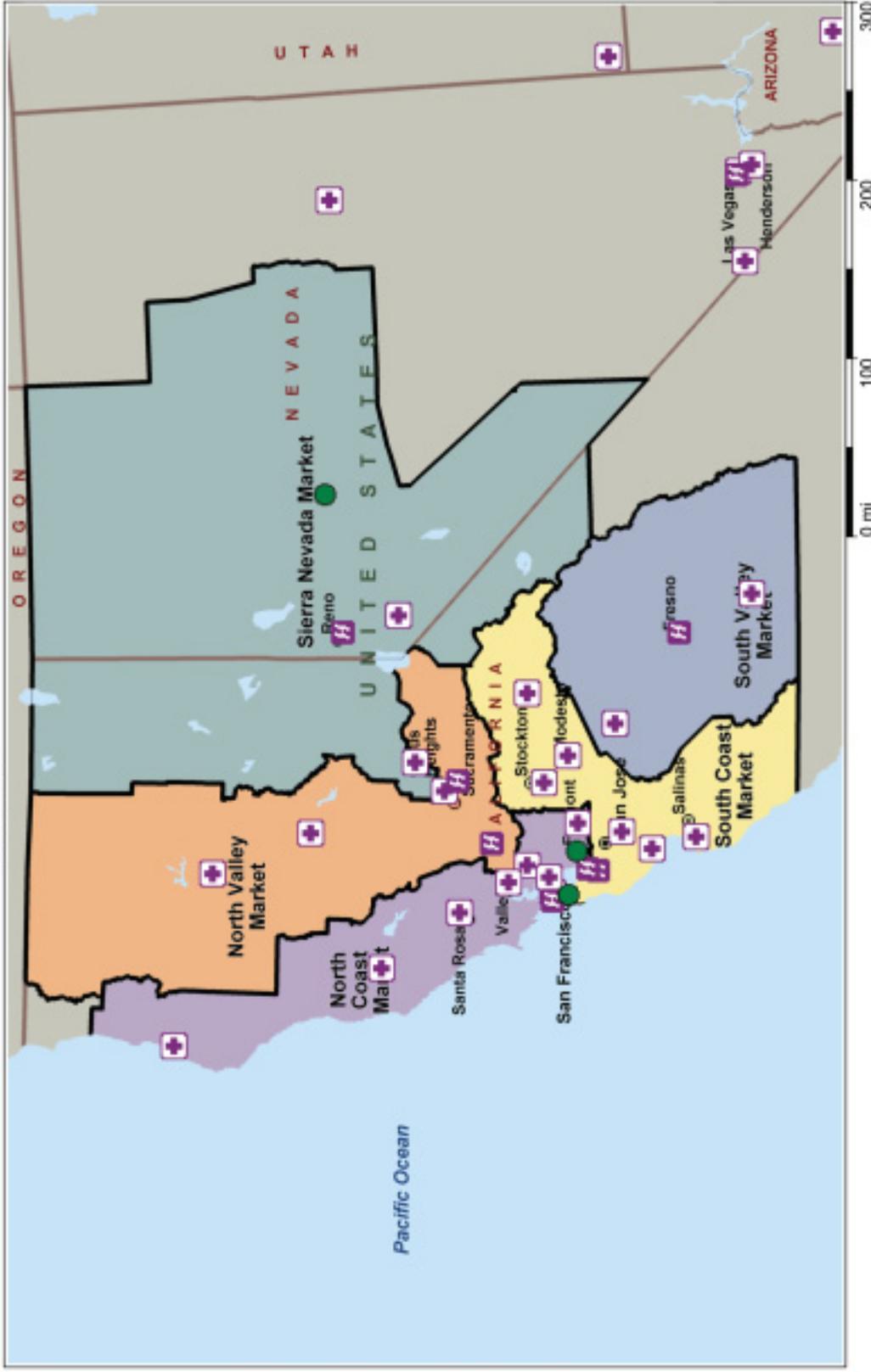


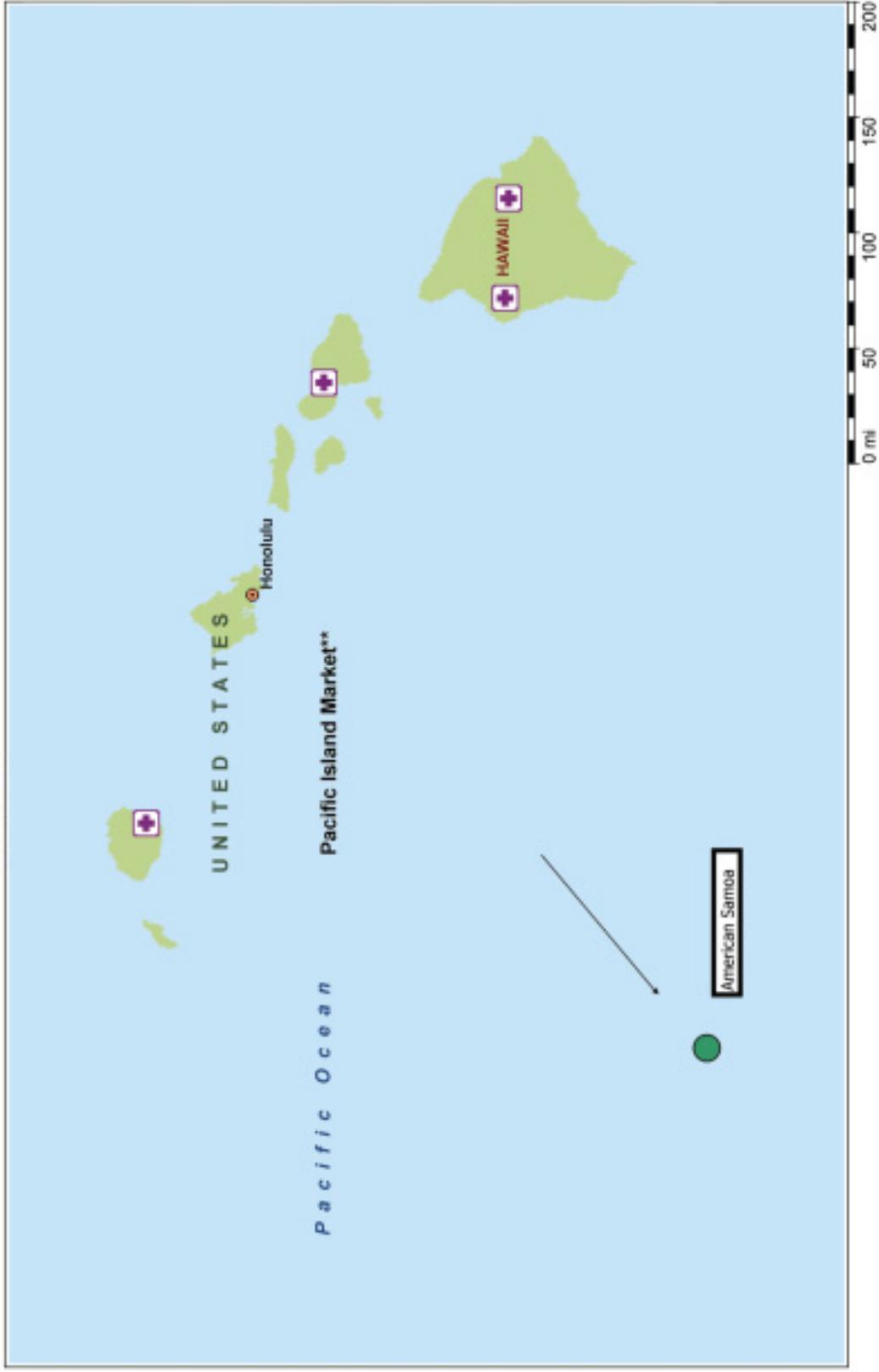
# VISN 21



- Pushpins**
- VA Clinic
  - VA Hospital
  - Planned New CBOC
- Markets**
- North Coast Market
  - North Valley Market
  - Pacific Island Market\*\*
  - Sierra Nevada Market
  - South Coast Market
  - South Valley Market

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## CARES DECISIONS FOR VISN 21

### *CARES Commission Recommendation*

#### **I Campus Realignment**

##### *Livermore VAMC*

- 1** The Commission does not concur with the DNCP proposal that nursing home care at Livermore be transferred to Menlo Park and the community.
- 2** The Commission recommends that the long-term care services (nursing home beds) at Livermore be retained as a freestanding nursing home care unit.
- 3** The Commission concurs with the DNCP proposal to transfer sub-acute beds to Palo Alto.
- 4** The Commission concurs with the DNCP proposal to shift outpatient care to CBOCs.

### *Secretary's Decision*

#### **I Campus Realignment**

##### *Livermore VAMC*

VA will realign the Livermore campus to improve access to and quality of patient care by moving services closer to where patients live and by collocating care. The realignment will include transfer of outpatient care to an expanded Central Valley clinic and to a new East Bay clinic. The realignment also will move sub-acute and low-volume specialty services currently provided at Livermore to the Palo Alto VAMC where they will be colocated at a tertiary care facility.

VA is committed to the care of its nursing home patients and will maintain access to services locally by retaining a nursing home presence in Livermore through construction of a new facility. Because this new facility will not be collocated with other VA care, VA will develop a referral agreement to ensure it is able to effectively respond to emergent situations.

The Livermore campus currently requires significant ongoing maintenance and scarce patient care resources are used for maintenance of buildings and grounds. This realignment will redirect funds spent on maintaining Livermore's deteriorating physical plant to patient care services. Through realignment, VA will enhance care to veterans and make better use of its resources.

To ensure that this transition is managed effectively, VA will develop a Master Plan for the Livermore campus. The Master Plan will include strategies for managing the transition of patient care services associated with realignment. It also will include a careful study of the appropriate size and location of the new nursing home to include a cost-effectiveness analysis to ensure maximum effective use of VA resources. Plans for the nursing home will be developed using the long-term care and mental health strategic plans. The Master Plan also will ensure that the decision on disposal or reuse of excess VA property serves to enhance the Department's mission.

