

January 11, 2005

SPINAL CORD INJURY CENTER STAFFING AND BEDS

1. PURPOSE: This Veterans Health Administration (VHA) Directive identifies Spinal Cord Injury (SCI) designated beds and staffing, and defines the minimal number of available and staffed SCI beds and the minimal number of staff for certain aspects of the SCI Program.

NOTE: The need for other personnel not covered within this Directive, such as physician assistants, nurse practitioners, administrative support staff, speech pathologists, vocational rehabilitation specialists, respiratory therapists, dieticians, etc., is considered critical to SCI programs.

2. BACKGROUND

a. The minimal staffing levels for the particular personnel included herein were derived from several sources (e.g., VHA staffing guidelines, professional organization recommendations, task force recommendations, customary case mix, and developmental or first-generation staffing guidelines). The majority of the SCI Centers are to be staffed for nursing at 85 percent of the available beds. However, a number of centers will be staffed for nursing at a different level because of clinical considerations and unique factors. *NOTE: Some centers may emphasize additional types of personnel based on unique program or patient characteristics.*

b. Attachment A and Attachment B set forth the specific number of available and staffed SCI beds for each Department of Veterans Affairs (VA) facility.

3. POLICY: It is VHA policy that available and staffed SCI beds and acceptable staffing for inpatient SCI nursing, SCI physicians, SCI psychologists, SCI social workers, and SCI rehabilitative therapists must be provided to meet or exceed the requirements described in Attachment A and Attachment B. *NOTE: Any decrease of the existing resources devoted to the SCI program requires the prior approval of the Under Secretary for Health.*

4. ACTION

a. **Chief Consultant, Spinal Cord Injury and Disorders (SCI&D) Strategic Healthcare Group (SHG).** The Chief Consultant, SCI&D SHG, is responsible for:

(1) Determining the number and assignment of SCI beds. The 1,209 staffed beds for SCI patients described in Attachment A and Attachment B are to be maintained as specified in this Directive. The staffed beds are comprised of:

(a) Nine hundred and forty-nine beds. Nine hundred and forty-nine (of the available 1,128 SCI beds in SCI Centers) must be staffed as specified in this Directive.

(b) Thirty extended care beds. In addition to the existing extended care beds at SCI Centers, an additional 30 staffed extended care beds in nursing home care units are designated for SCI use at: Menlo Park (10), Miami (10), and Brecksville (10).

THIS VHA DIRECTIVE EXPIRES NOVEMBER 30, 2006

VHA DIRECTIVE 2005-001

January 11, 2005

(c) Fifty extended care beds. An additional 50 staffed extended care beds for SCI use are to be established in SCI Centers at: Memphis (20) pending proven need, and Tampa (30) pending proven need and construction funding.

(d) One hundred and eighty extended care beds. An additional 180 staffed extended care beds for SCI use are to be identified and designated within VHA facilities.

(2) Assessing the status of the SCI system as of September 30 of each year. After seeking input from interested Veterans Service Organizations and stakeholders, the Chief Consultant must provide the Under Secretary for Health with any recommended changes to the minimal bed and staffing levels for each facility that are required to ensure that SCI patient needs are met.

b. **Medical Center Director**. Medical Center Directors of facilities having an SCI Center are responsible for ensuring that SCI staffing adheres to VHA policy. Increased staffing must be provided in accordance with the provisions of this Directive whenever the average daily census (ADC) exceeds 85 percent of the staffed beds specified in Attachment A and Attachment B.

(1) **Nursing**. Minimal nursing staffing must be calculated based on 71 Full-time Equivalent (FTE) employees per 50 staffed beds. This equates to 1.42 FTE per staffed bed and is derived from an SCI system wide average of 356.7 hours of patient care required per day for 50 staffed beds. *NOTE: When acuity levels exceed the national average, nursing staffing needs to be increased accordingly.*

(2) **SCI Physicians**. SCI physician staffing must be, at a minimum, one physician for every ten staffed beds. *NOTE: At the Brockton and Hampton SCI Centers, and Hines Residential Care Facility (RCF), physician staffing must be, at a minimum, one physician for every twenty-five extended care staffed beds. An additional .5 FTE are to be allocated for administrative responsibilities of the full-time SCI Chief.*

