



SOUTHERN LOUISIANA VA HEALTH CARE SYSTEM (SLVHCS) | NEW ORLEANS, LA

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Chairman of the Veterans Affairs & Rehabilitation Commission: Ralph Bozella, *ex-officio*

Veterans Affairs & Rehabilitation Division Member: Steve Kleinglass (MN)

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Chairman's Statement

In 2003, Ron Conley, The American Legion's National Commander that year, visited and assessed the delivery of health care at over 60 Department of Veterans Affairs' medical facilities across the country. Commander Conley wanted to assess the delivery of health care delivered to the nation's veterans to determine if the VA health care system was truly a "System Worth Saving." The following year, The American Legion passed a resolution making System Worth Saving a permanent program under the National Commander. The American Legion's National Executive Committee later realigned the program under the Veterans Affairs and Rehabilitation Commission.

After nearly two decades, The American Legion has conducted more than 300 System Worth Saving visits to VA/VHA medical facilities in the United States, its territories, and the Philippines. Over the course of those visits, The American Legion has played an integral role in shaping federal legislation that improves the delivery and quality of healthcare at VA/VHA medical facilities. Furthermore, each System Worth Saving visit culminates with a report that informs members of the American Legion and provides additional insight to the president of the United States, members of Congress, the Secretary of Veterans Affairs, and other senior leaders at the Department of Veterans Affairs/Veterans Health Administration about the challenges and best practices at VA medical centers.

Primary Purpose of the Visit

The American Legion conducted a System Worth Saving (SWS) visit to the Southern Louisiana Veteran Health Care System – also referred to in this report as SLVHCS. The American Legion visited the facility with the intended purpose of meeting the facility's staff and assessing the newly built hospital 15 years after the devastation of Hurricane Katrina.

Scope

The American Legion conducts between 12 to 18 System Worth Saving (SWS) visits per year.

National staff select the sites based on reports from the

VAOIG, media, a review of a Strategic Analytics for Improvement and Learning (SAIL), requests from a veteran, caregiver, or a department of The American Legion. Each SWS visit follows a triangular review model depicted in Figure 1. The American Legion requests data from the VA medical center via a Mail-Out Questionnaire. The SWS team reviews the data and constructs an In-Facility Questionnaire used to conduct structured interviews with the Executive Leadership Team, department managers, and other staff.

The American Legion receives data and information from SAVAHCS before the actual visit to the hospital that included SAIL reports used to measure the quality of care at VA health care systems. The SWS team analyzes the data and information builds an "In-Facility Questionnaire" to conduct structured interview sessions.

Once on site, the VAMC leads a tour with the SWS of the various departments such as the Emergency Department, Community Living Center, Sterilization Supply, and call centers. During both the tours and structured interview sessions, the SWS team notates their observations of the facility's cleanliness, procedures, employee morale, patient-staff interactions, and appearance of patients in Community Living Centers.

The SWS team did not visit any of the Community-based Outpatient Clinics, or CBOCs, to assess the presence of inventory problems. Moreover, the SWS team did not assess the facility's computerized inventory systems for either expendable medical items or capital equipment. The SWS team did not review any records, electronic or hardcopy that disclosed personal health information of patients or personal identifying information pertaining to employees.

Key Data (Source: Facility Reports)

Main Campus: New Orleans, Louisiana

Complexity Level: 1a

Accreditations: Joint Commission | Commission on Accreditation of Rehabilitation Facilities (CARF) | American Psychological Society | National Center for Patient Safety (Gold Standard two consecutive years) | Long Term Care



Institute | College of American Pathologists (CAP) | Project Management Institute (PMI). Rarely does PMI accredit an institution, but when that happens, the facility has developed a very mature project management culture and initiates projects that comply with PMI standards found in the Project Management Book of Knowledge or PMBOK.

Authorized Beds: 200

Geriatrics and Advanced Rehabilitation Beds: 200

Catchment Areas: Southern Parishes in Louisiana

Number of Enrolled Veterans: 57,772 Unique Patients Treated (FY18): 12,833 Number of Employees: 3,000

Medical Care Budget (FY2017/FY18): > \$400 million

Mental Health Outpatient Completed Appointments (FY17/FY18): 48,907/57,376 (17%+)

New Medical Campus: 1.7 million square feet/ 30 acres that consists of medical research facilities, rehab facilities, a Community Living Center that is truly beautiful and state-of-the-art, outpatient clinics, and separated parking garages for both veterans and employees, and inpatient beds, and mental health center.

