



Department of Veterans Affairs

VA Supplier Relationship Management: Breakout Session Overview

Regional Forum – Seattle, WA
August 3, 2012





Management and IT: Key Issues

- High Contract Officer Turnover
 - No apparent transition planning
 - Lack of communication with CORs, end users and suppliers
 - Why is there so much turnover? COs appear to be over worked
- Parties in contracting process don't understand their roles and responsibilities
 - COs, CORs, PMs, end users/clinicians, ISO/IT
- Lack of local end user involvement in contracting decisions
 - Results in poor requirements development
 - Lack of understanding in local issues / environment
 - Difficult for local end users to receive “best value”



Management and IT: Key Issues

- RFPs are not clear
 - Appear to be written by someone who doesn't have subject matter knowledge of the item/services to be procured
 - Find inappropriate “copy and pasting”
 - Makes it difficult to determine what VA is attempting to purchase
- Barriers exist that prevent small businesses from doing business with VA:
 - GSA Source Supply Letters
 - Large, national companies that have no knowledge of the local VA or VISN environment
 - Unrealistic turn-around times for RFPs and Modifications



Management and IT: Recommendations

- Create, implement and monitor use of formal transition plans for when COs change assignments.
- Create and implement training and outreach materials so that all parties involved in a contract understand their roles and responsibilities
- Formally involve local users in the entire contracting process, particularly:
 - Requirements development
 - Technical review panel
 - Contract award
- Reduce barriers to small business involvement



Healthcare: Key Issues

- Inconsistency of process, personnel, communications
- Disconnect between program offices, contracting offices, headquarters, and the field
- Lack of understanding by contracting offices and clinical and internal customers' needs
- Unrealistic timelines for bids, modifications, and extensions



Healthcare: Recommendations

- Enforce accountability supported by the requisite authority
- Implement Commodity Managers across the enterprise; people who specialize in particular products and/or services
- Drive policies and procedures down to the working level
- Work with Suppliers as partners; engage in consistent, two-way communications
- Implement vendor and internal customer outreach or ombudsman programs



Medical Equipment: Key Issues

- Complex processes delay delivery of service and care
- Medical departments and procurement staff do not share goals, and their processes are sometimes at odds
- Consolidation of procurement has led to duplication and disconnect with the needs of the Veteran
- Some Veterans won't advocate for their own care; they fear retribution for using patient care advocates, and/or think it is their duty to tolerate delays
- Suppliers have to teach the medical center staff how to use VA procurement processes



Medical Equipment: Recommendations

- Raise the \$3,000 purchase card ceiling for prosthetics purchases
- Invest more energy in empowering Veterans to advocate for their own care
- Reduce duplication in procurement between the NAC, VISNs, and the medical centers
- More training for contract administrators
- Create enterprise level relationships with suppliers; partner with vendors who can help VA make the best choices in each market



Building, Construction, and Engineering: Key Issues

- VA Personnel are committed and capable. The issue is lack of staffing.
- CO's lack technical knowledge and often are not working effectively with COTRs and PMs.
- Work is going to low price firms either because of set-aside requirements or least cost decision. These firms often do not have the same qualifications as other bidders.
- There is significant confusion about who to contact to resolve issues (e.g. invoicing, changes/modifications, and security clearance requirements)
- Solicitations don't accurately convey the technical parameters of the project and transfer risk primarily to the supplier.
- OB-10 requirements are unclear and not well communicated.



Building, Construction, Engineering: Recommendations

- VA should do formal evaluations on close out and post results.
- Delegate decisions down to the lowest level possible to increase efficiency.
- Provide instructions to new small vendors-e.g. security clearances and invoicing.
 - GSA Vendor support website is a good example.
- Allow suppliers, contractors and AE firms to be more involved in planning and budgeting processes.
- VA should have a representative to defend design decisions during construction.