

Manual M-9, Strategic Planning

(Veterans Health Administration)

Chapter 4, Off-Cycle Business Submissions

(Paragraphs 4.01 through 4.03)

Rescinds Chapter 4 dated October 2, 1989

This document includes:

Title page and p. ii for M-9, dated **July 26, 1991**

Contents page for M-9, dated **June 5, 1992** (Change 9)

Rescissions page for M-9, dated **May 4, 1992** (Change 4)

Contents page for Chapter 4, dated **June 5, 1992** (Change 9)

Text for Chapter 4, dated **June 5, 1992** (Change 9)

Transmittal sheet located at the end of the document:

Change 9, dated **June 5, 1992**

Transmittal sheets for changes prior to 1992 also located at the end of the document:

Change 2, dated **July 26, 1991**

Sheet dated **October 2, 1989**

Reference Slip, dated **January 27, 1986**

Memorandum dated **April 3, 1984**



Department of
Veterans Affairs

Strategic Planning

July 26, 1991

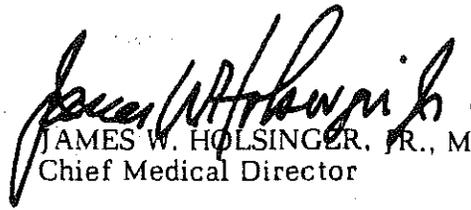
Veterans Health Administration
Washington DC 20420

Department of Veterans Affairs
Veterans Health Administration

Department of Veterans Affairs
Veterans Health Administration
Washington, DC 20420

July 26, 1991

Department of Veterans Affairs, Veterans Health Administration Manual M-9, "Strategic Planning," is published for the information and compliance of all concerned.


JAMES W. HOLSINGER, JR., M.D.
Chief Medical Director

Distribution: RPC: 1318
FD

Printing Date: 7/91

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RESCISSIONS

The following material is rescinded:

Complete rescissions:

Circulars

10-87-113 and Supplement No. 1
10-87-147
10-88-3
10-88-150
10-89-31
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10-90-124

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CHAPTER 4. OFF-CYCLE SUBMISSIONS

4.01 POLICY

- a. Occasionally, situations may arise where planning issues must be addressed prior to the "normal" submission date. Flexibility is provided for the submission of such issues.
- b. An off-cycle submission must clearly demonstrate the need for higher level review and approval of the revised recommendation prior to the next normal plan submission date.

4.02 SUBMISSION REQUIREMENTS

- a. The off-cycle submission should briefly outline the following information:
 - (1) The circumstances necessitating the request, e.g., special studies, construction projects, FDP (Facility Development Plan).
 - (2) Specifically what is requested.
 - (3) The rationale for requesting review of a new issue or an amendment of a previously submitted recommendation (e.g., needs assessment, budget justification, bedsizing rationale, quality of care issue), if appropriate.
 - (4) The impact of the proposed change on the previous submission and VHA (Veterans Health Administration) plans.
- b. If a construction project is impacted by an off-cycle submission, ample time for review and approval must exist to provide for planning of the project so that budget submission requirements can be met to avoid slippage of the construction project.
- c. Sufficient justification must be submitted to permit comprehensive review of the proposed change.

4.03 REVIEW PROCESS

- a. Proposed off-cycle submissions must be forwarded through the appropriate channels for review and approval.
- b. If VA (Department of Veterans Affairs) Central Office review and approval of the amendment is required, the off-cycle request should be forwarded through the Associate CMD (Chief Medical Director) for Operations to the Director, Strategic Planning and Policy. Those requests will be disseminated by the Director, Strategic Planning and Policy to appropriate VA Central Office program offices for review and comment.
- c. After comments are received, the Director, Strategic Planning and Policy will notify the chairperson of the Planning Review Committee of the results of the program office review. Review by the full Planning Review Committee will be conducted only when requested by the chairperson of the Planning Review Committee.
- d. The recommendation of the Planning Review Committee will be forwarded to the CMD. The decision of the CMD will then be provided to all appropriate offices for necessary action.

June 5, 1992

1. Transmitted is a change to the Department of Veterans Affairs, Veterans Health Administration Manual M-9, "Strategic Planning."

2. Principal changes are:

a. Significant revisions to the following chapters to reflect changes in Veterans Health Administration strategic planning:

- (1) Chapter 1: "Strategic Planning."
- (2) Chapter 2: "Strategic Planning Constituency Awareness."
- (3) Chapter 3: "Strategic Planning Confidentiality Policy."
- (4) Chapter 4: "Off-Cycle Submissions."

b. The addition of a new Chapter 12, "National Health Care Plan."

