Resilience
Going Above and Beyond for Veterans and the Community through the Pandemic

2021 ANNUAL REPORT
Resilience

NOUN

the capacity to recover quickly from difficulties; toughness.

SYNONYMS: flexibility · pliability · suppleness · plasticity · elasticity · springiness

Hopes were high at the start of 2021. Late in 2020, a vaccine was approved in the fight against COVID-19 and Corporal Michael J. Crescenz VA Medical Center (CMCVAMC) was one of the first VA medical centers to receive it. Already many front-line team members had received their first dose of the vaccine, and it was being administered to our most vulnerable Veterans, the residents of the Community Living Center. Some of the COVID restrictions put in place were being lifted in the city of Philadelphia, and throughout Pennsylvania and New Jersey.

As the world entered year two of the pandemic, team members at CMCVAMC continued to show resilience in the fight against this deadly virus. Not missing a beat, Veteran care was never disrupted. Whether continuing with virtual care or starting to bring patients back for in-person appointments, Veteran health care remained the top priority. Through it all, no one lost focus on the mission to provide the highest quality care to Veterans.

In their own way, each member of the CMCVAMC team stepped up. Environmental Management Service kept the facility clean and germs to a minimum. Facilities and Engineering kept the building in top shape. Health Administration Service answered phones, scheduled appointments, and helped keep clinics running. Occupational Health made sure team members were screened and helped any team member who was ill. Logistics and Resource Management ensured that clinicians had PPE and other equipment to keep patients and themselves safe. Public Affairs kept Veterans informed about the availability of vaccinations. Everyone had a role to play, and each team member contributed, keeping Veterans safe and continuing the important work done every day.

In these pages, we highlight some of the tremendous work by CMCVAMC team members who went above and beyond for Veterans and the community in 2021.

On the cover: CMCVAMC team members walk in the Philadelphia Veterans Parade holding signs to inspire and also to identify their department.
Focus

Vaccine Distribution Process  p. 6
Hospital Care  p. 8
Vaccines for Veterans  p. 10
Pathology & Laboratory Medicine  p. 12
Robust Research During the Pandemic  p. 13
Social Work, Nutrition & Food Service and Center for Development & Civic Engagement (formerly Voluntary Service)  p. 14
Facilities Management  p. 15
Use of Clinical Team Training to Move Forward on the Journey to Becoming a High Reliability Organization  p. 16
Tidbits  p. 17
Workplace Data Statistics  p. 18
Accreditations  p. 19
2021 COVID Resilience

I am pleased to share with you the Corporal Michael J. Crescenz VA Medical Center’s 2021 annual report.

This year’s annual report is a testament to the resilience of our team members as they faced the second year of the COVID-19 pandemic. I am so proud of our team for their hard work, going above and beyond, to keep our Veterans, and the larger community, safe. Through innovation and dedication, we ensured that Veterans continued to receive high quality safe care.

The year started on a hopeful note with vaccines to fight against the virus, and optimism as the winter turned to spring, and spring to summer. People felt able to get together with family and friends they had not seen in over a year. The world was opening up again and here at CMCVAMC we were starting to see relief from all things COVID related. But the fall brought a new variant of the virus, and the number of people testing positive for COVID-19 started to climb. Through the entire year, our team never lost its spirit, dedication, and resilience.

This report highlights five responses to the pandemic; yet so many other examples exist, that we could have filled more pages with stories of caring and support.

As I say to our team members each week in my Director’s message:
**Joy, Kindness and Courage has and will continue to keep us together.**
**Whatever is ahead, We Got This!**
**Be Kind, Stay Strong and Be Safe.**

Warmest regards,
Karen

Message From the Medical Center Director
The year started with the good news of the availability of vaccines for COVID-19. CMCVAMC was one of the first VA medical centers to receive the Pfizer-BioNTech vaccine due to having the equipment needed to maintain the vaccines at very cold temperatures. Since receiving those first doses, CMCVAMC has been exceptionally successful in the delivery of COVID-19 vaccines to Veterans and staff starting in late 2020 and throughout 2021.

Initially established under the formalized CMCVAMC Incident Command System, an interdisciplinary vaccine delivery team first met on November 10, 2020, and worked to strategize, design, implement, and monitor all aspects of COVID-19 vaccine distribution for enrolled Veterans and staff. The Save Lives Act, signed into law in March 2021, expanded VA's ability to vaccinate all Veterans, regardless of enrollment in VA health care, as well as their spouses and caregivers.

