

Message from the Director



2022 turned out to be a positive, successful year for our health care system. We had several favorable inspections – The Joint Commission, The Office of the Inspector General and others – that validated high quality of care and our efforts in support of Minnesota/Western Wisconsin Veterans in the Medical Center and in our Community Based Outpatient Clinics. Like past years, 2022 was not without challenges.

As we transitioned into our third year of COVID-19 hardships, treatment has become more normalized and we're thankful that the prevalence among our Veterans has decreased. We no longer have the very large number of infected patients and staff but are still exercising necessary precautions because we're not done and it's not over.

Like all other health care systems, we've had labor market challenges resulting in shifting, or in some cases, delaying care. The Minnesota Hospital Association reported a 22% vacancy rate in health care staff among its members and that's about what we've seen here. That's meant the current staff have had to re-double their efforts, work lots of overtime and cover for each other to ensure safe, high-quality care. We've not quite returned to our pre-COVID visits and admission levels, but staff have made extraordinary efforts to take care of every Veteran need.

A few of our notable successes in the past year include:

- Congress passed the PACT Act to care for Veterans with toxic exposures, one of the largest and necessary expansions in benefits in many years.
- Congress passed the COMPACT Act to ensure that all Veterans receive the mental health care they need, here or in the community, during a crisis.
- Two of our providers were recognized by the American Legion as Physician and Health Care Provider of the year at their national convention.
- Several Minneapolis VA researchers were published and cited in the very best professional journals and publications, validating the impact of our research efforts.
- We opened new clinics in Mankato, St. James and Maplewood, signaling our ongoing commitment to providing Veterans expanded care and services where they live.
- We have reduced homelessness and Veteran suicides among our Veteran population, although we have a long way to go with many partners and this remains our top priority.

We've been serving Minnesota/Western Wisconsin Veterans since 1921. We have a hard-fought reputation as one of the very best VA Health Care Systems due to the efforts and commitment of our staff. We serve over 100,000 Minnesota/ Western Wisconsin Veterans and are grateful to them for their continued trust in us as their health care system of choice. We are committed to building on past successes and being even better next year. Our Veterans deserve no less than this.

Patrick J. Kelly, Director US Navy (ret)



Kurt Thielen Associate Director US Air force (ret)



Kent Crossley, MD Chief of Staff US Army Medical Corps



Teresa Tungseth *Nurse Executive*



Amy Archer Chief Experience Officer



Health Administration Services has worked to implement the new Beneficiary Travel Self Service System known as BTSSS. This system will allow Veterans who are beneficiary travel eligible to submit their claims online from their smart phone or other desk top device at their residence. The system was launched across VA facilities and will allow for a smooth transition as Veterans transition to and from other VA facilities. We have partnered with MyHealtheVet to ensure a smoother transition as a part of the login process. We have continued to offer hands on training and will continue to offer assistance as Veterans become more familiar with the system. We know that sometimes it takes a number of problem solving meetings to adjust to the new system. Although this has slowed down claims processing, as we shift from processing to education, we are seeing trends in the right direction.





Education Services

The Education Service Line (SL) supports all aspects of education across the facility including staff, trainees and patients. The team is interdisciplinary, innovative, and according to the All Employee Survey, is considered a top department to work in across all areas in the Minneapolis VA Health Care System (MVAHCS). The Education SL exists to empower patients and all employees to leverage learning resources and to foster a culture of growth; we value partnership, innovation, trust, growth and leadership.

Trainee Education Highlights

We welcome over 1,500 trainees annually for 40+ health disciplines, including medicine, nursing, social work, psychology, occupational therapy, physical therapy, dietetics, radiation technology, speech language pathology, optometry and pharmacy. The onboarding of first-year medical students and nursing students was optimized, which supported the VA site coordinators and training director community. Our team also expanded collaboration with Minority Serving Institutions to increase diversity of trainees. This year we started a simulation fellowship and applied for an APRN residency program in Primary Care. Additionally, our team advanced nursing education by implementing Transition to Practice, Nurse Onboarding and Preceptor Programs.

Staff Education Highlights

We delivered targeted simulation training for space activations and education consultations and support to all MVAHCS staff and trainees. Through the Field Accreditation Services (FAS), we can deliver evidence based, quality education programs to our staff. The FAS program offers continuing education credit for 22 National and 3 Local Accreditations and completed 17,442 Continuing Education Hours for staff across 536 scheduled sessions.

The non-Title 38 tuition support process was updated by the Education Business office, which increased the eligibility and use of tuition funds by employees. Tuition funds have been utilized by over 243 staff members. The Library Services at MVAHCS are a recognized resource within VHA and supported patient care and academic needs during a critical time. Our facility is also actively involved in national initiatives such as the VHA Library Core Collection Advisory Group.

The Clincal Application Coordinator (CAC) division delivered 480 training courses for our electronic computer applications and completed over 1300 Computerized Patient Record System (CPRS) request modifications/enhancements to the electronic medical record, in addition to over 89 National reminder installations to support patient care. The CAC team is working on the pre-deployment process for Electronic Health Record Management (EHRM/ CERNER).

Patient Education Highlights

Our Patient Library reopened after being closed for two years due to the pandemic. Connected Care helped with a successful pivot to virtual care delivery and supported our Veterans in accessing the care they need. The team also supported clinics and providers in reducing escalation rates of secure messaging.





Massive transfusion events: a life in the balance

Emergency! A patient's gastric ulcer has eroded into a gastric artery and the patient is losing blood rapidly. The clinical team mobilizes to stabilize the patient and stop the bleeding. Meanwhile, in the basement, the blood bank team swings into action.

