Report to the Legislature Minnesota State Veterans Homes: Strategic Planning, Service Partners & Long-Range Planning



January 15, 2009



STATE OF MINNESOTA DEPARTMENT OF VETERANS AFFAIRS

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Dear Reader:

The 2008 Legislature appropriated \$200,000 to the Minnesota Department of Veterans Affairs for the following purposes:

- 1) Strategic Planning;
- 2) Commission a study on the feasibility of continuing to provide nursing home services on the Minneapolis Campus or build several smaller homes around the metro area;
- 3) Commission a state-wide study on the best location for other possible veterans homes in greater Minnesota; and
- 4) Methods by which the current homes can partner in the delivery of services.

At the writing of this report, the strategic planning for the Department and the Homes has been completed. The seven county metro area and the Minneapolis Veterans Home studies are in progress by Horty Elving and Associates, Inc. The Contractor will conduct a demographic/market study to identify/recommend area community amenities for a successful program delivery to veterans in the metro area. The statewide study was still under contract negotiations with company who was awarded the project.

The timeline for completion for the metro study is as follows:

Tasks Demographics / Market Study Existing Buildings (Minneapolis Vets Home) Analysis Evaluation of other alternatives Schematic Study of other alternatives Project Final Report Completed and Report Delivered December 23, 2008 January 12, 2009 January 12, 2009 January 30, 2009 February 27, 2009

I am pleased to present this report to the Legislature on the progress of the above named projects, and I look forward to providing the complete reports upon their conclusion.

Sillert Acerea

Gilbert Acevedo Deputy Commissioner of Veteran Health Care Minnesota Department of Veterans Affairs

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INTRODUCTION

History

With the merging of the five Minnesota Veterans Homes with the Minnesota Department of Veterans Affairs, the state continues a long tradition of recognizing the contributions of Veterans. Over the years, the Department of Veterans Affairs and the Minnesota Veterans Homes have existed separately and been combined, depending on the needs of Veterans at that particular time. Whether combined or separate, both entities have always cooperated to provide services to Minnesota Veterans.

Beginnings

The history of Minnesota's Veterans Homes began two decades after the Civil War. As Veterans of that conflict began to age, there was a growing conviction that provisions should be made for those Veterans who, because of wounds, disease, old age or infirmities, were unable to support and care for themselves. The Minnesota Legislature authorized the establishment of the Minnesota Soldiers' Home in 1887 as a "reward to the brave and deserving," and a Board of Trustees was established to manage the facility. A Soldiers Relief Fund was also established that year, which continues today as the State Soldiers Assistance Program. By 1888, construction at the site of the current Minneapolis Veterans Home had begun; and, by 1911, five men's cottages and one women's cottage had been built, along with several support services buildings (infirmary, dining hall, etc.). The Soldiers' Home was operated in a military atmosphere; the head of the facility was appointed as Commandant, and services and discipline were meted out in a quasi- military fashion.

The mission of soldiers' homes, in the nineteenth century, was to create beautiful, landscaped communities for Veterans - havens of rest for Veterans' later years. These homes were not primarily designed to be medical facilities; rather, they were seen as monuments to the contributions of Veterans. In fact, it was not until World War I that medical care was provided in soldiers' homes, and even then it was of secondary consideration.

Minnesota Department of Veterans Affairs established

The Minnesota Department of Veterans Affairs was established by the Minnesota Legislature in 1943 to consolidate and strengthen services provided to Veterans and their families during the height of World War II. As the needs of returning Veterans were recognized, it also became apparent that the needs of Veterans of previous wars were often neglected. The new Department was to consolidate the services and assistance provided to all Veterans and their families. It transferred services and programs previously provided by the Adjutant General, Division of Social Welfare and the Soldiers' Welfare Director. The Minnesota Legislative Manual for 1945 describes the duties of the Department as: "The Department of Veterans' Affairs assists Veterans and their dependents in obtaining federal and state benefits to which they may be entitled; maintains a permanent registry of the graves of all Veterans buried in Minnesota; compiles and maintains service records of all Minnesotans who served in the armed forces of the United States during war periods; administers the laws relating to Indian War Veterans; acts as custodian of all bonus records; administers the laws relating to the burial of Veterans and placing of headstones and markers; administers the laws relating to recreational or rest camps for Veterans; furnishes relief to needy disabled war Veterans and their immediate families; acts as guardian for minor or incompetent persons; and investigates the treatment of Veterans who are confined in any public institution."

