Overview

Tennessee Valley Healthcare System (TVHS) is an integrated health-care system comprised of the Alvin C. York Campus in Murfreesboro, Tenn., and the Nashville Campus in Nashville, Tenn.; and many community-based outpatient clinics (CBOCs) located in Tennessee (Charlotte Avenue, Chattanooga, Clarksville, Tullahoma, McMinnville, Maury County, Cookeville, Vine Hill and Dover); and Kentucky (Hopkinsville, and Bowling Green).

TVHS provides ambulatory care, primary care, and secondary care in acute medicine and surgery; specialized tertiary care; transplant services; spinal cord injury; outpatient care; and a full range of extended care and mental health services. The Nashville Campus is the only VA facility that supports all solid organ transplant programs, including total in-house kidney and bone marrow transplants. The Alvin C. York Campus is a network referral center for mental health services, geriatrics and extended care. TVHS provides a full range of specialized medical services.

TVHS has active affiliations with two local institutions. The Alvin C. York Campus is primarily affiliated with Meharry Medical College, with active residency programs in oral surgery, psychiatry, general internal medicine, occupational medicine, preventive medicine, geriatric medicine and family practice. The Nashville Campus is primarily affiliated with the Vanderbilt University School of Medicine, with active residency programs in all major medical and surgical specialties and sub-specialties.

Campus Realignment

The original vision for the realignment of TVHS’s inpatient services was proposed to consolidate the acute psychiatric unit located at the Nashville campus to the Murfreesboro campus. Repurposing the psychiatric unit would accommodate the consolidation of inpatient medicine beds from the Murfreesboro campus, to include Acute Medicine Unit, the Medical Intensive Care Unit and the Progressive Care Unit.

This proposal was withdrawn due to concerns expressed by the Office of Mental Health Services. The removal of inpatient psychiatric beds was not supported; instead, the redesign of the 16-bed unit recommended to enhance the Psychiatric-Medical Unit was considered the best practice. As a result of the inability to consolidate the psychiatric services, the realignment of inpatient medicine services was also withdrawn.

Budget

Since 2003, TVHS has introduced several major programs/new initiatives to include: rural health, Transformation-21 and Specific Purpose Funds. During both FY 2012 and FY 2013, TVHS received funding for several specific purpose funding programs, including homeless, transplant, palliative care, mental health, pharmaceutical, interns, clinical trainees, research, telehealth and VISN/medical center Transformation funds. The medical center has an operating budget of $619,513 million for fiscal 2014, which accounts for unexpected needs and requirements. TVHS has not eliminated or reduced in services/programs due to budget concerns.

Staffing


TVHS’s goals are to ensure mission-critical occupations and competencies are identified and documented; and provide a baseline for the facility to develop strategies to recruit, develop and retain talent needed to meet the mission, goals and program performance levels. An equally important goal is to ensure that highly talented, experienced and competent individuals are placed in the right jobs at the right time to maximize outcomes, improve comprehensive continuum of care, reduce wait times and enhance access to veterans residing in rural areas.

Due to the challenges faced by the growing number of retirement-eligible senior human resource staff, TVHS is identifying and developing new leaders while refocusing on attracting and retaining high-performing, experienced staff. TVHS believes that continued growth and upward mobility from within the service is a key element in building a cohesive and experienced staff. Seizing opportunities to obtain senior specialists from other venues is also a staffing route that TVHS is using to ensure that it stays on track with its five-year medical center plan.
The TVHS staffing levels and mix are based on the number of recruitment actions to be completed, within a 60-day time frame, to allow the system to attract the most qualified candidates to the facility.

Veteran’s preference gives eligible veterans preference in appointment over many other applicants. Veteran’s preference applies to virtually all new appointments in both the competitive and excepted service. TVHS also utilizes special hiring authorities for veterans that permits it to appoint eligible veterans without competition.

TVHS offers local leadership training that includes Lead program, 40 hours, face-to-face supervisory training and various online opportunities through its Talent Management System. In addition, it offers Franklin Covey Workshops such as Leadership Foundation Workshop, Organization Trust, Project Management, Time Management, The 4 Imperatives of Leadership, The Diversity Advantage and Unleashing Your Team’s Talent. VISN 9 offers employees an opportunity to enter its sponsored Leadership Institute. The Center of Leadership Development is dedicated to developing career leaders for federal government through government-to-government educational programs.

