

October 3, 2005

MODIFICATION OF VHA NATIONALLY-STANDARDIZED FILES

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes policy regarding the modification of Veterans Health Information Systems and Technology Architecture (VistA) files that have been standardized nationally.

2. BACKGROUND

a. The availability of standardized VistA data is essential for the continued enhancement of VHA's electronic health record. Data standardization supports advanced clinical decision-making, improved data quality, more reliable data aggregation, and expanded data interchange with VHA's health care partners.

b. VHA data standardization efforts also support department-level data interchange and standards-related activities. The Department of Veterans Affairs (VA) was instrumental in the formation of the interagency Consolidated Health Informatics (CHI) initiative, and works closely with the Department of Defense (DOD) and the Department of Health and Human Services (HHS) on CHI and related projects. CHI, a part of the President's eGov initiative, was established to foster the adoption of Federal interoperability standards related to health care as part of a joint strategy for developing an electronic health record. CHI has endorsed communications and data standards in areas such as: laboratory, radiology, pharmacy, encounters, diagnoses, and nursing information. It continues to review and endorse standards in other health data domains. As a partner in CHI, VA has agreed to adopt the standards endorsed by CHI.

c. In order to ensure the availability of standardized health data, the Office of Information (OI) has established processes for creating, distributing, and maintaining standard data sets across all VHA facilities via nationally-standardized files. These files are known as Standardized Reference Files. Standardized Reference Files are not to be modified in any manner without prior authorization from OI. Even minor changes to Standardized Reference Files could have a significant impact on data quality, aggregation of data, and negatively affect business operations, patient care, or patient safety.

d. The Data Standardization (DS) Program, under the OI Office of Health Data and Informatics (HDI), is responsible for coordinating the development, adoption, implementation, and verification of Standardized Reference Files. Standardized Reference Files are developed with input from stakeholders across VHA, including clinicians, domain content experts, business owners, site users, and affected program and project offices. The DS Program collaborates with other VHA program offices and works closely with project teams and offices within OI to identify applicable data standards and develop appropriate strategies for implementing them. Collaborators within OI include Enterprise Terminology Services (ETS) and Enterprise

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Reference Terminology (ERT), Health Information Management (HIM), Data Quality (DQ), Health Information Architecture (HIA), Health Data Repository (HDR), and Common Services (CS). This interdisciplinary team evaluates available standards, VHA requirements, existing VistA data, and local variations, and submits its recommendations to the DS Oversight Board for approval. The Informatics and Data Management Committee (IDMC) and the National Leadership Board (NLB) provide oversight for VHA data standardization activities.

e. Standardized Reference Files are distributed to sites via VistA patches. OI updates Standardized Reference Files when necessary in order to accommodate new health data standards, nomenclature, or classification schemes; to meet changing business requirements; or to support legitimate local reporting needs. In addition, sites may submit requests for changes or additions to Standardized Reference Files through the New Term Rapid Turnaround (NTRT) process established by ERT. ERT data stewards evaluate each request and contact the site if more information is necessary. If a request is denied, ERT suggests an equivalent existing term. If a request is approved, ERT updates the affected Standardized Reference File via a Health Level 7 (HL7) messages to all VistA sites. Requests can be submitted via the NTRT website at <http://vista.med.va.gov/ntrt>.

f. Nationally-standardized files are listed on the Health_eVet-VistA database administration (DBA) website at <http://vista.med.va.gov/dba/>, under the “Standardized Reference Files” link at the left of the page. The list of files can be accessed directly at <http://vista.med.va.gov/dba/standard-files.htm>.

3. POLICY. It is VHA policy that files standardized nationally must not be altered in any manner, in whole or in part, except by OI or with the prior formal approval of OI.

4. ACTION

a. **VHA OI.** VHA OI is responsible for:

(1) Developing Standardized Reference Files and distributing them to VHA sites and OI field offices.

(2) Maintaining a list of Standardized Reference Files and publishing the list on the Health_eVet-VistA DBA website.

(3) Monitoring site compliance with this directive.

(4) Determining whether changes made to Standardized Reference Files are authorized or unauthorized.

(5) Contacting sites to require the removal of any unauthorized changes made to Standardized Reference Files.

(6) Evaluating and responding to requests for modification of or additions to Standardized Reference Files submitted through the ETS NTRT process, and updating Standardized Reference Files to reflect approved changes.

b. **Facility Directors.** Facility Directors are responsible for ensuring that:

(1) Facility staff complies with this Directive.

(2) Requests for changes to Standardized Reference Files are submitted through the ERT NTRT process and that no changes are made without formal prior approval from OI. **NOTE:** *Requests can be submitted via the NTRT website at <http://vista.med.va.gov/ntrt>.*

5. REFERENCES: None.

6. FOLLOW UP RESPONSIBILITY: The OI Office of Health Data and Informatics (19F) is responsible for the contents of this directive. Questions may be addressed to 801-588-5035.

7. RESCISSIONS: None. This VHA Directive expires October 31, 2010.

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