CMCVAMC made an early decision to include frontline input from clinical and non-clinical areas that could be leveraged to address every aspect of vaccine delivery, including concerns about equity and open access for all communities served by CMCVAMC. Community leaders from the Veteran Community Advisory Board (VCAB) and Center for Health Equity Research and Promotion (CHERP) provided important feedback. Early integration of this workgroup into a variety of community outreach efforts was important because it included the voices of our Veterans and ensured all specific concerns were addressed prior to the implementation of a comprehensive vaccination strategy. This outreach included focus groups on vaccine access and diversity, and the inclusion of community-based health care workers who are integrated into the care networks for CMCVAMC Veterans across the city.

Input was also provided through a rapid staff outreach program which was led by key opinion leaders and influencers from staff areas and was designed to focus on each area’s specific concerns. This personalized outreach program included clinical leaders from CMCVAMC and incorporated Q&A sessions with all staff to increase exposure to vaccine information and combat vaccine hesitancy across the organization. Each session was designed to allow direct access to clinical and administrative leaders to receive feedback and address vaccine concerns. The investment of time from leadership during this program is one of the many examples of CMCVAMC’s commitment to keeping team members safe so that they could continue to care for Veterans.

Vaccination efforts were initially focused on distribution and delivery of vaccine at the main medical campus due to storage and pharmacy requirements, but was expanded to outpatient clinics and off-site locations to ensure that our vaccine efforts reached Veterans where they lived. This effort included community partnerships to provide multiple regional mass vaccination events. The specific needs and concerns of each community group were incorporated into the outreach for, and planning of, these vaccine events at remote VA and community locations.

Early in the vaccine distribution, a special focus was on vaccines for one particularly high-risk group - homeless Veterans. The homeless outreach team identified homeless Veterans throughout the City and drove them to the medical center to be vaccinated. As a result, CMCVAMC remains in the top 20 of all VAMCs in vaccination of homeless Veterans.

CMCVAMC had limited time to develop and implement a simple scheduling program that could accommodate vaccination appointments for all staff while allowing flexibility for cohort scheduling, in case vaccine side effects caused a high number of absences. Through iterative rapid quality assessment and improvement, CMCVAMC successfully implemented the Vaccine Administration Scheduling Tool (VAST). This program allowed simple and flexible scheduling for team members in appropriate cohorts and ensured continuation of all clinical programs regardless of potential side effects. This rapid build was designed based on frontline user input and adjusted based on that feedback. VAST evolved into a program that continues to support the successful scheduling and delivery of vaccines to large numbers of staff without any interruption to clinical operations. It has
been identified as a best practice tool across VA and has been implemented at multiple VA sites, and was selected as the presentation to the High Reliability Experience and Actions Discussion (THREAD) from VISN 4.

Direct outreach to every enrolled Veteran was multifaceted and designed to facilitate maximum exposure of CMCVAMC Veterans to vaccine offerings. CMCVAMC leveraged multiple communication tools, including media outreach, text messaging, and AudioCare messaging. Following the mass outreach, direct personalized contact was undertaken in the form of scheduling calls from provider teams to their patients. Older Veterans were called by their primary care team to ensure that they had priority scheduling for vaccines before opening vaccine appointments to younger Veterans. Home Based Primary Care made individual calls to those high-risk Veterans and a plan was implemented to successfully provide vaccinations delivered to them in their home.

CMCVAMC's Behavioral Health experts recognized that Veterans with significant Behavioral Health diagnoses were at high risk for COVID-19. Early recognition of this risk allowed CMCVAMC to build a dedicated outreach program and vaccine clinic for those Veterans, allowing them to choose which vaccine was right for them while facilitating rapid vaccine delivery to another vulnerable group of Veterans. From January through June 2021, using a variety of modalities, CMCVAMC made over 508,000 outreach attempts to schedule Veterans, spouses and caregivers for vaccines.

The CMCVAMC vaccine program evolved from a clinic offering one vaccine product delivered at one location to mass vaccination events involving three separate simultaneous clinic locations with walk-in components to support open access of vaccinations to our Veteran communities. The vaccination program incorporated the delivery of three vaccine products at multiple sites for vaccine events in communities surrounding the medical center, as well as inter-agency vaccination efforts for other federal agency staff members in the Philadelphia area.

In April 2021, CMCVAMC was given a Federal Emergency Management Agency (FEMA) approved fourth mission to assist the City of Philadelphia in its vaccination efforts, using city-supplied resources and the good-will of our staff who have shown time and time again a commitment to the health and well-being of our Veterans and the communities in which they live. This event provided early vaccine to over 1,600 city residents. Through media contacts, two vaccine-outreach events were held in partnership with Veteran groups representing Veterans of color who wished to hold special vaccination clinics geared towards those Veteran communities.