(3) **SCI Social Workers**. One SCI social worker must be available for every twenty available beds. *NOTE: At the Brockton and Hampton SCI Centers, and Hines RCF, one SCI social worker must be available for every forty extended care beds. Social workers are expected to provide services to SCI outpatients.*

(4) **SCI Psychologists**. One SCI psychologist must be available for every twenty acute or sustaining care available beds. *NOTE: At Brockton and Hampton SCI Centers, and Hines RCF, one psychologist must be available for every forty extended care available beds. Psychologists are expected to provide services to SCI outpatients.*

(5) **Therapists**. One rehabilitation therapist (from a rehabilitation therapy mix of physical therapists, occupational therapists, kinesiotherapists, and certified therapeutic recreational specialists) must be available for every five available beds. *NOTE: At the Brockton and Hampton SCI Centers and Hines RCF, one rehabilitation therapist must be available for every fourteen available beds.*

(6) **Additional SCI Staffing Needs.** In addition to the preceding defined minimal staffing needs, additional immediate needs for instituting key program elements within the SCI Centers (including SCI Home Care, SCI Care Coordination, SCI Outpatient Clinic and SCI Telemedicine programs) are to be implemented with categories of staff determined locally.

5. REFERENCES

- a. VA Special Task Force on Spinal Cord Injury Programs.
- b. VHA Executive Decision Memo dated January 7, 2000.
- c. Section 104 of Public Law 104-262, Management of Health Care.
- d. Section 203 of Public Law 107-135, Maintenance of Capacity for Specialized Treatment and Rehabilitative Needs of Disabled Veterans..
- e. VA Capacity Report to Congress.

6. FOLLOW-UP RESPONSIBILITY: The Chief Consultant, Spinal Cord Injury and Disorders (SCI&D) Strategic Healthcare Group (SHG) (11S), is responsible for the contents of this Directive. Questions are to be addressed to (206) 768-5401.

7. RESCISSION: VHA Directive 2004-044 is rescinded. This VHA Directive expires November 30, 2006.

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Acting Under Secretary for Health

Attachments

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ATTACHMENT A

SPINAL CORD INJURY (SCI) CENTER ACUTE AND
SUSTAINING BEDS BY FACILITY

VETERANS INTEGRATED SERVICES NETWORK (VISN)	FACILITY	DEPARTMENT OF VETERANS AFFAIRS (VA) AVAILABLE BEDS	VA STAFFED BEDS
18	Albuquerque	30	26
7	Augusta	60	55
3	Bronx	62	53
10	Cleveland	38	32
17	Dallas	30	26
3	East Orange	14	12
12	Hines	68	58
16	Houston	40	34
22	Long Beach	85	72
9	Memphis	70	60
8	Miami	36	31
12	Milwaukee	38	32
21	Palo Alto	43	43
6	Richmond ^	100	68
17	San Antonio	30	26
22	San Diego	30	26
8	San Juan	20	17
20	Seattle	38	32
15	St. Louis	32	27
8	Tampa	70	60
1	West Roxbury	40	34

^ 20 Hoptel beds

ATTACHMENT B

SPINAL CORD INJURY (SCI) CENTER EXTENDED CARE BEDS AND ADDITIONAL
EXTENDED CARE DESIGNATIONS BY FACILITY

VETERANS INTEGRATED SERVICES NETWORK (VISN)	FACILITY	VA AVAILABLE BEDS	VA STAFFED BEDS
1	Brockton	40	30
3	Castle Point	20	15
10	Cleveland (Brecksville Division)	10	*
6	Hampton	64	50
12	Hines Residential Care Facility (RCF)	30	30
9	Memphis	20	**
21	Menlo Park Nursing Home Care Unit (NHCU)	10	#
8	Miami NHCU	10	#
8	Tampa (Extended Care)	30	##
* Pending remodel			
** Pending proven need			
# Already staffed			
## Pending proven need and construction funding			

Total Department of Veterans Affairs (VA)	
Available Beds at SCI Centers =	1128
Total SCI Center Staffed Beds =	949
Newly Identified Extended Care Beds (Brecksville, Memphis, Menlo Park, Miami, and Tampa) =	80
To be Identified Extended Care SCI Priority Beds =	180
SCI Bed Total =	1209