First things first—get help and establish leadership. If there is a request for Emergency Release, the blood bank technologist who receives the initial telephone call rushes two O negative red blood cell units to the pneumatic tube while shouting out orders to whoever else is available to assist. Someone starts slinging ice into ziplock bags for the coolers. Someone looks up blood type history in Computerized Patient Record System (CPRS) and enters the order for a massive transfusion protocol (MTP) into CPRS. With blood type established, red cell, plasma and platelet units are selected; an electronic or manual crossmatch is performed on the red cell units; and a pack is prepared with four red cell units, four plasma units and one platelet unit. When the first pack is ready, the clinical team is notified to send a runner to collect the units. Then everything starts again as the

blood bank team assembles the next batch. The rotation continues until a call is received to announce the MTP is over.

An established protocol for massive transfusion events is essential because seamless communication between the clinical team and the blood bank team is crucial in the race against time to sustain the patient's circulatory system. Delivery of red cells, plasma and platelets in a fixed ratio is necessary for optimum outcome, since delivery of red cells without platelets or plasma would soon lead to an inability to clot. Every massive transfusion event is debriefed soon after the event by the blood bank team and nurse manager of the clinical unit, and is also reviewed in the quarterly meetings of the Transfusion Committee for lessons learned. Because an MTP is an unexpected event, simulations need to be scheduled to ensure that staff are fluent in the procedures and protocols. During 2022, a task force was assembled from nursing, ICU, blood bank, surgery and anesthesia to revise the Minneapolis VA MTP procedures, which included transferring responsibility for ordering the protocol in CPRS from the clinical team to the blood bank, and

obtaining a supply of liquid plasma to be kept on hand in the blood bank for immediate release. Rather than representing a one-time project, ongoing review of procedures by multidisciplinary groups will be part of a continuous improvement process, and simulations will routinely occur in order to maintain readiness for emergencies.

"FISH" in the Anatomic Pathology Laboratory

FISH refers to Fluorescence In Situ Hybridization, a laboratory technique that localizes a particular DNA sequence within a cell. A "probe" consists of a small piece of DNA tagged with a fluorescent dye. The labelled probe binds to any matching sequences on human chromosomes, and the chromosomal location of the sequence (or loss of the sequence) can be visualized under a fluorescence microscope.

This technique can detect chromosomal translocations, aneuploidy, gene amplification and deletion mutations within tumor cells. During the past year, our anatomic pathology and molecular diagnostics services have implemented the commercial "UroVysion" assay used to help solve diagnostic dilemmas on urine cytology tests. Inflammation or irritation from urinary stones

can cause changes in the appearance of ureteral or bladder cells that can mimic neoplastic cells. Urinary cytology specimens that are considered "suspicious" but not diagnostic for cancer are reflexed to the UroVysion assay. Clinicians can use these results to decide whether to follow patients with repeat urine cytology samples or to embark on a search for a possible urinary tract malignancy with modalities such as cystoscopy.

Staff Recognition

We are proud to recognize our staff members who have been commended for their efforts during this past year: **Kathy Rignell**, lead phlebotomist in the Blood Draw Room was the September 2022 Employee of the Month, while **Brad Wigton**, microbiology supervisor and **Jessica Saleh**, offshift core laboratory supervisor, were nominated for Supervisor of the Year.









The Minneapolis VA Health Care System Pharmacy Service consists of a team of 181 permanent employees, including 122 pharmacists, 56 pharmacy technicians, and 3 administrative support staff, serving 70,677 patients in 2022. Services provided include medication procurement, storage, security, inventory management, inpatient medication distribution, IV compounding, outpatient prescription dispensing, mail-order pharmacy, antimicrobial stewardship and formulary management. There are 52 Clinical Pharmacist Providers in ambulatory care offering medication management services for a wide range of specialties: primary care, m ental health, pain, cardiology, liver, oncology, pulmonary, endocrinology, rheumatology, nephrology, infectious disease, spinal cord injury, home based primary care, and a centralized anticoagulation clinic.

Consistent with the MVAHCS commitment to teaching, Pharmacy Service maintains a strong focus on academic programs. In 2022, we supported 75 pharmacy students and 11 pharmacy interns. Our four pharmacy residency programs (General, Pain & Palliative Care, Psychiatry, Geriatrics) carry an 8-year accreditation with American Society of Healthcare System Pharmacists (ASHP) and graduate 7 residents annually.

Several treatments were approved for emergency use in 2022, as important tools in the ongoing fight against COVID infection. In collaboration with physician and nursing leadership, we developed a dispensing process that optimized access to oral antiviral treatments while carefully addressing significant drug interactions. As a result, we dispensed 1041 courses of Paxlovid in 2022, more than any other VA in the country.

Managing inventory of pharmaceuticals comes with ongoing waste reduction challenges. To address these, a new procedure was implemented for processing outdated pharmaceuticals utilizing N3PR reverse distribution software. The new system helps to easily identify expired medications eligible to return for credit. After just one year of the program, pharmacy procurement staff have recouped over \$300,000 in reimbursements. Better tracking through the new system will also reduce waste over time by improving inventory practices.

Strategic initiatives implemented last year in collaboration with local, VISN, and National leadership include expansion of pharmacy services for Home Based Primary Care, pain, and substance use disorders and an initiative increasing awareness and prescribing of empagliflozin for improved diabetes, heart failure and kidney outcomes.

Examples of other process improvements this year are BD IV Prep expansion for non-hazardous compounding, implementation of expanded scopes for independent anticoagulation management of inpatients, addition of indications to outpatient prescription menus and standardization anticoagulation patient education materials.