Old Soldiers' Home Transformed

The view that Soldiers' homes were rest homes persevered in Minnesota until the 1960s. In 1968, for example, the Minneapolis Soldiers' Home was licensed for 56 nursing care beds and 375 boarding care beds, the latter of which represented primarily custodial (nonmedical) care. By the late 1960s; however, the Soldiers' Home Board of Trustees, along with others, recognized a growing need for making the health care needs of Veterans a primary concern of the Home.

The 1970s began a time of change and growth for the Soldiers' Home. In 1972 and 1980 new nursing care facilities were constructed on the Minneapolis campus. Along with this growth, the Board of Trustees was abolished in 1975 and the administration of the Soldiers' Home became a responsibility of the state Commissioner of Veterans Affairs in an effort to consolidate all matters pertaining to Veterans in one Department. Additionally, in 1978, the old state hospital in Hastings was converted into a domiciliary residence for Veterans.

In 1988, the Legislature reorganized and separated the Veterans Homes from the Department of Veterans Affairs. The Veterans Homes Board of Directors was established, consisting of nine members appointed by the governor. The Board was charged with restructuring the homes along the lines of the medical model of operations and turning them into high quality health care facilities while also taking into consideration the special needs of the Veteran population. All of the facilities have medical directors, directors of nursing, social services, financial and other staff appropriate to the needs and levels of care of their Veteran Residents.

Five Veterans Homes now operate in Minnesota: Fergus Falls, Hastings, Luverne, Minneapolis, and Silver Bay.

Minnesota Veterans Homes merged into Minnesota Department of Veterans Affairs In 2007, the governor abolished the Veterans Home Board and transferred the five Minnesota Veterans Homes once again to the Minnesota Department of Veterans Affairs. This was done to consolidate all state Veterans services and programs in one Department and to improve the services provided to Minnesota Veterans residing in those homes.

Today

The Minnesota Department of Veterans Affairs assists Minnesota's more than 410,000 Veterans and their families to obtain the benefits and services afforded them under state and federal law. Programs offered include, Claims Assistance, Outreach, Tribal Veteran Service Officers, Recently Separated Veterans Program, State Soldiers Assistance Program, State Approving Agency, LinkVet Referral Center, Minnesota Veterans Homes, Minnesota GI Bill, Higher Education Veterans Assistance, Minnesota Veterans Cemeteries, Bronze Star Markers, Minnesota Service C.O.R.E., Military Funeral Honors, Veterans Preference in Employment, and the Women Veterans Program.

Minnesota Veterans Homes Program

In 1968 the Minneapolis Soldiers' Home was licensed for 56 nursing care beds and 375 boarding care beds. Today Minnesota operates five State Veterans Homes. They are located across the state providing 24 hour skilled nursing and dementia care along with domiciliary care.

Minnesota will have 1.6 million people age 65 and over by the year 2030, representing one out of four Minnesotans, compared to one out of eight in 2008. The average age of Veterans in skilled beds is 78.8 and increasing. The Veteran population in Minnesota is estimated at 410,000 and it is anticipated that the number of Veterans 85 years old and older will peak in 2010, and decline gradually through 2025 to current levels. Approximately 25 percent of Minnesota's homeless are Veterans and would qualify for domiciliary care.

Admission criteria for the Minnesota Veterans Homes require a Veteran be honorably discharged from the United States Armed Forces with 181 consecutive days of active duty, and be a Minnesota resident, or had military service credited to Minnesota. Spouses of eligible Veterans over 55 years of age and who reside in Minnesota are also eligible for admission to the Veterans Home. All applicants applying for admission to the Minnesota Veterans Homes must demonstrate medical need prior to approval for admission.

