

Charting

a new
course

Annual Report 2012

Captain James A. Lovell Federal Health Care Center

Leading the way for federal health care by providing a quality, patient-centered experience, and ensuring the highest level of operational medical readiness

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A year of notable achievements for the FHCC

As we reflect on the second year of our “being” the nation’s first federal health care center, we are proud of our many accomplishments and humbled at the same time by our sacred mission of *Readying Warriors and Caring for Heroes*.

And as we begin our third year, the way forward for the nation’s first federal health care center is clearly mapped, guided now by a comprehensive strategic plan that will ensure we remain a health care provider of choice, as well as the employer and destination of choice. We will do this by providing first-class patient-centered care to thousands of Veterans, military retirees, Active Duty military members and their families at our East and West campuses, along with three community based outpatient clinics.

With the objectives of becoming a **Lean** organization, fostering ongoing **Innovation**, focusing on **Talent Management** and always providing premier **Patient-Centered Care**, we are charting a challenging, but exciting

course. As you go through our annual report, you will notice remarkable initiatives that have been implemented.

Every one of our approximately 3,000 dedicated Sailors and civilian staff take to heart our honorable role of ensuring military readiness for U.S. Navy recruits and wellness for our retired military, military families and Veterans. From the World War II Veteran who is greeted at the entrance by enthusiastic and caring volunteers – many of them Veterans themselves – to the military spouse picking up medication to ease the symptoms of a child, we strive every day to provide *Excellent Care, Every Patient, Every Time*.

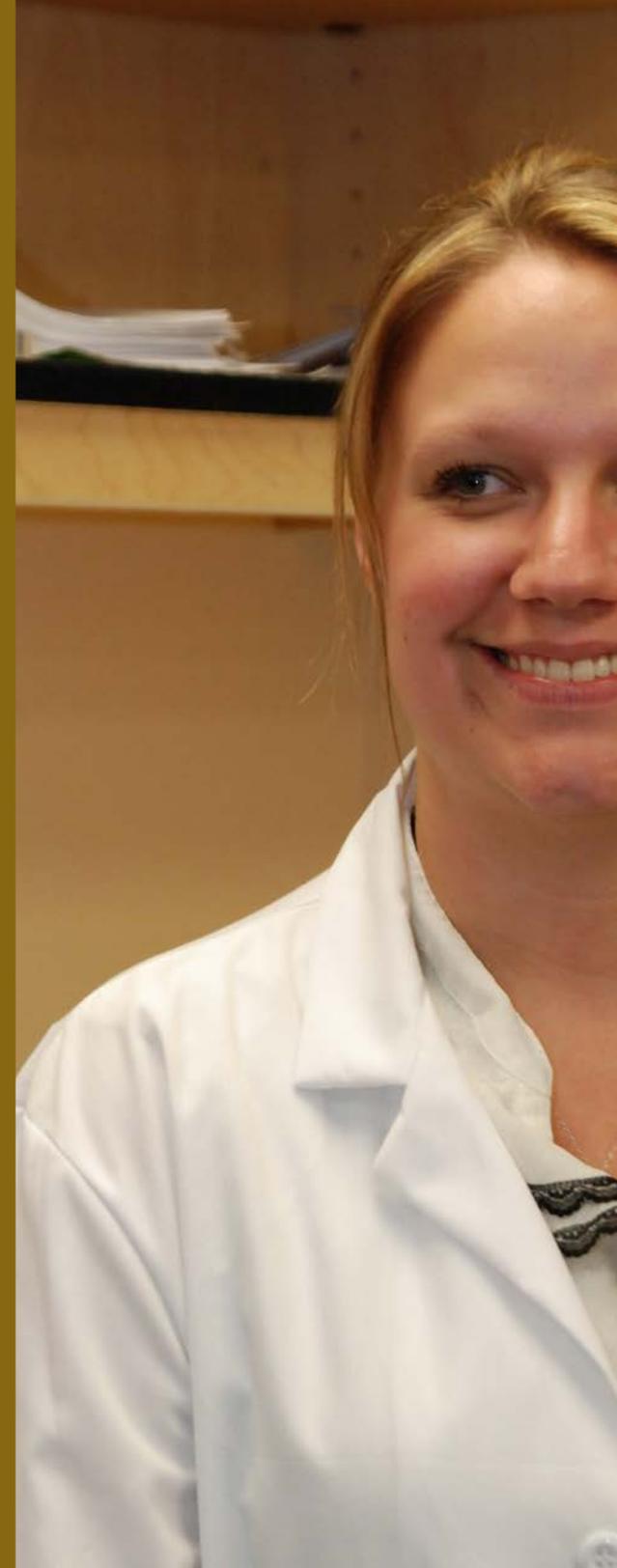


Patrick L. Sullivan, FACHE
Director



Captain José A. Acosta, MC, USN
Commanding Officer
and Deputy Director

As always, we sincerely thank you for choosing Lovell FHCC to provide your health care, and/or be your employer, in 2012, and we look forward to more firsts and bests in 2013.





Who We Are

We are two rich cultures combined with a single purpose: *Readying Warriors and Caring for Heroes*. The core of our organization is made up of the men and women we serve. They are what defines the organization's purpose. They are our patients. Our patients are at the center of everything we do, every decision we make.

In building upon our core and patient-centered approach, it is important to recognize and understand the role and impact of Lovell FHCC staff and volunteers.

The staff, volunteers, and patients go hand-in-hand; each are critical to defining and fulfilling our mission. Our staff and volunteers are the human touch to the patient; they are the closest to our patients, and have the awesome responsibility of setting the example of *Excellent Care, Every Patient, Every Time*.