Finally, we continue to manage significant drug shortages, including a global shortage of iodinated contrast. In collaboration with service line leaders, we were able to carefully manage our limited inventory and maintain access to important imaging services.

Recognition

Pain

Liver

Cardiology

Oncology

- Kevin Burns, PharmD North Dakota State University Preceptor of the Year
- Orly Vardeny, PharmD, MS University of Minnesota Professor of the Year
- Orly Vardeny, PharmD, MS Commendation from the American College of Cardiology (ACC) and American Heart Association (AHA) for her work on the AHA/ACC/HFSA Guideline for the Management of Heart Failure
- Tena VonTungeln, CPhT MN Federal Executive Board Civil Servant of the Year
- Close to Me Infusion Program Top Poster Award, Association of VA Hematology/Oncology (AVAHO) Annual Meeting. Co-authors: Andrea Stone, RN and Brittney Fox, PharmD

Number of pharmacy unique pa	atients	70,677 Veterans
Number of outpatient prescript	ions dispensed	1,774,359 Prescriptions
Number of inpatient orders pro	249,413 Unit Dose Orders 48,326 IV Orders	
Number of patients served by p	22,002 Veterans	
Number of outpatient visits covering a wide range of services:		97,870 Pharmacist Provider Visits
AnticoagulationPrimary CareMental Health	PulmonaryEndocrinologyRheumatology	

2022 Annual Report

Nephrology

HBPC

Infectious Disease

Spinal Cord Injury



In September 2022, Chaplaincy Services led a Last Roll Call service for Veterans for the first time since March 2020 due to the pandemic.

During this service of remembrance 577 Veterans who died between April 1, 2020, and July 31, 2022, were remembered. Over 320 family members, Veterans and staff gathered outdoors. Flowers were given to family members for their comfort. Several family members spoke about their loved ones and their appreciation for the care given at the Minneapolis VA Health Care System. The bell tolled for each Veteran named by family and for Veterans from each military branch. This was a significant



event that helped the families of veterans move forward in their grief. Last Roll Call services are now offered the first Friday of each month. The Minneapolis VA Chaplaincy Service is unique among VA services in the country providing nine continuing education presentations during Chaplaincy Awareness Week in October. Dr. Keith Meador from Vanderbilt University gave a presentation on integrative mental health. Chaplains gave presentations on moral injury, five world religions, disaster spiritual care, mindfulness, grief, guilt and shame. These presentations were available inperson and live-streamed via Teams. In partnership with the Ethics Committee there was a book study and panel discussion of "The Immortal Life of Henrietta Lacks."

With temporarily increased staffing, Chaplaincy Services was able to provide chaplain coverage more consistently. Spirituality groups began on the Mental Health unit. With increased staffing Chaplains have been able to be more dedicated to specific units like Mental Health, Hospice and Palliative Care and Spinal Cord Injury. We have been able to make more comforting visits to the families of deceased Veterans.

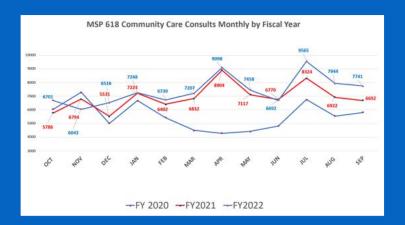
Chaplaincy Service sponsors a food drive in November each year that helps care for homeless Veterans at the Minneapolis VA Community Resource and Referral Center. This year 638 pounds of food were donated by employees, volunteers and patients.

We are grateful for the dedicated office and other volunteers that serve with Chaplaincy. They make a huge difference in serving Veterans and active-duty service members.



Community Care's (CC) biggest challenge in the past year was the record numbers of consults. Durring summer months we received consult volumes over 8000 per month. CC staff can manage a volume of around 6000 consults per month.

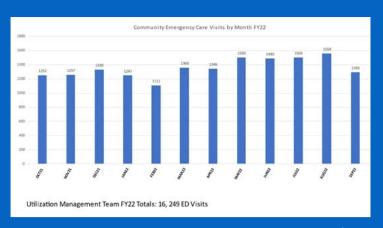
In May 2022, Community Care welcomed staff from the University of Minnesota. We assumed responsibility for the staff performing continuing stay reviews for Veterans who seek emergency care in the community. These staff are responsible for facilitating follow-up care for Veterans who are seen in community emergency departments. When a Veteran is admitted



as part of the emergency visit, they follow to help facilitate discharge needs and facilitate transfer to Minneapolis VA when possible.

In addition to scheduling large volumes of consults, our Medical Support Assistants staff the community care call center. We are very proud of how well they balance scheduling and helping Veterans and vendors who call our call line. Staff participated in several performance improvement projects related to the call line and we are looking forward to improving our service in 2023.

Total Calls FY22: 99,643





Patient Experience Week: Sent Out 300 wellness bags to CBOCs with Integrative Health and Wellness information, water bottles and reusable shopping bags to be handed out to Veterans (*Picture from left to right, Jody Frederick, Christopher Hayes, Jennet Boese, Goldie Bosard, Heather Wickberg, and Mary Ann Davis*).