STRATEGIC PLANNING

With the merger of the Minnesota Department of Veterans Affairs and the Veterans Homes Board, the Department recognized the need to develop a strategic plan to help the Department become one and move into the future. The Strategic Plan will act as a roadmap and guide the Department through the many challenges and opportunities over the next five years.

The Department has completed its Strategic Plan which includes a sub plan for the Veterans Homes and Programs and Services (the Department felt it made good business sense to have the Department's Strategic Plan in place prior to starting the Minneapolis plan). The strategic planning process was filled with energy and a strong desire to improve the care and service of Minnesota Veterans. The planning process was divided into phases and was used to solidify the Department and build a strong leadership team with one purpose: caring for Veterans.

In the early stages and development of the Strategic Plan the Department focused its attention on the following:

- How will the Department fulfill the needs of Minnesota Veterans and their families?
- What will our customer look like in five, ten or twenty years?
- How will the Department ensure Resident/Veteran centered care throughout the state?
- What untapped services are available for Minnesota Veterans and how can the Department identify and fill these voids?

MDVA Mission, Vision and Core Values

<u>Mission</u>

Dedicated to serving Minnesota Veterans and their families

<u>Vision</u>

Fulfilling the needs of Minnesota Veterans and their families by providing proven and innovative programs and services to maximize quality of life

Core Values

- V- Veterans first in our hearts, mind and actions
- E- Excellence is our standard
- **T-** Trust through results
- E- Ethics is our cornerstone
- R- Respect for service (past and present)
- A- Advocacy for care and services
- N- Nation Leading services
- **S** Stewardship of resources

The Department developed five strategic goals with accompanying objectives and strategies. The goals and objectives will assist the Department with the smooth delivery of programs, services and care to Minnesota Veterans and their families.

Goal #1:

The Minnesota Department of Veterans Affairs will develop <u>integrated service</u> lines to promote program delivery to the Minnesota Veteran's community.

- A. The Chief Operating Officer will facilitate the conversion of the IT platform to Microsoft to share data and enhance communication by July 1, 2009.
- B. The Senior Director of Programs and Services will facilitate the coordination and integration of all benefits available to Veterans to maximize program utilization by July 1, 2010.

- C. The Financial Officer will develop and maintain a financial structure that supports the delivery of integrated services by July 1, 2008.
- D. The Communications Director will develop an integrated communications process to create a unified voice by October 1, 2008.
- E. The Chief Operating Officer will develop a human resource system to consolidate and integrate human resource management functions to support service lines by July 1, 2009.

Goal #2

The Minnesota Department of Veterans Affairs will ensure <u>financial integrity</u> and viability through the development of an attainable financial base that includes resources supplemental to and independent of state appropriated funds.

Objectives:

- A. The Financial Officer will identify current and potential revenue sources to support program initiatives Department-wide by July 1, 2009.
- B. The Chief Operating Officer will facilitate the cost benefit analysis of any potential revenue source identified in objective 3A to make prudent fiscal decisions to support current and future services by January 1, 2010.
- C. The Financial Officer will ensure generally accepted accounting principles (GAAP) are followed to maintain fiscal integrity by December 1, 2011.
- D. The Financial Officer will implement a streamlined and standardized financial reporting procedure that will provide managers with financial reports to allow them to monitor and evaluate their budgets to make informed decisions by July 1, 2009.
- E. The Financial Officer will analyze purchasing practices and explore opportunities to make the best use of our financial resources and maximize our purchasing power by July 1, 2010.

Goal #3

The Minnesota Department of Veterans Affairs will formalize and implement <u>organizational systems</u> to support Department operations.

