

# CENTRAL BLIND REHABILITATION CENTER



**2023**

**Annual Perspective**

**Edward Hines Jr. VA Hospital  
5000 S. 5<sup>th</sup> Ave  
Hines, IL 60141  
708-202-2273**

# Central Blind Rehabilitation Center

## **ANNUAL PERSPECTIVE**

The purpose of the Annual Perspective is to communicate accomplishments and outcomes to stakeholders (Federal, State, local, and private) agencies who provide Blind Rehabilitation services to individuals that are blind and visually impaired.

Data points referenced in this publication cite the Fiscal Year 2023 (FY23) which represents October 1, 2022 through September 30, 2023.

## **PROGRAM OVERVIEW**

### **MISSION**

To provide high-quality Blind Rehabilitation through the provision of a broad range of rehabilitation, education, and research/technology.

### **PROFILE**

The Central Blind Rehabilitation Center (CBRC) is a 34 bed residential facility at Edward Hines Jr. VA Hospital. The CBRC is one of 13 VA Blind Rehabilitation Centers located within the United States and Puerto Rico. We accept applicants from the 14 Midwest states, which make up the Central Area Region, as well as those from across the country. Our Central Area Region personnel and Visual Impairment Services Team (VIST) Coordinators work within communities of those 14 states to locate Veterans who are in need of Blind Rehabilitation services. Blind Rehabilitation services include five distinct skill areas: Orientation & Mobility, Living Skills, Visual Skills, Manual Skills, and Computer Access Training (CAT). These areas are supplemented by Recreation Therapy, Social Work, and Psychology disciplines that all work together with clinical staff, including a physical medicine Doctor, Nurse Practitioner and Nursing, to support a successful Blind Rehabilitation experience. In addition to our inpatient Blind Rehabilitation services, we also offer a Low Vision Outpatient Clinic, Blind Rehabilitation Outpatient Services (BROS) Rural Health within a 100-mile radius, and a Polytrauma-Traumatic Brain Injury (TBI) BROS that supports the population of Veterans experiencing functional vision loss due to trauma to the brain.

## **PROGRAM ACCOMPLISHMENTS**

### **STRATEGIC GOALS - PERFORMANCE IMPROVEMENT SUMMARY**

Performance Improvement goals for Fiscal Year 2023 included six goals designed to incorporate Veterans Health Administration, National Blind Rehabilitation, Veterans Integrated Services Network (VISN), and Hines VA Hospital strategic goals and initiatives. These goals included plans designed to address and improve access to care, stakeholder satisfaction, patient safety, family stakeholder education, and the delivery of complementary and integrative whole health care modalities.

#### **Goal 1- Improve Access to Inpatient Blind Rehabilitation by Decreasing the Wait Time for Blind Rehabilitation Service**

In compliance with the Mission Act of 2019, National Blind Rehabilitation key performance indicators mandate admission to Blind Rehabilitation Centers within 28 days from the receipt of application for inpatient care and 7 days for VA Video Connect (VVC).

*Total Inpatient and VVC admissions for the year*

<b>Metric</b>	<b>Totals</b>
Total Inpatient Admissions	211
Percent Admitted ≤ 28 days	57.3%
Total VVC Admissions	216
Percent Admitted ≤ 7 days	83.3%

The metrics listed below provide explanation as to the rate for inpatient admissions not meeting the 28 day target.

*Explanations and number of Veterans not meeting the 28 day mandate*

<b>Explanation</b>	<b>Number of Veterans</b>
Veteran Preference	70
COVID	2
Pending Dialysis Bed	1
Medical/Medical testing	12
Pending Needed equipment	2
Unable to Contact	2

The metrics listed below provide explanation as to the low success rate for VVC admissions not meeting the 7 day target.

*Explanations and number of Veterans for not meeting the 7 day mandate*

Explanation	Number of Veterans
Veteran Preference	16
Process Error	13
Documentation Error	5
No Outside Factor Noted	2

**GOAL #2: Maintain and Improve Access to Care Utilizing VA Video Connect**

In alignment with the National Blind Rehabilitation goal, 80% of Blind Rehabilitation Specialists will complete at least five VVC encounters yearly.

