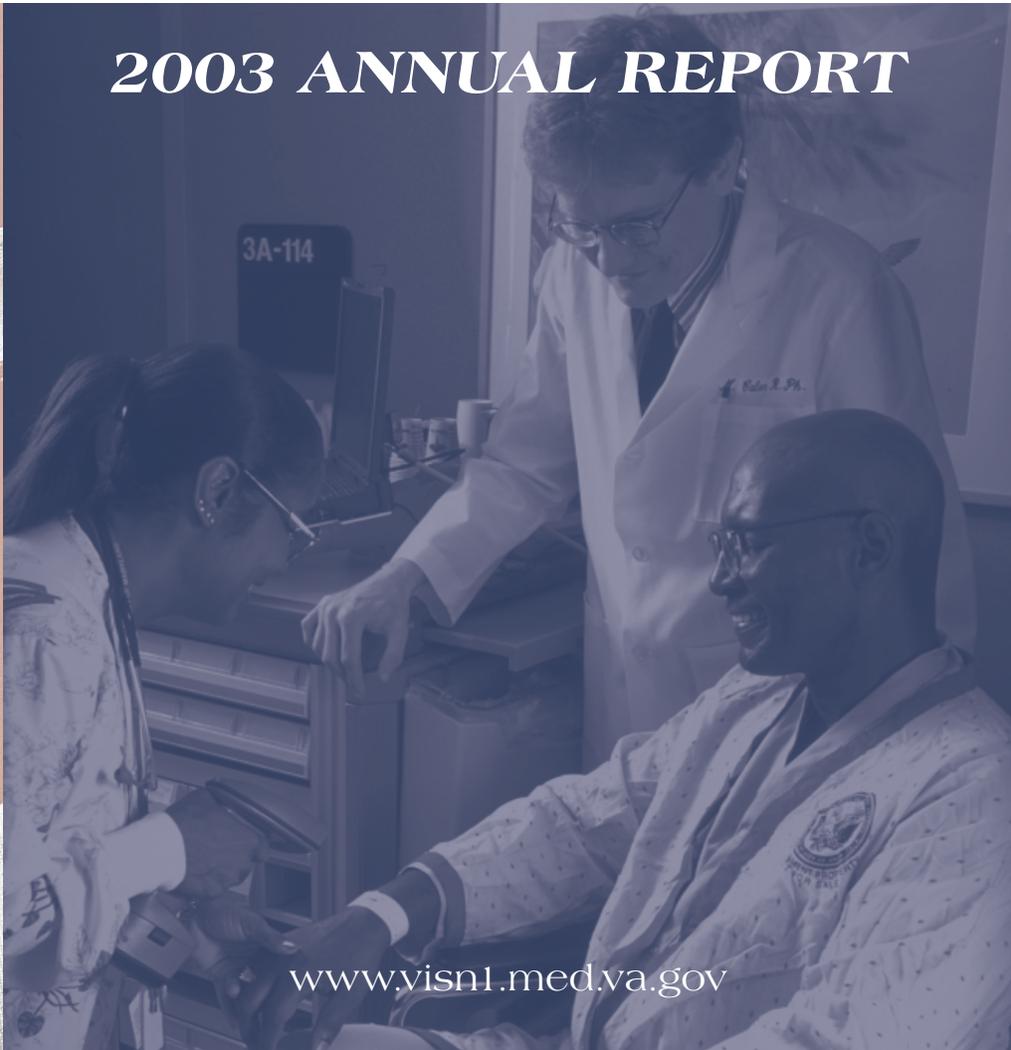


VA NEW ENGLAND HEALTHCARE SYSTEM (VISN 1)



2003 ANNUAL REPORT



www.visn1.med.va.gov

Letter from the Network Director



On behalf of the 9,000 dedicated staff of the VA New England Healthcare System (Network 1), I am pleased to present to you our Annual Report for FY2003. In Network 1 we are proud of the many accomplishments that demonstrate our commitment to our mission of providing the veterans of New England excellence in health care, education and research. These accomplishments were achieved through a comprehensive, integrated health care delivery system so that veterans receive timely, compassionate, high quality care along a seamless continuum based in primary care.

Network 1 achieved significant successes in FY2003, including:

- outstanding customer satisfaction results
- ranking third among Networks on performance measure outcomes
- JCAHO accreditation scores above the national average
- progressive patient safety programs
- outstanding health information systems

As impressive as these accomplishments are, we must continue to move forward with our planning efforts and establish new priorities and accomplishments. Some of the VHA goals established for 2004 include: continuing to ensure that returning service members and veterans receive the highest quality, timely care; working closely with the Department of Defense; advancing care through telehealth initiatives; ensuring that our research programs are models of quality and safety; and continuing to increase our rate of insurance collections.

These goals are related to the Under Secretary's 30 strategies in VHA's strategic plan, VHA Vision 2020. Our goal is to make sure that we move the Network in the right direction by aligning our strategies and supporting initiatives with VHA and VA goals and objectives.

Our Network's strategic priorities for FY2004 are to achieve excellence in care coordination, integrate the specialty and acute care service line and maintain our fiscal solvency. We are committed to these strategies through a number of objectives that will require the active participation of all our employees.

The compassionate employees of the Network remain committed to our mission, knowing we have made a difference in the lives of 229,000 veterans. We remain ready to meet the challenges of 2004.