- A. The IT Systems Supervisor will analyze and develop a plan to address current and future IT service, system and equipment needs that will best support and improve Department operations by July 1, 2009.
- B. The Chief Operating Officer will develop a Department-wide education needs assessment and training plan to provide learning and development opportunities to recruit and retain the best skilled employees, fostering positive employee relations and decreasing turnover rates by 5% by July 1, 2012.
- C. The Facilities Director will analyze and report on current infrastructure and future growth so the Department is well positioned to meet the needs of those we serve by January 1, 2009.
- D. The Legal Analyst will review and revise rules so we may appropriately administer and provide fair and equitable services to our constituents by July 1, 2013.

E. The Legal Analyst will review and revise Department policies and procedures to ensure legal and consistent business practices by October 1, 2010.

Goal #4

The Minnesota Department of Veterans Affairs will develop strategies to foster employee morale and strong <u>partnerships</u> with stakeholders.

Objectives:

- A. The Communications Director will develop and implement a marketing plan for the Department to:
 - i. increase awareness of programs and services
 - ii. increase understanding of the Minnesota Department of Veterans Affairs mission
 - iii. garner support from our stakeholders
 - This will be accomplished by June 1, 2010.
- B. The Deputy Commissioners will develop and implement strategies that promote a positive work environment to recruit and retain quality employees and to enhance employee morale by July 1, 2009.
- C. The Department Webmaster will develop a secured Department internal website to enhance communication, support staff activities and share knowledge by June 1, 2010.
- D. The Communications Director will implement a Department-wide external information dissemination process to ensure that our stakeholders receive timely and relevant information by June 1, 2009.
- E. The Senior Directors will expand partnership opportunities and utilize external resources to enhance services for Veterans, families and employees by October 1, 2010.

Goal #5

The Minnesota Department of Veterans Affairs will meet the needs of the Veteran's community by providing innovative <u>customer service</u>.

- A. The Communications Director will develop and market a user-friendly one-stop website for our constituency by July 1, 2009 to enhance accessibility and awareness, resulting in a 70 percent level of customer satisfaction.
- B. The Communications Director will formalize a process to identify the needs of Minnesota Veterans and their families to assist the Department with the development of new strategies to address unmet needs by December 1, 2009.
- C. The Senior Director of Veteran Health Care will formalize a process to define quality standards for the Department to assist in providing the highest level of care and services to our stakeholders/clientele/customers/constituents by July 1, 2009.
- D. The Senior Director of Programs and Services will define, streamline and coordinate Veterans services at the community level to ensure the unique needs of individual Veterans and their families are met by July 1, 2009.

E. The Senior Director of Veteran Health Care will define the current and future continuum of care to ensure the Department is prepared to provide program choices to enhance quality of life for Minnesota Veterans and their families by July 1, 2010.

The Minnesota Department of Veterans Affairs is proud of all the hard work represented in the 2008-2013 Strategic Plan. The staff focused a great deal of time, effort and enthusiasm into the construction of this plan to ensure it reflects the current and future needs of Minnesota Veterans. The Department will use the plan to track performance measures, and meet quarterly to discuss and analyze the progress of the goals and objectives. The intent of this tracking and monitoring system is to meet timelines and ensure that the strategic planning remains successful. The Department will revisit this plan annually to make sure the mission and vision of the Department truly reflect the ever-changing world of Veteran care and services.

Minnesota Veterans Homes Program Goals and Objectives

Goal #1

The Veterans Homes Program will provide high quality care and services.

Objectives:

- A. The Director of Quality Assurance for the Central Office will develop and implement a quality improvement plan by July 1, 2009.
- B. The Veterans Homes Administrators will develop standards that define person centered care by May 1, 2009.
- C. The Senior Director of Veteran Health Care will evaluate current needs and direct resources to address behavioral health concerns by October 1, 2009.

Goal #2

The Veterans Homes Program will develop a community relations plan to increase awareness and support of the Minnesota Veterans Homes.

Objectives:

- A. The Legislative Director will develop continuous awareness of legislative issues through training and communications by January 1, 2009.
- B. The Volunteer Coordinators and the Communications Director will develop a marketing campaign by January 1, 2010.

Goal #3

The Veterans Homes Program will ensure fiscal integrity.