CMCVAMC's vaccine program began on December 16, 2020 and has run continuously through today. The clinic runs Monday through Friday and has walk-in capability for any Veteran, spouse, caregiver, family member, or CMCVAMC staff member. We continue to provide vaccine and vaccine boosters to any eligible individual. To date, CMCVAMC has given out over 71,000 vaccine doses to Veterans and 68% of enrolled Veterans have been vaccinated. We remain committed to protecting Veterans and the nation from this deadly virus.
Hospital Care:
*Inpatient Care for the Sickest Veterans During a Pandemic*

Carrying over from 2020, and into early 2021, 5 East was designated as the unit for non-critical COVID-19 patients, with the medical intensive care unit (MICU) designated as the unit for the critical, or sickest, COVID-19 patients. As the pandemic worsened over the year, and the MICU overflowed with patients, the surgical intensive care unit (SICU) also started caring for critical patients.

By spring and summer there was a noticeable reduction in the number of COVID-19 infections needing hospitalization, so 5 East reverted to its pre-pandemic mission and COVID patients were seen in SICU (non-critical patients) and MICU (critical patients). By fall though, the surge that resulted from the omicron variant necessitated the reopening of 5 East to care for COVID patients as the number of cases increased in record amounts.

Team members from all three units demonstrated high levels of performance, professional competence, and excellent teamwork in providing patient-centered care to Veterans ill with COVID-19. The unknown situation was frightening for team members but the circumstances surrounding the pandemic did not allow team members time to dwell on their fears.

To enhance communication with patients who were isolated, team members used small hand-held white boards to communicate through the glass doors. At first, team members were incredibly fearful and worried about the unknown and about bringing COVID-19 home to their families, but once staff members started taking care of these sick patients, they did what needed to be done to get the job done.

As the pandemic became more intense and the workload became more stressful, demanding, and daunting, the skills of the members of these units remained sharp. Teamwork was at its best and the care for the Veterans ill with COVID-19 remained top tier.

The team handled the pandemic with resilience and fortitude. To ensure a safe environment, several patient rooms were reconfigured to enhance the ventilation system. Nurses teamed up with unit helpers and buddies to maximize efficiency and limit exposures of personnel.

Team members quickly adapted to best practices and evidence knowing that the best practices were changing daily. A variety of treatments were implemented including administration of
Remdesivir, Dexamethasone, and plasma, and supportive therapy, including proning, and continuous renal replacement therapy (CRRT), was tried more frequently than at any time in the past. The MICU team also participated in the HITCH Trial - Hormonal Intervention for the Treatment in Veterans with COVID-19 requiring Hospitalization: A Multicenter, Phase 2 Randomized Trial of Best Supportive Care (BSC) vs BSC plus Degarelix.

The team never gave up on a Veteran patient. They refined the intubation process for Veterans critically ill with COVID-19, even in limited negative pressure rooms. They huddled every day with leadership to discuss safe practices to prevent exposure of aerolization. Proper donning and doffing of personal protective equipment (PPE) were a top priority, and they coached all who came into the units on how to care for the Veterans and how to don and doff PPE.

Team members from these units collaborated with interdisciplinary team members from other services including respiratory therapy, palliative care, food and nutrition, pharmacy, physical and occupational therapy plus a host of other departments involved in the care of these patients.

While every team member in the units wished for successful outcomes, they faced losses. They grieved for every Veteran who succumbed to the virus. The hearts of team members were filled with compassion and tears were not uncommon. When safety dictated that family members could not visit, team members became surrogate family, holding patients’ hands when they were dying, and positioning phones so Veterans could say their last goodbyes. To reduce feelings of isolation and boredom, team members offered facetime sessions with family members. On one occasion, a nurse set up a FaceTime on the wedding anniversary date of a patient. His wife was so excited to have had this special time recognized by her spouse and his clinical team.

Over the course of the year, there were five critically ill Veterans who were on mechanical ventilators with an average length of stay of 42.5 days who successfully recovered. They were decannulated, transferred to rehabilitation facilities and eventually discharged to home. One of these Veterans recently visited the MICU to express his gratitude for care he received from the team. Another Veteran who was in the MICU for a total of 135 days was applauded and cheered by hundreds of CMCVAMC team members as he left the facility and was transferred to rehab.

Since the beginning of the pandemic, a total of 135 COVID-19 positive patients were admitted to the MICU. Thirty-seven patients were vented; fifteen patients were on CRRT; 101 patients recovered, and 36 patients passed.