Serving Veterans, Active Duty service members and their families and military retirees in Northern Illinois and Southern Wisconsin, the commitment of our integrated staff is evident in the patient-centered

care provided in our West campus, East campus and three Community Based Outpatient Clinics.

Our Guiding Principles

- **Quality:** Commitment to patient outcomes, adherence to best practices, and state-of-the-art care for patients throughout the organization.
- **Experience of Care:** Excellence for every patient, every time. Providing the best experience for our patients and their families through excellent customer service, quality, coordinated care in a patient-centered environment.
- **Readiness:** Optimizing operational medical readiness for both our staff and constituents.
- **Staff:** Serve as the employer/destination-of-choice. We will foster career development through education, teamwork and accountability. We strive to recruit and retain the highest qualified staff to ensure engagement and satisfaction.
- **Innovation:** Continuing to be a leader in creating a 21st century healthcare organization.
- **Sustainability:** Ensure longevity of success. We will maximize



the utilization of our resources, capitalize on opportunities for growth, and evolve with transformation in the health care industry to ensure a sustainable environment for the future of our organization.

Our Directional Strategies

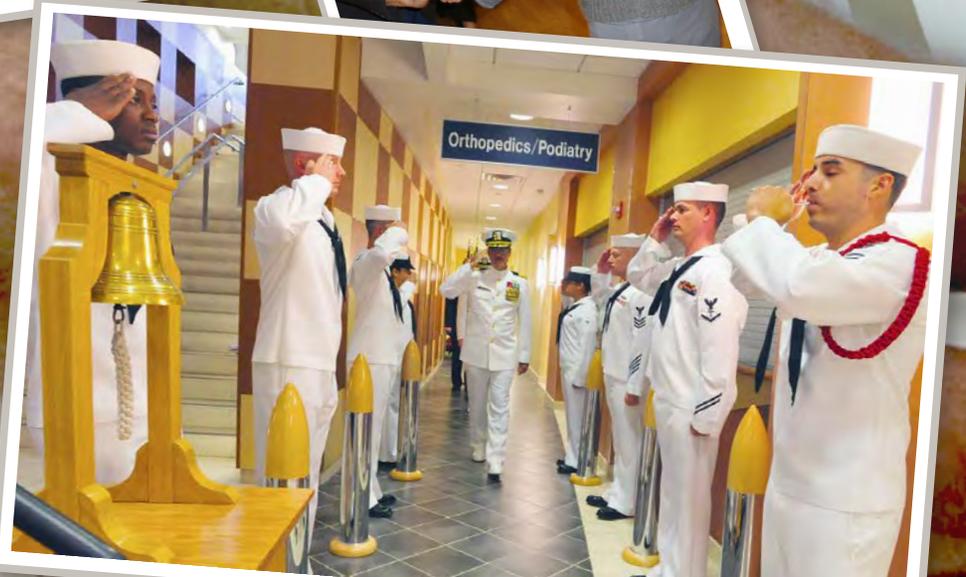
Lovell FHCC staff and volunteers provide care to our patients through our Guiding Principles, which are framed within a three-point foundation:

- ... our Mission of leading the way for federal health care by providing a quality, patient-centered experience, and ensuring the highest level of operational medical readiness.
- ... our Vision of creating the future of federal health care.
- ... our Values of Respect, Integrity, Trust, Accountability, and Teamwork.

Our Promise

Readying Warriors and Caring for Heroes

One Team





Our Facilities



West campus

48 buildings on 107 acres of land between Green Bay Road and Buckley Road in North Chicago, Ill.

East campus

Four medical facilities on Naval Station Great Lakes, Illinois

Community Based Outpatient Clinics:

One each facility in Evanston and McHenry, Ill., and one in Kenosha, Wis.

Operating Beds

369 (authorized 442)

At our campus in North Chicago, Ill., the Lovell FHCC provides a full-spectrum of health care for our patients, including full medical and surgical care, a large array of medical sub-specialties (cardiology, pulmonary, neurology, etc.), a

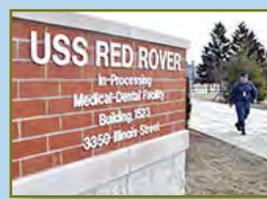
variety of mental health services (acute and long-term care, post-traumatic stress care, homeless domiciliary care, alcohol/drug rehab, etc.), and Community Living Center services, as well as many other programs.



Evanston CBOC



Fisher Clinic



USS Red Rover



McHenry CBOC



USS Osborne



Kenosha CBOC

2012 Highlights

- Accredited by The Joint Commission with half the national average number of findings (15 vs. 29).
- Opened two 16-bed Community Living Center units following the patient-centered care design model, with private rooms and bathrooms, and a unit kitchen.
- Renovated Primary Care Clinic to better serve patients, facilitating Patient Aligned Care Team initiative.
- Initiated a 48-hour follow-up callback process for discharged Medical/Surgical patients to ensure all needs are met.
- Established evening clinics to better serve patients and to target OEF/OIF/OND returning combat Veterans and Active Duty military.
- Implemented a mental health 24-hour callback program, which is specifically geared toward ensuring that all recently discharged mental health patients have what they need to affect a successful return to the community.
- Implemented clinical guidelines for care of diabetes, hypertension, cardiac disease and surgical procedures.
- Established programs for returning OEF/OIF/OND combat Veterans and Active Duty to ensure every returnee is screened for depression, substance abuse, post-traumatic stress (PTS), traumatic brain Injury (TBI), gastroenterology, infectious disease and imbedded fragments.
- Opened our first Green House® home, shifting established practices of long-term patient care to a more personalized and dignified care for up to 10 Veterans.



USS Tranquility



Department of Defense Secretary Leon Panetta, center, joined Veterans Affairs Secretary Eric Shinseki, second from right, to present FHCC staff with awards for the new model of VA/DoD care created at the FHCC.