- A. The Deputy Commissioner of Veteran Health Care will conduct a feasibility study on Centers for Medicaid Services by September 1, 2009.
- B. The Business Managers and the Finance Officer will identify and recommend alternative funding options by January 1, 2010.

- C. The Administrators will develop a project management system to streamline the use of program funding based on Veterans Homes priorities by July 1, 2009.
- D. The Senior Director of Veteran Health Care will coordinate with the Senior Director of Programs and Services to develop a process to maximize and standardize Veterans benefits by March 1, 2009.
- E. The Administrators and Directors of Nursing will evaluate current pharmacy services and options and make recommendations for future pharmacy services by July 1, 2009.
- F. The Deputy Commissioner of Veteran Health Care and the Senior Director of Veteran Health Care will conduct a feasibility study on future program development by September 1, 2009.

Goal #4

The Veterans Homes Program will develop a comprehensive plan to address human resource needs.

Objectives:

- A. The Staff Development Directors along with the Senior Director of Veteran Health Care, will identify and implement educational standards by July 1, 2011.
- B. The Human Resource Directors will develop facility programs to recruit and retain excellent employees by July 1, 2010.

Goal #5

The Veterans Homes Program will develop a comprehensive risk management program.

Objectives:

- **A.** The Senior Director of Veteran Health Care will coordinate a risk management analysis by October 1, 2009.
- **B.** The Senior Director of Veteran Health Care will coordinate a disaster plan for the Veterans Homes by July 1, 2010.

Goal #6

The Veterans Homes Program will maximize Information Technology tools.

- A. The Administrators, in conjunction with Information Technology staff, will identify the technology needs of the Veterans Homes by October 1, 2009.
- B. The Directors of Nursing in conjunction with the Director of Quality Assurance will fully implement the standardized electronic medical record by July 1, 2012.
- C. The Physical Plant designee, in conjunction with the Facilities Director will fully implement a standardized archibus system by July 1, 2012.
- D. The Administrators in conjunction with the Information Technology Supervisor will incrementally implement Health Insurance Portability Accountability Act (HIPAA) privacy and security rules to the Homes by October 1, 2010.

Minneapolis Veterans Homes

The Minneapolis Veterans Home is one part of the big picture of the Minnesota Department of Veterans Affairs, and the Home is currently working on their Strategic Plan. All preliminary work regarding the Minneapolis Veterans Home's strategic plan was completed by the Minneapolis staff.

Mission

Serving those who have served

<u>Vision</u>

A person-centered community of excellence that meets and exceeds the needs of those we serve in an environment of peace and well being

Core Values

- **W=** Willingness to serve in an
- **E** = Environment of person-centered care with
- **C** = Compassion
- **A** = Accountability
- **R** = Respect and dignity with
- **E** = Excellence as our standard

Goal #1

Minnesota Veterans Home – Minneapolis will meet and exceed customer expectations by providing quality care and services as a community of excellence.

Objectives:

A. The Quality Director will develop strategies to fulfill regulatory requirements (obtaining improved survey results) by December 31, 2009.

Strategies:

- i. The Quality Director, Staff Development staff and the Leadership Team (Department Directors) will develop a Quality Improvement Plan, which will include training, implementation guidelines and the establishment of benchmarks.
- ii. The Quality Director and the Leadership Team will develop a Survey Readiness Plan, which will include regulatory education and internal quality assessment surveys.
- iii. The Leadership Team will identify "Best Practices" that will be shared with other Minnesota Veterans Homes.
- **B.** The Leadership Team will develop strategies to explore the continuum of care by July 31, 2010.

- i. Current care/service models will be reviewed and recommendations will be given to the Minnesota Department of Veterans Affairs. For example:
 - a) Domiciliary care move to another campus

- b) Nursing Care Units expand to include other types of care such as sub acute care
- c) Dementia Care/Services- expand
- ii. The following services will be explored as potential services on campus:
 - a) Adult Day Care
 - b) Assisted Living
 - c) Hospice Services
 - d) Gero-psychiatric Services
 - e) Sub-acute (Transitional Care) Services
 - f) Traumatic Brain Injury Services
 - g) Post Traumatic Stress Disorder Services
 - h) Female Veterans Services
 - i) Clinic(s) including dental, optometry, podiatry, audiology, etc.
 - j) Other
- **C.** The Leadership Team will develop strategies to promote a culture of Person-Centered Care, resulting in improved customer satisfaction survey scores by December 31, 2010.