**Enrollment/Outreach**

TVHS is expected to have the largest increase in enrollment in VISN 9 over the next five years. With recent Affordable Care Act (ACA) projections, those numbers have further increased to approximately 25 percent of current enrollment. To efficiently maintain services for all veterans, TVHS will be expanding the Chattanooga and Clarksville CBOCs, as well as create a new plan to increase leased space in the Nashville metropolitan area. TVHS is also planning to open new CBOCs in Sumner County, Tenn., and Whitfield County, Ga. (approximately 30 miles from the Chattanooga CBOC). Additional efficiencies are being implemented via quality control projects and NRM projects.

The expansion of the Chattanooga Clinic will convert the facility from a 40,000 to 75,000 square-feet. TVHS also will be opening a new dental clinic in the Clarksville area to provide dental services outside of the Nashville and Murfreesboro region. Additionally, TVHS will be opening a new outreach clinic in Athens, Tenn., to provide mental health and primary care services in the eastern portion of the TVHS market. TVHS also is developing a functional plan for removing all primary care services from the Nashville Campus and providing it at a location in the Nashville metropolitan area.

TVHS identified space as being its No. 1 enrollment challenge, with the approximate 400,000 square foot gap based on projected workload and ideal space conditions in 2019. The Chattanooga, Clarksville, Sumner County and Whitfield County, Ga., CBOC expansion projects will fill more than approximately 50 percent of that gap. Efficiencies and fee-based services will be used to handle the remaining demand.

In FY 2013, TVHS identified 327,265 veterans in their catchment area, of which 123,380 are enrolled in VA. There are 90,000 unique veterans who used TVHS services in fiscal 2013; of that, approximately 70,000 are paneled to primary care.

TVHS has made a concerted effort to increase outreach in four major areas: access, women’s health, OEF/OIF enrollment and preventing homelessness. TVHS has done this by expanding its geographical footprint, opening new outreach clinics and CBOCs into rural areas, opening the first women’s clinic in VISN 9, creating two OEF/OIF veterans-only clinics in Nashville and Murfreesboro, and actively combating homelessness through a variety of outreach programs targeted at helping homeless veterans.

TVHS opened a dedicated women’s clinic in Nashville in May 2009. Since that time, the women’s health program has developed outreach events individually and in collaboration with other VA programs/services. Information on women’s health services is regularly provided at OEF/OIF briefings, homeless program events, at the local Vet Center, and at each TVHS hospital facility through Women Veteran Program Managers and CBOCs through the use of women’s health liaisons on site. Expansion of 30 additional outreach staff at the VA in middle Tennessee across multiple service lines includes information about women’s health through outreach nurses, social work staff, employment specialists and peer-support staff. But specifically, the women’s clinic also has been represented through open houses, receptions, public-service announcement, flyers, newsletters, brochures, a dedicated website, and participation in community events such as the annual Stand Down event and the Tennessee Woman’s Summit (2011 and 2012).

As a part of TVHS’s FY 2014 goals, the health-care system wants to house the last remaining chronic homeless veterans in Davidson County and all major cities and rural areas, increase female veterans enrollment to 90 percent in the new women’s clinic, increase enrollment of women veterans into health-care services at TVHS, expand outreach efforts to reach women veterans not enrolled in VA health care or not aware of the availability of the women’s health program, establish a new major lease for the Chattanooga CBOC to decrease wait time and expand access, open a new contract outreach clinic in Athens, open new dental clinic in Clarksville, and increase enrollment in the OEF/OIF clinics by 10 percent.

Over the next five years, TVHS will continue to aggressively reach out to veterans with all components of its outreach program. Additional emphasis will be placed on Jail VJO Program, Prisons HCRV Program, Permanent Housing VASH Program, Transitional Housing GPD Program and the SSVF Social Services for Veterans Families grant funding.
Mental Health

Since 2003, TVHS has worked on a number of mental health programs and initiatives, including: R-19/Staffing increases, resulting in a more than doubling of mental health staff; approval of Residential Recovery and Treatment Program to open in January of 2014; implementation of evidenced-based treatments for PTSD and Telemental health, implementation of a mental health provision in every CBOC; moving from day treatment to psychosocial rehabilitation and recovery programs; mental health care imbedded into primary care clinics; and the Suicide Prevention Program (2007). The Suicide Prevention Team also has implemented quarterly “drop-in” suicide prevention trainings at both campuses for all TVHS staff. The trainings are set at various times to ensure that all staff, working all shifts, has opportunities to attend.

