

# FY 11–12 Business Plan



## MISSION

Under the direction of the Colorado Department of Human Services, the mission of the Division of State Veterans Nursing Homes is to honor and serve our nation's veterans, their spouses and Gold Star Parents by creating opportunities for meaningful activity, continued growth and feelings of self-worth in resident-centered long-term care and supportive living environments.



**Colorado State Veterans Home  
at Fitzsimons**

**Business Plan:  
Fiscal Year 2011-2012**

# **Executive Summary**

**Colorado State Veterans Home at Fitzsimons**  
**Executive Summary:**  
**Fiscal Year 2011-2012 Business Plan**

Colorado State Veterans Home at Fitzsimons has a well-defined mission of serving the needs of our honored military men and women, their spouses and Gold Star Parents. In the coming year we plan to build upon our previous successes. The facility will continue to expand in care areas, namely by improving services to our residents with dementia as we work to train all staff through our two-day, in-house dementia intensive training class. In addition, we will continue to offer this program to the other State Veteran Homes.

Additional service areas slated for expansion are expected to have positive effects on the short-term, rehabilitative resident. Last year we began a close partnership with Kindred Hospital and our oxygen provider to care for veterans with tracheotomies. Through well thought-out procedures and fine-tuned training, our staff has the resources needed to successfully care for this medically challenged population. Fitzsimons will continue researching additional care areas that are lacking in the community and that are needed by the veteran population. Some of these additional areas include outpatient therapy, adult day services and durable medical equipment.

As we continue to set our sights high to meet the developing needs of the veteran, we will also commit to the following goals:

- Liberalize medication pass times.
- Each neighborhood team will develop community meeting schedule and format.
- 30 percent of staff will be Eden Associates by end of fiscal year.
- Send all of Leadership Team and staff development coordinator to Leadership Culture Change Training.
- 50 percent of staff will complete 2-day in house dementia training by end of fiscal year.
- Leadership Team members to provide on spontaneous activity per month for residents (This can be for as few or as many residents as they want.)
- Create and complete resident video care plans.
- 50 percent of staff members in some manner touch the life of a resident outside the scope of their regular duties.
- Formal leaders will initiate and engage in fun and recognize team efforts to make fun a part of daily life.
- Formal leaders will create healthy relationships by knowing information beyond the name (and job) of the residents, care partners and families and can share a story about each person.
- Families are welcomed as participants in the neighborhood care partner team.
- Residents, families and care partners will work together to create a caring community.
- Residents actively will participate in assisting with neighborhood gatherings.
- Care partners and residents will work together to decide how the physical environment reflects the people who live and work here - beyond resident rooms.

# **Analysis of Strengths, Weaknesses, Opportunities and Threats (SWOT Analysis)**

## FY 11-12 SWOT Analysis

	Strengths	Weaknesses	Opportunities	Threats
<b>Marketing</b>	<p>Well defined marketing strategy for FY 11-12</p> <p>Strong cohesive team</p> <p>Well defined product</p> <p>Successful track record</p> <p>Strong nursing team both rehab and long-term care</p> <p>Above industry average staff-to-resident ratio</p> <p>Strong leadership team</p> <p>Culture change philosophy</p> <p>Eden Registered</p> <p>State-of-the-art facility</p> <p>Outside marketing events</p> <p>Positive relationships with hospital discharge planners</p> <p>Expanded office hours to better serve veteran community</p>	<p>Limited market (veterans, spouses, gold star parent)</p> <p>Minimum veteran percentage</p> <p>Veterans who believe the VA pays for long-term nursing care services</p>	<p>Pre-surgical admits, i.e. orthopedic future scheduled surgeries</p> <p>Processes in place to grow tracheotomy and respiratory programs</p> <p>Market expansion, i.e. northern and southern regions</p> <p>Market to assisted living facilities through advertisement of rehabilitative services</p> <p>Hospital visitation, i.e. monthly schedule</p> <p>Build relationships with hospital discharge planners</p> <p>Explore expansion into additional services to include:</p> <ul style="list-style-type: none"> <li>• Adult day care</li> <li>• Outpatient rehabilitation services</li> </ul> <p>Durable medical equipment provider</p>	<p>Newer facilities with enhanced amenities such as wireless Internet services and private rooms</p> <p>Hospital step down units, sending possible admissions to internal rehab</p> <p>Numerous competitor facilities in local area</p> <p>Payment structure for service-connected veterans</p> <p>Poor economic environment, delaying elective surgeries</p> <p>Medicare changes and lowered reimbursement rates</p>



