The Significance of the 13 Areas of Improvement for Veterans Affairs

The dire need for improvement in the business processes within The Department of Veteran's Affairs (VA) has been a source of much discussion over the past few months. With the appointment of David Shulkin as the Secretary of Veterans Affairs in February has come renewed hope and need for greater accountability.

In his May 31st State of VA report, Shulkin detailed 13 areas within which the department will be working towards improvements. **The areas are as follows:**

1. Accountability
2. Staffing
3. Access
4. Paying providers on time
5. Community care
6. Quality of services
7. Streamlined disability claims and appeals processes
8. Updated information technology
9. Capital assets
10. Construction projects
11. Bureaucracy
12. Waste, fraud and abuse
13. Veteran suicide

Improvements have been underway for a few years, with the department implementing Lean Six Sigma principles for process improvements. They take a Human Centered Approach to the methodology, calling employees the 'beating heart of the VA'.

The identification of these 13 areas brings much needed order to the department. Impetus for the improvement comes from the basic fact that as a nation, we believe it is an honor to serve those who have put themselves at risk by choosing a life in uniform.

The 3 key goals that The Department of Veterans Affairs is working towards with this excellence mandate are:

1. Expanding on and improving the Veterans Choice Program
2. Significantly lowering wait times on veterans' appeals related to benefits claims
3. Improving accountability within the Department itself for greater efficiency

The identified areas have been chosen after careful review of 137 studies on Veteran's Affairs by Shulkin and his team. These studies were both internal and those done by third parties. In keeping with the focus on veterans' reform as a top domestic priority, Shulkin underlines all improvement with a strong commitment to transparency.

Let's take a look at promised improvement within each area and the impact we will likely see.
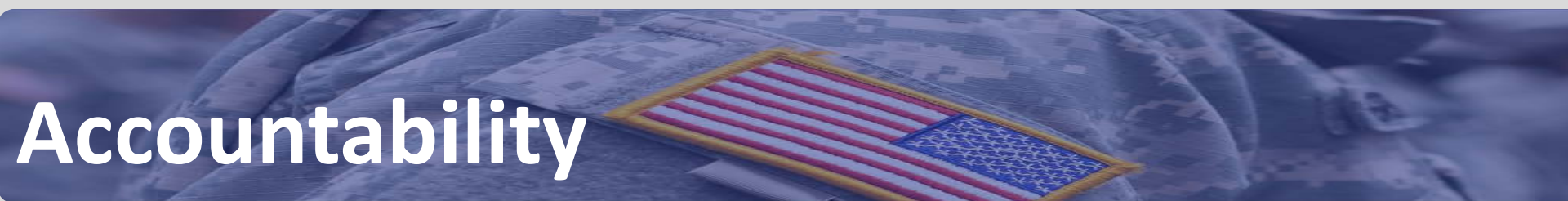
Accountability

Shulkin, a doctor by trade, has been direct in his opinion of the current procedures relating to accountability within the department. Congress passed the Veterans Access, Choice and Accountability Act of 2014, which Shulkin believes needs updating, as he calls for a fresh look at legislation.

In his own words, "Our accountability processes are clearly broken." Current disciplinary procedures leave much to be desired and it can take as long 51 days from the day VA management proposes to suspend or remove an employee until the date the action takes effect. The department now has over 1,500 disciplinary actions pending.

The Veteran's Affairs Accountability and Whistleblower Protection Act of 2017 seeks to hold the department accountable once again by eliminating the option given to senior executives to appeal disciplinary cases. This comes in response to calls for legislation that gives VA the tools it needs to adequately hold all of its employees accountable.

Hot on the heels of the Act came efforts to put greater efficiency into processes as a way to track and fix the accountability problem. The first report relating to the act, which was released in July, 'shows a remarkable number of suspensions, demotions or removal of workers. The employees worked across all areas in the VA. They include attorneys, cemetery caretakers, program analysts, paralegals, claims examiners, rehabilitation counsellors, and loan officers, among others.'