Strategies:

- i. The MVH-MPLS community will promote a home-like environment based on resident preferences and needs.
- ii. Person-Centered Care Teams (comprised of residents, families and staff) will develop "neighborhoods" for all care areas.
- iii. All residents will receive "I" centered care and services.
- iv. Family and/or significant others will be supported as an integral part of care teams.

Goal #2

Minnesota Veterans Home – Minneapolis will provide effective and efficient services according to Resident needs to ensure fiscal integrity.

Objectives:

A. Administration, Finance and the Leadership Team (Department Directors) will prioritize staffing, Resident and facility needs according to financial projections by April 30 (annually).

- i. Overtime and use of agency (pool) staff will be minimized and/or eliminated.
- ii. Staffing patterns will be determined by Resident care needs/care levels
- iii. Building upgrades, repairs and equipment purchases will be prioritized to meet Resident needs and quality standards.
- B. MVH-MPLS will maximize all revenue sources according to budgeted census, level of Resident care, benefits and staffing patterns (annually).
 Strategies:

- The Admissions Department, Finance and Administration will continue to i. meet regularly to ensure admissions are timely and according to beds availability (ongoing).
- The Finance Department will monitor timely collection of maintenance fees ii. and Veterans Administration per diems (ongoing)
- Social Services staff and Benefits staff will work with Residents/families to iii. ensure benefit maximization is achieved (ongoing)
- Administration and Finance will explore alternative revenue sources and will iv. make recommendations to the Minnesota Department of Veterans Affairs by Iune 30. 2011.
- C. The MVH-MPLS Leadership Team will work with the Central Office and other Minnesota Veterans Homes to consolidate services and increase efficiencies during the next biennium (07/01/09 - 06/30/11).

Strategies:

- Opportunities to be explored to consolidate services (for cost containment i. and ease of service) are:
 - a) Purchasing
 - b) Pharmacy Services
 - c) Medical Services
 - d) Behavioral Services
 - e) Rehabilitation Equipment
 - f) Human Resources
 - g) Dietary Services
 - h) Social Services
 - i) Other
- **D.** Administration and Finance will meet and/or exceed the compliance standards of the Minnesota Office of the Legislative Auditor (ongoing).

Strategies:

- All areas identified in financial audits (i.e. OLA) will be corrected in a timely i. manner.
- The Finance Department will report routine monitoring results to the Quality ii. Assurance/Quality Improvement Committee at least quarterly.

Goal #3

Minnesota Veterans Home – Minneapolis will establish customer service standards of excellence to sustain and improve positive customer relations.

Objectives:

A. MVH-MPLS will develop a Customer Service Plan to improve internal and external relationships by December 01, 2010.

- i. The Leadership Team will develop the components of the Customer Service Plan using tools such as the Pinnacle customer satisfaction surveys, LEAN and Kaizen.
- Human Resources will incorporate the Customer Service Plan ii. components into all position descriptions.

- **B.** The Leadership Team will develop an outreach plan to enhance partnerships and improve "community perceptions" of MVH-MPLS by July 01, 2011. **Strategies:**
 - i. The following areas will be explored:
 - a) Expanding internship programs
 - b) Being a host site for community events
 - c) Developing positive media opportunities, including websites and newsletters.
 - d) Expanding the volunteer program to include corporations and community organizations
 - e) Developing shared educational opportunities (i.e. with families, Community Veterans Services Officers, the VA Medical Center, Aging Services of Minnesota and other long term care facilities)
 - f) Other

Goal #4

Minnesota Veterans Home – Minneapolis, as the employer of choice, will recruit, hire and retain the highest quality workforce.