- A total of 90% of the CBRC staff completed five or more VVC encounters.
- The vacant Computer Access Training position was filled by a Blind Rehabilitation Specialist who is designated to complete training via VVC to meet the increasing demand for virtual care. Staff are assigned VVC programs based on demand for virtual vs. inpatient care.

**GOAL #3: Increase Stakeholder Satisfaction (Patient, Internal, and External)**

Patient Satisfaction was monitored through the National Satisfaction Survey, **uSPEQ** as well as through an internal exit survey completed with Veterans at discharge. Our target goal was to achieve 90% (agree, strongly agree) on uSPEQ question 5.4, “services enabled me to do things better.” CBRC scored 99.4%.

Our internal exit survey revealed both good and excellent scores in all areas monitored including Nursing Care, Medical Services, Rehabilitation Services, Program Function, and Overall Satisfaction. Trends indicated scores of fair to poor related to food, facility cleanliness, WI-FI, BRC orientation and activities. Appropriate Services (Food and Nutrition, Environmental Management Service, Recreation Therapy and Information and Technology) were notified for action plans to improve satisfaction scores.

The annual External Stakeholder survey was conducted with the Central Area Region VIST Coordinators in early 2023 and received positive feedback. Two trends were identified in this survey including the request for a comprehensive prosthetic list sent to them post discharge and a pre-recorded virtual tour of the CBRC that could be shared with Veterans. As of March, VIST Coordinators are receiving a comprehensive equipment list. In

addition, Medical Media was contacted regarding the creation of a pre-recorded virtual tour. Live tours are still being offered.

#### **GOAL #4: Patient Safety Fall Prevention**

Maintain Fall Prevention initiatives to ensure fall rate is less than or equal to 10% of CBRC admissions. A total of 19 falls were recorded, resulting in a 9% fall rate for FY23. Eight occurred either as a result of ambulating without proper assistance or prescribed equipment or during transferring. Two falls occurred with a high fall risk Veteran with a pre-existing neurological condition that impacted balance. Action response to this circumstance included purposeful rounding, education, and root cause analysis of each incident.

Additional responses to enhanced fall prevention in FY23 included:

- Post Fall Meeting
- Root Cause Analysis including three whys to evaluate cause of fall

#### **GOAL #5: Increase Family Education**

In alignment with the National Blind Rehabilitation goal, increase Family Training Program participation by 10% in FY23.

In FY23 there were 71 unique encounters for Blind Rehabilitation Family Training. This was a 3% increase with 69 unique encounters from FY22. It is assumed that due to COVID restrictions that limited on site family training from Quarter 1 to mid-Quarter 3, we did not host as many on site family training programs as we have in the past. To accommodate for the inability to host on site family training, additional resources were provided to the Veterans in the exit packet to share with family members and caregivers.

#### **GOAL #6: Develop a System to Capture the Delivery of Complementary and Integrative Health Approaches to Include Whole Health Models of Care (Healthy Eating, Yoga, Walking Program, Mindfulness)**

Launched in 2017, the Department of Veterans Affairs initiated the Whole Health for Life Program including complementary and integrated health practices into the medical model. Since 2018, many whole health-based programs have been incorporated into the Blind Rehabilitation program including Yoga, Meditation, Guided Imagery, Mindfulness, Acceptance, Effective Communication, Mindful/Healthy Eating, Sleep Health, Science of Happiness, Brain Health, and Resilience/Grit. Capturing these encounters accurately was essential in gauging the success of this initiative. Health Factor Codes were identified in Quarter 2 and utilized in the electronic patient record system for proper coding of these

sessions to capture whole health services in the Blind Rehabilitation Center. In FY23 there were 113 encounters for whole health services and 87 uniques provided through the CBRC's Social Worker. Although Recreation Therapy and Psychology were not able to be captured through CBRC stop codes, they too continued to provide whole health services throughout the fiscal year.

### **GOAL #7: Implement Visual Functioning Questionnaire (VFQ), an Evidence Based Outcome Measure**

In alignment with the National Blind Rehabilitation goal, 80% of all Blind Rehabilitation programs to install VFQ by Quarter 4 in FY23.

The VFQ was implemented at the CBRC in February of 2023. It is being completed by the Team Coordinator during the Veterans first week and again during the last week of admission. A total of 122 VFQs were completed.