'In addition to the more aggressive approach in dealing with under-performing employees, the VA also now mandates that any settlement with an employee for more than $5,000 must get approval from a senior-level official. Shulkin said he wants taxpayers and veterans to understand that the (department) is committed to transparency and the best possible management of tax dollars.'

Staffing Appropriately

As part of its efforts to streamline the bureaucracy at the department and improve it's administrative capacity, a fully functioning Manpower Management Office will be established by the end of the year. The goal is to put in place a complete position management program to track and fill open roles. As these processes are established, the VA Central Office is under a temporary hiring freeze. They are also implementing shared services, and working on reducing overheads by a minimum of 10%.

A key obstacle in recruiting and retaining healthcare providers and prosthetics representatives is the level of salaries. The 2016 median salary for Biomedical Engineers is $85,620. The National VA average for Biomedical Engineers was $65,677, nearly 25% below the private sector (a $20k difference). For Mechanical Engineers, that discrepancy is $15k or 18% below the national average ($84,190 vs. $68,800). Further, the department will be pursuing legislation to expand graduate medical education training opportunities to help with staffing shortages.

Access to Treatment

VA has faced much negative publicity in recent years and some of the process improvement sorely needed to facilitate access to treatment has already been put in place. One such effort is the initiation of Same Day Services for primary care and mental health at all 168 VA medical centers. 22% of VA's patients are seen on the same day now. Of their primary care clinics, 16% are currently over 100% capacity – a number the department is focussed on bringing down. 10% of community-based clinics do not offer same-day services at this time, but the goal is to hit a 100% by the end of the year. Another system that has been put in place is making the wait time data for clinical appointments public. VA is now the only healthcare system in America that does this.

A source of debate remains the Veteran's Choice program. Veterans often wait months for appointments, with the possibility of loss of life. 'Congress created a program aimed at temporarily alleviating the strain on the VA. Veterans who lived more than 40 miles from a health-care facility, or who had to wait more than 30 days for an appointment could take their benefits outside the system and seek treatment from private doctors.' Amid accusations of 'stealth privatization', Shulkin said, "I am not in support of a program that would lead toward privatization or shutting down the VA programs. Unfettered Choice is appealing to some, but it would lead to essentially, I believe, the elimination of the VA system altogether. It would put veterans with very difficult problems out into the community with nobody to stand up for them and to coordinate their care."

Paying Service Providers

Another criticism levelled at VA has been slow processing of service provider invoices. They currently have over $50 million in outstanding outpatient bill charges that are over six months overdue. Standard processing times are rarely under a month. It takes the VA more than 30 days to process 20% of payments for what they call 'clean claims' (no dispute) – affecting over 25,000 providers across the country. VA is working with the private sector to ensure more claims are submitted electronically to allow faster adjudication and payment – particularly for the Choice Program, which increases access. In April this year, it was estimated that only 65% of community care claims are submitted electronically, and that was an area for improvement.

Community Care

Amidst legislative controversy surrounding the Veteran's Choice Program, VA is working on addressing how the program is accessed. Streamlining is underway to help veterans get more access to care by increasing the number of available facilities. Existing rules and policies mean only three DoD facilities are currently a part of the Choice Program. VA is working on ensuring that veterans in need of care in the community are able to use any DoD facility that offers the care they need.

Quality

In point 3 relating to access, we mentioned VA's transparency efforts relating to tracking wait times for access to treatment. A number of other quality efforts are being put in place alongside. VA now shares both its star ratings and comparisons between VA medical centers and local community hospitals. 14 medical centers have been identified as being below the community standard of care, with 1 Star Ratings. Teams are in place to implement performance plans at each of these centers. Streamlining the Choice plan is also on the department's agenda to offer veterans access to better care in their communities.