## FY 11-12 SWOT Analysis

	Strengths	Weaknesses	Opportunities	Threats
<b>Capital construction / renovation</b>	<p>Beautiful facility layout</p> <p>Location of the facility</p> <p>Historical location of the facility</p>	<p>Lack of private rooms</p> <p>Aging building structure</p>	<p>Domiciliary construction</p> <p>New VA Regional Center to provide additional opportunities for generating increased census</p> <p>New medical tower built on the campus for the University Health System (opportunity to attract residents)</p> <p>Upgrades to the facility through flooring, walls and furniture</p> <p>Upgrades to the lighting and water systems to produce energy savings</p> <p>Remodeling the satellite kitchens to include short-order cooking stations</p>	<p>New VA Regional Center to compete for staffing and sub-acute population</p> <p>New medical tower built on the campus for the University Health System (competition for staff)</p>

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Fundraising</b>	Interested family members  Involved veteran community	Lack of educational materials to inform the public of donation opportunities	Communicate donation needs  Celebrate donations and successes  Reach out to veteran community for donations	Multiple veteran organizations seeking financial and other assistance



## FY 11-12 SWOT Analysis

	Strengths	Weaknesses	Opportunities	Threats
<b>Culture change</b>	<p>In-house Eden Associate training provided by Fitzsimons Eden certified trainers</p> <p>Eden Associate Training included in new employee orientation</p> <p>100% of leadership and management are Eden certified</p> <p>100% of leadership team is trained in Eden leadership principles</p> <p>Consistent staffing on all neighborhoods</p> <p>Variety of meal choices</p> <p>Blue Plate Diner</p> <p>Resident-directed care</p> <p>Choices related to care</p> <p>Expanded pantry available for neighborhood gatherings</p> <p>Variety of clubs:</p> <ul style="list-style-type: none"> <li>• Cooking club</li> <li>• Huntsman club</li> <li>• Baking club</li> <li>• Crochet club</li> <li>• Anglers Club</li> </ul>	<p>Getting staff buy in to new ideas; staff can be resistant to change</p> <p>Acceptance can be a cumbersome and difficult process</p>	<p>Grow and expand snack program</p> <p>Continue to grow in culture change by listening to residents</p> <p>Greater resident involvement in planning neighborhood events</p> <p>Extend invitation to residents and volunteers to receive three-day Eden certification</p> <p>Expansion of short-order diner style cooking availability to all neighborhoods</p> <p>All staff to become Eden Associates</p>	<p>If not invested in culture change can miss future opportunities</p> <p>The consumer / customer is educated and is shopping for rehab/long-term care facilities</p> <p>Negative staff attitudes may affect culture change progress</p>

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Quality assurance / quality of care</b>	Good survey history  Internal pharmacy  Certified wound nurse on staff  Involved physician staff	Size of the building challenges span of control that can cause systems to break down	Pharmaceuticals to the other SVNHs  Strengthen the fall management program	Environmental and regulatory changes

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Customer satisfaction</b>	<p>Greater than 78% return-to-home rehab success rate</p> <p>Positive customer relationships</p> <p>Positive hospital discharge planner relationships</p> <p>Educational offerings to assisted living facilities and their residents</p> <p>Repeat business</p> <p>Positive staff interactions</p>	<p>Families see Medicare guidelines as facility driven</p> <p>No longer accept Medicaid-pending individuals without securing payment</p>	<p>Positive word of mouth</p> <p>Positive outcomes</p> <p>Resident/family feedback to hospital discharge planners</p> <p>Resident/family feedback to other residents in assisted living facilities regarding Fitzsimons experience</p> <p>Grow Fitzsimons image</p> <p>Positive staff interactions</p> <p>Certified application assistance site for Medicaid applicants</p>	<p>Negative word of mouth</p> <p>Unmet expectations</p> <p>Negative staff interactions can affect customer satisfaction</p>