Over the next five years, TVHS plans to fully staff primary care mental health integration, fully staff and transition to BHIP teams for general mental health care, and increase the provision of strong practice psychiatric medical unit from four to eight beds with the renovation of the 4B acute psychiatric unit. All contract CBOCs will follow BHIP model and be equipped with a full time Telemental health office.

TVHS offers several Complementary and Alternative Medicines (CAM) therapies to their enrolled veterans. Mindfulness Meditation Group (M, N) focuses on active meditation training strategies to promote positive coping strategies. Loving Kindness Meditation Group (N) uses visualization, reflection, and auditory components to develop a positive attitude and appreciation of the good in others, and being non-judgmental to self. Biofeedback is a safe and effective strategy that utilizes physical signals from within the body to train the individual to improve coping with chronic pain. Biofeedback trains the veteran to actively control some of his/her body’s reactions to pain, such as muscle tension, temperature and breathing. By exerting control over these areas, veterans are able to change their pain experience by decreasing physical pain, reducing the emotional impact of their pain, and improving coping. Auricular acupuncture, drum circle and healing waters also are offered by TVHS.

Intensive Care Unit

Since 2003, TVHS has improved on and added additional services to improve its patients’ experiences. TVHS has completed renovations of both the SICU and MICU, modified the household staff work hours so interns never work more than 16 hours straight and implemented the 12-bed model. TVHS currently has 12 beds designated to its MICU and 13 beds designated to its SICU; all are fully staffed.

The TVHS offers veterans very complex ICU services. MICU is capable of providing care with the highest levels of acuity (advanced ventilation methods, dialysis, interventional cardiology, intensive care support for oncology patients, experience with managing complication of the stem cell transplant, sepsis/ARDS, GI bleeding and hemorrhagic shock). The SICU is very strong in critical care of general, vascular, cardiac, thoracic, urologic, orthopedic and neurosurgical patients. Patients with trauma and burns are referred to the immediately adjacent affiliate, Vanderbilt University Hospital, a regional referral center.

One goal for FY 2014 is to move toward development of a left ventricular assist device program for patients with advanced heart failure.

TVHS also received two national awards for performance, in 2013

Long-Term Services and Support

Since 2003, TVHS has created a Geriatric and Extended Care Product Line Service, geriatric primary care clinic and a dementia clinic. TVHS also has enhanced and improved End of Life Service offered to veterans, and developed Home Base Primary Care, a Medical Foster Home program and a Chronic Mental Health Unit.

TVHS conducted a bereavement family survey; a score of 55 percent is the VA Central Office target. TVHS scored a 58 percent from veterans dying in the TVHS, with families assessing their care as excellent. Seventy-one percent of the families in the Community Living Center (CLC) assessed the end-of-life care as excellent (through the third quarter of FY 2013) for their loved ones. Satisfaction survey by residents had scores from 85 percent to 100 percent, meeting their level of satisfaction for 10 or more elements in 2013.

On Nov. 12, 2013, TVHS opened the Tennessee Fisher House on the Murfreesboro campus. Fisher Houses provide lodging for families of wounded servicemembers and veterans at no cost while a loved one undergoes treatment at the hospital. These beautiful homes enable family members to be close to a loved one at the most stressful time – during the hospitalization for a combat injury, illness or disease. The 10,000 square-foot house can accommodate up to 12 families and is fitted with amenities that include private bathrooms, a communal kitchen, living space and laundry facilities. The Tennessee Fisher House is only the 62nd to open in the United States.