Awards & Recognition:

- 2012 DoD Medical Operations Management (LIMDU & MEDBOARDS)
- 2012 U.S. Navy Certified Pipeline Mover Certificate (third year in a row)
- College of Lake County Certificate of Recognition 2010-2011 (HIMS)
- 2012 U.S. Navy Bureau of Naval Personnel, Transient Monitoring Unit
- Mr. Patrick Sullivan, Lovell FHCC Director, 2012 Presidential Distinguished Rank Award

The FHCC was surveyed and remains accredited by Comprehensive Accreditation for Rehabilitation Facilities (CARF); successfully recertified the Vocational Rehabilitation and Compensated Work Therapy Transitional Residence (CWTRR) programs. For the first time, CARF also provided initial surveys for the Mental Health Residential Rehabilitation Treatment Programs, the Psychosocial Rehabilitative Recovery Center, the Grant and Per Diem Program, and the Department of Housing and Urban Development and VA's Supportive Housing (HUD-VASH) Program. All programs surveyed were found to have no issues requiring corrective action, putting Lovell FHCC in the top 3 percent of all facilities nationwide.

The FHCC also boasts full accreditation from the College of American Pathologists and the Nuclear Regulatory Commission.



Patient-Centered Care

Our patients are at the center of everything we do, every decision we make. It is because of their service and sacrifice that we are proud to care.

and volunteers are the human touch to the patient and have the awesome responsibility of providing excellent care to every patient, every time.

Surrounding the patient core are the Lovell FHCC staff and volunteers. The staff, volunteers, and patients go hand-in-hand; each is critical to defining and fulfilling our mission. Lovell FHCC staff

It is our honor to serve our country's warriors and heroes, and our organization. The Lovell FHCC is a pioneer on a remarkable journey to transform federal health care.



Patient Encounters

Total Outpatient patient visits: 804,610
VistA: 371,759
AHLTA: 432,851
Total Inpatient Admissions: 4,773
Total Dispositions (Discharges): 4,750
Total Dental Encounters
West campus: 7,707
East campus: 195,250

Patient Population Care Total: 76,086

Unique Veterans: 24,317
Active Duty Military: 3,995
Active Duty Family Member: 5,111
Non-Active Duty Family Member and Retirees: 4,663
Recruit Training Command Students and Recruits: 38,000



Lovell FHCC cuts ribbon on first Green House® home

“When I needed the FHCC for help and direction, you were all there; ready to assist me. I’m so fortunate to have you all there for me. Thanks ...”



This model is a cultural shift in long-term patient care. It’s a vision that allows a home-like environment for “residents,” not “patients.”

The revolution in how long-term care will be provided in the new Green House® homes focuses on giving residents choices.

The model dovetails state-of-the-art medical care with resident choice and the fundamental comforts of life. It means not just building homes, but building choices.

The culture change is part of a national movement to transform nursing homes and long-term care facilities to provide each resident – each person – improved quality of life through care that gives residents choices and greater autonomy. Instead of an “institution,” 10 residents live in a home where they have private bedrooms and bathrooms, and the ability to direct their care and treatment on their own schedules, according to their own desires.

The model allows residents to live as autonomously as possible through creating a family-like environment, where they dine together and are able to have choices in their daily environment.

Each home is staffed by two universal workers, called Shahbazims, on each shift. The workers provide patient care, cook, do some light housekeeping and help with resident activities.

Meals are cooked on site based on a meal plan developed by house residents and staff together. Medical providers, nurses, social workers and dietitians make up a clinical support team to assist with meeting the medical needs of each resident.



Patient-Centered Care

Primary Care Renovation

The first time Army Vietnam Veteran Herman “Sam” Radatz sought medical care at a Veterans Affairs facility in 1974, crowded waiting rooms and impersonal service caused him to decide he would never go back unless absolutely necessary.

Today he is so satisfied with the care he receives at Lovell FHCC that he agreed to speak at the ribbon-cutting of the renovated Primary Care Clinic. The renovation brings the clinic’s décor in line with other clinics at Lovell FHCC, and it will better serve patients. It will allow health care team members to be located closer together. In the renovated clinic, patients will find clerical staff, nurses, medical providers, pharmacists, social workers, mental health professionals and dietitians.

Modernizations, including private screening rooms, also allow for patient privacy and the best infection control.

There are approximately 4,000 patient encounters a month in the Primary Care Clinic. The space is also the outward sign of a new initiative to improve patient care called PACT, or Patient Aligned Care Team. PACT is a partnership between Veterans, their families and multi-disciplinary treatment teams that work together to improve health outcomes. The bottom

line is that patients don’t always need to get in a car and drive to the FHCC to get the care they need. PACT will use a variety of methods to treat patients. In addition to face-to-face visits, PACT will use telephone consultations, shared medical appointments and secure messaging online to serve patient needs.

The focus is on the patient being at the center of his or her care, and PACT will help patients make lifestyle choices to meet their health care needs.

When patients do have to come in for an appointment, they’ll find their team of providers and other medical professionals all in one convenient place, ready to do their utmost to provide the best patient care.



Pharmacy Prescriptions Total: 1,773,836
Total outpatient prescriptions filled: 610,735
Total inpatient prescriptions filled: 53,607
Total unit-dose prescriptions filled: 1,095,353
Total local mail-order prescriptions filled: 14,141

The “Team” Approach

The medical home or patient-centered medical home (PCMH) is a team-based method of providing comprehensive and continuous medical care.

The medical home model for Veteran patients is called the Patient Aligned Care Team (PACT).

The medical home model for Active Duty patients and their family members is called Medical Homeport.