Jeannette Chirico-Post, MD
Network Director

our mission

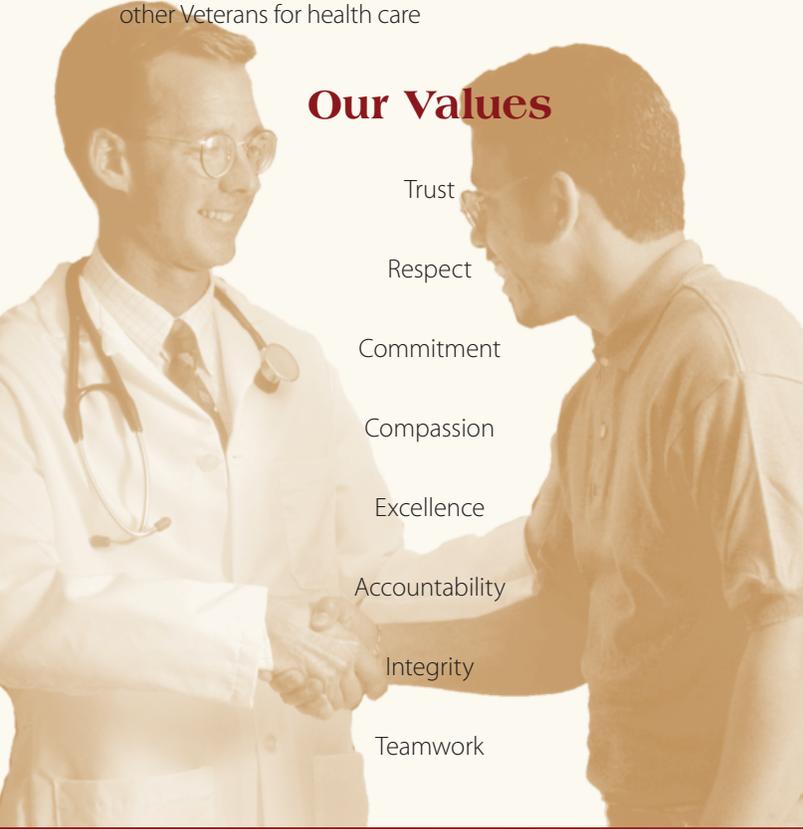
Our Mission

To improve the health of Veterans through Clinical Care, Education and Research

Our Vision

- Strive to exceed veterans' expectations by providing the right care at the right place at the right time
- Support employee development to ensure a work force that will meet the challenges ahead
- Seek to be recognized as a leader in the health care Community
- Create innovative ways to deliver health care
- And not to yield, until we are recognized as the health care provider of choice by Veterans, who then recommend us to other Veterans for health care

Our Values



Trust
Respect
Commitment
Compassion
Excellence
Accountability
Integrity
Teamwork

Guiding Principles

The Network's six strategic vision elements and seven key drivers guide our individual and organizational efforts to improve the integrated delivery system and ensure the right care, at the right time, in the right location for the veterans we are honored to serve:

Strategic Vision

Clinical Excellence

Education Excellence

Research Excellence

Employee Development

Financial Excellence

Managing for Excellence

Key Drivers

Provide Improving Clinical Care
Provide Improving Patient Satisfaction

Highly trained medical students and residents and other health care trainees

Advance knowledge for the care of veterans

Well qualified and satisfied staff

Cost and Revenue

Agile and Timely Decision-Making



Network 1

The VA New England Healthcare System (Network 1) includes eight VA Medical Centers and 38 Community Based Outpatient Clinics located throughout the six New England states—Maine, New Hampshire, Vermont, Massachusetts, Rhode Island and Connecticut.



★ MEDICAL CENTER

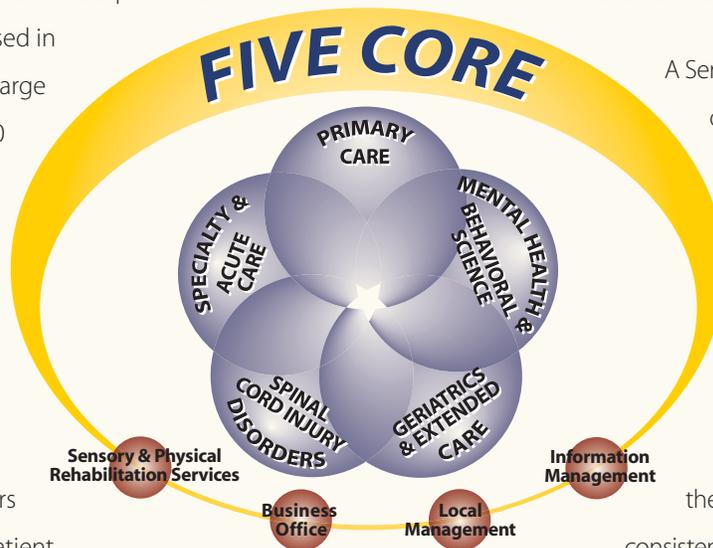
■ COMMUNITY BASED OUTPATIENT CLINIC (CBOC)

Who We Are

The VA New England Healthcare System (Network 1) is an integrated health care delivery system that provides comprehensive, high quality, innovative care, in a compassionate manner to all the veterans it serves. Care is provided along a seamless continuum based in primary care. New England is a large geographic area covering 70,000 square miles that spans the full spectrum of socioeconomic conditions from dense, urban centers to sparsely populated rural areas.

The New England Network includes eight VA Medical Centers and 38 Community Based Outpatient Clinics located throughout the six New England states—Maine, New Hampshire, Vermont, Massachusetts, Rhode Island and Connecticut. Network 1 has improved access to care such

that we have health care delivery sites within 30 miles of 97% of the veterans served in New England. The VA New England Healthcare System Network Office is located on the campus of the VA Medical Center, Bedford, Massachusetts.



A Service Line approach to health care delivery is utilized and organized around broad categories of care: primary care, specialty and acute care, mental health care, spinal cord injury care and geriatrics and extended care. These programs are horizontally integrated across the Network to enhance the quality of care by developing consistent standards of care and benchmarks.

Coordination of care among facilities allows patients to move through a system of referrals for needed care, in order to access the highest quality providers for their specialized need.

Who We Serve

The VA New England Healthcare System's mission is to improve the health of veterans through clinical care, education and research. Of the 1,275,930 veterans residing in New England, Network 1 treated approximately 18% of the veteran population in FY2003. Network 1 serves 229,000 veterans with a total budget of over \$ 1.2 billion. Medical centers currently operate 1,915 inpatient beds for acute medical/surgical, mental health, nursing home and domiciliary care. Annually, the Network has 26,000 admissions and over 2.2 million outpatient visits.