Objectives:

A. MVH-MPLS will establish and maintain an annual employee stability rate of 80 percent or greater.

Strategies:

- i. Human Resources and the Leadership Team will minimize the timeframe from "vacancy to hire" by December 31, 2009.
 - a) Each Department supervisor will determine "fill time" from "vacancy to hire" for each position filled.
 - b) Human Resources and Department supervisors will identify any barriers to the hiring process.
 - c) The Leadership Team will develop and implement a plan to overcome the barriers.
- **B.** MVH-MPLS will establish and maintain an annual employee turnover rate of 20% or less.

- i. Staff Development and Human Resources will complete an assessment of all employees' current "retention needs" by June 30, 2009.
- ii. MVH-MPLS will contract with Pinnacle to complete employee satisfaction surveys by April 30, 2009.
- iii. MVH-MPLS will establish an ad hoc employee recognition team by June 1, 2009.
- iv. The Employee Recognition Team will make recommendations to the Leadership Team by September 1, 2009.
- v. The Leadership Team will develop an Employee Recognition Plan with an emphasis on employee appreciation by September 30, 2009.

C. MVH-MPLS will provide all employees with education and training to meet the requirements of their position description and to assist them in meeting the needs of Residents.

Strategies:

- i. The Human Resources Director and each supervisor will ensure that each employee has an individual development plan (as part of their annual review). The plans will be submitted to Staff Development upon completion (by April 30 each year).
- ii. The Staff Development Director and Quality Director will use the individual development plan data and regulatory survey data to create the overall MVH-MPLS education plan. The Leadership Team will review and implement the plan.

Goal #5

Minnesota Veterans Home – Minneapolis, will maximize the utilization of technology to enhance the Resident's quality of life.

Objectives:

A. The Leadership team and Information Technology (IT) Department will identify technology needs of MVH-MPLS by July 1, 2012.

Strategies:

The team will:

- i. Fully implement the electronic health record, including "e prescribe"
- ii. Establish a wireless network
- iii. Partner with the Central Office to improve access to VAMC electronic records
- **B.** The Leadership Team will research new technology and identify equipment needs by May 10, 2009 (annually).

Strategies:

- i. All Departments will provide input for area-specific needs, including staff communication tools (i.e. "speak up" program).
- ii. The Team will develop a comprehensive neighborhood strategy related to Resident space and new technology.
- iii. The Team will develop strategies to integrate technology and equipment for current and future buildings.
- **C.** Staff Development, Human Resources and IT will provide staff education and ongoing support for the established programs and systems by December 31, 2010. **Strategies:**

The Team will:

- i. Develop guidelines for use of electronic communication.
- ii. Continue development of online academy training modules to ensure content is specific to MVH-MPLS.
- iii. Create an MVH-MPLS Help Desk.
- **D.** MVH-MPLS and the Minnesota Department of Veterans Affairs will partner to develop and implement technology systems to support operations by April 30, 2009. **Strategies:**

- i. MVH-MPLS will create a technology team, which will be chaired by the Assistant Administrator.
- ii. The Technology Team will develop a proactive plan to identify technology needs and recommendations.

CONSTRUCTION PROJECT PRIORITY LISTING STATUS REPORT

The Department does not have control over the United States Department of Veterans Affairs Construction Grant Priority list. The list is normally funded based on life safety issues and the state's ability to provide a 35% match.

The Department was legislatively directed to keep the Kandiyohi facility on the project priority list. The Department will continue to list Willmar on the bonding list of priorities, as was done in the 2008 session; however, the state has not met the financial requirement or commitment of 35% for the Willmar Veterans Home project. Until the 35% match is provided, the Federal VA will not move the project to a priority one status.

