MEMORANDUM OF UNDERSTANDING

The following constitutes an agreement between the Department of Veterans Affairs, Veterans Health Administration (VHA) and the American Federation of Government Employees, (AFL-CIO), National VA Council #53 (NVAC) concerning " Patient Centered Medical Home" within the Department

1. The national parties understand that VA Patient Centered Models are a commitment to enhanced services to Veterans. Patient Centered Medical Home (PCMH) is one of such models that focus on the VA's primary care setting. This will involve changing primary care staff/teams into "Teamlets" that support and empower Veterans and their families' needs.

2. A "Teamlet" by definition consists of a primary care provider, registered nurse care coordinator, clinical associate (LPN/LVN/CNA/HT/MA) and administrative associate (MC/HT). The Department agrees to provide clarification of the roles of Teamlet members once the Teamlet is established. The specific disciplines will be determined locally.

3. The Department has agreed to provide adequate and funded staff to support such a culture change, prior to any implementation within a VISN or facility. The Union at the appropriate level, intermediate or local will have input into the staffing mix needed for this change through pre-decisional involvement of labor forums or through management meeting their bargaining obligations in changes in working conditions.

4. The Union at the national, intermediate or local level will be allowed pre-decisional involvement through participation in and selection of bargaining unit employees to serve on workgroups and task forces established to plan, review, and modify existing practices as a result of Patient Centered Medical Home.

5. The Department agrees not to implement recommendations from these above-mentioned work groups or task forces that affect working conditions of bargaining unit employees without meeting their bargaining obligations. The exclusive representative shall be provided with the notice and afforded the opportunity to name its negotiating team members to meet the bargaining obligation at levels below the national level.

6. No bargaining unit employee impacted by the implementation of Patient Centered Medical Home will be adversely affected in his or her position of record as a result of implementation. Should new positions be developed, staff will be able to compete for positions for which they are qualified.

7. The national parties agree that bargaining unit employees will receive training/re-training with new emphasis on: a) working in teams, b) customer service and resolving problems at point of care and c) Patient Centered Medical Home concept and cultural change necessary to fully implement.

8. The national parties agree that for consistency, the Department will ensure that Clinical Support Associate or Administrative Support Associate positions related to Patient Centered Medical Home will be done after implementation to ensure they are accurate, properly classified and graded correctly. The NVAC shall be informed when the process has been completed.

9. Bargaining unit employees impacted by the implementation of Patient Centered Medical Home will be provided with information about their reporting structure when they are assigned to a Teamlet.

10. NVAC reserves its right to address matters, at the appropriate level national, intermediate or local concerning Patient Centered Medical Home as they occur.

11. The appropriate management official shall provide a copy of this MOU to the Local Union President, upon their receipt.

Leslie Wiggins, DAS LMR
For the Department of Veterans Affairs (VA)

6/9/2010
Date

Oscar L. Williams Jr.
For the National VA Council #53 (NVAC)

June 9, 2010
Date

Joleen Clark, Chief Officer WMC
For Veterans Health Administration (VHA)

June 9, 2010
Date