The teams on these units employed every bit of their tenacity and strength and pushed through each and every challenge of the pandemic. They continue to care for the critically ill COVID-19 patient population. Over the experience the team grew stronger. Their resilience is unquestioned. They are truly health care superheroes.
In the battle against the deadly COVID-19 virus, CMCVAMC team members went above and beyond to provide vaccinations and to support VA’s fourth mission which includes providing support and assistance to federal, state and local authorities during emergencies, natural disasters, and public health crises.

In early 2021, CMCVAMC held daily vaccine clinics and mass vaccination clinics on many weekends at both the medical center and at community locations. Through an outstanding partnership with Camden County, New Jersey, county officials donated use of space and provided support for a series of four mass vaccination clinics for Veterans in New Jersey. Hundreds of Veterans and their spouses and caregivers were vaccinated at these pop-up vaccination clinics.

At the height of the pandemic, the daily vaccination clinics were administering 600 vaccinations per day, and over 1,818 Veterans were vaccinated at the first weekend walk-in clinic in January.

Due to the successful mass vaccine clinics, CMCVAMC was authorized to support a fourth mission for Philadelphia residents through FEMA. Through the coordination of voluntary efforts by the CMCVAMC team, this successful vaccination program supplied 300 vaccinations per clinic session, utilizing City resources after regular business hours. In addition, vaccines were administered to staff from other federal agencies including Department of Homeland Security, Food and Drug Administration, General Services Administration and US Federal Court.
CMCVAMC also supported VA’s Disaster Emergency Medical Personnel System (DEMPS). DEMPS is the Veterans Health Administration’s main program for deployment of clinical and non-clinical employees to an emergency or disaster. In 2021, CMCVAMC proudly participated in 13 DEMPS missions, including two missions in support of state Veterans homes, and four FEMA missions. Twenty-one team members, including nurses, physicians, social workers, respiratory therapists, lab techs, logistical staff, chaplain, and administrative support were deployed to over eight different locations to support VA’s fourth mission.

At the end of the fiscal year, CMCVAMC had vaccinated over 65% of enrolled Veterans (41% identify as Black/African American and 50% as white), and the vaccine team had administered over 61,028 total vaccinations ensuring that 31,707 Veterans (64.9%), and over 250 spouses and caregivers were fully vaccinated.
Pathology & Laboratory Medicine:
Providing Testing for Fast COVID Diagnosis

During the pandemic, the Pathology and Laboratory Medicine service (P&LM) played a vitally important role as the COVID-19 testing center not only locally for CMCVAMC, but also on a VISN level for the other medical centers in the network. The dedicated and committed team exudes a daily passion for their work in leading COVID-19 diagnostics at the local, regional, and national level. The team continues to advance VA’s mission through outstanding diagnosis, education, training, and research, and has received well-deserved recognition nationally as number one for productivity and patient care.

CMCVAMC’s P&LM served as a Lab testing site for VISN4, running samples on both the Abbott Realtime SARS-CoV-2 Assay and the Cepheid Xpert Xpress SARS-CoV-2 Assay. As of the end of 2021, the Lab had run a total of 67,754 tests, 54,904 for CMCVAMC and 12,850 for VISN 4 VAMCs, with 24-hour turnaround time for test results, something only a handful of facilities can provide. P&LM estimates that through its capacity to run these diagnostics tests internally, it has saved the VA approximately $6 million (some commercial labs charge between $100-135 per test) by establishing in-house COVID-19 testing.

Team members from P&LM attended the meeting of the American Society of Clinical Pathology in Boston where they presented ten abstract posters and represented the only VA medical center to present posters on COVID-19 disease, pancreatic adenocarcinoma, toxicology, and clinical chemistry. The team was recognized as a Blue-Ribbon finalist for Best Laboratory Practices for their work on COVID-19 for two years in a row during this national meeting which showcases the quality work being done.

P&LM continues to take the lead and function as a referral lab for COVID as well as non-COVID testing for VISN 4, running thousands of tests for multiple VAMCs in VISN 4 with its mission and vision to provide timely, safe, and the best care for our Veterans while providing huge cost-savings for VA.
Robust Research During the Pandemic:
Looking for Answers to Improve the Lives of Veterans

In 2021, CMCVAMC continued to have a robust research program. Despite the pandemic, there were over 250 active research studies of relevance to Veterans’ health, conducted by over 100 faculty members, many of whom have dual appointments with VA and University of Pennsylvania, CMCVAMC’s primary academic partner. Research studies cover a variety of diverse areas including health services, rehabilitation, biomedical laboratory and clinical science research and development, in addition to cooperative studies programs and quality enhancement research initiative projects.

