

**COMMENTS BY DR. LORRIS BETZ REGARDING VA SALT LAKE CITY
HEALTH CARE SYSTEM CARES INITIATIVES
SEPTEMBER 22, 2003**

First, I would like to say “Thank You” to the CARES Commission for giving me the opportunity to speak before you today. My presence here is an indication of the high level of support and commitment that the University of Utah has to the VA Salt Lake City Healthcare System and the critical importance that facility has within our education and training mission.

The VA and the University of Utah have a long history of interdependence in the areas of education, training, and research. For more than 40 years, medical students, interns, residents, and fellows, as well as numerous other allied health professionals have received training through the VA. Last year, 750 residents and other professionals were trained at the VA. Much of the medical training is in specialty care, the area of need addressed by the Salt Lake City CARES initiatives.

The University of Utah strongly supports the CARES initiative as proposed by the VA Salt Lake City Healthcare System. Given the expected increase of over 70,000 stops per year by 2012, the projected need of 68,000 additional square feet of space is ½ of the equation for meeting veterans’ health care needs over the next twenty years. Having this space will permit the development of a “state of the art” setting in which to provide the highly specialized services that are a core component of health care in the 21st century. In this model of health care delivery, procedurally

based care, provided on an outpatient basis, is the norm and continues to increase rapidly. Because of the significant increase in demand for care in this type of setting, meeting veterans' needs will require that VA Salt Lake City's facility be expanded to this degree.

Because the Salt Lake City facility already has much of the ancillary infrastructure in place, it will be easier to expand imaging and laboratory services to support this endeavor. The technologies contained in these services are a necessary part of specialty care provision and must be expanded to keep pace with this greatly increased demand. Strengthening these “economies of scale” that occur from centralized specialty care delivery will assist in keeping costs lower.

However, there is a second part of this equation beyond the “bricks and mortar” solution. The second part of this equation is adequate staffing. Recruiting and retaining quality clinical staff to support this critical mission is something that the University is very interested in seeing occur. Adequate numbers of specialty-trained physicians will increase the quality of services provided to our veterans as well as meet the education and training mission of the VA. Since many of these professionals hold joint appointments at both the VA and the University of Utah, these teachers will impact medical care at both of our facilities. This “win-win” situation will provide significant benefits for both of our institutions.

Increasing the available space and resources for specialty care services will allow VA to adequately meet the needs of veterans in Utah and neighboring states for the next 20 years. These specialty care services are in increasing demand because our veteran population is aging and Utah citizens rank amongst the highest in lifespan.

Because the CARES plan focuses specialty care resources at the VA Salt Lake City Medical Center, education and training will be optimized for our specialty care residents. Residency training will occur in excellent facilities, supported by outstanding teaching faculty and staff. The changes proposed in the Salt Lake City portion of the CARES plan will allow the VA, in partnership with the University, to continue to provide excellence in patient care to our nation's veterans.

*Nursing Shortage in Utah
have more applicant's to schools
pushing
• ↑ funding from State - (Nat. Insts)
Issue is funding*