The primary goal for the VA New England Healthcare System is to ensure access for all enrolled veterans to the right care, at the right time, at the right place, at the right cost and of the highest quality. The VA New England Healthcare System continuously strives to improve access, quality, patient satisfaction and wellness to better serve the veterans of New England.

clinical excellence

Access

- Significantly reduced wait times for initial primary care appointments through advanced clinic access initiatives
- Wait times per provider are 20 minutes or less
- Lowered the average waiting time for specialty clinics for audiology, cardiology, eye care, orthopedics and urology. This includes a 12-day decrease in eye care average waiting time and a 10-day decrease in audiology wait times
- Selected to train other VISNs in home telehealth
- Received funding to participate in a multi-VISN home telehealth and care coordination project
- Spinal Cord Injury & Disability (SCI/D) experts available for consultation across the Network through telehealth services
- Expanded home and community-based services
- Expanded home based primary care services
- Palliative Care Consultation Teams initiated at each medical center
- Lithotripsy services initiated to eliminate the need for patients to travel outside the Network
- Dysphasia Team activated at VA Bedford to enhance speech/language services
- PTSD Residential Rehabilitation Program at VA Connecticut provides psychosocial rehabilitation, focusing on patient strengths and improving functional status
- Implemented cardiac care plan to assure appropriate and timely services are available across the Network
- Improved patient care delivery and coordination of care through the Veterans Resource Center, a vocational rehabilitation center at VA Providence
- Women Veterans Health Programs in Network 1 ensure that a full range of medical and mental health services are available for women veterans in order to promote their health, welfare and dignity

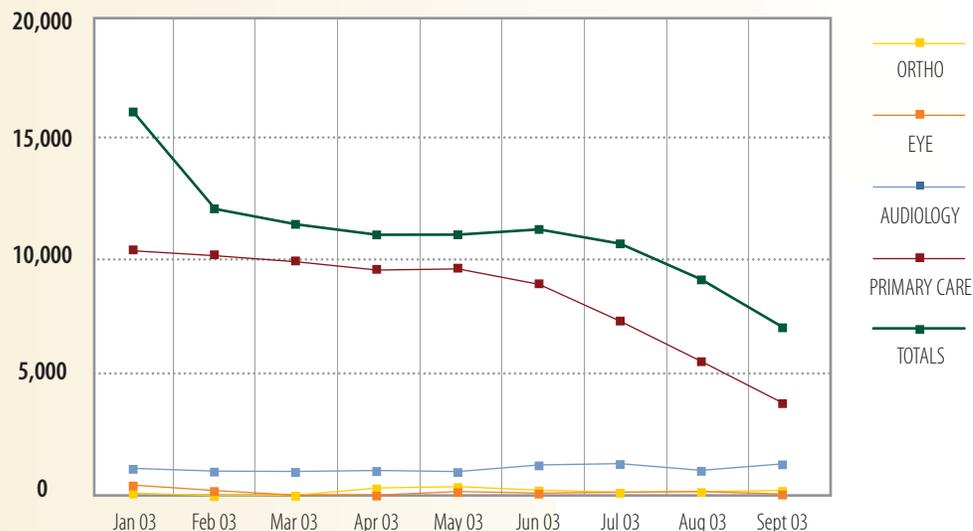
State of the Art Equipment

- Enhanced electronic record to allow providers network-wide access to radiology digital images and EKGs resulting in benefit to patients
- Installed Magnetic Resonance Imaging (MRI) and Angiography suites at West Roxbury campus
- Initiated two new cardiac catheter labs for improved acute myocardial infarction at West Roxbury and West Haven campuses
- Implemented laser delivery system for advanced ophthalmic care at Jamaica Plain campus



Reduced Wait List

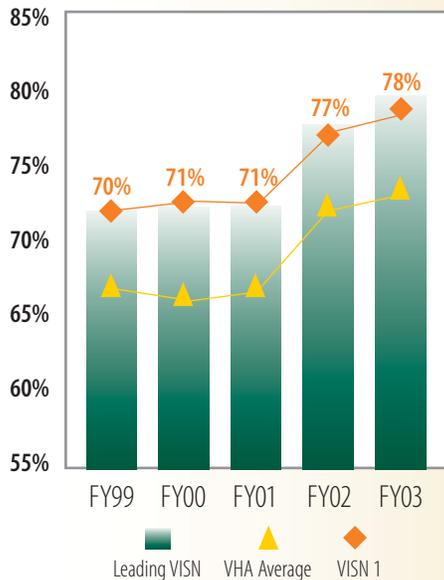
Significantly lowered waiting lists for primary care, audiology, eye care, and orthopedic services through advanced clinic access initiatives



Patient Safety

- Implemented the six JCAHO patient safety goals at all facilities: patient identification, communication among caregivers, high-alert medications, wrong-site surgery, infusion pumps and clinical alarm systems
- Deployed Bar Code Medication Administration system at all facilities to increase efficiency and safety of medication administration
- Utilized computerized mail-out pharmacy (CMOP) services to ensure timely delivery of drugs to patients
- Decreased adverse health care events through voluntary external patient safety reporting
- Implemented highly successful patient falls initiative at VA Northampton
- Center for Learning & Improvement of Patient Safety (CLIPS) site in Network 1

Percentage of Outpatients Rating Quality of VA Care Very Good or Excellent



Patient Satisfaction

- Outpatient satisfaction overall very good or excellent
- Inpatient satisfaction overall very good or excellent
- Led the nation in overall patient satisfaction in SCI/D
- First in the nation to establish SCI/D primary care clinic or support clinic at all non-SCI/D center sites
- 2003 Survey of Healthcare Experiences of Patients (SHEP) inpatient survey results:
 - Network ranked first for coordination of care
 - Network significantly better than the national average in nine categories
 - Network ranked within the top four VISNs in four indicators
- 2003 SHEP outpatient survey results:
 - Network had significantly higher scores in nine standards
 - Network ranked within the top four VISNs in 10 indicators
 - Network ranked second in education and information, emotional support, and overall coordination

Performance

Overall Network Performance

- 75% of performance indicators were at least Fully Successful, ranking third in the nation
- Network 2003 average accreditation scores exceeded national non-VA scores on Joint Commission for Accreditation of Healthcare Organizations (JCAHO)