As of October 2008, the following Minnesota projects are listed in the following positions on the Federal VA Construction list:

- 2009 Priority One List
 - (2) Minneapolis Bldg 9 Demo/Construction New Bldg 9
 - (6) Minneapolis Adult Day Healthcare Renovation Bldg 4
 - (12) Hastings Water Replacement
 - (62) Fergus Falls Dementia-Special Care Unit (24 Beds-New)
- 2009 Priority List Two List Seven
 - (109) Minneapolis Kitchen/Dining Room Renovation
 - (113) Minneapolis Phase 2 Renovation
 - (120) Montevideo 90 Bed NHC (New)
 - (132) Willmar 90 Bed NHC (New)

PARTNERING IN DELIVERY OF VETERANS SERVICES REPORT

The Department has gone through the appropriate state contracting process to bid out the two studies to support the 2008 Agriculture and Veterans Policy Bill (Chapter 297, Art. 2, Sec. 24-25).

At the writing of this report, the statewide study contract negotiations were still occurring with the company who was awarded the project.

The seven county metro area and the Minneapolis Veterans Home studies are in progress by Horty Elving and Associates, Inc. The Contractor will conduct a demographic/market study to identify/recommend area community amenities for a successful program delivery to veterans in the metro area. The study shall consider at least the following:

- Area Veteran census totals broken down by age, need for services, or other factors;
- Area demographics, distance to federal Veterans Administration Medical Center (VAMC) or Community Based Outpatient Clinic (CBOC) for medical care;
- Support services: community medical services, hospitals, doctors, nurses, therapists availability;
- Medical employment availability, Registered Nurses, Practical Nurses, Certified Medical Assistants, Human Services Technicians;
- General employment availability;
- Community Involvement and amenities; and
- Recommendation for clientele: medical conditions to be served, including the medical needs of veterans returning from the current conflict.

The contractor is to conduct a study of current and alternative facilities that are, or could in the future, furnish long-term care to Veterans in the Twin City metropolitan area. The contractor will examine the current physical facilities at the Minnesota Veterans Home-Minneapolis in light of the future long term care needs of Veterans in the Twin City metro area. The contractor will conduct specific additional analysis of the projected capital, maintenance, and operating costs of that Home, including an assessment of the feasibility of alternative operational models at that Home or at alternative or additional state veterans home locations within the seven-county metropolitan area.

The contractor must include the likelihood and projected amount of any cost-savings that could result from the demolition or remodeling and conversion of some of the infrastructure of the current campus for alternative uses and other pertinent items, such as:

- construction of rental housing for Veterans and family members of Veterans receiving medical care at the nearby US/VA Medical Center or other nearby medical institutions; and
- conducting a land use study including a highest and best use analysis for the existing site and all improvements investigating opportunities for public/private partnerships in strategic land use.

The contractor will identify and analyze alternative physical facilities for providing long term care.

The contractor will examine the financial, legal, cultural, and historical implications of at least the following possibilities:

- Maintain and /or update existing capacity at the Minnesota Veterans Home-Minneapolis (MVH-MPLS);
- Construct new capacity on the MVH-MPLS campus;
- Discontinue long term care at MVH-MPLS, and devote and develop the property for some other public or private purpose;

- Develop one or more new facilities in the Twin City metropolitan area to provide long term care to Veterans, and identify the geographic area(s) best suited for such expansion; and
- Any other model or models of providing care and services to metro area Veterans.

The guide for this project will follow the Minnesota Department of Administration Pre-Design manual for capital Budget Projects, 4th Edition 2007. The guide is available on-line at the Minnesota Department of Administration, Real Estate and Construction Services website.

CONCLUSION

The Department has undergone significant changes in 2008. With the addition of the Veterans Homes, we are once again responsible for the care, needs and quality of life of Minnesota's aging, elderly veterans. We understand this is a monumental task and an important responsibility that has been added to the Department. The Commissioner and Deputy Commissioner of Veteran Health Care can assure that MDVA staff take this charge seriously and will work tirelessly to ensure the Veterans are treated with dignity and respect. As outlined in the mission, vision and throughout the Strategic Plan, MDVA's focus as a Department and as Veteran advocates is to ensure every Veteran and their family receives or is made aware of the benefits and services they are entitled. We, the Minnesota Department of Veterans Affairs, look forward to the positive changes throughout our system and in particular the success of the Minnesota Veterans Home – Minneapolis.