With PACT and Medical Homeport, each patient works with their primary health care team to plan for whole-person care, and life-long health and wellness. The goals of this method of care are to:

- *Allow better access to providers through clinic visits, telephone visits, group visits and secure messaging (Relay Health and My HealthVet) to increase patient satisfaction with medical care and improve patient health.*

- *Provide team-based care with a whole person approach, focusing on health, wellness and prevention. Patients are members of the team, which may include the primary care manager, a nurse, clinical associate, Navy Corpsmen, pharmacist, mental health provider and support staff as well as your family members and caregivers.*

USS Red Rover processed:

18,000 glasses, administered 230,000 immunizations, conducted approximately 9,000 gynecological exams and evaluations, administered 40,000 hearing exams, collected and examined 200,000 tubes of blood



Patient-Centered Care



Get Well Network

The Get Well Network is an Interactive patient-care system to be activated at the FHCC in 2013.

The Get Well Network offers the following:

Clinical capabilities include patient alerts, care plans, bedside nursing tools, documentation and patient education.

Entertainment options include internet access, games, movies, menus and communication tools.

Performance improvement options include the ability to survey patients and solicit comments/suggestions.

The Get Well Network was made possible through the FHCC's partnership as a pilot facility with the Office of Patient Centered Care and Cultural Transformation.

USS Osborne provides a full spectrum of dental treatment to 38,000 enlisted recruits. Seventy-five percent of incoming recruits need some dental treatment during recruit training; 60 percent require treatment that is more extensive than a simple cleaning; 20 percent of incoming recruits require extensive treatment such as removal of impacted wisdom teeth, root canals, multiple large fillings, crowns, and/or dentures, frequently calling for complex, multi-disciplinary treatment plans.



FHCC Pain Clinic offers support, relief

Some of FHCC Veteran patients can barely walk or talk when they first come to Lovell FHCC's new Primary Care pain management program. They hurt so much that it is all they can do to make it in, leaning heavily on canes or walkers for support or even resorting to wheelchairs to get around.

After the five-month program, however, they "graduate" into a brighter future, where most can manage their pain on their feet, armed with new knowledge and coping skills to improve their quality of life. They learn more about their pain and what triggers it, and they develop self-management skills including relaxation and stress-

management techniques, healthy eating habits, exercise skills, and pacing skills.

At the FHCC, many patients have many chronic health conditions, which frequently involve some degree of chronic pain. The Shared Medical Appointment (SMA) program was developed in response to this ever-growing problem of chronic pain and the demand for patient-friendly and effective pain management programs. It is the first of its kind. It was developed after months of legwork by FHCC Primary Care staff and piloted in July 2011. It is a comprehensive and interdisciplinary approach to pain management. Three to seven

people enroll at a time and meet for two clinics a week.

The goal is to empower Veterans to achieve a better state of health by actively coping and self-managing their pain, resulting in a more balanced and functional lifestyle. When patients sit down during their regular SMA visits, not only are their primary care doctors at the table, but they also are joined by a registered dietician, psychologist, physical therapist, nurses, and a neurologist as needed. Working together, the medical professionals then treat the "whole patient," covering many issues in one visit.



New Facility for Kenosha CBOC

The expanded Kenosha Community Based Outpatient Clinic will open its doors in the spring, 2013 at a convenient new location at 8207 22nd Avenue in Kenosha, Wis.

The new 8,000-square-foot facility will double the number of exam rooms from the current location, making the best use of space for Kenosha Veteran patients.

The new facility will continue to offer primary care services, women's health care, phlebotomy, mental health services,

social work services, MOVE weight management clinic and pharmacy services.

Additionally, the larger space will allow for larger group clinics, TeleDiabetes screenings and primary care space improvements to support the Patient Aligned Care Team initiative.

The new location and additional space will allow us to continue to grow and meet the ever-expanding medical needs of our Kenosha Veterans.

Nearly 1,700 Veterans use the Kenosha Community Based Outpatient Clinic during approximately 9,000 unique visits each year.

The number of visits is expected to grow by 23 percent over the next two years.

Talent Management

Over the past decade, our efforts have been dedicated to integrating two distinct organizations; organizations with different missions and patient populations.

Today, as an integrated organization and the nation's first federal health care center, we are proud of the progress made and are excited about the extraordinary opportunities that lie ahead.



Staffing: Total full-time equivalent (FTE) positions: 3,058.9

Civilians: 1,988

Active Duty military: 799

Stay Navy civilians: 16

Contractors:

212 DoD contractors

17 VA contractors

OI&T/ISO: 26.9

Volunteers: 1,099

Volunteer hours: 56,887



Residency Programs

Through our affiliations with the Rosalind Franklin University of Medicine & Science/The Chicago Medical School and the University of Illinois at Chicago, medical residents and students receive extensive training here at Lovell Federal Health Care Center.

Residency/fellowship training is in internal medicine, psychiatry, endocrinology, infectious disease, pulmonary

medicine, cardiology, dermatology and ophthalmology. FHCC physician faculty have joint appointments at the universities and at the FHCC, seeing patients at the FHCC, supervising students and residents, and conducting research.

The FHCC delivers high quality patient care with highly trained, academically-oriented physicians.

Employer of Choice

-The FHCC attracts and retains the “best of the best” civilians and Sailors.

-It’s a place where staff enjoy coming to work and find a rewarding purpose to each day.

-It’s a unique and valuable experience, which will prepare civilians and Sailors for career progression.

-The FHCC fosters a great work/home-life balance.



Secretary Shinseki’s goal to hire and retain Veteran employees is 40 percent.

Lovell FHCC retains 37.30 percent, which is the highest within the Veterans Integrated System Network 12 (VISN12).

“It’s an honor to serve our Veterans and Active Duty patients at Lovell FHCC ...It is a great place to start my career!”