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Advisory Board activities</b>	<p>Objective, third-party view</p> <p>Actively involved in the affairs of the facility</p> <p>Actively involved in veteran affairs</p> <p>Willingness to become involved to assist the facility</p>	<p>Difficult to recruit new members</p>	<p>Have been invited to participate in dementia and Eden</p> <p>Associate in-house trainings</p> <p>Monthly interdepartmental trainings have been and continue to be provided</p>	<p>Limited pool of replacements for outgoing members</p>

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Staff training</b>	<p>In-house dementia (two-day) training program</p> <p>Provide high-quality educational opportunities</p> <p>Grow staff by supporting their education through internships / externships</p> <p>Monthly nursing / certified nursing assistant (CNA) in-services</p> <p>Yearly competencies for nursing / CNA staff</p> <p>Monthly all staff in-services</p> <p>Monthly computer-based Silver Chair trainings</p> <p>Train-the-trainer opportunities</p>	<p>Limited funds due to economic environment</p> <p>Second hand training, train the trainer</p> <p>Limited out of state travel paid for by facility</p>	<p>Expanding staffing expertise, Colorado Health Care Association (CHCA) "season ticket"</p> <p>Commitment to provide all staff with in-house dementia training</p> <p>Market expansion, new training opportunities, i.e. tracheotomy and respiratory therapy</p>	

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>State and VA surveys</b>	<p>Positive quality improvement survey (QIS) history</p> <p>Good rapport with survey agency</p> <p>Director of nursing services has a high knowledge level regarding survey process</p> <p>New QIS process has removed some subjectivity from the State survey process</p> <p>Good survey outcomes in past several years</p>	<p>Lengthy QIS survey process, which includes numerous interviews with residents, families and staff</p>	<p>To initiate and better understand the QIS survey process</p> <p>To improve and strengthen existing processes</p> <p>To be survey-ready at all times through use of the Abaqis software, which mimics the QIS survey</p> <p>QIS survey process may produce positive resident feedback</p>	<p>Poor survey can negatively affect reputation</p> <p>QIS survey process may reflect negative resident feedback</p> <p>VA and State surveys can occur in close proximity of one another, causing additional stress to staff and residents</p>



## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Pay for performance</b>	Enhanced dining Person-centered care (daily schedules) Neighborhoods/households 80% consistent assignments Living environment Eden Registered Home	Career ladders/career paths	Provide information on career ladders/career paths New employee orientation program expansion to include Eden Associate training	Implementation does not always meet the expectations of staff Potential for lost revenue and reduction of five-star rating from the Centers for Medicare & Medicaid Services (CMS)

## FY 11-12 SWOT Analysis

	<b>Strengths</b>	<b>Weaknesses</b>	<b>Opportunities</b>	<b>Threats</b>
<b>Volunteer services</b>	<p>Volunteer retention and growth</p> <p>Volunteer learning opportunities</p> <p>Positive feedback from residents, families and staff</p> <p>Yearly Volunteer Appreciation Celebration</p>	<p>Volunteers have limited opportunities to get to know one another</p>	<p>Increase volunteer interaction activities</p> <p>Increase volunteer appreciation/recognition throughout the year</p>	<p>Limited fund availability that can be used toward volunteer appreciation</p>

