

VA task force's findings summarized

Draft findings of the VA New Hampshire Vision 2025 Task Force:

- Use of partnerships and relationships to deliver inpatient surgical care for veterans. "In-patient hospital services can and should be provided to veterans in New Hampshire, but construction of an in-patient hospital is not the best way to deliver these services."

- Development of a "group practice" model between the VA Medical Centers in Manchester and White River Junction, Vt. Under the model, VA providers could work at both sites as well as Community Based Outpatient Clinics. It would also expand the White River Junction facility's affiliation with the Geisel School of Medicine at Dartmouth. Ambulatory surgeries would take place in Manchester, complex surgeries in Vermont.

- An Ambulatory Care Center on-site in Manchester, which would provide a full range of ambulatory surgery, gastrointestinal and pulmonary endoscopy, urology, minor orthopedic procedures, a full spectrum of radiology and imaging, and cataract surgery. One or two new buildings would be needed at the Manchester VA site; "it is unclear to what level the existing structure at Manchester could be updated and refurbished."

- A "VA first" approach to health care that would allow the VA to exercise some control over Veterans Choice. It anticipates the VA at the center of a veteran's care, either through the VA or a community partner. "The task force believes that in all other circumstances, every effort should be made to provide care to veterans at a VA site."

- A centralized, urban-area Community Care Center for veterans in Manchester struggling with mental illness, substance abuse or homelessness. It would be modeled after the Errera Community Care Center in West Haven, Conn., and provide access to everything from primary care to job placement, to showers. The task force estimates that leased space would cost less than \$1 million.

- A single Seacoast location to combine the Somersworth and Portsmouth Community Based Outpatient Clinics. The Dover area seems like the best site, and the task force favors a community partnership with a local facility.

- Expanded tele-health and virtual services. Last year, 45 percent of veterans in rural areas received tele-health services, with licensed practitioners delivering primary care, mental health and some specialty services via telephone.

- Special attention for certain fields of medicine. They include primary care, pain management, mental health, radiology, geriatric care, and sensory and physical rehabilitative services, including a center of excellence for amputees.