Primary Care

- Led the nation in patients receiving tobacco counseling
- Led the nation in patients receiving retinal eye exams
- Led the nation in patients with hemoglobin levels below 11

Network 1 shares the number one ranking in:

- colon cancer screening
- pneumococcal immunizations
- patients receiving follow-up testing for positive hepatitis C screening

Network 1 ranked in the top three for performance in:

- cervical cancer screening
- education on prostate cancer screening
- control of hypertension
- use of beta-blockers for post Myocardial Infarction
- cholesterol control post Myocardial Infarction
- blood sugar control in diabetes
- blood pressure control in diabetes
- cholesterol control in diabetes
- screening for Hepatitis C risk factors
- influenza vaccination

- screening for depression
- screening for alcohol problems
- rate of smoking and screening for tobacco use
- satisfaction of established patients with wait times for primary care appointments
- veteran satisfaction with outpatient care

Specialty & Acute Care

- Share number one rank for heart failure patients with left ventricular ejection factor assessed prior to discharge
- Community acquired pneumonia patients having their oxygen assessed within 24 hours of admission

Mental Health & Behavioral Science

- Mental Health Intensive Case Management (MHICM) screening improved by 54%
- Mental health patients receiving tobacco counseling improved by 30%

Spinal Cord Injury & Disability

- Ranked in the top three for performance in:
 - pneumococcal immunization and influenza immunization
 - tobacco cessation counseling

Sensory & Physical Rehabilitation Service

- Waiting time for Audiology Compensation & Pension (C&P) exam < 30 days for all sites

Local Management

- C&P exam processing times at VA Manchester best in the nation
- C&P processing times below national average at all facilities

We maintain compliance with national accreditation organizations

- Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- National Committee for Quality Assurance (NCQA)
- Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC)
- College of American Pathologists (CAP)
- Food and Drug Administration on Blood Bank



education excellence

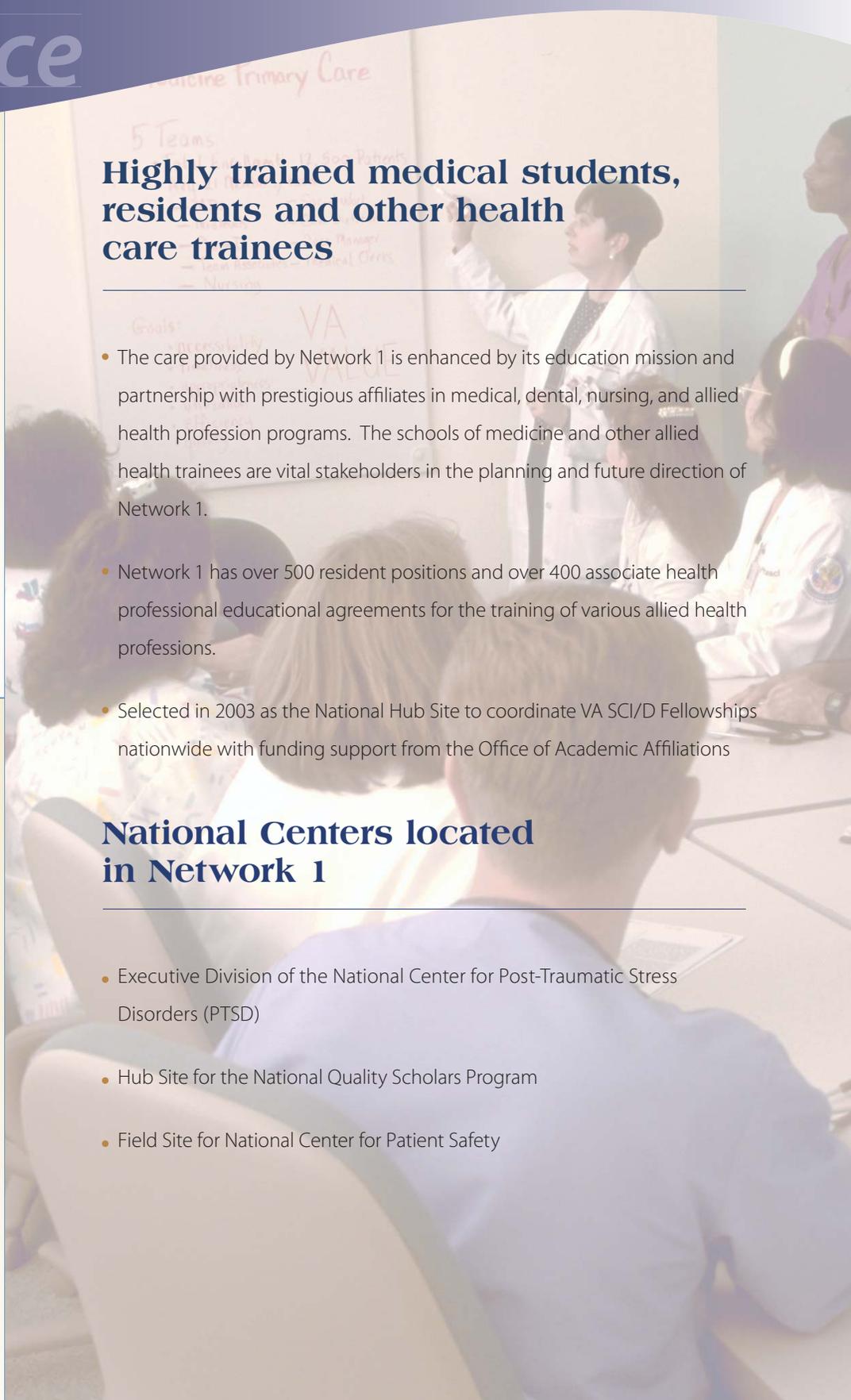
Academic Affiliates

- Boston University School of Medicine
- Brown Medical School
- Dartmouth Medical School
- Harvard Medical School
- Tufts University School of Medicine
- University of Connecticut School of Medicine
- University of Massachusetts School of Medicine
- University of New England School of Osteopathic Medicine
- University of Vermont School of Medicine
- Yale University School of Medicine