Veteran's Day: 1000 special pins distributed to Clinical Based Outpatient Clinics (CBOCs) and inpatients at Minneapolis VA Medical Center (MVAMC)

National Sock Day, December 4th, 2021 donated 400 socks for all inpatients, and socks to women's clinic for outpatients

Holiday Gift Distribution, December 2021, gifts for inpatients:

American Legion and American Legion Auxiliary:
 \$25 VISA gift card and a fleece scarf

American Legion Auxiliary: \$10 cash
DAV Auxiliary: \$10 Holiday fuel gift card

• VFW Auxiliary: \$5 Subway gift card

National Salute to Veteran Patients: 1500 Valentines for Veterans, 250 National Salute pins and hats for inpatients, 1000 pins sent to CBOCs for outpatients

National Salute video featuring Drector Patrick Kelly and messages from Commanders Task Force members (Veterans service organizations), posted to social media, internal Sharepoint and played on hospital TV twice a day the week of Valentine's Day

Volunteer Appreciation Week: Cards sent from CDCE to all active Volunteers. Ice cream treats provided to Volunteers at MVAMC, other snacks and treats sent for Volunteers at CBOCs, Vet Centers, Comunity Resource and Referral Center (CRRC) and for Memorial Rifle Squad.

Notable Donations:

- Received \$4,200 donation from Red Cross: (Pictures in order from left to right, Jeff Kazel, Rachel Hammer, Christopher Hayes, Kirsten Tracy)
- Patient Outdoor Recreation Kits for Adaptive Sports
- Caribou Coffee for Patient and Guest Comfort
- Received donation from Disabled American Veterans (DAV):
- \$30,749 Honda CRV for service in the Northwest CBOC area with wrap featuring Women Veterans.
- \$50,745 Ford Transit E-350 Wagon that will service the Anoka Northwest Metro area.
- 250 Saint Paul Saints Tickets for Volunteer Recognition
- Conducted Food Drive during August to Veterans served at CRRC – total lbs: 622.

• Hosted Annual VACO CDCE VISN Liaisons and leadership for strategic program planning at the Minneapolis VA.





Recreation and Creative Arts Therapists (R/CAT) to offer innovative, new, and collaborative programming within the context of evolving COVID-19 guidelines. The R/CAT team thoughtfully found ways to continue celebrations, develop new programs, implement new modalities, and continue to grow community partnerships.

Our new Art Therapist and Music Therapist assisted to launch the Rehabilitation Evaluation and Neurologic Enhancement for Warriors (RENEW) program. Whole Health Coaching was implemented for Veterans in the Pain Clinic. Additional holistic, health and wellness modalities continue to grow within many programs; Yoga, My Life My Story, mindfulness, meditation, breathwork and expressive arts being most prevalent.

National Events continued to highlight the year for many. The National Veterans Wheelchair Games in Tempe, Arizona offered new sporting competitions for 10 Minneapolis athletes. The Veterans Creative Arts Program had 5 artists attend the National Festival in St. Petersburg, Florida. The National Disabled Veterans Winter Sports Clinic in Snowmass, Colorado had 6 novice and 5 returning athletes. The National Disabled Veterans Golf Clinic in Riverside, Iowa had 9 athletes participate. Finally, the National Summer Sports Clinic in San Diego, California had 5 novice and 1 returning athlete.

Local adaptive sports programming included: golf, kayaking, cycling, archery and bowling as well as a new bi-monthly sports sampler in partnership with MNPVA. This included air guns, archery and boccia which was held nearby at Northern Star Base Camp. R/CAT staff continued to work closely with Veterans to identify and

Therapy programming was expanded into Psychiatry Partial Hospital, Community Living Center (CLC), inpatient mental health and RENEW programs. Additionally, a Songwriting experience was introduced to the Caregivers support group.

The R/CAT team is well-known for fostering meaningful heartwarming moments of joy, and 2022 was no exception. The second annual CLC Carnival was an interdisciplinary collaboration which gave Veterans the opportunity to participate in various games as well as make their own tie dye shirt. Animal Assisted Therapy visits made a careful return to inpatient wards after a long hiatus. Finally, a Veterans' final wish to visit the MN State Fair one more time was brought to fruition by a multiteam collaboration.

FY 2022 Statistics:

679 Active Volunteers - 93 new volunteers.

103,605 Total Volunteer Hours = 55 FTE

152.58 hours average per Volunteer for FY 22

\$ 2,956,879.57 Volunteer Hours Value (\$28.54/hour)

\$896,710.41 Monetary Donations

\$ 6, 888.80 Activity Donations

\$ 327, 357.96 Item Donations

\$ 1,230,957.17 TOTAL donations

\$ 4,187836.74 total resource impact CDCE volunteers and donations FY 2022



This year began the renovation of the inpatient mental health unit with the construction of a temporary space (1L) while the new inpatient unit (1K) is completed. The final design includes an additional six beds for a total of 30 beds in private or double rooms. Featured will be an open design to include healing spaces in a safe environment. Veterans will be able to participate in a multitude of activities while managing their mental health concerns. As much of our focus on inpatient mental health is on group interaction and group therapies, many additional offerings will be made available providing programming to meet each individual need. Additional safety features will include improved visibility within the unit, state of the art environmental considerations for Veteran safety and improvements in care delivery through better workflow designs.

Suicide prevention

During FY22 the Suicide Prevention Program saw many exciting changes.

We increased our partnerships with the local Vet Centers to strengthen communication and increase identification of High-Risk Veterans in the community

We added three new suicide prevention case managers to the team, doubling our efforts to reach the highest risk Veterans.

The Veterans Crisis Line changed to 988 in July 2022. This has increased our call volume by over 30% in FY22. The original Veterans Crisis Line number 1-800-273-TALK will remain operational for the foreseeable future. Chat and text functions for the crisis line continue to grow exponentially as the preferred method to connect with the counselors.

We added another Community Engagement & Partnership Coordinators (CEPC) to actively expand the public health model for suicide prevention with our community & stakeholders. Currently, we have four active community coalitions for suicide prevention – Duluth, Twin Cities, Rochester & Eau Claire, WI

The Suicide Prevention team attended/presented at over 75 outreach events in FY22 including the Duluth Boat show, Pride Festival, Minnesota State Fair, MN Farm Fest & multiple Suicide Prevention Awareness walks/events.