VA recognizes that this realignment will change the location and nature of some services provided in the Livermore area. VA is committed to managing these transfers effectively and to minimizing any impact on patients, employees, and the community. This will include assuring continuity of patient care to the greatest extent possible, and managing any changes in employment through natural attrition, transfer, early retirement, retraining or other benevolent mechanisms. VA will continue to work closely with its stakeholders to ensure that development and implementation of the Master Plan are managed effectively.

While VA expects this transition to occur over several years, VA will complete the Master Plan by the end of 2004 (*Reference – Long-Term Care, Excess VA Property: Crosscutting*).

### ***CARES Commission Recommendation***

#### **II Inpatient Care and Access**

The Commission concurs with the DNCP proposal for expansion of services at the Reno VA Medical Center (VAMC) and contracting for services in South Coast and Sierra Nevada markets as needed to meet inpatient access demands.

#### ***Secretary's Decision***

#### **II Inpatient Care and Access**

VA will expand services at the Reno VAMC and enhance telemedicine services between the Reno, Palo Alto and San Francisco VAMC's. VA will use existing authorities and policies to contract for care in the Sierra Nevada and South Coast markets where necessary (*Reference – Contracting for Care: Crosscutting*).

### ***CARES Commission Recommendation***

#### **III Outpatient Care**

- 1** The Commission recommends that VA open a new CBOC closer to the residences of patients who now receive outpatient care at Livermore.
- 2** The Commission recommends that the Secretary and USH utilize their authority to establish new CBOCs within the VHA medical appropriations without regard to the three priority groups for CBOCs outlined in the DNCP.

#### ***Secretary's Decision***

#### **III Outpatient Care**

VA will meet the increase in demand for outpatient care in all four markets through expansion, renovation, new construction, and use of existing authorities and policies to contract for care where necessary.

VA will develop new CBOCs through the National CBOC Approval Process. VISN 21 has four new CBOCs targeted for priority implementation by 2012:

<b>Parent Facility</b>	<b>Planned New Facility Name</b>	<b>State</b>
Sierra Nevada HCS	Fallon	NV
San Francisco VAMC	North San Mateo	CA
VA Palo Alto HCS	East Bay	CA
Pacific Islands HCS	American Samoa	HI

The Fallon CBOC will help the VISN, which currently is below access standard in its Sierra Nevada market, meet national access standards. The American Samoa CBOC will support VA/DoD sharing, the North San Mateo clinic will relieve space at a crowded San Francisco VAMC, and the East Bay clinic will be opened in conjunction with the realignment of the Livermore VAMC (*Reference – Contracting for Care, Community-Based Outpatient Clinics: Crosscutting*).

**CARES Commission Recommendation**

**IV VA/DoD Sharing**

The Commission concurs with the DNCP proposals on DoD collaborations.

**Secretary’s Decision**

**IV VA/DoD Sharing**

VA will continue to pursue collaborative opportunities with DoD across the VISN. VA will work to expand its sharing arrangement with Travis Air Force Base, continue its collaborative work with Tripler Army Medical Center, and seek new VA/DoD sharing opportunities in American Samoa and Guam (*Reference – DOD/VA Sharing: Crosscutting*).

### ***CARES Commission Report***

#### **V Infrastructure and Life Safety**

- 1** The Commission concurs with the DNCP proposals for seismic construction projects at facilities in the North Coast, South Coast, and South Valley markets.
- 2** The Commission recommends that patient and employee safety should be the highest priority for VA CARES funding. VA should seek the appropriation of necessary funding to correct documented seismic/life safety deficiencies as soon as possible.

#### ***Secretary's Decision***

#### **V Infrastructure and Life Safety**

VA will improve patient and employee safety by correcting existing seismic and life safety deficiencies in Palo Alto, San Francisco, Menlo Park, and Fresno (*Reference – Infrastructure and Safety: Crosscutting*).

### ***CARES Commission Recommendation***

#### **VI Consolidation of Services**

##### ***San Francisco and Palo Alto VAMCs***

The Commission concurs with the DNCP proposal to maintain both San Francisco and Palo Alto as separate facilities and to realign and consolidate services as the VISN is able to do so.

#### ***Secretary's Decision***

#### **VI Consolidation of Services**

##### ***San Francisco and Palo Alto VAMCs***

VA will maintain San Francisco and Palo Alto as separate tertiary facilities, but will continue to consolidate administrative and clinical services between both facilities as recommended in the DNCP.

***CARES Commission Recommendation*****VII Enhanced Use**

The Commission concurs with the DNCP proposal to provide a research facility at San Francisco.

***Secretary's Decision*****VII Enhanced Use**

The Secretary will continue to consider proposals to improve research and long-term care missions through enhanced use lease opportunities that recognize limitations of existing space at the medical center and enhance VA's primary mission of patient care (*Reference – Enhanced Use Lease: Crosscutting*).