# **Action Plan**

## FY 11-12 Action Plan

### Marketing

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Develop comprehensive marketing plan</b>	Increase community awareness of services offered	Follow the marketing strategy developed	Increase rehab admissions by two on average monthly	Admissions and Marketing Coordinator	Ongoing
<b>Continue to grow team</b>	Employee morale and training programs	Develop programs: to enhance morale in-house training	Improve warmth and satisfaction survey data for customer service by 5%	NHA	6/30/12
<b>Expand into other geographic markets</b>	Develop relationships both North and South of the Denver Metro area and raise awareness of services provided	Develop programs: Follow marketing plan Utilize Marketing Strategy	Increase referrals from all of the hospitals being marketed to during the current fiscal year by one	Admissions and Marketing Coordinator	6/30/12
<b>Build and grow relationships to increase referrals</b>	Introduce Admission Team staff to discharge planners	Expedite admission acceptance process	At least one referral from all of the hospitals being marketed to during the current fiscal year	Admissions and Marketing Coordinator and Clinical Liaison	6/30/12
<b>More community awareness of who we are and what we offer</b>	Through marketing educate target audience on services provided	Pre-market for elective surgeries Increase marketing and product awareness at events	Increase the awareness of admission criteria by attending at least five marketing events	Admissions and Marketing Coordinator	6/30/12
<b>Increase veteran percentage to 83%</b>	Target female veterans to help increase vet percentage while maintaining veteran to spouse ratios	Attend marketing events geared toward female vets	Increase spouse admissions by one per month	Admissions and Marketing Coordinator	6/30/12
<b>Potential residents will be educated and have discharge plans prior to surgery</b>	Develop relationships with orthopedic surgeon groups	Schedule ortho office visits and marketing	Pre-admit two planned orthopedic rehabilitation admissions for the fiscal year	Clinical Nurse Liaison	6/30/12
<b>Build and grow relationships to increase referrals</b>	Introduce Admission Team staff to discharge planners	Develop programs: Network with new software programs, i.e. Curaspan and Allscripts	Increase number of rehab referrals by two on average per month	Admissions and Marketing Coordinator	6/30/12

## FY 11-12 Action Plan

### Marketing

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Continue to market and make community aware of services provided</b>	Develop relationships with Orthopedic Surgeon groups  Develop marketing plan to Assisted Living Facilities (ALFs)	Schedule ALF visitation programs similar to hospital marketing program with social workers	Increased Facility Awareness to five ALFs	Admissions and Marketing Coordinator	6/30/12
<b>Continue to reach out and care for those veterans with a service connection</b>	Actively participate with the National Association of State Veterans Homes (NASVH) to have fee schedule reflect appropriate payments	Thorough cost analysis to ensure continued financial viability  Investigation of any programs that can assist with financial responsibility	Receive appropriate reimbursement for care	NHA/Business Office Manager	Ongoing

## FY 11-12 Action Plan

### Capital construction/renovation

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Keep a positive appearance through an active preventative maintenance program</b>	Maintain internal and external structure	Utilize facility specific software to maintain highest level of functionality	A building with a positive image as expressed by community visitors	Maintenance Team	Ongoing
<b>Construct in 7-10 years an independent living building.</b>	Obtain funding when available	Obtain funding and legislative support	Construction of two new buildings	NHA/CDHS	2020
<b>Obtain grant, create design, and bid out project to improve facility appearance.</b>	To supplement the daily menus and increase food variety achieving a higher level of satisfaction	Grant has been preliminarily approved, once funded work with architect to create design and then bid project	Increase dining satisfaction over current options to all residents as evidenced by a 5% improvement in My InnerView score	NHA/Facility Maintenance Director/CDHS	12/12/11



## FY 11-12 Action Plan

### Fundraising

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
Allow family members the opportunity to participate in gift giving campaigns	Keep family members informed of gift giving opportunities	Advertise within the facility and in the newsletter of the need for specific gifting opportunities	Greater community awareness of opportunities to donate as evidenced by an increase in donations by 5%	NHA	6/30/12
Allow the veteran community to provide gifts to the facility for the benefit of the residents	To provide the residents the opportunity to receive meaningful gifts from donors	Allow for gift giving opportunities	Greater community awareness of opportunities to donate as evidenced by an increase in donations by 5%	NHA	6/30/12
Inform donors of the potential and rewards for donating to Fitzsimons	To impress upon the community the good will created through donations to Fitzsimons	Continuous advertising of donation possibilities	Greater community awareness of opportunities to donate as evidenced by an increase in donations by 5%	NHA	6/30/12