3. Filing Instructions

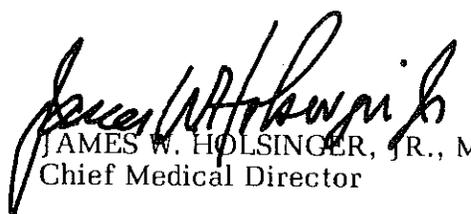
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iii ✓
1-i through 1-7 ✓
2-i through 2-2 ✓
3-i through 3-1 ✓
4-i through 4-2 ✓

Insert Pages

iii ✓
1-i through 1-8 ✓
2-i through 2-2 ✓
3-i through 3-1 ✓
4-i through 4-1 ✓
12-i through 12-5 ✓

4. **RESCISSION:** M-9, Chapters 1, 2, 3, and 4, dated October 2, 1989, and VHA Circulars: 10-86-013, 10-86-056 and its supplements, 10-87-009 and its supplement, 10-87-097, 10-87-147, 10-88-028, and 10-89-039.


JAMES W. HOLSINGER, JR., M.D.
Chief Medical Director

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July 26, 1991

1. Transmitted is a change to Department of Veterans Affairs, Veterans Health Administration Manual M-9, "MEDIPP," which is changed to M-9, "Strategic Planning."

2. Principal reason for this manual change is to delete the term "MEDIPP":

a. In chapters 1 through 11, delete the term "MEDIPP" and replace it with "Strategic Planning."

b. Changes to all M-9 chapters are in process to update to current procedures.

3. Filing Instructions:

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Cover page through iv

Cover page through iv


JAMES W. HOLSINGER, JR., M.D.
Chief Medical Director

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October 2, 1989

1. Transmitted is a new Veterans Health Services and Research Administration Manual M-9, "MEDIPP," chapter 1 through chapter 11. Changes will be made to incorporate the recent reorganization in the near future.

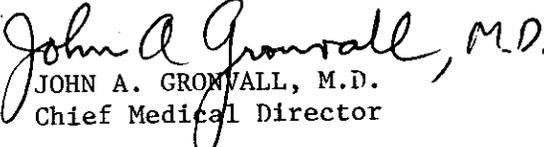
2. Principal reason for this manual is to provide a description of and issue guidance concerning VHS&RA planning process.

3. Filing Instructions:

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1-1 through 11-3

4. RESCISSIONS: Circular 10-87-113, dated October 10, 1987 and Supplement No. 1 dated April 4, 1988; Circular 10-87-147, dated December 30, 1987; Circular 10-88-3, dated January 13, 1988; Circular 10-88-150, dated December 9, 1988; and Circular 10-89-31, dated March 23, 1989.


JOHN A. GRONVALL, M.D.
Chief Medical Director

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Veterans Administration

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REMARKS

SUBJ: Departmental Manual M-9

1. In DM&S Supplement MP-1, Part II, Changes 35 dated November 13, 1984, the title of M-9 is "Medical District Initiated Program Planning."

2. This is to request that the title of this manual be changed to:

"Planning and Evaluation and Systems Development"

We expect to be submitting a number of items to be included in this manual during the coming year.

3. Thank you for your assistance.

Approved Disapproved

John W. Ditzler
JOHN W. DITZLER, M.D.
Chief Medical Director

2-3-86
Date

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6/1/84
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FROM

Marjorie R. Quandt
MARJORIE R. QUANDT

ACMD for Planning Coordination (17A)

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Veterans
Administration

Memorandum

APR 03 1984

From: Director, Program Analysis and
Development (10C2B)

To: Chief Medical Director (10)
Publications Control Officer (101B2)

Subj: Establishment of M9-MEDIPP

1. Request permission to establish a new manual (M9-MEDIPP) to formalize MEDIPP (Medical District Initiated Program Planning) as a permanent DM&S Policy.
2. MEDIPP has in its two year cycle become an effective mechanism for DM&S planning purposes. MEDIPP has become the management tool providing comprehensive information directly from the medical districts. This allows prudent decision making in order to meet the health care veterans needs of the 1990's and beyond.
3. The '84 MEDIPP Planning Guidance has been reviewed and concurred in by appropriate program offices, therefore, in order to expedite the process, I would recommend that Volume I: Medipp Purpose, Structure, and Process and Volume II: Plan Development, of the '84 MEDIPP Planning Guidance be accepted as the M9-MEDIPP Manual without further circulation. (Appropriate formatting would be instituted.) I anticipate no changes to these two volumes in the near future.

Volume III: Needs Assessment Methodology and Volume IV: MEDIPP Reference Documents will by necessity be revised annually and will therefore have to be issued annually as a CMD Circular.

4. It is timely that M9-MEDIPP be developed in order to firmly establish its important place in DM&S as a consistent, and permanent policy.

Murray G. Mitts M.D.
MURRAY G. MITTS, M.D.

Donald L. Custis
DONALD L. CUSTIS, M.D.
Chief Medical Director (10)

Approve
~~Disapprove~~

4/17/84
Date