Town Hall Meeting

Approximately 38 persons attended the town hall meeting including several dignitaries from the local municipal government. Additionally, staff from the SLVHCS attended and actively participated in the town hall meeting – Mr. Fernando Rivera, Director, and Mr. Bob Manness, Executive Assistant to the Director/Veteran Experience Coordinator. The 70 – minute town hall meeting allowed veterans to voice opinions about their experiences at SLVHCS. Discussions centered on:

- **Privatization of VA / VHA Medical Centers** this discussion lasted about 20 minutes. Veterans spoke about their “intense dislike of the thought of taking the VA private.”
- **The MISSION Act of 2018 and VA Modernization Act** – the SWS team sensed confusion and uncertainty among veterans when talking about the MISSION Act of 2018 and the VA Modernization Act that became law in February. Mr. Rivera did an excellent job distinguishing the two laws and what they entail both operationally and financially.
- **SLVHCS Town Hall Meetings** became a great topic of discussion as many veterans and Legionnaires attend the town hall. Mr. Rivera and other attendees spoke of the extensive use of the medical center’s staff to enroll veterans, conduct health screenings, and address challenges that veterans engage at the new hospital.

Finally, veterans enjoyed a lively discussion on ways The American Legion can help local VAMCs spread the word about services, events, and general information. Veterans and municipal government leaders applauded the efforts of The American Legion. However, several veterans voiced their displeasure by stating that “people at national should get involved more with publicizing events and publishing information from the VA.” Some acknowledged gaps in service and the “indifference from national headquarters in both Indianapolis, Indiana and Washington, D.C.”

Executive Briefings

Summary

The American Legion’s SWS team conducted structured interviews with staff of SLVHCS including the Executive Leadership Team or ELT. The SWS team used a prepared questionnaire called the In-Facility Questionnaire to conduct its structured interviews with members of the ELT. The SWS selected the questions based on data received from the medical center prior to the visit. The SWS team also discussed “Best Practices,” and “Challenges.” The ELT ensured all staff designated to participate in the interviews did so and were prompt in coming to the meetings.

Best Practices

The American Society of Quality or ASQ (2014) defines Best Practice as “a superior method or innovation that contributes to the improved performance of an organization, usually recognized as best by other peer organizations.” The SWS team identified the following best practices at the Southern Arizona VA Health Care System.

1. Leadership and Employee Engagement

The SWS team has visited many VA medical centers and held meetings with medical center directors. However, Mr. Fernando Rivera demonstrates the kind of that is contagious and inspiring. He is a practical visionary who draws from multiple disciplines to achieve success – LEAN-Six Sigma, project management, organizational psychology, strategic planning, and like a great military general, flawless execution of tactical plans. Patients see Mr. Rivera’s photos throughout the facility. On every information desk, patients and visitors will find Mr. Rivera’s business cards with his cell phone number on it – a cell phone that he answers personally. While other VAMCs have capable leadership, SLVHCS has great leadership and an excellent culture that puts the safety and care of veterans as a primary concern.

Results: The employees at SLVHCS enjoy working at the medical center. Studies corroborate the notion that leaders who



create climates of openness and trust balanced with achievable but difficult goals results in highly engaged employees. What is more, highly engaged employees positively affect patient satisfaction, increases productivity, and creates an ambience of caring people caring for people.

2. Supervisor Institute

SLVHCS conducts its own leadership development training titled Supervisor 301.” As the program brochure states, “The goal of 301 is to provide dynamic training to improve productivity, morale and behaviors.” It helps emerging leaders develop their style or “brand” of leadership.

Results: Less employee turnover; reduced voluntary attrition results in less waste, retention of skills and knowledge that sustains the over the long-term, and no wasted recruitment efforts trying to replace or find “new employees.” For a hospital caring for patients, unnecessary employee turnover improves and sustains patient safety initiatives.

3. Patient Engagement

SLVAHCS formed and conducted veteran focus groups to design the facility, chose furnishings, and decorations such as paint and artwork. At every juncture of the design process, veterans played a critical role.

Results: Veterans feel they have ownership not only because of their service to the country but because of their active participation in designing the facility. This type of engagement builds trust and creates opportunities for open communication and ameliorates efforts for patient compliance with care instructions and adherence to prescribed drug regimens.

Challenges and Recommendations

The SLVHCS’ main campus and the hospital is new. New facilities operate under a budget earmarked for “Activation” by The Department of Veteran Affairs and the Veterans Health

Administration. Yet, the activation budget often leaves facilities with a “donut hole.” In the case of SLVHCS, the donut hole requires the facility to find \$70 million to fund operations after the activation budget of \$200 million has been exhausted. Not having adequate funding puts a great deal of stress on the staff at all levels of the organization.

Challenge 1: Activation Budgets

Recommendation: The American Legion recommends System Worth Saving staff research this topic by conducting interviews with key stakeholders, directors and VHA finance staff, to determine what can be done to avoid the Activation donut hole.

Conclusion

Data

The System Worth Saving program staff requests data from each VA medical center designated for a site visit. The team requests SAIL reports, strategic plans, HR statistics, and patient experience statistics. The SWS team requested data from SLVHCS one month in advance of the visit, which is usual and customary. The medical facility did respond by providing the team with entire data sets and information that supported the data. In some cases, the facility submitted more than what the team requested.

Observations

Members of the SWS team made the following observations:

- Staff at the facility are dedicated to serving veterans in an organizational culture that is fully supportive of their professional development.
- Buildings and grounds were very well-maintained.
- Veterans in the Community Living Center were clean, alert, and complimentary of nursing and medical staff.