## FY 11-12 Action Plan

### Culture change

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Remaining staff to become Eden Associates</b>	Educate staff on what it means to have resident directed care	Offering Eden Associate training to all new hires and monthly to staff	A 10% growth of culture change activities in the building	Volunteer Coordinator	6/30/12
<b>Continue to involve residents in care and choices and staff consistently</b>	Educate residents that they drive/direct their care	Social Services educates and informs residents about culture change	Improve warmth and satisfaction survey data for customer service by 5%	Directors of Nursing Services & Social Services	6/30/12
<b>Educate staff of the effect on residents</b>	Show staff how this enhances resident lives	Continued education 3 day associate training	Train 30% of staff as Eden Associates by the end of the fiscal year.	Volunteer Coordinator	6/30/12
<b>Create a culture change pantry with a variety of foods available for impromptu neighborhood get together</b>	To provide additional choices	Purchase variety of items for pantry  Expand pantry  Purchase necessary supplies and equipment	A growth of 10% additional spontaneous activities in the neighborhoods	Neighborhood team leaders	6/30/12
<b>Meet the residents individual preferences</b>	Give residents alternatives in their day like they would have if living at home	C.N.A. involvement  Query residents about choices	Increased resident satisfaction of 5% as seen in the resident survey on Abaqis software	Snack Team	6/30/12
<b>Educate volunteers of the effect on residents</b>	Show volunteers how this enhances resident lives	3 day associate training	5-10% of volunteer corps will receive training	Volunteer Coordinator	6/30/12
<b>Work on Eden Milestone # 2</b>	Educate staff on what it means to have resident directed care	Follow Eden program	Transformation away from the "Medical Model of Care" by maintaining a home like appearance	NHA/Leadership	Ongoing

## FY 11-12 Action Plan

### Quality Assurance/Quality of Care

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Better than average care results</b>	Improve quality of wound care services	Continuation of training for the certified wound care nurse	Provide an in-house wound care program that exceeds industry standards by providing regimented wound rounding assessments on all residents requiring this level of care	Director of Nursing Services	6/30/12
<b>Maintain a viable pharmacy operation</b>	To provide timely service and in-house consulting to staff	Provide outstanding customer service	In-house pharmacy will assist with a 5% reduction in medication errors	Pharmacy manager	6/30/12
<b>Improve communication and staff education in quality of care</b>	To assure that system breakdowns are discovered in a timely manner	Routinely scheduled quality assurance meetings and staff in-services	Reduce negative outcomes by 5%, e.g. area of falls	Leadership	6/30/12
<b>Reduce falls to an acceptable level based on industry averages</b>	Put practices into place that help to protect residents by minimizing number of falls experienced	Categorize, track, and trend types of falls Prepare viable solutions for perpetual fallers	A 5% yearly reduction in the number of falls occurring in the facility as evidenced by My InnerView data	Fall Management Committee	6/30/12
<b>Maintain or increase the percentage of residents who are prescribed anti-psychotic medications</b>	Minimize health risks to residents that can be caused by the use of anti-psychotic medication	Identify and monitor the percentage of residents who are prescribed anti-psychotic medications  Put practices into place to maintain or reduce the current percentage of residents who take anti-psychotic medications	Maintenance or increase in the percentage of residents without anti-psychotic medications, as reflected in My InnerView quality metric data	Director of Nursing	Monthly

## FY 11-12 Action Plan

### Quality Assurance/Quality of Care

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Maintain resident health and nutrition</b>	Maintain healthy weights for residents	Incorporate weight-related goals into all resident care plans  Monitor resident weights each month; implement appropriate actions to increase or decrease weight as appropriate	Maintenance or improvement of current percentage of resident without unplanned weight loss or gain, as reflected in My InnerView quality metric data	Director of Nursing	Monthly