### **Staff Satisfaction**

Staff satisfaction continues to be monitored through the annual **All Employee Survey** facilitated by National Center for Occupational Development (NCOD). Metrics identified in 2023 included addressing co-worker relationships by encouraging staff to participate in engagement opportunities offered in CBRC. Co-worker relationships were addressed through bulletin board decorating, a question of the week, staff group lunches, and after work activities. In addition, a staff spotlight was implemented that features two staff members per month. A permanent Hospitality Team was developed to ensure engagement opportunities are provided regularly.

## **PROGRAM DRIVERS AND UPDATES**

### **STAFFING**

Several staffing changes occurred in FY23 including increased Nursing staff (six additional staff, a combination of RN, LPN, and Health Care Technicians), and a Blind Rehabilitation Specialist in Computer Access Training.

Additionally, leadership changes included new appointments in the positions of Visual Skills Supervisor, Living Skills Supervisor, as well as a new Nurse Manager and Assistant Nurse Manager.

All areas of the Blind Rehabilitation Program are now fully staffed at approved levels for the size of the program/facility. This allows us to provide the best possible care to all Veterans who participate in the Blind Rehabilitation Program.

## **VA VIDEO CONNECT (VVC)**

With VVC Programs representing almost 50% of the Veterans we served in 2023, this model of care continues to remain a popular choice for eligible Veterans who are seeking Blind Rehabilitation. While all aspects of Blind Rehabilitation cannot be conducted through this modality, each skill area can provide some level of training to increase Veteran access to Blind Rehabilitation services. The CBRC continues to develop and enhance the VVC Program in the new fiscal year.

## **BLIND REHABILITATION OUTPATIENT SERVICES**

### **BROS Rural Health**

BROS Rural Health brings Blind Rehabilitation to the Veteran's home through both outpatient and VVC modalities. This service model covers a 100-mile radius surrounding Hines VA Hospital including Hines VA, Jesse Brown VA, and Captain James A. Lovell VA. This territory includes a large portion of northern Illinois, the city of Chicago, the southernmost area of Wisconsin and northwest Indiana. Referrals are received primarily from VIST Coordinators or are self-referrals at Veteran request. Referrals in 2023 reached 121 Veterans.

### **BROS POLYTRAUMA Traumatic Brain Injury (TBI)**

The Polytrauma BROS provides outpatient and VVC Blind Rehabilitation services to Veterans and Active-Duty Service Members that are visually impaired in the Cook and DuPage counties of the Chicagoland area. As a member of the Hines VA Polytrauma team, BROS Polytrauma conduct functional vision screens and/or visual screen questionnaires during the initial TBI evaluation and submit referrals to the Eye Clinic as needed.

A total of 326 referrals were received in 2023 for BROS and Polytrauma TBI services on site, in-person, and through VVC. Referrals for Polytrauma BROS are received from VIST and Low Vision Therapists, as well as Veteran self-referrals.

### **LOW VISION CLINIC**

Our Low Vision Clinic continues to provide comprehensive eye examinations, education on eye conditions, instruction on optimal use of remaining vision, tips to modify home environment with proper lighting and contrast, and hands-on training with low vision devices and adaptive equipment.

In 2023, a total of 280 Veterans were served by the Low Vision Outpatient services. While 140 were new to the clinic, 140 Veterans returned for additional care/services.

## **COMMUNITY AWARENESS and EDUCATION**

Supporting education and awareness on low vision and blindness, and what Blind Rehabilitation offers remains a priority for our professional staff. A limited number of visitors and educational orientations occurred due to lingering COVID 19 restrictions.

- 28% of the staff are members of a professional organization
- 15% presented at a conference or in the community on blindness/vision impairment or support services for the visually impaired
- 55 Visitors were hosted in 2023. This consisted of clinical staff residents, students, interns, community partners and a State Senator totaling over 200 hours of education

Professional organizations of which staff members participate include but are not limited to:

- **Association for Education and Rehabilitation of the Blind and Visually Impaired (AER) and the Illinois Chapter (IAER)**  
The Association for Education and Rehabilitation of the Blind and Visually Impaired (AER) is a professional membership organization dedicated to professionals who provide services to persons with vision loss.
- **American Academy of Optometry**  
Inspiring excellence in eye care, the American Academy of Optometry provides exceptional education, supports innovative research, and disseminates knowledge to advance optometric practice and improve patient care.
- **Association of Vision Rehabilitation Therapists (AVRT)**  
AVRT is a professional organization for vision rehabilitation therapists from public and private sectors across the U.S. who provide services to people with blindness or low vision impairments.