Centers of Excellence

The many Network Centers of Excellence are nationally recognized and exemplify the best of VA care. They stand as world-class leaders in their fields:

- Ambulatory Care
- Alzheimer's Care
- Cardiac Surgery
- Compensated Work Therapy (CWT)
- Consolidated Mail-Out Pharmacy (CMOP)
- Eastern Blind Rehabilitation Center
- Mental Health Intensive Case Management (MHICM)
- Post-Traumatic Stress Disorder
- Rehabilitation Research Center
- Renal Dialysis
- Seriously Mentally Ill
- Substance Abuse
- Women Veterans



Highly trained medical students, residents and other health care trainees

- The care provided by Network 1 is enhanced by its education mission and partnership with prestigious affiliates in medical, dental, nursing, and allied health profession programs. The schools of medicine and other allied health trainees are vital stakeholders in the planning and future direction of Network 1.
- Network 1 has over 500 resident positions and over 400 associate health professional educational agreements for the training of various allied health professions.
- Selected in 2003 as the National Hub Site to coordinate VA SCI/D Fellowships nationwide with funding support from the Office of Academic Affiliations

National Centers located in Network 1

- Executive Division of the National Center for Post-Traumatic Stress Disorders (PTSD)
- Hub Site for the National Quality Scholars Program
- Field Site for National Center for Patient Safety

Advance knowledge for care of veterans

Research is a key component of the mission of Network 1. We recognize the critical role of research in providing care to veterans and the need to link research with veteran patient needs. Many researchers in Network 1 have received national prestigious awards for recognition of their research achievements.

Network 1 Research Centers and Programs

- Addictive Behaviors and Psychiatric Disorders
- Aphasia Research Center
- Cancer Prevention and Treatment
- Center for Health Quality, Outcomes, & Economic Research (CHQOER)
- Center for Innovative Visual Rehabilitation Research
- Chronic Obstructive Pulmonary Disorder (COPD)
- Clinical Epidemiology Research Center (CERC)
- Collaborative Study of Ophthalmic Imaging Techniques with the Joslin Clinic
- Cooperative Studies Program Coordinating Center (CSPCC)
- Environmental Hazards Center: Behavioral Neurotoxicology
- Geriatric Research Education & Clinical Center (GRECC)
- Gulf War Illness
- Health Services Research & Development (HSR&D) National Field Office
- HDL Intervention
- Hypertension and Cardiovascular Diseases
- Management Decision and Research Center (MDRC)
- Massachusetts Veterans Epidemiology Research & Information Center (MAVERIC)
- Medical Research
- Memory Disorders Research Center
- Mental Illness Research Education and Clinical Center (MIRECC)
- National Center for Post-Traumatic Stress Disorder (PTSD)
- Northeast Program Evaluation Center (NEPEC)
- Paralyzed Veterans of America/Eastern
- Paralyzed Veterans Association Neuroscience Center
- Prostate Cancer Screening
- Pulmonary Diseases
- Rehabilitation Research
- VA Outcomes Center
- Women's Health Science Center

Network 1 Research Statistics

- VA research funding for Network 1 was over \$34 million for FY03, one of the highest among networks
- Over 350 principal investigators
- Over 1000 research projects

Key research areas include:

- Aging
- Alzheimer's Disease
- Alcoholism/Substance Abuse
- Cancer Research
- Cardiovascular Disease
- Diabetes
- Disease Prevention
- Endocrinology
- Gastrointestinal Disorders
- Health Quality & Outcomes Management
- Heart Surgery
- Hepatitis C & Liver Disease
- Infectious Disease
- Mental Illness
- Neurobiology
- Ophthalmology
- Post-Traumatic Stress Disorder
- Schizophrenia
- Sleep Disorders
- Smoking Cessation
- Spinal Cord Injury
- Surgery
- Telemedicine
- Womens' Health



employee development

Well-qualified, satisfied staff

- Developed Network award program to improve employee recognition as identified through the Employee Satisfaction Survey
- Enhanced incentive award programs to include "on the spot awards" and established a floor of .25% of salary dollars for each medical center awards program
- Network Director communications are enhanced with employees through Web question/answer link and letters to all employees
- Enhanced communications through employee newsletters
- Expanded succession planning and career development programs to enhance staff development and promote continuity of leadership:
 - Leadership Orientation
 - Supervisor Development Program
 - Management Leadership Development Program
 - Executive Leadership Program
 - Orientation to national leadership training programs for Leadership VA (LVA), Executive Career Field (ECF), and Network/Facility Leadership Development (LEAD)
 - Nurse Leadership Academy
 - Coaching and Mentoring Skills
 - 68% of graduates from Network succession planning programs have been promoted or assumed new roles
- Used High Performance Development Model for performance-based interviewing
- Identified need for Human Resource Committee as a major Network committee reporting to the Executive Leadership Board



- Education Center programs awarded national accreditation status by national organizations:
 - The American Nurses Credentialing Center (ANCC)
 - The Accreditation Council for Continuing Medical Education (ACCME)
 - The Accreditation Council for Pharmaceutical Education (ACPE)
- Non-profit Education Corporation
- Redesigned Network 1 Intranet Web site to improve access to information and advance communications
- Provided Web based learning opportunities
- Provided Alternative Dispute Resolution (ADR) programs:
 - 42 trained ADR mediators in Network 1
 - ADR was utilized 45 times during FY2003
 - 60% of mediations resulted in settlement while parties were at the table
- Maintained positive Labor/Management relations



Employees Who Serve

Network 1 is proud to honor the 424 employees who are members of the Reserves and National Guard. During Operation Enduring Freedom and Operation Iraqi Freedom, these employees were called to active duty or stood ready to serve our country.