Our two CEPC's are actively leading priority groups with the State of Minnesota Governor's challenge. These priority groups focus on the identification and screening of service members, Veterans and families utilizing resources and services in the community as well as improving connected ness and care transitions as Veterans move between community services and VA services.

Multiple new partnerships were formed with agencies such as the American Legion, Every Third Saturday and the state of Minnesota Community Hospitals.

The Mental Health ICC continues to be focused on providing quick access to saving medications and evidence-based psychotherapies for Veterans seeking treatment for substance misuse. In response to a National and VISN SUD Strategic Initiative, the Mental Health ICC expanded substance use disorder services by the addition of 15 fulltime positions. The multidisciplinary positions include psychiatrists, a clinical pharmacist, psychologists, social workers, nurses, peer support specialists and administrative support. These new team members are embedded into existing healthcare teams outside of the specialty addictions clinic (Addiction Recovery Services) to allow Veterans to access treatment for substance

misuse in coordination of other care they are receiving in mental health or primary care. These new SUD treatment providers are in primary care clinics, the emergency department, the acute psychiatric unit, the mental health intake clinic, the CRRC, and are available to serve all 13 of the CBOCs within our catchment area.

Mental Health Research

Clinician Investigator Team (CIT) is multi-disciplinary team of clinician investigators studying various mental health conditions, mental health impact on daily functioning, mental health risk and protective factors, and mental health treatments in Veterans.

In FY 2022, the CIT investigators under leadership of Drs. Melissa Polusny and Snezana Urosevic initiated a VA Office of Research and Development-funded summer research program, "Service to Science Scholars Research Program (SSS-RP)."The goal of the SSS-RP is to introduce Veteran and military-connected students to mental health research in Veteran populations and in doing so aid in diversifying future VA scientific workforce. Our inaugural summer program cohort was selected from applications across the US and had 5 participants who completed 10 weeks of professional development didactics, research seminars, and hands-on experiences of working in the CIT mentors' laboratories. The SSS-RP student participants reported increased confidence in their research skills and gaining useful tools to further their careers in mental health fields.

The CIT investigators also led a program evaluation project with a follow-up survey about long-term impact of COVID-19 pandemic-related stressors on mental health among 664 Veterans receiving care through Mental Health ICC who provided similar survey responses in 2020. About half of those Veterans responded to our follow-up survey and we are analyzing data to see long-term impact of the pandemic on mental health among patients that we serve.

In August of 2022, one of our recently retired staff members, Dr. Paul Arbisi was honored with a prestigious award by the American Psychological Association Division 12 for Distinguished Contributions to Assessment Psychology Award across his three decades at the Minneapolis VAHCS. Across Mental Health ICC, a productive research year yielded 65 publications in peer-reviewed scientific journals in the calendar year 2022.

Finally, in FY 2022, the CIT investigators were awarded \$8,862,302 in total research funds received by the Minneapolis VA facility.

Peer Support recognition



Over this last year, our Peer Support Team was very proud to recognize Mr. Martia Fuller, Certified Peer Specialist, for the Peers in PACT Program as the recipient of the 2022 Minneapolis VAHCS and VISN 23 Peer of the Year Awards. Both awards recognize outstanding Peer Specialists who demonstrate exemplary work performance, superior leadership abilities within

the VHA Peer Specialist profession and have made a substantial contribution to the recovery and wellness of Veterans. Among Mr. Fuller's many accomplishments, he successfully launched a Black Veterans Peer Support Drop-In Group, which is a group that is open to any Veteran enrolled in Minneapolis VAHCS who identifies as Black. This group has been an incredibly valuable resource for black Veterans and was honored with the 2022 Minneapolis VAHCS Mental Health Quality Improvement Project Star Award.

2022 American Legion VA Physician of the Year, **Dr. Patty Dickmann**.



"Veterans and their families stopped by our outreach booth at the MN State Fair on Military Appreciation Day to learn more about our suicide prevention program, health care eligibility and benefits for Veterans, and our research program."





The MADE Program developed a skin screening camera system to help Veterans monitor and detect skin problems before they become late stage pressure injuries. This device may be useful for Veterans with SCI and Veterans with diabetes to help monitor their skin in hard to see areas that are at high risk for developing pressure injuries. This system has been licensed and is being commercialized as the Habit Camera.

John M Looft, PhD, is a clinical biomedical engineer who directs the Minneapolis VA's Prosthetic & Patient



Services' Motion Analysis Laboratory and is a principal investigator in the Minneapolis Adaptive Design & Engineering (MADE) program. Dr. Looft's research focuses on improving access for Veterans to participate in activities. On the clinic side, Dr. Looft focuses

on promoting personalized understanding within the scope of personalized medicine by using motion capture to promote conversations between the clinical team and the veteran.



Psychologists Allison Battle and Thomas Quinlan use Dungeons and Dragons in group therapy sessions they lead at the VA Medical Center.

Dungeons and Dragons

Allison Battles and fellow VA psychologist Thomas Quinlan created one of the first group therapies using Dungeons and Dragons (D&D) to give veterans with depression, post-traumatic stress and other disorders practice with social skills that can be barriers in real life. Veterans prone to aggression can practice patience, while those with anxiety can express themselves or test personality traits through the game's mythical characters. Veterans after 12 weeks of game play reported reductions in depressive and anxiety symptoms, aggression and social avoidance. Role-playing games (RPGs) work as adjuncts to traditional therapy because they foster teamwork, compared to games that pit players against one another.