## **Visual Impairment Services Team Coordinators**

The VIST Coordinators are case managers for Veterans who participate in Blind Rehabilitation services. Whether it be a first admission to a Blind Rehabilitation Center, a special program to meet unique needs or a refresher program, these representatives are key in ensuring our Veterans have support in navigating and obtaining the proper services.

The CBRC is a regional program designed to serve Veterans in the Midwestern geography. (See map below)



Referral sites include Medical Centers and local outpatient clinics across the Midwest. However, Veteran preference precedes over designated catchment areas, and we receive referrals from across the U.S. The most common referral stations include:

- Edward Hines Jr. VA Hospital (Hines, IL)
- VA Illiana Health Care System (Danville, IL)
- Jesse Brown VA Medical Center (Chicago, IL)
- Iowa City Health Care System (Iowa City, IA)
- VA Central Iowa Health Care System (Des Moines, IA)
- Battle Creek VA Medical Center (Battle Creek, MI)
- St. Paul Community Based Outpatient Clinic (St. Paul, MN)
- Richard L. Roudebush VA Medical Center (Indianapolis, IN)
- Clement J. Zablocki VA Medical Center (Milwaukee, WI)
- Kansas City VA Medical Center (Kansas City, MO)

## **75<sup>th</sup> Anniversary**



*Gary Sinise Foundation volunteers and Blind Rehabilitation staff at Blind Center 75th Anniversary celebration*

On July 4, 2023, the CBRC celebrated 75 years of service. The Blind Rehabilitation Center at Hines VA was the first and is the largest Blind Center in VA Healthcare. Since its founding, thousands of Veterans and their families have benefitted from the Blind Rehabilitation program and its services. Blind Rehabilitation services have grown from a nine bed unit with nine staff at Hines VA in 1948 to over 500 staff, 13 Blind Centers and multiple clinics and programs across the United States. A celebration on July 20<sup>th</sup> provided us an opportunity to reflect on our 75 years of accomplishments.

**1948** - VA celebrated the establishment of the first Blind Rehabilitation Center at Edward Hines Jr. VA Hospital.

**1951** - The Korean War warranted an increase in beds at the CBRC, the humble nine bed unit increased to 27 beds.

**1953** - VA, in cooperation with the Department of Agriculture, produce the film entitled, "The Long Cane."

**1961** - The first University Training Program was developed in cooperation with Western Michigan University.

**1970** - Program expansion led to the relocation of the CBRC to a three-story building, centrally located on Hines VA campus.

**1980** - The National VA Blind Rehabilitation logo was created by a Hines Blind Center patient.

**1998** - CBRC celebrated 50 years.

**2001** - CARF Accreditation status was achieved at the CBRC.

**2005** - Activation of a new state-of-the-art, 2-story, residential Blind Rehabilitation facility on Hines VA Campus.

**2006** - The first Polytrauma BROS Specialist was established at CBRC.

**2008** - CBRC was the first Blind Center to offer Apple iOS technology training as part of the Blind Rehabilitation program.

**2009** - CBRC hired its first full time permanent Recreation Therapist to support the rehabilitation process.

**2013** - CBRC hires its first Rural Health BROS.

**2020** - Due to COVID-19 pandemic, the CBRC closed for inpatient training, as well as other Blind Rehabilitation Centers across the United States. However, the CBRC, quickly adapted to meet the needs of its Veteran population. Staff engaged in national wellness check telephone calls and greatly expanded the use of VVC to continue to serve Veterans safely from their own home.

**2021** - First inpatient Veteran returned for Blind Rehabilitation training.

**2023** - CBRC celebrated 75 years.

## **Patient Demographics**

### **Age Range 2023**

The average age of Veterans participating in Blind Rehabilitation was 70.