For FY 2014, TVHS plans on increasing workforce development through training and mentoring, integrating long-term services among facilities throughout VISN 9 (enhancing the veteran and their families experiences in the CLC-private rooms), increasing the opportunities and varieties of activities, and continuing to develop better practices in the areas of dementia, end-of-life care and chronic mental illness.
**Homeless Coordinator**

Since 2003, TVHS has implemented a new Veterans Justice Outreach Program, HCRV prison outreach program, Social Services for Veterans Families Programs, Homeless Peer Support programs, an Employment Development specialist, HV-SEP Employment Program, a 50-Bed GPD Program, 16-bed GPD program, 500 VASH vouchers, 10 Stand Down events, 100,000 HOMES campaign partners and a formal Nashville Rescue Mission partnership. Operation Stand Down Service Center, Penroyal Veterans Center, Campus for Human Development, Mathew 25 INC., Buffalo Valley INC., Centerstone, Behavior Associates and Room in the Inn, are additional homeless programs within TVHS' jurisdiction that are partially funded by VA.

TVHS's walk-in clinic serves approximately 900 homeless veterans annually, of which 3 percent are women veterans. Seven Assertive Care Teams were formed and placed in TVHS homeless programs in Chattanooga, Clarksville, Murfreesboro and Nashville (three teams).

During FY 2014, TVHS plans to provide 80 new homes for veterans and their families through new HUD/VASH vouchers and keep occupancy rates above 85 percent in their 230-plus GPD transitional housing beds. Over the next five years, TVHS plans to house the remaining chronically homeless veterans in Davidson County, and all major cities and rural areas of middle Tennessee. The local plan has been implemented in conjunction with the overall VISN 9 plan and the VA national plan.

**Information Technology**

Since 2003, TVHS's Information Technology (IT) has improved upon current programs and introduced new initiatives to improve the overall veteran experience. TVHS has centralized all IT services, increased use of veteran access via Telehealth and mobile applications, introduced converge services (video/voice/data) to better utilize infrastructure and increase collaboration, implemented Open Source Electronic Health Record Agent and open source VistA, implemented the Big Blue Button (MyHealthVet), introduced secure messaging (veteran to provider), and improved Graphical User Interface (GUI) for providers.

In FYs 2012-2013, TVHS received 1,610 incident tickets (complaints) about their telephone system. During The System Worth Saving town hall meeting, several veterans expressed their concerns about not being able to schedule appointments within the TVHS, emphasizing long hold/wait-times. TVHS received a new PBX (telephone) switch in 2007/2008; PBXs traditionally can be supported through upgrades for 10-15 years. TVHS is included in the VA “Fix the Phones” pilot to replace PBX with Voice-over-IP phone system.

During FY 2014, TVHS plans to replace the technological capabilities within 800 workstations three years or older, implement pilot site for Enterprise Voice Communications (voice over IP replacement of traditional phone system), implement pilot site for mobile health applications (estimated 100 iPads enhancing provider/veteran access), begin wall-to-wall wireless installation (foundation for increased mobile application support across the entire facility), continue support of Telehealth implementation and sustainment, and increase networked instrumentation (AccuCheck devices, Vital Sign Monitors).

**Construction**

TVHS invested more than $36 million in construction projects in 2012 and 2013, ensuring the health-care system continues to have facilities that will offer the best health care to veterans. Many of the projects directly impacted veterans, such as the expansion of the parking garage at the Nashville Campus, which created more than 200 parking spots for veterans; new MICU (completed early 2012); surgical administration (completed early 2012); and Research Lab Phase 2 Renovation (completed February 2013). TVHS completed the renovations of its kitchen facilities at the Murfreesboro Campus. This renovation produced a modern kitchen to serve both inpatients and outpatients.

TVHS expanded its access to veterans in middle Tennessee in November 2013, opening its 10th community-based outpatient clinic to serve Maury County. The clinic was in response to data showing a need for a clinic in the county and in response to veterans’ wishes. The Maury County Clinic opened to great fanfare, and the TVHS leadership was present at the event to welcome the first veteran who received care. The clinic offers primary care services and mental health services, as well as lab services to veterans in Maury County and in the surrounding communities.

TVHS currently has three major projects underway: Specialty Services Tower in the north parking lot (Nashville campus), Mental Health Service Building (Murfreesboro campus), and a major lease for a new expanded outpatient clinic in Chattanooga.

