what changes have been made as a result of feedback from the application?

For VISNs who answered 'yes' to: "Has the VISN submitted a Ken Kizer Quality Award application?", the following network-wide changes were specified.

VISN	Change 1	Change 2	Change 3	Change 4	Change 5	Change 6
1	Beginning to develop better processes to deploy actions/ideas throughout the Network					
2	Communication process and widening participation in organizational improvement	Universal involvement in strategic planning and process improvement	Widening our scope of performance metrics	Redirected our focus toward private sector health systems results, targeting results at the highest level of the healthcare industry	Focus on customer service	Utilize the feedback reports to serve as additional sources of input for the strategic planning process
3						
4	Committee restructuring	Rewards/recognition program	Staff development/NE HCLI			
5						
6						
7	Improve linkage between network education plan and strategic plan	Improved complaints tracking reports and reporting process	Development of in-process measures to identify potential problem areas, particularly in heath care services	Developed demand and capacity workgroup to systematically improve access	Continue development of DataBook, including linking DataBook and Financial Dashboard to strategies and objectives	Identified performance outcome data for special populations (homeless, SCI, etc)
8	Feedback from patient satisfaction surveys analyzed with a systematic approach to develop effective ways to improve customer service	Efforts implemented to improve supplier performance	Enhanced involvement of workgroup members in the development of the annual strategic plan			
9						
10	Executive Leadership Training (Baldrige criteria/framework)	Restructuring of VISN councils around Baldrige categories	More integrated strategic planning process			
11						
12						
15						

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VISN   **Network changes (continued):**

VISN	Change 1	Change 2	Change 3	Change 4	Change 5	Change 6
16	Formalized strategic planning process	Sharing pockets of knowledge is completed by collecting and advertising best practices	Improvement in data analysis and sharing	Improvement in customer satisfaction through comparisons and benchmarking	Identification and better management of key health care processes	Added developing employees as a key driver
17						
18	Incorporated core competencies with performance requirement of key staff	Process for routinely evaluating and improving leadership system implemented	System for tracking accomplishment of strategic initiatives implemented	System to predict future technology and information needs and evaluate information system implemented	Emphasis placed on ensuring employees are included in work redesign processes	Systematic processes implemented to track and analyze management operations
19						
20	CORE - predecessor to SOARS	VISN level communications processes	Web re-design			
21						
22	Helped us systematize our leadership approach	We developed councils loosely based on Baldrige criteria, for example, Leadership (NELB), service quality council	Helped us look at the criteria and requirements within each of these broad categories to see if we were listening to our patients and employees			
23	VISN 23 designed its governance structure around network councils using the principles of the Malcolm Baldrige Health Care Criteria for Performance Excellence	VISN 23 developed a Decision Matrix to be used at ELC. The Decision Matrix requires a presenter of a topic for…	VISN 23 designed an assessment tool and has completed two years of network council assessments in an effort to determine the effectiveness…	Through the Office of Organizational Development, VISN 23 participated in an Executive Leadership 360 Degree Assessment in an effort to determine the effectiveness of senior…	VISN 23 developed an Agenda Template, which includes the mission, vision, values and key priorities on each meeting agenda	VISN 23 identified its key health care service, market segments and strategic challenges on which to focus strategic planning efforts

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