The VA Traumatic Brain Injury Model Systems (TBIMS) program is a collaborative research effort between the five VA Polytrauma Rehabilitation Centers (PRCs) to improve the understanding of health outcomes after traumatic brain injury (TBU) and to disseminate that knowledge to individuals with TBI and their families, as well as rehabilitation teams. The VA TBIMS program has a core longitudinal study that enrolls active duty service members and Veterans who were admitted for inpatient TBI-focused rehabilitation at one of the PRCs and conducts follow-up assessments at multiple time points after injury. The VA TBIMS program partners closely with the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) TBIMS program, facilitating stronger research in TBI by spanning public and private health care systems and by identifying the unique needs of military service members and veterans with TBI compared to their civilian counterparts.

As one of the five VA PRCs, the Minneapolis VA participates in the VA TBIMS research program. The Minneapolis VA TBIMS team is led by Dr. Jacob Finn, whose research focuses on psychological health and well-being after TBI. Using the VA TBIMS national longitudinal database, which now has over 1,900 participants, Dr. Finn and his research team have led projects to identify unique predictors of post-injury anxiety, depression and life satisfaction; the impact of psychological health on post-injury functioning, such as driving; factors relevant to mental health treatment utilization after TBI; and predictors of unmet needs in family care partners. In collaboration with other VA

PRC investigators, the Minneapolis TBIMS team has contributed to understanding factors associated with suicidality post-TBI, alcohol use patterns post-injury, racial/ethnic disparities in community engagement and social participation, and facilitators and barriers to accessing rehabilitation care after TBI. Dr. Finn has also collaborated closely with NIDILRR TBIMS researchers to examine the trajectories of anxiety after a TBI and the impact of post-TBI emotional health on family care partner strain.

Locally, Dr. Finn and his research team actively engage in additional projects and in research dissemination efforts. Specifically, Dr. Finn has completed the data collection phase of a grant-funded study focused on Veteran engagement in outpatient TBI rehabilitation services. Additionally, Dr. Finn and his team are launching a new grant-funded study of resilience in care partners of Veterans with TBI. The Minneapolis TBIMS team creates a bi-annual newsletter of VA TBIMS research activities and distributes the newsletters to Minneapolis VA TBIMS participants and the Minneapolis VA TBI rehabilitation teams. These newsletters ensure that participants are kept aware of how their continued participation is furthering TBI knowledge and care and that the rehabilitation teams are aware of new findings that could guide their practice. Dr. Finn also has presented findings at national VA PRC grand rounds, the Brain Injury Association of America's research webinar, the Minneapolis VA Rehabilitation & Extended Care grand rounds, and team-based TBI education programming.



We have had a successful year in the surgery/specialty care ICC despite internal and external challenges. As a group, we have been able to continue to provide quality patient care to our veterans, provide meaningful research to medical literature, and advanced the mission of the Minneapolis VA for several successful VISN initiatives.

Our Tele-Dermatology strategic initiative that was awarded in FY 2019–2022, was recently expanded to a VISN wide initiative this year. In addition, our Technology Eye Computer System (TECS) program which was started in 2017, was also expanded to a VISN wide initiative that anticipates to reduce Care in the Community (CITC) expenditures by 50% in the ophthalmology department by the end of FY 2024.

In addition to the expansion of those two previous programs, there have also been three new initiatives awarded. Our TelePAVE (preventing amputations in veterans everywhere) initiatives anticipates creating a VISN wide PAVE service and creation of a threatened limb hotline with estimated cost savings of \$1 million/yearly from the vascular service line. The Tele-Neurosurgery strategic initiative offers Veterans centered care for a highly specialized triage service across the VISN that anticipates an estimated cost saving of \$2 million/yearly in the neurosurgery service line. Our FIRM program focuses on creating long-term follow-up for vascular patients that will bring quality care that is in line with national Society of Vascular Surgery recommendations that looks to decrease morbidity and mortality from inadequate surveillance.

The Dermatology Department has started a pilot outreach program. This program sends our dermatologist to provide in-person specialized care to our outlying facilities/CBOCs. This program is piloting care in the Twin Ports CBOC. This is not only beneficial to our remote Veterans, but also builds comradery amongst VA employees and decrease CITC expenditures.

In line with the facility vision to create single beds for outpatients, we have created a new 2K nursing until this will be able provide care to our Veterans undergoing outpatient procedures that occur outside of the operating room (same-day interventional radiology, cardiology procedures, etc). This is would be a tremendous adjunct to decrease work-load on our perioperative services and allow for increased bed capacity for our inpatients.

Lastly, with installation of our new linear accelerator (LINAC) in our radiation oncology department, we will be able to provide the most up-to-date techniques in external beam radiotherapy for treatment of cancer patients including intensity modulated radiation therapy, volumetric-modulated arc therapy, image guided radiation therapy and stereotactic body radiation therapy. The new LINAC can better target and destroy cancerous cells in a precise area of a patient's body with minimal exposure to the surrounding healthy tissue which key to improving patient outcomes and quality of life.



Minneapolis VA Health Care System wins national award for environmental sustainability

Sustainability is at the heart of our healing mission – and we're proud to share that our sustainability strategies have won us a national award. Minneapolis VAHCS received the Top 25 and Circles of Excellence from Practice Greenhealth, the nation's leading organization dedicated to environmental sustainability in health care.

Top 25

Practice Greenhealth's highest honor for hospitals. Selected from the pool of Partner for Change applicants, these hospitals are leading the industry in all-around sustainability performance, demonstrating comprehensive programs, and illustrating how sustainability is entrenched in their organizational culture. Each year, the competition for these top spots increases as hospitals across the country continue to innovate.