Talent Management

Lovell FHCC Navy Corpsmen mentored by inpatient nurses

Lovell FHCC's new Corpsman Clinical Practice Program pairs nurse preceptors with Navy Hospital Corpsmen.

When Navy Hospitalman Shawn Cook was asked if he wanted to participate in a new training program at the Lovell Federal Health Care Center in North Chicago, Ill., after graduating from Naval Hospital Corps School, he jumped on board.

He already loved the hospital because he had surgery at the FHCC after Boot Camp at Naval Station Great Lakes, and found the staff to be very nice and caring. So the idea of being one of the first to go through the FHCC's Corpsman Clinical Practice Program was appealing.

Having Corpsmen actually work on a ward in a facility like Lovell FHCC was such an exciting and different concept, Cook thought it would provide him invaluable career experience.

A few weeks after he reported to the FHCC, he began working on the Med-Surg (Medical-Surgical) inpatient unit, where he was assigned a civilian nurse as his preceptor. In the nursing world, a preceptor is the person who mentors and

educates a new nurse. That was the start of the unique training he received as part of the program.

Cook said he benefitted and learned from the different perspectives of non-military nurses.

Lovell FHCC's Corpsman Clinical Practice Program was a long time in the making. Navy Lieutenant and Nurse Gwendolyn Mulholland spent months researching and designing the parameters of the initiative, and today serves as the division officer for the Corpsman Clinical Practice Program.

The 2010 integration of Department of Defense and Department of Veterans Affairs medical services at the Lovell FHCC precipitated the development of the Corpsman Clinical Practice Program. This means there currently isn't a program exactly like it anywhere in the country.

The goal is to get Corpsmen inpatient clinical experience to develop their critical thinking skills and their hands-on actual clinical skills so when they get deployed, they have those necessary skills.



Lovell FHCC Magnet Journey

While the reason for taking the journey can vary, embarking on the Magnet Journey pulls nursing staff together for a single purpose: excellence in patient care. Magnet designation serves to promote a collaborative culture and advance nursing practice. Nursing staff from a variety of departments have contributed to the development and outcomes of our shared governance councils — a forum where nurses are respected for their knowledge and professionalism while contributing to decision-making in patient care.

Changes in our professional nursing practice are apparent at the direct-care level as our nursing units apply a variety of processes for change: patient rounding, unit-level journal clubs, improvement in the discharge-planning process, self-scheduling, stocking and supply enhancements, and many others. For example, as a Magnet initiative, a small nursing team initiated a research study to learn about the educational needs of our direct-care nursing staff who serve our diabetic patient population. As a result, an interdisciplinary team now provides focused diabetes education, and nurses have become more knowledgeable about the epidemic of diabetes and its latest treatments.

