

provider in the community, the distance to another VHA facility, and innovative consolidations.

Closure of Acute Hospital Beds

Eight medical centers were recommended for closure of acute hospital beds over the next several years. One facility's acute bed closure would occur as a transition. In Altoona, the transition would occur after 2012, when beds are expected to decline much further. Knoxville's acute and

long-term beds would be closed through a consolidation of Knoxville with Des Moines, which is a distance of 44 miles. The majority of these facilities are proposing to provide inpatient care through a combination of referrals to another VA medical center and community hospital(s). The intention of the acute bed closures is to keep access local, maintain customer satisfaction through better access, and improve cost efficiencies and patient outcomes.

Other

In addition, Big Spring, Texas (VISN 18) will close inpatient surgery. Big Spring will be reviewed as a realignment issue and studied for the possibility of no longer providing health care services on the Big Spring campus. Development of a Critical Access Hospital, that would include a plan for a nursing home and expansion of an existing clinic to a multi-specialty outpatient clinic, will be explored for the Odessa-Midland area.

TABLE 8.2.—SMALL FACILITY RECOMMENDATIONS

Facility	VISN	Retain acute beds *	Convert to 'CAH-like' model	Contract and/or refer	Decrease and/or re-view surgery	Close or re-view ICU beds	Comments
Hudson Valley Castle Point.	3	Y	Y	.....	N/A	N/A	Enhanced Use at Montrose. Castle Point retains beds. Convert to CAH.
Erie	4	Y	N	.....	Y	Y	Convert inpt to outpt. surgery w/ (with) surgery observation (obs.) beds. Eval. ICU.
Beckley	6	Y	Y	.....	Y	Y	Convert inpt to outpt surgery w/ obs. beds; convert to CAH. Close ICU beds.
Dublin	7	Y	N	.....	Y	Y	Transition inpt surg. to outpt w/ obs. beds. Eval. ICU beds.
Poplar Bluff	15	Y	Y	.....	N/A	N/A	Functioning as CAH at present.
Muskogee	16	Y	N	.....	Y	Y	Convert inpt to ambulatory surgery w/surg. observation (obs.) beds. Eval. ICU. Eval. Psych. bed expansion.
Prescott	18	Y	N	.....	N/A	N/A	Bed expansion to lessen demand pressure on Phoenix.
Cheyenne	19	Y	Y	.....	Y	Y	Convert to CAH, close ICU and continue surgery but w/limited scope of practice.
Grand Junction	19	Y	Y	.....	Y	Y	Convert to CAH, close ICU and continue surgery but w/limited scope of practice.
Des Moines	23	Y	N	.....	Y	Y	Move acute beds from Knoxville to Moines Des Moines. Eval. ICU & for reduced scope of surgical practice.
Hot Springs	23	Y	Y	Y	N/A	N/A	Convert to CAH; decreased beds w/increased contract/referral.
Altoona	4	Transition	Y	Y	N/A	Y	Implement closure of acute beds by 2012; interim, convert to CAH.
Butler	4	N	N/A	Y	N/A	N/A	Transfer medicine services to Pittsb. & contract emergency care.
Fort Wayne	11	N	N/A	Y	N/A	N/A	Acute medicine would close by contracting and transferring to other VAMCs.
Saginaw	11	N	N/A	Y	N/A	N/A	Acute medicine would close by contracting and transferring to other VAMCs.
Kerrville	17	N	N	Y	N/A	N/A	Implement in coordination with San Antonio capacity; in interim, convert to CAH.
Walla Walla	20	N	N/A	Y	N/A	N/A	Contracted beds only.
Knoxville	23	N	N/A	N	N/A	N/A	Consolidate with Des Moines.
St. Cloud	23	N**	N/A	Y	N/A	.....	Transfer medicine services to Minneapolis & contract.
Total "Yes" .....	.....	11	7	8	7	8	