Circles of Excellence

The Circles of Excellence Awards celebrate hospitals who have not only earned an award for all-around sustainability achievement but have also been identified as the top scoring programs for each sustainability category. Minneapolis VAHCS was awarded the following Circles of Excellence:

- O Circle of Excellence **Leadership**
- O Circle of Excellence Waste
- O Circle of Excellence Chemicals
- O Circle of Excellence Greening the OR
- Circle of Excellence Sustainable Procurement
- Circle of Excellence **Energy**

- O Circle of Excellence Water
- Circle of Excellence **Transportation**
- Circle of Excellence **Green Building**

In health care, sustainability means looking at how our operations affect the health and safety of our environment as well as the health of our patients, staff, visitors, and local community. Strategies to address sustainability at our organization include minimizing and recycling waste, addressing chemicals of concern, lowering energy and water consumption, sourcing food and products sustainably, and establishing environmentally preferable purchasing criteria. At the Minneapolis VAHCS we know sustainability is essential to better care for our patients, communities, and planet.

In recent years, we have made great strides toward reducing our impact on the environment, and we are committed to doing even more.

We're grateful to the many caregivers, frontline workers and administrators who are committed to this work and bring innovation, ingenuity, and adaptability to help us dramatically improve our footprint.



The Minneapolis VAHCS Community Based Outpatient Clinics (CBOCs) include 13 locations across Minnesota and western Wisconsin.

The Rice Lake Clinic moved into their new location in March and expanded to over 14,500 square feet with 21 employees. Rice Lake provides primary care, mental health, radiology, laboratory, social work, dietitian, physical therapy, telemedicine and pharmacy.

Upcoming changes include Maplewood moving to their new clinic in January and adding Optometry to their services provided. Lyle C Pearson (Mankato) and

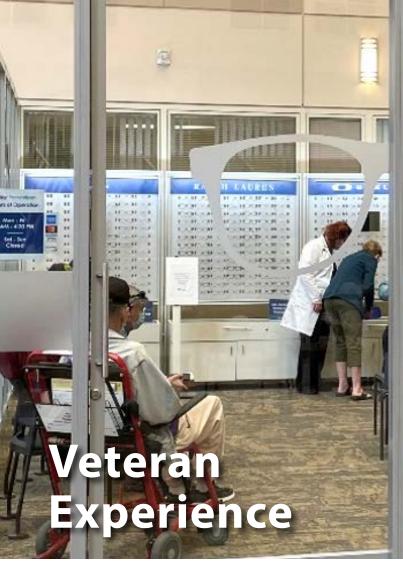
St James will transition from contracted to VA staffed clinics at the end of December and opening in new spaces the first week of January. Lyle C Pearson will provide primary care, mental health, radiology, laboratory, social work, dietitian, physical therapy, telemedicine and pharmacy. St James will provide primary care, mental health, radiology, laboratory, social work, dietitian, telemedicine and pharmacy.

Other highlights from this year include: the CBOCs continued to administer COVID Vaccine over the past year. The CBOCs also hosted drive-up flu clinics this September and October that the veterans much appreciated. Rochester added TECS (Technology based Eye Care Services) to their location. Rochester and Hibbing added AMTAS (Automated Method for Testing Auditory Sensitivity) to their clinics this year. The CBOCs continue to collaborate with specialty care to provide services at many locations. The CBOCs held 4 virtual townhalls this past year with Minneapolis VA Director, Patrick Kelly, and VBA representation.

A Outpatient Clinic



Rice Lake CBOC



PatriotVision Optical

The Minneapolis VA medical center opened the PatriotVision optical shop in July 2022, to enhance the Veteran health care experience with the addition of optical services. Veterans no longer need to leave the VA to find eyewear in the community.

Veterans may spend their visit at the VA addressing all their Whole Health needs with an appointment at PatriotVision after visiting with their primary care physician or other clinicians. Veterans Canteen Service's PatriotVision offers one-stop shopping for the Veteran.

PatriotVision allows VA to expand the fitting and dispensing of basic issue eyewear by offering a selection of reasonably priced frame upgrades or second pairs. Veterans choosing to upgrade their frames or select a second pair save a significant amount of money over the amount they would spend outside of VA.



Patrion

Serving

Those

The Veteran Canteen Service provides vision services nationwide at more than 190 optical shops in medical centers and community-based outpatient clinics across 14 VISNs.

"It is an honor for the Minneapolis VA to be a flagship location for PatriotVision. PatriotVision enhances the customer experience for our Veterans by providing upgraded eyeglass options as well as a second pair of glasses at a reduced price. The feedback from our Veterans has been overwhelmingly positive as they appreciate the enhanced services as well as pleasant experience of the Optical Shop space." – Amy Archer, Chief Experience Officer

Veteran Experience

Trust scores-FY22: following Outpatient HealthCare Visit:

94.5% Say they trust the Minneapolis VA for their health care needs. 96.5% Say they felt respected and comfortable during their most recent visit.