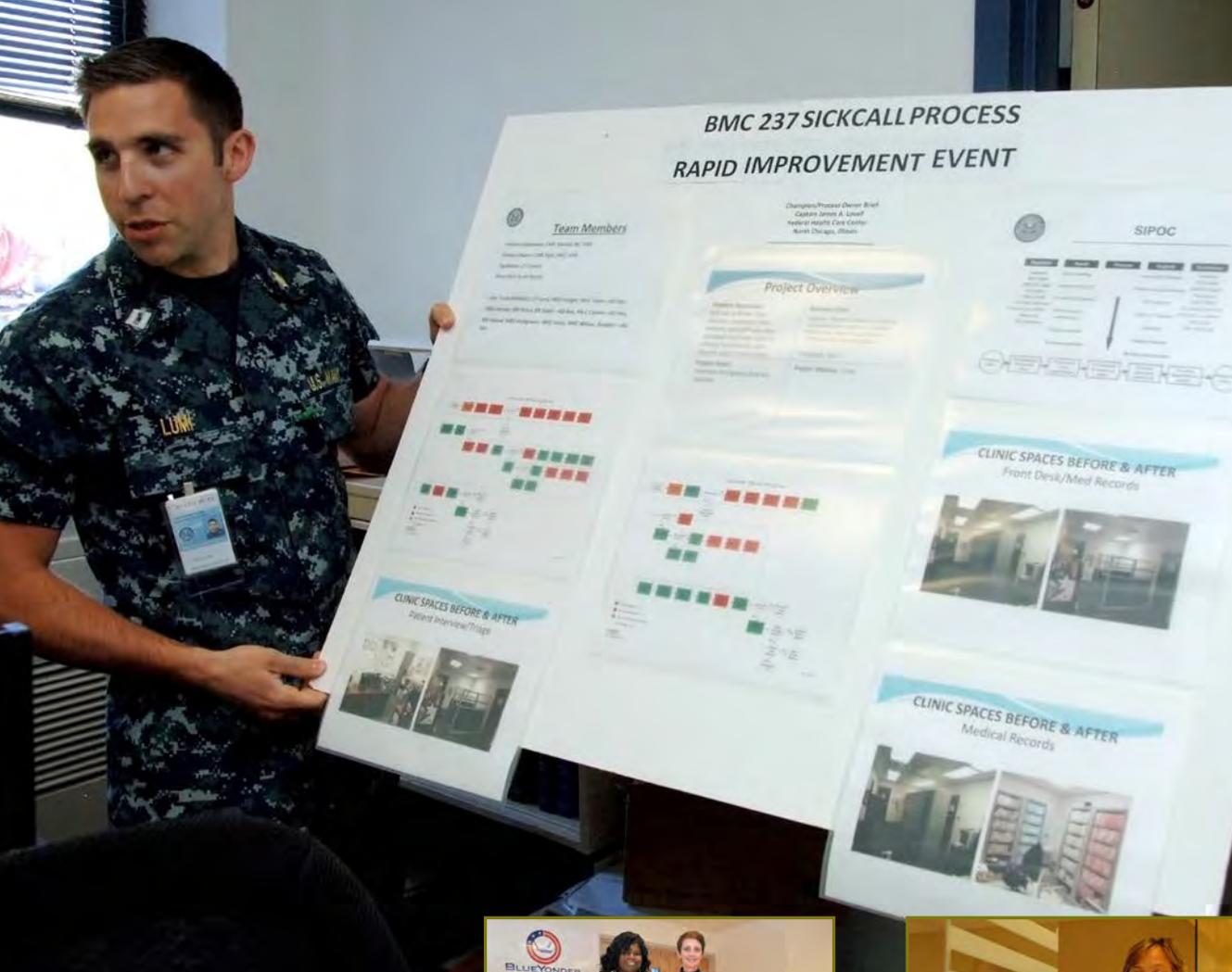
Unit-based Diabetes Nurse

Champions provide support for point-of-care nursing, and nurses report an increase in their confidence levels in providing care to diabetic patients.

Our evidence-based nursing practice is data-driven, and our nursing staff collects, analyzes and uses data to improve nursing care practices. Our Magnet journey reinforces the art and sciences of nursing as a lifelong learning process and offers the opportunity for staff nurses to be mentored and to mentor others and to lead projects and meetings, as well as make contributions as team members on a wide range of initiatives, committees and projects.

While we still have quite the distance to go in the first steps of our Magnet Journey, we've seen increases in nursing educational levels (more undergraduate and advanced degrees), the number of nurse specialty certified nurses, and the number of nurses returning to school to advance their careers. Truly, the FHCC has just begun the Magnet Journey —and we already have plenty to celebrate; our future looks to be even more successful for our organization, our staff, and our shared mission — our patients.





Lean

The FHCC Lean Six Sigma (LSS) program continued to expand since Lean was selected as one of the four strategic objectives.

Lean is also known as Kaizen, Rapid Improvement Event (RIE) and Rapid Process Improvement Workshop (RPIW).

The Lean process always involves “people who do the work.” It is about waste reduction to maximize flow to meet customer requirements.

Lean identifies critical customer requirements and uses tools to identify and eliminate waste.

Lean is about continuous improvement; a process, system, or a culture. It respects the people who do the work.



LOVELL FHCC Annual Budget
(includes Military labor, less TRICARE funding)

Fiscal Year 2012:
\$466,152,760.58. Carried over \$7,071,303.

DONATIONS - \$1,018,641.00



After the project, wait time was reduced to less than 30 minutes for 70 percent of our patients.

We initiated and completed a project based on customer input at Fisher Branch Medical Clinic for our Sick Call process. Patients told us they wanted improved privacy and reduced wait times to see their providers.

We constructed three private patient interview and triage rooms, and also made several improvements that resulted in reducing patient wait times by 38 to 67 percent and decreasing time spent by patients at the clinic by 26 to 31 minutes per visit, depending on the time of year (seasonality of volume). This project also resulted in redeploying 60 hours of staff time each week from non patient care to direct patient care, and also resulted in improved physical space utilization.

The FHCC also initiated Lean projects to streamline the Periodic Health Assessment (PHA) process at Fisher Branch Medical Clinic; completely redesign the delivery process for medications for our Domiciliary patients; and we also initiated a project to improve the hiring timeline for new FHCC staff, based on input from our staff.

This past year, Navy Medicine East traveled to the FHCC and presented

a five-day Green Belt Class to teach students about Lean and Six Sigma.

During The Joint Commission Accreditation survey, The Joint Commission was impressed with the sustainment results from our LSS projects. The Joint Commission Resources Quality and Safety Network visited the FHCC for one day to shoot a video entitled, "Developing Your Performance Improvement Approach." The video highlights the FHCC LSS program and is a best-practice case study. It can be viewed at <http://2012.august.qualityandsafetynetwork.com/>.

In the near future, the FHCC will be partnering with the Indianapolis Veterans Engineering Resource Center (VERC) for 12 months to undertake a Lean transformation journey. The Indianapolis VERC, part of the VA, employs industrial engineers and other experts in LSS. The VERC will work with FHCC staff to develop a Lean transformation project plan and provide on-site training, coaching, and other activities while completing 12 to 18 Lean projects.

FHCC focuses on Lean

Lean typically focuses on removing waste to improve flow, while Six Sigma focuses on reducing and eliminating process variation.

The multidisciplinary team formed as part of the strategic planning process completed its recommendations to implement a full LSS program at the FHCC. The recommendations were presented to the Executive Steering Committee (ESC), which approved military and civilian positions, space, equipment, and implementation support.

The FHCC has been using customer input from patients and staff to initiate projects. For example, one Six Sigma project resulted in reduced wait times for pharmacy. Pre-project, 60 percent of patients waited more than 30 minutes to have their outpatient prescriptions filled at our main pharmacy.





Innovation

The Lovell FHCC is a pioneer on a remarkable journey to transform federal health care. It is with full confidence that through the support and dedication of the Lovell FHCC staff and volunteers, our plan will be successful, progress unprecedented, and a transportable federal health care delivery model discovered in our pursuit of creating the future of federal health care.



Orders Portability

In 2012, we began the deployment of Laboratory Orders Portability, which crossed orders and results between VistA and CHCS. Unlike Radiology, which was deployed in 2011, laboratory was deployed in a phased approach turning clinics on separately. We began at the end

of February and completed the phased deployment in late spring.

In September, we then initiated the roll out of increment 1 for consults orders portability in the similar phased approach as we did with laboratory. **Increment 1** provided us with the ability to get the consult order and status to

cross between VistA and CHCS. Full roll-out was completed on October 31, 2012. **Increment 2** for Consults requirements phase began immediately after.

Anticipated deployment of **Increment 2** is March 2013 which will allow the notes to cross!