### **Gender 2023**

<b>Gender</b>	<b>Number of Veterans</b>	<b>Percentage of Veterans</b>
<b>Female</b>	27	7%
<b>Male</b>	354	93%

### **Race 2023**

<b>Race</b>	<b>Number of Veterans</b>	<b>Percentage of Veterans</b>
<b>Black or African American</b>	85	22.3%
<b>Native Hawaiian or Other Pacific Islander</b>	8	2.1%
<b>White</b>	258	67.72%
<b>Hispanic or Latino</b>	2	.5%
<b>Asian/Oriental or Pacific Islander</b>	1	.3%
<b>American Indian or Alaskan Native</b>	2	.5%
<b>Unknown</b>	25	6.56%

### **Visual Diagnosis and Common Co-Morbidities of Inpatients 2023**

Below represents the most common eye conditions and co-morbidities that our patient population faces. Some Veterans have more than one diagnosis.

<b>Eye Diagnosis</b>	<b>Number of Diagnoses</b>	<b>Percentage of Discharges</b>
<b>Glaucoma</b>	71	28.06%
<b>Macular Degeneration</b>	48	18.97%
<b>Other</b>	49	19.37%
<b>Optic Atrophy</b>	27	10.67%
<b>Diabetic Retinopathy</b>	20	7.91%

<b>Retinal Detachment</b>	5	1.98%
<b>Retinitis Pigmentosa</b>	17	6.72%
<b>Head Trauma</b>	1	.4%
<b>Stroke</b>	4	1.58%
<b>Cataract</b>	1	.4%
<b>Histoplasmosis</b>	1	.4%
<b>Optic Nerve Disease</b>	3	1.19%
<b>Corneal Trauma</b>	3	1.19%
<b>Toxoplasmosis</b>	1	.4%

<b>Disability</b>	<b>Percentage of Cases</b>
<b>Diabetes</b>	24.57%
<b>Psychological</b>	25.06%
<b>Auditory</b>	10.71%
<b>Pulmonary</b>	6.08%
<b>CVA</b>	5.35%
<b>Renal</b>	6.57%
<b>Neuropathy</b>	7.06%
<b>Cardiac</b>	3.16%
<b>Neurological/Cognitive</b>	4.87%
<b>Amputee Arm</b>	.48%
<b>Rheumatology</b>	.97%
<b>Ulcers/Foot Sores</b>	.24%
<b>None</b>	4.87%

## **OPERATING STATISTICS 2023**

### **Access to Care**

#### **Number of Discharges 420**

<b>Inpatients</b>	212
<b>VA Video Connect (VVC) – Telehealth</b>	208

#### **Blind Rehabilitation Programs**

<b>Program</b>	<b>Number of Veterans Discharged</b>	<b>Average Wait for Admission (Days)</b>	<b>Average Length of Stay (Days)</b>
<b>Dual</b>	148	30.7	25.3
<b>Regular</b>	16	37.7	23.4
<b>Computer Access Training (CAT)</b>	35	31.3	18.4
<b>Other (Including Matter of Balance)</b>	13	31.5	12.6
<b>Outpatient</b>	4	N/A	N/A
<b>VA Video Connect (VVC) - Telehealth</b>	208	4.7	N/A

**Dual** – The most popular program consists of both basic core Blind Rehabilitation and computer access technology.

**Regular** – Consists of basic core rehabilitation in four skill areas: Orientation and Mobility, Living Skills, Visual Skills, and Manual Skills.

**Computer Access Training (CATs)** – Training in the use of adaptive access software.

**VA Video Connect (VVC)/Telehealth** – Training, predominantly technology based, conducted via video modality.

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### **CONTRIBUTORS FOR THE 2023 ANNUAL PERSPECTIVE**

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Margaret Elgersma, Chief, Central Blind Rehabilitation Center; Lauren McCarthy, Assistant Chief; Alex Gabel, Admissions Coordinator; Peter Russo, OD, Staff Optometrist; Jennifer Jackson, Visual Skills Supervisor; Sarah Appler, Blind Rehabilitation Outpatient Specialist Rural Health; Sara Heatherly, Blind Rehabilitation Outpatient Polytrauma TBI Specialist; Corie Gallagher, Blind Rehabilitation Specialist/AES Representative.

The Central Blind Rehabilitation Center 2023 Annual Perspective is published for VA Blind Rehabilitation Stakeholders.