Some examples of ongoing studies include health equity (with the Center for Health Equity and Promotion), aging (with a newly established Center for Aging through Quality Enhancement Research Initiative Funding), behavioral health (addiction, depression, post-traumatic stress disorder), neurological disorders (traumatic brain injury, dementia, Parkinson’s Disease), genomics research (with the VA’s Million Veteran Program and Precision Medicine in Mental Health), liver disease (fatty liver, hepatitis, cirrhosis), cancer (lung, colon, pancreas, liver, leukemia) and musculoskeletal health (osteoarthritis, spine degeneration, rheumatoid arthritis).

Of particular relevance during the COVID-19 pandemic, CMCVAMC has been actively participating in the multi-center VA Cooperative Studies Program (CSP2028) enrolling Veterans to study the epidemiology, immunology and clinical characteristics of COVID-19, and VA’s Million Veteran Program COVID-19 studies examining the role of genetics in COVID-19 outcomes, with additional VA-funded basic science research examining viral immune pathogenesis of COVID-19.

CMCVAMC is proud that three new research investigators received VA’s Career Development Award to study areas of relevance to Veterans’ health—reflecting the continued pipeline for VA research in Philadelphia. The highly competitive national review process awards funding to early career VA scientists with proven track records, commitment to VA research, who present impactful research proposals. Many of these awardees go on to become recognized leaders within VA research and health care. Congratulations to researchers Dr. Randel Swanson, from Rehabilitation Research & Development program, and Drs. Shimrit Keddem and Kirstin Manges from Health Services Research & Development, on receiving this prestigious award.
Social Work, Nutrition & Food Service, and Center for Development & Civic Engagement (formerly Voluntary Service): Joint Efforts to Connect in a Pandemic through Volunteers, Donations, and Outreach

The pandemic isolated many Veterans in their homes, without support, and some suffering with food insecurity. Throughout 2021, the Center for Development and Civic Engagement (CDCE - formerly Voluntary Service) looked for ways to connect with Veterans and partner with community donors to assist Veterans whether in the hospital or at home.

A team of almost 70 volunteers reached out to Veterans by telephone through wellness checks and birthday calls. These important connections resulted in identifying Veterans struggling with food insecurity as well as providing support for those in isolation. In addition, trained volunteers wrote approximately 60 stories for the My Life, My Story initiative, which is a program to strengthen the patient-provider relationship through storytelling.

As the pandemic persisted, the CMCVAMC on-site food pantry continued to flourish and remain sustainable. Begun pre-pandemic as a collaboration between Social Work, Nutrition and Food Service (NFS), and the CDCE, became a lifeline for many of the Veterans served. Team members from NFS helped to identify food needs for Veterans discharging to home from in-patient care to ensure that no one went home without nutrition, and Social Work team members began packing and delivering food to Veterans in their homes. The team delivered food throughout the area traveling as far out as southern New Jersey and Delaware. This wide range effort could not have been accomplished without the large group of volunteer social workers who week-in and week-out come to the VA on Saturdays to deliver food.

The home deliveries allowed the Social Work team the opportunity to check-in with Veterans and see how they were managing. One essential support the VA food pantry has been able to provide is delivering to those Veterans quarantining from being exposed to COVID-19 who have no other means to obtain food. A great example of this support was when food was delivered by the team to over 20 Veterans quarantining at one of the Grant and Per Diem sites. These Veterans were extremely grateful for this support and have voiced their appreciation that they did not need to expose others in the community to obtain food.

While making food deliveries, social workers also provide Veterans with information and resources to connect them to other local pantries and agencies which help Veterans in a variety of ways including applying for Supplemental Nutrition Assistance Program (SNAP) benefits free of charge. Looking ahead, the Social Work team is thinking of additional support and education that can be provided to these vulnerable Veterans. One possibility is providing onsite cooking lessons or dietary consultations.

Since the food pantry officially opened in January 2020, CMCVAMC has provided over 3,000 bags/boxes of food to Veterans and their families. The pantry has served 1,897 people, some of whom have received repeated support, and a total of 948 unique Veterans. These food pantry figures do not include a massive food donation received in November 2021 where food bags were handed out to Veterans at the medical center and the Veterans Multi-Service Center.

As long as Veterans in our community suffer food insecurity, the CMCVAMC food pantry will be here to meet the need.
Facilities Management awarded $26 million in design and construction contracts for fiscal year 21. These projects ranged in scope from site preparation projects for medical equipment upgrades to infrastructure projects to replace roofs, sanitary lines, and domestic water piping. A project to improve efficiency of operations and contingencies in the Sterile Processing Services (SPS) will provide an additional cart washer to sterilize medical instruments.