FHCC breaks ground on Lovell Education Center of Excellence

Our high-tech education center will feature the very latest and best simulation training available, not just for our newest medical professionals, but also to sharpen the skills of our current medical practitioners, thus leading to the end result of providing optimum health care to our Veterans, Active Duty military and their families, and military retirees.

The FHCC's Center of Excellence will be



Dual Use Vehicle

The FHCC received five DUV (Dual Use Vehicle) buses: three large (36-foot) and two small (28-foot). These buses were purchased under a national program to outfit VA hospitals across the country with vehicles for emergency evacuations, whether it is a civilian disaster or local to the VA.

These buses can be quickly converted from regular daily use to an emergency

suite, long-term patient care unit, task training on actual functioning high-tech body parts, a medical-surgical open bay, computer training labs and a military training area that simulates a combat field hospital.

After the groundbreaking ceremony in August, 2012, attendees viewed architectural renderings and simulation displays.

evacuation vehicle capable of transporting patients on litters and in wheelchairs, ambulatory patients, or a combination of the three, to move people from one location to another. They can also be used on airfields.

We use these buses daily on our shuttle and train runs



a flagship for future federal health care centers and other integrated federal medical facilities.

The project is projected to be completed in the summer of 2013. The advanced simulations available in the center will cover the spectrum, including an intensive care unit, an emergency room, surgical suite, sedation



Attendees had the chance to experience simulations themselves as they helped

check vital signs on "patients" of various ages, including an adult and baby in separate hospital beds hooked up to real monitors.

In another corner, an injured serviceman "bled" from battlefield injuries. Each mannequin is named by education staff. Chesty, shown on the right, was named after one of the most decorated Marines in history, Lt. Gen. Lewis Burwell "Chesty" Puller (June 26, 1898 – October 11, 1971), who served in World War II and Korea.



and for patient recreation. Lovell FHCC is responsible for maintenance, fuel and keeping them mission-ready.





One Team

Dedication and compassion shown by our staff and volunteers

Year-end statistics look impressive on paper but it is the personal stories that best illustrate being "One Team, One Family."

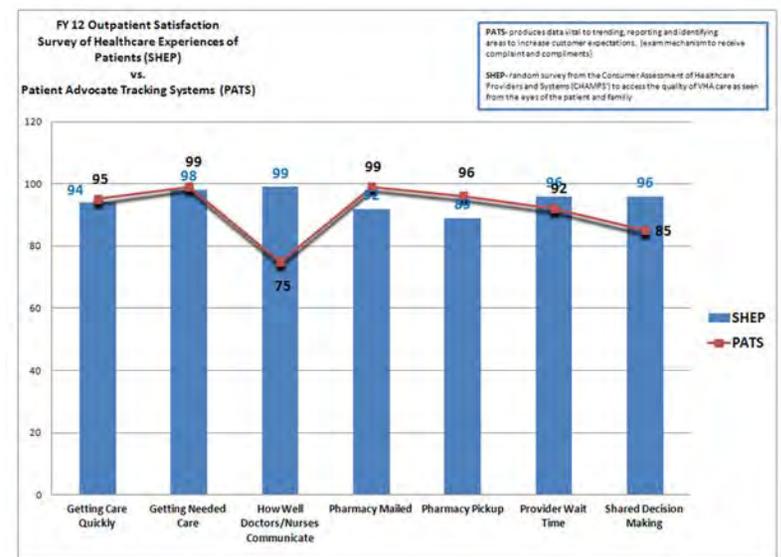
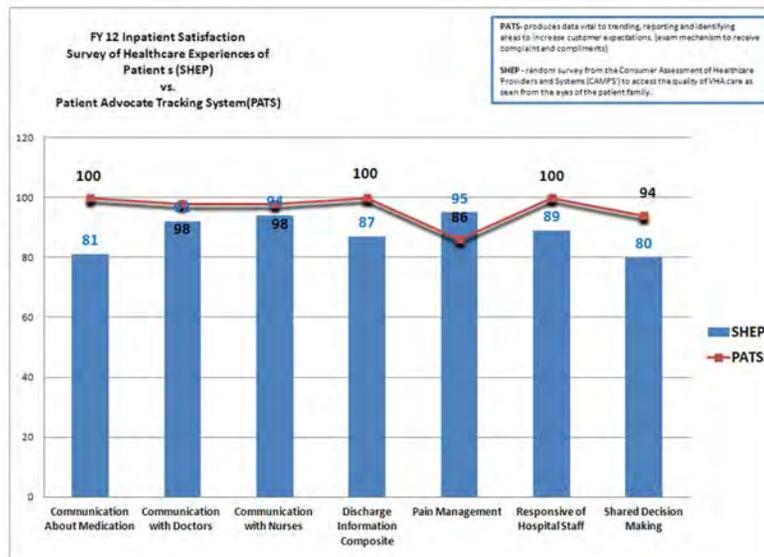
One such story is about the staff from the Critical Care Unit and Communications Department who helped a Vietnam Veteran patient, a retired Marine Lt. Col., and his wife celebrate their 10th wedding anniversary in his hospital room. The couple's long-planned trip to Las Vegas to celebrate had to be cancelled due to his failing health. Our employees gathered decorations, ordered a cake and quietly brought Las Vegas to him

while he slept, even going as far as to bring a working slot machine to his room. The Veteran's wife said she couldn't believe the lengths the staff went to in order to make their day special. What a great example of patient-centered care!

Another employee, a Navy Sailor, showed great compassion and care when he went the extra mile to follow up on treatment for a severely injured fellow shipmate, who was hospitalized in another state. The Hospital Corpsman 2nd Class, an assistant Leading Petty Officer in Managed Care,

coordinated with Lovell FHCC staff and multiple disciplines to ensure the best outcome for his patient, including Case Management, the Integrated Disability Evaluation System and Navy Safe Harbor. He kept the Sailor's family fully informed every step of the way.