TVHS acknowledges that the Strategic Capital Investment Plan (SCIP) is an effective tool when it is used as planning tool to see what construction projects are funded nationally, but it works against the medical center when it does not allow TVHS leadership to determine the priority of needs as it relates to their facility.

**Patient Advocate**

TVHS defines patient satisfaction as patient-centered care, which entails improving patient clinical outcomes and satisfaction rates by improving the quality of the relationship between the patient and employees of TVHS.
TVHS’s indicators and measurement are tracked through the SHEP reporting site for both inpatient and outpatient. Patient satisfaction also is measured and tracked through the PATS (Patient Advocate) report and the Patient Discharge Survey (nursing). Patient satisfaction touches all area of TVHS and places each within the organization responsible for these measures. TVHS leadership has demonstrated its commitment to ensuring all staff is trained and aware of the patient-centered care movement. TVHS leads the VISN in Patient-Centered Care Staff Engagement Session participation. These engagement sessions focus on veteran-directed care, and allow staff to openly discuss obstacles and challenges faced within their areas in providing patient-centered care. The concerns are brought back to the leadership so that these obstacles and challenges may be removed, and staff can focus on the veteran.

Since all staff is responsible for patient satisfaction, all staff works on these initiatives and movements. If a front-line staff member has an idea to improve patient satisfaction, the information is passed forward and a group is formed to implement. TVHS does utilize co-chairs for the Patient-Centered Care Committee, as well as for the staff engagement sessions.

**Town Hall Meeting**

The Veterans Healthcare Town Hall meeting took place at American Legion Post 88 in Nashville on Nov. 13, 2013. The purpose of the town hall meeting was to address the selected System Worth Saving topics and give veterans an opportunity to express their concerns and share their success stories about their VA health care over the past 10 years.

During the meeting, veterans had concerns about what appeared to them to be staffing shortages within TVHS. Several veterans shared their personal struggles with scheduling appointments successfully, getting in contact with their primary care physician and having to see a different primary care physician every time they had an appointment. Most veterans appreciated the user-friendly, online health record tool, MyHealthVet; but would like to see more primary care and specialty care physicians sign up to make the tool more effective. The lack of outreach (in rural communities) about new services and programs offered by TVHS was also mentioned.

Veterans praised TVHS for its new construction and renovation projects. Two expansion projects that were constantly mentioned were the new parking garage (Nashville Campus) and the opening of the Maury County Clinic, which gives veterans alternative options when it comes to where they can physically receive their primary care.

Overall, veterans seemed pleased with the amount of services and programs that TVHS offered. The issues, concerns and best practices discussed during the town hall meeting were expressed to the appropriate leadership at the medical center.

**Best Practices**

TVHS continues to find new ways to supplement funding by competing for special purpose grants to augment gaps in the budget. Some medical centers are not putting themselves in the running for these grants; TVHS has consistently sought out these opportunities.

TVHS’s commitment to invest in its infrastructure, ensuring the environment of care at their facilities meets the expectations that veterans have and deserve, is to be commended. The Nashville MICU patient rooms and nurses’ stations have been refined, renovated and reintroduced to meet the 21st century needs of veterans today.

TVHS continues to promote excellent recruitment initiatives. TVHS has, on average, 10,000 applications on file, giving the medical center the best opportunity to select talent that will best serve the veterans.

**Facility Challenges and Recommendations**

**Challenge:** TVHS struggles to fill critical leadership positions across multiple departments. These gaps could cause communication breakdowns between medical center leadership and staff that work in these departments.

**Recommendation:**

TVHS needs to improve its communication about upcoming health and informational events, and new services and programs that are offered to the veterans that it serves – especially those living in rural areas.

TVHS needs to improve the continuity of care for PACT teams with veterans. Veterans feel that consistency with primary care physicians is lagging, and TVHS has not offered any clear explanations for the changes. The American Legion recommends that TVHS ensures the Human Resources Department has every tool available to streamline the number of recruitment actions to avoid losing qualified candidates for key leadership positions.

The American Legion recommends that TVHS develop specific outreach event goals, and track the number of veterans that attended and are enrolled. Insure that veterans not enrolled take the necessary steps to begin the enrollment process.

The American Legion recommends that TVHS continues to monitor and prepare for different scenarios that may impact future budget, such as: sequestration, ACA and MCCF.