The medical center completed the construction efforts for the modernization of elevators in the north end of the building which provides upgraded technology for the efficient and safe operation of the elevators. The interior finishes were also upgraded as part of this project. The south elevator door upgrade project to address deficiencies in door operations has begun. Construction completion of Phase 1 MRI and Digital X-ray rooms have allowed this equipment to be deployed for Veteran use.

One long-delayed project was completed in 2021, the construction of the Community Living Center (CLC) atrium. Finally opened to Veterans over the summer, the atrium provides a large gathering space for residents on the 1st and 2nd floor units, and their families, to get together and visit. The space provides a welcoming environment with views to the street below. In the fall of 2021, the 2nd phase of this construction project was awarded. This project will renovate space in the CLC that is currently vacant to create single bed/single bath resident rooms, integrating patient centered care for our Veterans and their families.

Another important construction project this year was an internal project developed to renovate the building that houses the outpatient opioid treatment program. This project was designed by in-house staff in collaboration with the end users. Renovation encompassed a complete renovation of the 1st floor to improve efficiency in how the clinic operates and to include COVID design models for improved social distancing. The renovated unit opened October 2021.
Use of Clinical Team Training to Move Forward on the Journey to Becoming a High Reliability Organization

A High Reliability Organization (HRO) experiences fewer than anticipated accidents or events of harm despite operating in highly complex, high-risk environments, where even small errors can lead to tragic results. The concept was pioneered in industries like aviation and nuclear power that were able to reduce accidents in their complex environments and adopted by the Veterans Health Administration for rollout at all VA medical centers. HROs avoid harm by becoming proficient in three pillars of High Reliability, Leadership Commitment, Culture of Safety and Continuous Process Improvement, while ensuring that team members adhere to the high reliability principles and values put in place.

Leaders prepare clinical teams to become more reliable by encouraging participation in clinical team training (CTT), the grass roots effort of the HRO work, which introduces specific applications in the health care environment. Leaders and clinical team members apply insights they have gained through specific activities such as leadership participation in daily rounding, daily safety huddles where teams identify, report, and prioritize potential risks of the day and review past events for action, closure, and learning. Other activities include monthly patient safety forums, run by leaders and the safety department to reinforce the importance of the safety program and collaborative partnership teamwork. In addition, visual management systems, which are snapshots of clinical and operational performance and improvements that focus on the front-line team members and processes that impact their work, are now in place on clinical units throughout the medical center and at the community-based outpatient clinics.

At CMCVAMC there are many safety projects throughout the hospital led by multidisciplinary teams comprised of physicians, nurses, pharmacists, and team members from Environmental Management Service, Health Administration Service and Social Work. We have seventeen master CTT trainers, who have trained nearly 100 staff in the CTT program, working in twelve CTT teams on unit-based safety projects. Teams work to identify areas they feel would benefit most from safety and process improvement. For example, there are projects focused on scheduling, team building, timeliness of antibiotic delivery, and delivery of printed post-visit summaries to Veterans for better understanding of their visit.

In 2021, through CTT, a bi-annual safety fair was instituted which spotlights the work and accomplishments of HRO clinical teams and other employees engaged in performance and quality improvement work. At the safety fairs, held in May and October, participants prepared posters of their projects for review. At the October fair, a local HeRO award was introduced and presented to team members who exemplified and demonstrated high reliability through the HRO principles. A total of four awards were presented and will continue to be presented at each fair.

The clinical teams continued their work, sometimes remotely, despite the challenges presented by the COVID-19 pandemic. All efforts were made to maintain full operations, improve the culture, and roll-out the safety projects. The resilience of team members was demonstrated in their ongoing efforts to multi-task – providing patient care during the pandemic, while also working to improve safety and continue the journey towards high reliability.
Community Outreach
Despite the ongoing pandemic, outreach into the community to educate Veterans and encourage them to enroll in VA health care continued in full force in FY21. Team members attended over 51 unique outreach events, both in-person, and virtually, and worked to establish and build relationships with a variety of community groups. In FY21, CMCVAMC increased its total number of unique patients by 10.5%, representing the second largest increase in VISN4.

Homeless Outreach
VA and its federal and community partners strive to meet the needs of Veterans by providing services that help them secure permanent housing and achieve their full potential. CMCVAMC, federal, state, and local partners, as well as non-governmental partners, recognize that ending Veteran homelessness is not a single event in time; rather, it is a deliberate effort, and continued follow-up efforts to make sure that progress is maintained. The ultimate goal is to make sure that every Veteran has access to permanent, sustainable housing with access to high-quality health care and other supportive services and that Veteran homelessness in the future is prevented whenever possible or is otherwise rare, brief, and nonrecurring.