Disability Claims and Appeals

VA currently has over 90,000 disability claims that are taking 125 days or more to process. They have set themselves the aggressive target of cutting this time by 50% over the next two years. They have also recently initiated the Decision Ready Claims process to move toward a paperless process aiming to reduce the disability and appeals backlog. And as the final piece of that plan, the department is also working towards making more information available to veterans on the status of their disability claims.

To address the problem of the many veterans awaiting an answer from the VA on their appeals, the Veterans Appeals Improvement and Modernization Act of 2017 was put in place. It is designed to overhaul the current appeals process at VA.

Information Technology

Old technology is one of the department's biggest problems and it is being given a thorough assessment and overhaul. Modernization initiatives will include commercial, cloud-based solutions wherever possible. VA is also taking immediate steps to deal with out of date inventory systems, which make it difficult to ensure doctors and nurses have the proper supplies and equipment needed to care for veterans.

Security of information is also high on the department's list of priorities. LaVerne H. Council, Assistant Secretary for Information and Technology, and CIO at the Department of Veterans Affairs, says, "I'm really excited with our enterprise cybersecurity strategy, which was the first of its kind… We are implementing that strategy in real time to eliminate the material weaknesses by the end of 2017 to better safeguard veteran information."

Construction

VA has Major Construction and Minor Construction Programs with large unobligated balances. $971 million in minor construction, and $2.6 billion in major construction, has been carried over into FY 2017. Currently, 11 Major Construction Projects totaling $1.4 billion are on hold because VA and the U.S. Army Corps of Engineers were working through differing processes and interpretation of appropriations rules. Congressional approval of a jointly proposed way forward will allow these projects to move ahead.

Capital Assets Assessments & Improvement

Many of the department's buildings are falling into disrepair. On average VA buildings are nearly 60 years old, with only half built since 1920. Facility Condition Assessments have identified critical infrastructure deficiencies of more than $18 billion that require remediation, including structural seismic, electrical distribution, and mechanical systems such as heating and ventilation.

Here are some numbers that break down the criticality of the problem:
449 buildings are from the Revolutionary and Civil wars; of these 96 are vacant.
591 buildings were built in the World War 1 era, of which 141 are vacant.
More than 400 vacant buildings and 735 underutilized facilities are costing taxpayers $25 million a year.

Bureaucracy & Administration

Reducing the burdensome regulations that do not make sense and launching new tools that make it easier for veterans to engage with VA is a high priority when it comes to administration at the department. Easy-to-use, modern websites with clear explanations and a single login will facilitate easier online interaction for veterans. Another important step is the restructuring of the department's caregiver regulations, intended to get services to veterans and their caregivers who need them most. VA has also recently adopted the American Cancer Society's mammogram guidelines. These measures, combined with the ones we discussed on staffing, above in point 2, will go a long way in cutting the bureaucracy within the department.

Waste, Fraud & Abuse

The department has prevented $27 million in fraudulent payments and identified potential duplicate payments of $24 million in the 2016 financial year. To keep the momentum, VA has established the Fraud, Waste, and Abuse Prevention advisory committee.

Veterans Suicide

Combating veteran suicide is the top priority for the department. Currently, about 20 veterans commit suicide a day. Tools in place like the suicide hotline have significant efficiency issues, often leaving veterans waiting as long as 30 minutes for help, a study found.

A new initiative called 'Getting to Zero' launched this summer, mandated to help put an end to veteran suicide. Further, the department has authorized emergency mental health services for those that were not honorably discharged – a population of service-members who are at the highest risk of suicide.

For much more great content on overcoming VA challenges, please take a look at the agenda for PEX VA – Process Excellence in the from **November 29 to December 1, 2017, in Washington, D.C.** Many of the sessions will bring direct value including the **Keynote Address - The Strategic Future of VA Process Excellence,** by **Dr. Carolyn Clancy, Deputy Under Secretary for Health for Organizational Excellence**. The session will touch on:

1. Determining the top 3 overall priorities for VA process development
2. Incorporating emergent IT technologies short- and long-term initiatives
3. Increasing the VA's focus on HR to improve efficiency and output

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