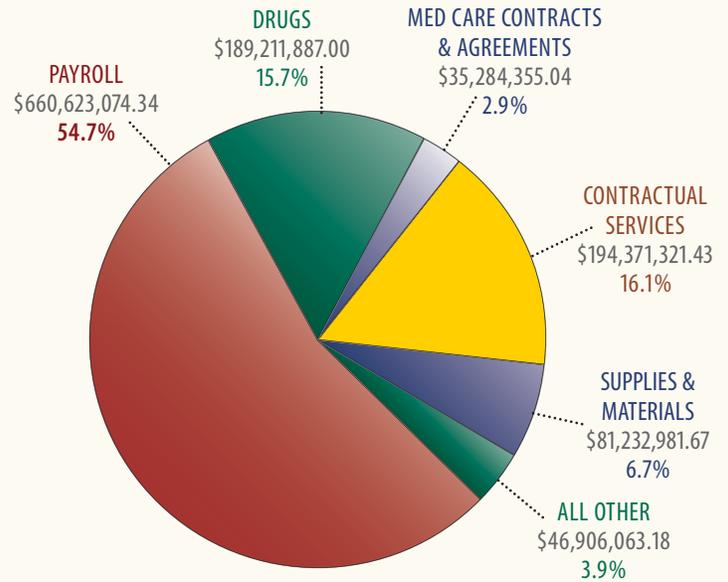
photo courtesy of Army National Guard

Cost and Revenue

- Medical Care Cost Fund (MCCF) collections totaling \$74,328,271
- Opened Network 1 Customer Call Center to provide veterans timely resolution of billing questions
- Successfully met 78% of financial performance measures
- Increased veterans served by 4%
- Total Cost per VA unique increased 3%
- Drug costs per unique increased 8%
- Radiology costs per unique VA patient increased 6%
- Network 1 medical centers recognized with the Deputy Secretary's Award for Financial Efficiency: Bedford, Boston, Connecticut, Manchester, Northampton and White River Junction

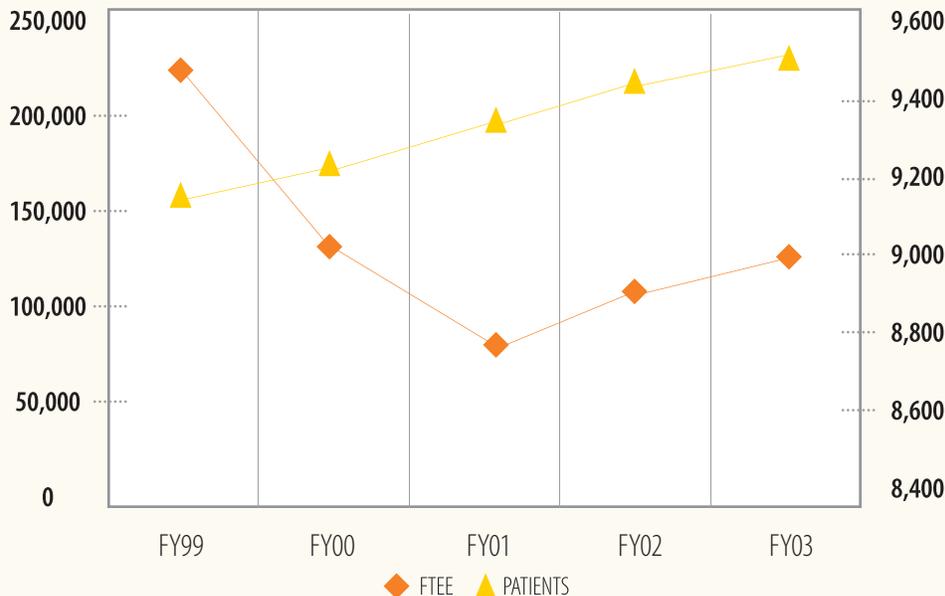
Total Network Allocations FY 2003

\$1,207,629,682.6



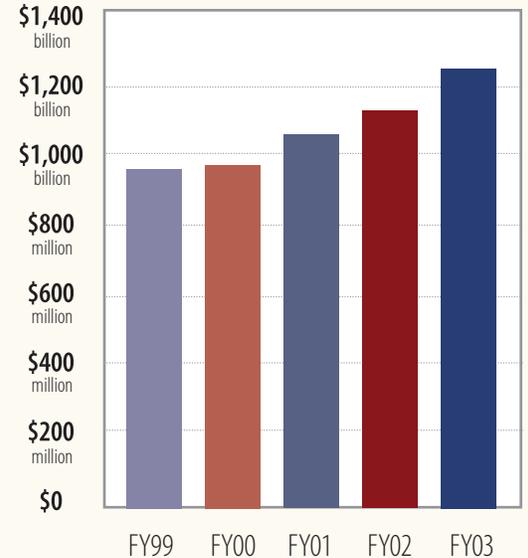
Patients and FTEE FY 1999-2003

Through efficiencies and improved processes, Network 1 is able to treat more veterans with fewer employees



Network 1 Allocations FY 1999-2003

Network 1 is taking care of more veterans; budget allocations have increased



managing for excellence



Agile and Timely Decision-Making

- ★ The Capital Asset Realignment for Enhanced Services (CARES) project was a national VA initiative to provide a comprehensive strategic plan that looked at the entire capital asset inventory. Network 1 developed a comprehensive analysis of the need utilization of all facilities in the Network.
- ★ Conducted leadership conference for Network, medical center and service line leaders to celebrate accomplishments and best practices throughout the Network.
- ★ Adopted the Malcolm Baldrige Health Care Criteria as a framework to drive improvements through the organization and achieve goals. The Baldrige criteria are an internationally recognized standard by which to evaluate organizational performance excellence.
- ★ Secretary of Veterans Affairs Robert W. Carey Award for high quality "Organizational Excellence" awarded to VA White River Junction for the second consecutive year.
- ★ 2003 Governor's Performance Excellence Award presented to VA White River Junction.
- ★ Energy Star Award presented to VA Boston Healthcare System and VA Connecticut Healthcare System by the Environmental Protection Agency and the Department of Energy, for energy performance in the top 25 percent of their peers.
- ★ VHA Innovations in Nursing Practice Award presented to VA White River Junction for the Vermont Community Diabetes Collaborative.
- ★ 2003 Under Secretary's Excellence in Public Affairs Award Program recognized the Network's Veterans Healthy Living patient newsletter with a first place award for external publications.