CMCVAMC and the Homeless Program remain dedicated to the goal of supporting and maintaining systems that effectively address homelessness. As literal homelessness becomes rare, brief, and non-recurring for Veterans and their families, the future of homeless programs will focus on prevention and sustainability. Coordinated outreach and intake systems serve to connect Veterans and their families with resources and supports to prevent homelessness and provide rapid permanent housing solutions. In addition, efforts to help Veterans remain housed include money management services, employment and education, and recovery focused/strengths-based supports.

Next Step Amputee Golf Outing
After taking a year off from the First Swing Amputee Golf Clinic and the Next Step Golf Outing in 2020 due to the pandemic, the amputee golfers were back on the links in September for a nine-hole scramble. Meant to be an enjoyable day for all participants, the event recognizes the importance of sports and fun in rehabilitation for amputee Veterans.

Each foursome is made up of two amputee Veterans, a PGA golf pro, and a VIP. Along the course are nurses and physical therapists to help the Veterans with balance, hydration, and any other medical needs. During a break in the virulence of the pandemic, it was great to see this group of Veterans enjoying the outing, and learning a new skill all while rehabilitating from their amputation.

Tidbits...
One of the lessons of living through the COVID-19 pandemic is to value the little things and enjoy life. Here are a few little tidbits from 2021.

CMCVAMC and the Homeless Program remain dedicated to the goal of supporting and maintaining systems that effectively address homelessness. As literal homelessness becomes rare, brief, and non-recurring for Veterans and their families, the future of homeless programs will focus on prevention and sustainability. Coordinated outreach and intake systems serve to connect Veterans and their families with resources and supports to prevent homelessness and provide rapid permanent housing solutions. In addition, efforts to help Veterans remain housed include money management services, employment and education, and recovery focused/strengths-based supports.

Next Step Amputee Golf Outing
After taking a year off from the First Swing Amputee Golf Clinic and the Next Step Golf Outing in 2020 due to the pandemic, the amputee golfers were back on the links in September for a nine-hole scramble. Meant to be an enjoyable day for all participants, the event recognizes the importance of sports and fun in rehabilitation for amputee Veterans.

Each foursome is made up of two amputee Veterans, a PGA golf pro, and a VIP. Along the course are nurses and physical therapists to help the Veterans with balance, hydration, and any other medical needs. During a break in the virulence of the pandemic, it was great to see this group of Veterans enjoying the outing, and learning a new skill all while rehabilitating from their amputation.

Tidbits...
One of the lessons of living through the COVID-19 pandemic is to value the little things and enjoy life. Here are a few little tidbits from 2021.

CMCVAMC and the Homeless Program remain dedicated to the goal of supporting and maintaining systems that effectively address homelessness. As literal homelessness becomes rare, brief, and non-recurring for Veterans and their families, the future of homeless programs will focus on prevention and sustainability. Coordinated outreach and intake systems serve to connect Veterans and their families with resources and supports to prevent homelessness and provide rapid permanent housing solutions. In addition, efforts to help Veterans remain housed include money management services, employment and education, and recovery focused/strengths-based supports.

Next Step Amputee Golf Outing
After taking a year off from the First Swing Amputee Golf Clinic and the Next Step Golf Outing in 2020 due to the pandemic, the amputee golfers were back on the links in September for a nine-hole scramble. Meant to be an enjoyable day for all participants, the event recognizes the importance of sports and fun in rehabilitation for amputee Veterans.

Each foursome is made up of two amputee Veterans, a PGA golf pro, and a VIP. Along the course are nurses and physical therapists to help the Veterans with balance, hydration, and any other medical needs. During a break in the virulence of the pandemic, it was great to see this group of Veterans enjoying the outing, and learning a new skill all while rehabilitating from their amputation.

Tidbits...
One of the lessons of living through the COVID-19 pandemic is to value the little things and enjoy life. Here are a few little tidbits from 2021.

CMCVAMC and the Homeless Program remain dedicated to the goal of supporting and maintaining systems that effectively address homelessness. As literal homelessness becomes rare, brief, and non-recurring for Veterans and their families, the future of homeless programs will focus on prevention and sustainability. Coordinated outreach and intake systems serve to connect Veterans and their families with resources and supports to prevent homelessness and provide rapid permanent housing solutions. In addition, efforts to help Veterans remain housed include money management services, employment and education, and recovery focused/strengths-based supports.
Workplace Data Statistics

Total unique patients:
Male: 56,895
Female: 8,835

Admissions (including observation): 6,715

Outpatient Visits Uniques
Philadelphia 577,518 57,845
Burlington 32,746 6,907
Camden 8,364 1,579
Saracini (Horsham) 44,270 8,600
Gloucester 29,460 6,080
West Philadelphia 6,743 1,443