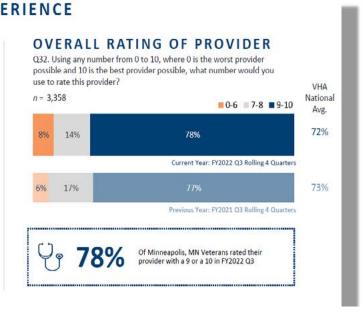
SHEP: overall inpatient hospital rating – 72% of people rate their inpatient stay with a 9 or 10

OVERALL HOSPITAL RATING (V23) (618) MINNEAPOLIS, MN OVERALL HOSPITAL RATING Q18. Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? VHA National n = 582■ 0-6 ■ 7-8 ■ 9-10 Avg. Of Minneapolis, MN Veterans rated their hospital stay with a 9 6% 22% 72% 69% or a 10 in FY2022 O3 Current Year: FY2022 Q3 Rolling 4 Quarters 70% 6% 21% Previous Year: FY2021 O3 Rolling 4 Quarters

Outpatient SHEP Primary Care: overall rating of Provider – 78% rate with a 9 or 10

OVERALL RATINGS OF PATIENT EXPERIENCE Of Minneapolis, MN Veterans were "Satisfied" or "Very Satisfied" with the health care they received in the last 6 months at their VA facility for FY2022 Q3 OVERALL SATISFACTION Q54. Overall, how satisfied are you with the health care you have received at your VA facility during the last 6 months? | n = 3,367 Very Dissatisfied + Dissatisfied VHA Somewhat Dissatisfied + Somewhat Satisfied National ■ Satisfied + Very Satisfied Avg. 82% 89% Current Year: FY2022 Q3 Rolling 4 Quarters 82%

Previous Year: FY2021 Q3 Rolling 4 Quarters



Vital Stats

UNIQUE PATIEN	TS
Minneapolis, MN	98,041
Northwest Metro, MN	9,293
Twin Ports, WI	8,317
Maplewood, MN	8,072
Chippewa Valley, WI	4,828
Rochester, MN	5,028
Albert Lea, MN	2,188
Shakopee, MN	4,235
Hibbing, MN	3,504
Mankato, MN (Lyle C. Pearson)	3,676
Rice Lake, WI	3,159
St. James, MN	2,036
Hayward, WI	1,176
Minneapolis, MN Community	
Resource Center	1,920
Ely	508
UNIQUE PATIENT TOTALS	104,342
Many Minneapolis patients are al in CBOC's.	so enrolled



1,364



3,381



46,987



Persian Gulf War 31,416

OUTPATIENT VISITS

988,162

Unduplicated Encounters 1,270,492



FY21 Rurality

Highly Rural = 9,940 • Rural = 49,829 • Urban = 72,816



Acute Care Beds

Average Daily Census 132 Average Length of stay 6.53 days



Community Living Center

Average Daily Census

Pharmacy Total 1,803,243 **Oupatient Prescriptions** Monthly 150,770 **FY22 Lab Reports** Lab Tests 3,510,014 Outpatient **Blood Draws** 59,802 lu Vaccinations 37,610

WOMEN

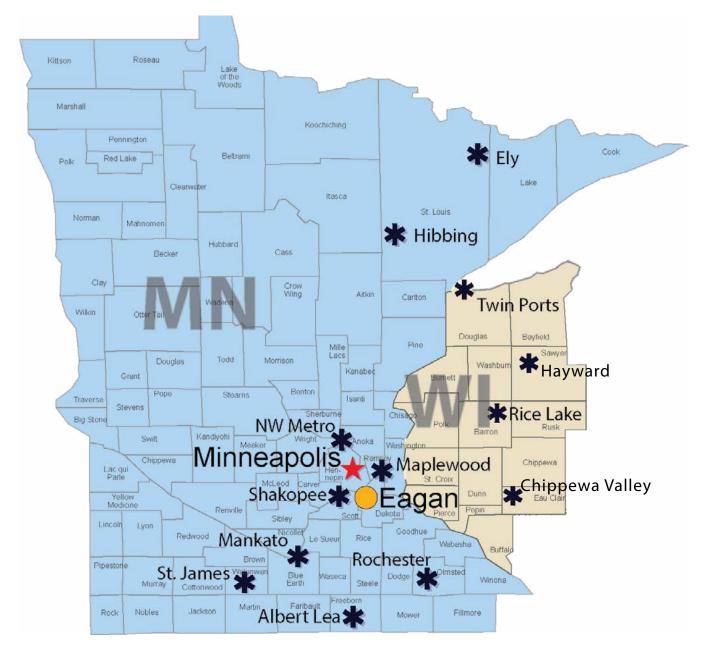
Type of Care	FY22 Unique Patients	FY22 Encounters
Women's clinic primary care	2014	4543
Women's clinic gynecology	227	262
General primary care	3204	6252
All clinics	10,682	131,526

ANNUAL BUDGET

Staffing Totals TOTAL EMPLOYMENT 4,787



7() ()Y			\$1,283,842,618
ACCESS TO		Y 22 NATIONAL S (86.7%) WITHIN 30 I	TANDINGS ALL APPTS DAYS
MINNEAPOLIS	NEW	ESTABLISHED	Appointments Completed <=30 Days
MENTAL HEALTH PRIMARY CARE SPECIALTY	4,126 7,166 71,185	1,117 166,800 346,629	Established - 80%, New - 56% Established - 91%, New - 77% Established - 81%, New - 68%



Network Hospitals and Clinics

Community Based Outpatient Clinics (CBOC's)

Minneapolis, MN Mankato, MN (Lyle C. Pearson) Northwest Metro, MN Rice Lake, WI

Twin Ports, WI St. James, MN Maplewood, MN Hayward, WI

Minneapolis, MN Community Chippewa Valley, WI

Resource Center Rochester, MN

Ely, MN Albert Lea, MN

Clinic Key

VA Medical Center

Network Office

VA Outpatient Clinics

Minneapolis VA Health Care System

One Veterans Drive Minneapolis, MN 55417 www.minneapolis.va.gov (612) 725-2000

Shakopee, MN

Hibbing, MN