## FY 11-12 Action Plan

### Customer satisfaction

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Continue to have positive results with residents and families</b>	Provide excellent customer service in all areas of care from Admission to discharge	Social Services to educate and inform residents about culture change and to create and utilize internal resident surveys	Facility will have a 5% reduction in resident and family concerns	All staff	6/30/12
<b>Always exceed customer expectations</b>	Go that extra step in customer service and strive for excellence	Interdepartmental communication to ensure best outcomes	Positive surveys to improve CMS's Nursing Home Compare star rating by one star	Leadership Team	6/30/12
<b>Exceed customer expectations</b>	Go that extra step in customer service and strive for excellence	Interdepartmental processes to ensure best outcomes	Facility will have a 5% reduction in resident and family concerns	All staff	6/30/12
<b>Improve Communication</b>	Leave no questions unanswered	Listen to resident/family member	Facility will have a 5% reduction in resident and family concerns	All staff	6/30/12
<b>Meet the needs of residents and families</b>	Attempt to meet expectations	Seek out complainant and attempt to fix	Improved results in "Satisfaction and Warmth" surveys by 5% over the past year	All staff/Affected Department	6/30/12

## FY 11-12 Action Plan

### Stakeholder and advisory board activities

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Increase board membership interest</b>	To recruit more interested parties to serve on the Board	Encourage potential members to join at appropriate forums such as United Veterans Committee (UVC)	To attract at least one more veteran to join the Advisory Board	NHA/Advisory Board	6/30/12
<b>Education of Board members and provide a better understanding of dementia</b>	The members will have a better understanding of the needs of Fitzsimons	Continue to invite members to scheduled trainings	Invite Board members to 100% of related trainings (e.g. Dementia and Eden Associate)	NHA/Dementia Training Team	Ongoing
<b>Education of Board members regarding the wide range of care provided at Fitzsimons</b>	Through knowledge the members will have a better understanding of the needs of Fitzsimons	Continue to schedule interdepartmental trainings for monthly Advisory meetings	Have at least four guest speakers at the Advisory Board meetings	NHA/Department Leaders	6/30/12



## FY 11-12 Action Plan

### Staff training

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>Better care due to a better understanding of whom we serve</b>	Increased staff awareness	Schedule and coordinate staff attendance	Have 80% of staff complete dementia training	Dementia Training Team	6/30/12
<b>Expanded Learning Opportunities</b>	Seek additional training opportunities	Train the trainer	Every staff member will attend either Dementia Training or Eden Associate Training	Staff Development Coordinator	Ongoing
<b>Continuing education in an educational lab type setting</b>	Surpass the VA requirements in this training requirement	Prepare innovative training programs to stimulate interest	Well prepared staff functioning at an above average level within the industry	Staff Development Coordinator	Yearly
<b>A higher quality of care for residents at this facility</b>	In-house dementia training and Eden Associate Training with the focus to educate staff on what it means to have resident directed care	Develop programming: 2-day in-house dementia training 3 day Eden Associate training	80% of staff will receive dementia training. 30% of staff will receive Eden Associate Training	Dementia Training Team, Staff Development Coordinator, and Volunteer Coordinator	6/30/12

## FY 11-12 Action Plan

### State & VA Surveys

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>To continue with positive survey outcomes</b>	To be survey ready at all times	Continuous process improvement through strong systems and ongoing audits designed to discover areas which are not performing to the established facility standard	Fewer than the statewide average number of deficient areas on state survey  Maintain or reduce the number of deficiencies received on the previous year's VA survey	PIC Committee	6/30/12
<b>Utilize the Abaqis software to help ensure regulatory compliance</b>	Improve the process through the use of interdisciplinary teams in the capturing of the necessary data	To be survey ready at all times, which will help to ensure that the highest level of service is always being provided at this facility	Fewer than the statewide average number of deficient areas on state survey	Interdisciplinary Team	6/30/12