Unique Veterans Based on Conflict:
WW II: 946
Pre-Korean: 75
Vietnam: 24,650
Persian Gulf: 20,384
OIF/OEF: 4,919
Other: 440

Total number of employees: 2,941
Number of Employees who are Veterans: 490 or 17%

Homeless Outreach Statistics for FY21
- Assisted 300+ new permanent housing placements for Veterans enrolled in homeless programs
- Provided permanent, supportive housing to 928 Veterans through HUD-VASH program
- Provided transitional housing to 449 Veterans through Grant per Diem (GPD) programs

Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH)
1,070 total VASH vouchers allocated
- 171 new Veterans housed using VASH voucher during FY21
- 928 Veterans housed using VASH voucher at end of FY21
- 799 Veterans enrolled in VASH Case Management and 193 graduated Veterans using VASH voucher (992 total) at end of FY21

The Center for Development & Civic Engagement (formerly Voluntary Service):
- $250,000 in monetary and gift-in-kind donations
- 307 volunteers serving 25,000 hours
Accreditations

To continually improve the health care provided to our Veterans, CMCVAMC is reviewed and accredited by several external review programs. These agencies evaluate the care processes of CMCVAMC and provide a framework for staff to provide excellent, safe, high-quality, and effective care. Some of our accreditations include:

**The Joint Commission:** Surveys in September 2020 for Hospital, Behavioral Health, Opioid Treatment Program and Home Care. Accredited for three years, through September 2023.

**Commission on Accreditation of Rehabilitation Facilities (CARF):** 2020 CARF reaccreditations had been postponed due to COVID-19. Medical Rehabilitation-Comprehensive Integrated Inpatient Rehab Program (CIIRP) and Amputee Program-Polytrauma/Amputation Network Site (PANS) reaccredited through August 2023. Employment and Community Services-Health Care for Homeless Veterans (HCHV), Homeless Outreach, HUD-VASH, and Grant & Per Diem, reaccredited through November 2023. Behavioral Health-Mental Health Intensive Case Management Program (MHICM), reaccredited through November 2023. Behavioral Health-Residential Rehabilitation Treatment Program (RRTP)/Snyder House reaccredited through October 2024. Behavioral Health-Psychosocial Rehabilitation and Recovery Center (PRRC)/Veterans Empowerment Center (VEC) accredited through October 2022. Employment and Community Services-Vocational Rehabilitation Services (VRS), accredited through October 2022.

**Office of Inspector General Comprehensive Health Inspection Program (OIG CHIP):** Survey in February 2019, accredited for three years, to February 2022.

**Substance Abuse and Mental Health Services Administration (SAMHSA):** SAMHSA Certification for Opioid Treatment Program (OTP) accredited through October 2023.

**Behavioral Health:** The American Psychological Association (APA) re-accredited the Psychology Internship program through 2031. The Clinical Psychology Postdoctoral Residency was accredited by the Commission on Accreditation of the American Psychological Association until 2028. The Neuropsychology Postdoctoral Residency is accredited, on contingency.

**Commission on Dental Accreditation:** Commission on Dental Accreditation (CODA) surveyed CMCVAMC Post–Doctoral General Residency Practice Dentistry Program in June 2015 and awarded accreditation through June 2022.

**Radiation Oncology:** Accredited by the American College of Radiation Oncology. Surveyed in May 2021 and accredited through May 2024.

**Mammography Program:** Reaccredited by the American College of Radiology from April 2020 through July 2023 for both standard 2D imaging and 3D Tomosynthesis imaging.

**Sleep Program:** The VISN 4 Eastern Regional Sleep Center was surveyed by the American Academy of Sleep Medicine (AASM) in August 2019 and reaccredited through August 2024.

**Long-Term Care Institute (LTCI):** The Community Living Center was surveyed in February 2020 for accreditation and is inspected annually. FY21 inspection is pending.

**The Office of Laboratory Animal Welfare (OLAW):** Reaccredited on June 25, 2020 through May 31, 2024.

**Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC):** AAALC is due for site visit and reaccreditation by March 2022.

Molecular Imaging and Interventional Radiology (MIIR) Service became the first VA in the country to receive PET/CT accreditation by the American College of Radiology (ACR). The goal of the ACR PET/CT Accreditation Program is to set quality standards for facilities and to help them continuously improve the quality of care given to patients through comprehensive review and evaluation of facilities, personnel qualifications, image quality, equipment, quality control procedures, and quality assurance. Our facility was chosen as a pilot site by the National VA Radiology/Nuclear Medicine Program office and received national funding for these efforts.