

# CARES Commission



## Capital Asset Realignment for Enhanced Services

February 2004

REPORT TO THE

SECRETARY OF VETERANS AFFAIRS





Department of Veterans Affairs  
CARES Commission

*February 12, 2004*

*The Honorable Anthony J. Principi  
Secretary of Veterans Affairs  
Washington, DC 20420*

*Dear Mr. Secretary:*

*We are pleased to submit the Capital Asset Realignment for Enhanced Services (CARES) Commission's report for your consideration. This report, in line with our charter, contains recommendations, developed after a thorough review of the Under Secretary for Health's Draft National CARES Plan (DNCP) and after seeking the views of veterans and stakeholders across the country, regarding the realignment and allocation of capital assets necessary to meet the demand for veterans health care services over the next 20 years.*

*Our recommendations will assist you in enhancing access to care for more veterans, while ensuring that the integrity of VA's health care and related missions is maintained, and any adverse impact on VA staff and affected communities is minimized.*

*Guided by your leadership, the Under Secretary, the NCPO and many hundreds of VISN personnel, veterans and stakeholders participated in the most comprehensive assessment ever undertaken by VA to determine the capital infrastructure needed to provide modern health care to VA's current and future enrollees. We also want to take this opportunity to applaud the VA for undertaking this massive effort. The Commission's work could not have been possible without the assistance of those in VA who contributed to the early stages of CARES. The VHA, through its National CARES Program Office (NCPO), took special efforts to inform the Commission, during its early months, of the work and methodology NCPO used to commence this mission. The Commission recognizes and commends the conscientious and comprehensive planning effort that culminated in the August 2003 issuance of the DNCP.*

*The methodology developed for the CARES process will serve as a strategic resource for years to come on managing and realigning capital assets nationwide. In particular, this blueprint, with the refinements brought by the Commission's review, provides the underpinnings for an approach for medical care appropriations to more appropriately be used for providing direct medical care to our nation's veterans, rather than for maintaining outdated or underutilized infrastructure. Moreover, VA, by establishing a sound approach to realigning assets, has moved into a leadership role among the other government agencies confronting similar issues.*

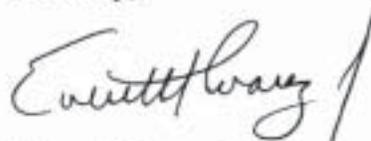
*We conducted 81 site visits to VA and DoD medical facilities and State Nursing Homes, 38 formal public hearings at the 20 VISNs and held monthly meetings since February 2003. These efforts enabled the Commission to develop an appreciation for the challenge that NCPO and the VISNs had faced in applying the model and developing market plans. The time they spent involving veterans and local stakeholders in identifying and gaining understanding for resolutions to the myriad of complex issues confronting VA will continue to be invaluable in the further development of the CARES process. Moreover, their actions provided a sound foundation for the Commission's work. The Commission recognizes that the DNCP proposals they advanced also forms the basis for making significant and far reaching changes in the delivery of health care to our nation's veterans.*

*The decision to evaluate how best to realign VA's capital assets, while initiated in response to concerns raised by the General Accounting Office report on underutilized vacant space (1999) and Congressional expectations that followed, evidences VHA's and VA's recognition of the need for a systematic assessment of future capital needs in relation to current assets. While it would likely result in the need for change, which does not always provide immediate comfort to those affected, it is essential to ensuring that VA can continue to serve the health care needs of those who have served in our military.*

*We believe that our recommendations support the sound objectives of the CARES process and that they will help you to lead VA to a future that will create better access to health care for more veterans across the country. The recommendations are divided into two main categories. The first sets, found in Chapters 3 and 4, provide the Commission's response to crosscutting and national issues. The second set of recommendations focus on the individual VISNs. Taken together, they provide a strategic approach to respond to the impact of capital assets on the health care needs of our veterans and provide a resource for the continued implementation of CARES.*

*Throughout the Commission's work, we were assisted by a group of dedicated staff who were tireless in supporting every aspect of the Commission's agenda. We thank you for the confidence you have shown in choosing us to undertake this mission. We appreciate the continuing support you have given to our efforts to further the goals of the CARES process.*

Sincerely,



Everett Alvarez, Jr.  
Chairman  
CARES Commission

CARES Commission  
(Capital Asset Realignment for Enhanced Services)

*Submitted  
to  
The Secretary  
Department of Veterans Affairs  
this  
February 2004*

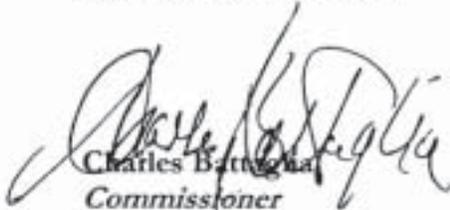
*Approved by:*



The Honorable Everett Alvarez, Jr.  
*Commission Chairman*



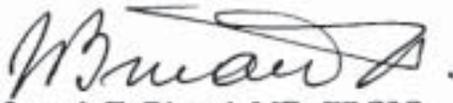
The Honorable Raymond John Vogel  
*Commission Vice Chairman*



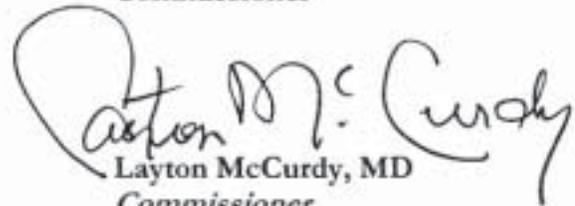
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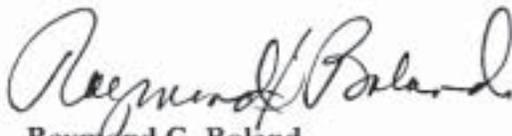
Richard McCormick, PhD  
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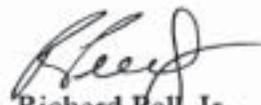
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*Commissioner*



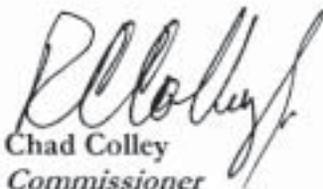
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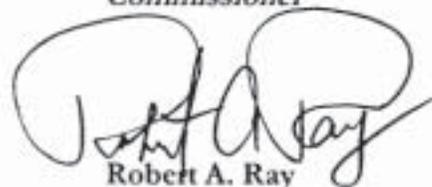
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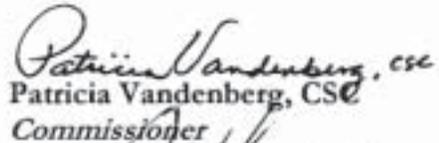
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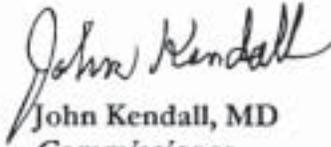
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Vernice Ferguson, RN, MA, FAAN, FRCN  
*Commissioner*



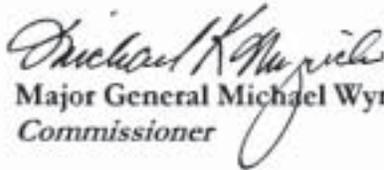
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*Commissioner*



John Kendall, MD  
*Commissioner*



The Honorable J. Krukar Webb  
*Commissioner*



Major General Michael Wyrick, USAF (Ret)  
*Commissioner*



Al Zamberlan, FACHE  
*Commissioner*

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