## FY 11-12 Action Plan

### Pay for Performance

Goals	Objectives	Tasks	Expected outcomes	Responsible individual(s)	Due date / timeline
<b>A higher level of care because staff and residents know one another and build relationships</b>	Because staff care for the same residents, they are better able to understand their needs	Staff have received consistent assignments	Staff will be assigned to neighborhoods on a consistent basis 80% of the time	Nursing Staff Scheduler	Met and continuing
<b>Focus on the needs and desires of a resident regarding their care</b>	Cease to use the medical nursing home model	Educate staff through Eden Associate, Dementia and other relevant training opportunities	100% residents, if able, will set their own daily schedules	Director of Nursing Services and neighborhood staff	Met and continuing
<b>To provide alternate dining opportunities for residents</b>	A variety of choices for residents to choose from, e.g., the blue plate diner, or alternate menu items in neighborhood dining room	To provide alternate choices in the blue plate that include menu changes as the seasons change	Residents will have a greater choice in their dining experience as evidenced by a 5% improvement as reflected on the satisfaction survey	Dining Service Manager and team	Ongoing
<b>To reach the highest attainable score</b>	By reaching the highest level of score the facility is meeting its goals to provide the best care and greatest revenue available	Set benchmarks in all areas of the facility and meet those goals through ongoing audit and review	Positive surveys to improve Center for Medicare & Medicaid Services' (CMS) Nursing Home Compare star rating by one star	NHA/Leadership Team	Ongoing

## FY 11-12 Action Plan

### Volunteer services

<b>Goals</b>	<b>Objectives</b>	<b>Tasks</b>	<b>Expected outcomes</b>	<b>Responsible individual(s)</b>	<b>Due date / timeline</b>
<b>Continue to grow the volunteer ranks</b>	Grow opportunities for volunteer activities	Develop additional volunteer opportunities that are reflective of resident and volunteer interests	Maintain core volunteer group and increase those ranks with new volunteers 10%	Volunteer Coordinator	6/30/12
<b>Create additional programming to introduce volunteers to each other</b>	Volunteers recognizing the depth of their group and commitment to service	Develop opportunities that will bring volunteers together	Maintain core volunteer group and increase those ranks with new volunteers 10%	Volunteer Coordinator	6/30/12
<b>Become partners on culture change journey and encourage cross training</b>	Develop additional volunteer opportunities	Offer Eden training and other trainings as per interest and applicability	Train 5-10% of volunteers as Eden Associates	Volunteer Coordinator	6/30/12

# Caring communities that honor America's heroes!

## KEY STAFF

Brad Honl, Administrator

Mindy Moskowitz, Assistant Administrator

Mary Ann Terry, Director of Nursing

Portia Benjamin, Assistant Director of Nursing

Dr. Jeffrey Wallace, Medical Director

Patti Ott, Staff Development Coordinator, RN,  
Infection Control Nurse

Jan Conner, Restorative Nurse

Gerri Ventura, Admissions and Marketing  
Coordinator

Carrie Hsu, Business Office Manager

Don Kessinger, Food Service Manager

Nancy McCullough, Social Service Director

Loretta Santistevens, Director of Environmental  
Services

Annette Ternes, Director of Health Information  
Management

Ray Fetherman, Director of Facility Services

Jeane Johnson, Director of Pharmacy Operations

Vanessa Carlson, Volunteer Coordinator

Melissa Blair-O'Shaughnessy, Director of  
Recreation Therapy

## COLORADO STATE VETERANS HOME AT FITZSIMONS

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Our vision is that residents experience compassion, dignity and companionship in communities filled with life, love and laughter.

Colorado's State and Veteran Nursing Homes are operated as self-funded enterprises by the Colorado Department of Human Services (CDHS). CDHS oversees Colorado's 64-county departments of social/human services, public mental health system, system of services for people with disabilities, juvenile corrections system, vocational rehabilitation system and all state and veterans nursing homes, through more than 5,000 employees and thousands of community-based service providers.