There are many more stories to tell of dedication and compassion. As we celebrate this past year, may we all be thankful for our fellow employees and volunteers at the FHCC, who go above and beyond every day to help us succeed as well as to provide *Excellent Care, Every Patient, Every Time.*



Lovell FHCC Leadership



Patrick L. Sullivan, Director of the Captain James A. Lovell Federal Health Care Center, is responsible for the strategic leadership and operations of the federal health care center. He leads an integrated VA/DoD team of people, serving Veterans, Active Duty military, retirees and DoD dependants. The Lovell FHCC is responsible for the medical readiness of more than 40,000 Navy recruits that pass through Naval Station Great Lakes.



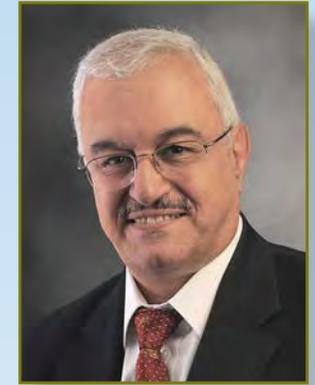
Captain José A. Acosta, MC, USN is the Commanding Officer and Deputy Director of the Captain James A. Lovell Federal Health Care Center. As the Deputy Director, he supports the Director with all leadership and administrative functions within the health care center, maintains Uniformed Code of Military Justice authority, and is responsible for the day-to-day operations at the federal health care center.



Master Chief Maurice Coffey is the Command Master Chief at the Captain James A. Lovell Federal Health Care Center. As the Command Master Chief, he is the senior enlisted advisor and works as a liaison between the Director/Deputy Director and the enlisted ranks. He is responsible for all quality of life, discipline, training and morale among enlisted members assigned to the federal health care center.



Captain Jim Oxford is the Interim Executive Officer at the Captain James A. Lovell Federal Health Care Center. In his current position, Oxford is responsible to the Commanding Officer for the military performance of duty, training, and good order and discipline.



Dr. Tariq Hassan is the Chief Medical Executive, Associate Director of Patient Care at the Captain James A. Lovell Federal Health Care Center. In his current position, he is responsible for overseeing all medical functions and direction at the federal health care center.

One Team



Captain Jamie Kersten is the Associate Director of Fleet Medicine and Deputy Navy Nurse Executive at the Captain James A. Lovell Federal Health Care Center. In this position, Kersten is responsible for all Branch Medical Clinic operations. As the Deputy Navy Nurse Executive, she shares the responsibilities for all FHCC Nursing Personnel with the Senior Nurse Executive.



Dr. Sarah Fouse is the Associate Director of Patient Services and Nurse Executive at the Captain James A. Lovell Federal Health Care Center. She is responsible for the operation and evaluation of education, geriatrics and extended care/Community Living Center (CLC), rehabilitative medicine, supply processing and distribution (SPD), customer service and ancillary services. Fouse is the organization's executive level nursing leader with full responsibility for the direction of nursing care delivery.



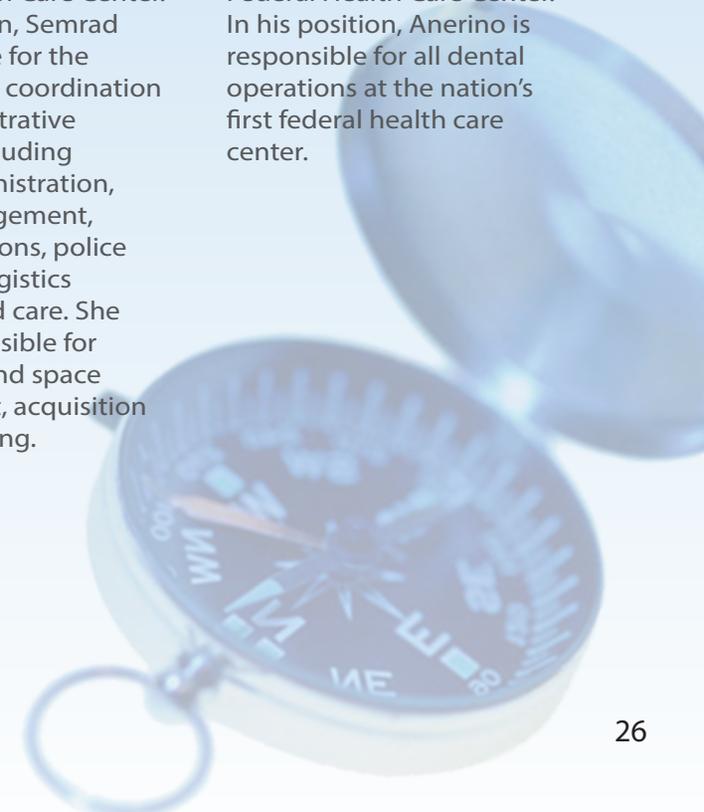
Captain Dale Barrette is the Associate Director of Resources at the Captain James A. Lovell Federal Health Care Center. In this position, Barrette is responsible for fiscal and budget management, business planning and operations, human resources and total workforce management, information resources and information security at the federal health care center.



Marianne Semrad is the Associate Director of Facility Support for the Captain James A. Lovell Federal Health Care Center. In her position, Semrad is responsible for the direction and coordination of all administrative functions including patient administration, facility management, communications, police and safety, logistics and managed care. She is also responsible for equipment and space management, acquisition and contracting.



Captain Martin Anerino is the Associate Director of Dental Services at the Captain James A. Lovell Federal Health Care Center. In his position, Anerino is responsible for all dental operations at the nation's first federal health care center.









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