community

Community Partnerships and Events

- ★ 17th National Veterans Golden Age Games—hosted by the Togus VAMC and co-sponsored by the Department of Veterans Affairs and the Veterans of Foreign Wars. Approximately 500 veterans from 27 states competed in events at the University of Maine at Orono on Aug. 7-12, 2003.
- ★ 6th Annual Winter Sports Clinic for Disabled Veterans—held at Mt. Sunapee, N.H. ski resort on Jan. 13-16, 2003. Thirty-eight disabled veterans from New England participated in the rehabilitative program.
- ★ Standdown—Boston Healthcare System conducted Standdown 2003 on Aug. 8-9, 2003, with 505 veterans participating in the event.
- ★ Native American Program—Bedford VAMC hosted the annual Native American Pow Wow on Sept. 20-21, 2003.
- ★ Women Veterans Expo—held at the Togus VAMC and sponsored by Togus and the VA Regional Office on Sept. 27, 2003. Federal, state and local agencies participated in the event, attended by over 1,200 veterans and their families.
- ★ Seamless Transition—Through outreach activities and established points of contact at each facility, Network 1 ensures a seamless transition for separating service members from the Department of Defense health care system to the VA health care system.
- ★ Federal Strategic Health Alliance (Fed Heals) Program—In collaboration with the Department of Defense, Network 1 provides periodic retention physicals, dental screenings, and immunizations to Army National Guard members.
- ★ Vermont National Guard Demonstration Project at Colchester CBOC—received funding support from the Department of Defense to provide enhanced medical services for National Guard members and veterans.

New England Congressional Delegation

Connecticut

Senator Christopher Dodd
Senator Joseph Lieberman
Representative Rosa DeLauro
Representative Nancy Johnson
Representative John Larson
Representative Christopher Shays
Representative Rob Simmons

Maine

Senator Susan Collins
Senator Olympia Snow
Representative Tom Allen
Representative Mike Michaud

Massachusetts

Senator Edward Kennedy
Senator John Kerry
Representative Michael Capuano
Representative William Delahunt
Representative Barney Frank
Representative Stephen Lynch
Representative Edward Markey
Representative James McGovern
Representative Marty Meehan
Representative Richard Neal
Representative John Olver
Representative John Tierney

New Hampshire

Senator Judd Gregg
Senator John Sununu
Representative Charles Bass
Representative Jeb Bradley

Rhode Island

Senator Lincoln Chafee
Senator Jack Reed
Representative Patrick Kennedy
Representative Jim Langevin

Vermont

Senator James Jeffords
Senator Patrick Leahy
Representative Bernard Sanders





now and in the future

BUILDING UPON OUR SUCCESSES

The Network's significant achievements in fiscal year 2003 represent an objective measure of the high-quality health care provided for the veterans we serve. Network 1 will continue to build upon these successes in 2004. In order to ensure that veterans continue to receive timely, compassionate, high-quality care, the Network has identified strategic goals to further enhance the integrated delivery system.

Following are the Network's top three strategic goals for fiscal year 2004 and the 30 VHA strategies that will help us continue to achieve organizational excellence in the future.

Top 3 Network Strategic Goals

★ **Coordination of Care**

Network 1 will achieve excellence in coordination of care by implementing a standardized Coordination of Care program in the Network, including using care coordination and telemedicine technologies to enhance services in the home and community.

★ **Integration of Specialty & Acute Care**

Implement specialized programs to integrate Specialty and Acute Care services in a uniform manner across the Network.

★ **Fiscal Solvency**

Develop a financial allocation utilizing DSS data that provides for the allocation of resources based upon workload and productivity. Redirect resources to:

- Meet workload demand.
- Eliminate backlog of primary care and specialty care workload.
- Lower the cost of care and to invest in new programs and /or alternative care settings.

VHA Strategies

1. Improve and enhance home care services and develop an assisted living strategy.
2. Promote the use of care management to facilitate care in the least restrictive and most efficient setting.
3. Reduce variability of health outcomes by providing for a more consistent delivery of services.
4. Accelerate development of Health Data Repository, HealthVet and telehealth initiatives.
5. Increase collaboration between VBA, VHA and DoD during the military discharge process.
6. Collaborate with DoD to develop a complete lifelong health record for veterans.
7. Collaborate with VBA to invigorate and update the Transitional Assistance Program.
8. Intensify efforts to implement Veterans' Health Initiative, including fully incorporating each veteran's military history and potential consequences of service into the Computerized Patient Record System.



vision 2020

9. Be a leader in the advancement of knowledge and practice of quality and patient safety initiatives to include: (a) the use of preventive medicine practices and guidelines for chronic disease management; (b) increasing the use of validated standardized processes such as increasing the use of automated systems to reduce the occurrence of adverse events; and (c) developing a culture of safety where reporting of close calls and adverse events results in the development and implementation of corrective actions that prevent harm to patients while under our care.
10. Implement a "service-recovery" program.
11. Standardize patient satisfaction surveys with real time results.
12. Provide incentives for ongoing, continuous healthcare system redesigns to streamline work, and to analyze, identify and promulgate improved health care practices.
13. Collaborate with public and private organizations to reduce redundancies and fill gaps in services to veterans.
14. Implement initiatives to support shared decision-making and patient empowerment.
15. Partner with other Federal, state and community agencies to develop a national emergency preparedness plan that clearly articulates VA's role and capabilities to respond to emergencies.
16. Conduct training and emergency preparedness drills using standardized scenarios consistent with VA's Emergency Management Program Guidebook.
17. Maintain full research compliance and standardized protection of human subjects.
18. Increase the proportion of research funding directed to projects addressing veteran-related issues, cooperative studies and translational research.
19. Improve the training and awareness in military health related issues.
20. Provide appropriate support for training, education and resident supervision.
21. Develop a comprehensive and coherent workforce development plan that incorporates High Performance Development Model, succession planning, diversity training and Alternate Dispute Resolution orientation.
22. Implement pay policies and Human Resource practices to facilitate hiring and retaining sufficient health care workers to meet capacity demands across the full continuum of care.
23. Implement the VHA communication plan.
24. Expand VA sharing and collaboration with DoD, Indian Health Service and state veterans' organizations.
25. Expand the Compensation and Pension Record Interchange.
26. Deploy VHA initiative to increase competitive sourcing.
27. Fully implement Procurement Reform Task Force recommendations.
28. Assess the feasibility of Federal imaging, lab and prescription centers.
29. Take full advantage of research-related intellectual property opportunities.
30. Re-engineer health care processes to incorporate technological advances and to address shortages of health care professionals.



