

U.S. Department of Veterans Affairs



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VA Takes Decisive Actions to Move off GAO High-Risk List

WASHINGTON — Recently the U.S. Department of Veterans Affairs (VA) announced actions it will take to address challenges and issues identified by the Government Accountability Office (GAO) when it placed VA on its <u>High-Risk List</u>. The move is designed to address lingering deficiencies in its health-care system once and for all.

Every two years, GAO calls attention to agencies and program areas that are high risk as a result of vulnerabilities and in need of transformation. VA is currently in the midst of a department-wide modernization that will build capacity for long-term management of GAO High-Risk List activities and strengthen VA's foundational business practices.

"We thank GAO for its review and for highlighting practices that VA needs to improve," said VA Acting Secretary Robert Wilkie. "Under President Trump, we are serious about doing business differently to improve Veterans' care and we are holding ourselves accountable to the nation's Veterans and to American taxpayers who entrust them to our care."

GAO identified five specific risk areas when it added VA health care to the Federal government's list of 32 high-risk agencies and programs in 2015: ambiguous policies and inconsistent processes, inadequate oversight and accountability, information technology challenges, inadequate training for VA staff, and unclear resource needs and allocation priorities. VA recently delivered a comprehensive action plan to GAO that includes these crucial steps the agency has taken to address these risk areas for VA health care, along with a number of others to improve business operations:

- Reducing ambiguity and red tape. Eliminated outdated policy documents. VA has already purged more than 235 expired directives and 85 percent of all outdated manuals.
- Eliminating bureaucracy and streamlining decision making. VA has reduced central office staff positions by 10 percent and consolidated its policy and operations functions in mental health, primary care, and geriatrics to improve support to field activities and Veteran-facing services. These restructuring actions allow VA to become more efficient by pushing decision rights to the lowest appropriate level.
- Strengthening internal oversight and accountability. The Veterans Health Administration (VHA) established the Office of Integrity to consolidate its compliance, ethics, and oversight programs under a single executive, and moved swiftly to establish an internal audit function and associated governance committee that provides the Under Secretary for Health with an independent and objective way to assess operations.
- Modernizing information technology support. VA's Electronic Health Record (EHR) Modernization program will enable seamless care and full interoperability with the Department of Defense's EHR modernization solution, and enhance the ability to exchange Veteran health data with community health partners.
- Clarifying resource needs and priorities. VA established a centralized manpower management office to integrate staffing processes, and transformed its financial management methods to improve resource planning and allocation.

In addition to addressing the GAO high-risk areas, VA continually responds to GAO recommendations on VA operations throughout each year. At any given time, there are 80 to 100 open recommendations about VA health care. Overall, VA has succeeded in closing approximately 377 recommendations since 2009, and is committed to closing as quickly as possible all 22 recommendations that GAO has identified as high priority.

VA expects the next GAO report to be released in early 2019.

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