VA NEW ENGLAND HEALTHCARE SYSTEM (VISN 1)

★ ★ ★ ★ ★ MEDICAL CENTERS

CONNECTICUT

VA Connecticut Healthcare System
Newington Campus
555 Willard Avenue
Newington, CT 06111
(860) 666-6951

West Haven Campus
950 Campbell Avenue
West Haven, CT 06516
(203) 932-5711

MAINE

Togus VA Medical Center
1 VA Center
Togus, ME 04330
(207) 623-8411

MASSACHUSETTS

Edith Nourse Rogers Veterans Memorial Hospital
200 Springs Road
Bedford, MA 01730
(781) 275-7500

VA Boston Healthcare System
Jamaica Plain Campus
150 S. Huntington Avenue
Boston, MA 02130
(617) 232-9500

West Roxbury Campus
1400 VFW Parkway
West Roxbury, MA 02132
(617) 323-7700

Brockton Campus
940 Belmont Street
Brockton, MA 02301
(508) 583-4500

Northampton VA Medical Center
421 North Main Street
Leeds, MA 01053
(413) 584-4040

NEW HAMPSHIRE

Manchester VA Medical Center
718 Smyth Road
Manchester, NH 03104
(603) 624-4366

RHODE ISLAND

Providence VA Medical Center
830 Chalkstone Avenue
Providence, RI 02908
(401) 273-7100

VERMONT

White River Junction VA Medical & Regional Office Center
215 North Main Street
White River Junction, VT 05009
(802) 295-9363

CBOCs ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★

CONNECTICUT

Danbury CBOC
7 Germantown Road
Danbury, CT 06810
(203) 798-8422

New London CBOC
U.S. Coast Guard Academy
15 Mohegan Avenue
New London, CT 06320
(860) 437-3611

Stamford CBOC
Stamford Health System
90 Morgan Street
Stamford, CT 06904
(203) 325-0649

Waterbury CBOC
St. Mary's Hospital
Medical Office Building
133 Scovill Street, Suite 203
Waterbury, CT 06706
(203) 465-5292

Windham CBOC
Windham Hospital
96 Mansfield
Willimantic, CT 06226
(860) 450-7583

Winsted CBOC
The Winsted Health Center
115 Spencer Street
Winsted, CT 06098
(860) 738-6985

MAINE

Bangor CBOC
304 Hancock Street, Suite 3B
Bangor, ME 04401
(207) 561-3600

Calais CBOC
1 Palmer Street
Calais, ME 04619
(207) 454-7849

Caribou CBOC
163 Van Buren Drive, Suite 6
Caribou, ME 04736
(207) 498-8785

Rumford CBOC
209 Lincoln Avenue
Rumford, ME 04276
(207) 364-4098

Saco CBOC
655 Maine Street
Saco, ME 04072
(207) 294-3100

MASSACHUSETTS

Causeway Street CBOC
251 Causeway Street
Boston, MA 02114
(617) 248-1000

Dorchester CBOC
895 Blue Hill Avenue
Dorchester, MA 02121
(617) 880-7946

Fitchburg CBOC
275 Nichols Road
Fitchburg, MA 01420
(978) 342-9781

Franklin County CBOC
51 Sanderson Street
Greenfield, MA 01301
(413) 773-8428

Framingham CBOC
61 Lincoln Street, Suite 112
Framingham, MA 01702
(508) 628-0205

Gloucester CBOC
298 Washington Street
Gloucester, MA 01930
(978) 282-0676

Haverhill CBOC
108 Merrimack Street
Haverhill, MA 01830
(978) 372-5207

Hyannis CBOC
145 Falmouth Road
Hyannis, MA 02601
(508) 771-3190

Lowell CBOC
130 Marshall Road
Lowell, MA 01852
(978) 671-9000

Martha's Vineyard CBOC
Hospital Road
Martha's Vineyard, MA 02557
(508) 693-0410

Nantucket CBOC
Nantucket Cottage Hospital
57 Prospect Street
Nantucket, MA 02554
(508) 825-8387

New Bedford CBOC
175 Elm Street
New Bedford, MA 02740
(508) 994-0217

Lynn CBOC
225 Boston Street, Suite 107
Lynn, MA 01904
(781) 595-9818

Pittsfield CBOC
73 Eagle Street
Pittsfield, MA 01201
(413) 443-4857

Quincy CBOC
114 Whitwell Street
Quincy, MA 02169
(617) 376-2010

**Springfield CBOC and
Veterans Community
Care Center**
25 Bond Street
Springfield, MA 01104
(413) 731-6000

Worcester CBOC
605 Lincoln Street
Worcester, MA 01605
(508) 856-0104

NEW HAMPSHIRE

Conway CBOC
7 Greenwood Avenue
Conway, NH 03818
(603) 447-3500

Littleton CBOC
Littleton Regional Hospital
600 St. Johnsbury Road
Littleton, NH 03561
(603) 444-9328

Portsmouth CBOC
302 Newmarket Street
Portsmouth, NH 03803
(603) 624-4366, Ext. 5500

Tilton CBOC
NH State Veterans Home
139 Winter Street
Tilton, NH 03276
(603) 624-4366, Ext. 5600

Wolfeboro CBOC
183 N. Main Street
Wolfeboro, NH 03894
(603) 569-4336

RHODE ISLAND

Middletown CBOC
One Corporate Place
West Main Road at Northgate
Road
Middletown, RI 02842
(401) 847-6239

VERMONT

Bennington CBOC
Vermont Veterans Home
325 North Street
Bennington, VT 05201
(802) 447-6913

Colchester CBOC
74 Hegeman Avenue
Colchester, VT 05446
(802) 655-1356

Rutland CBOC
215 Stratton Road
Rutland, VT 05702
(802) 773-3386