



Transformation Update

MAY 2016

VA



U.S. Department
of Veterans Affairs

This is a new VA. More transparent, more collaborative, and more respectful. It's principles-based and focused on outcomes for Veterans.

Last July in the [MyVA Integrated Plan and Overview](#), we laid out the focus, approach, and outcomes for MyVA.

This [MyVA Transformation Update](#) highlights our progress and our plan for the rest of CY 2016.

Our Vision

The [Department of Veterans Affairs Strategic Plan FY 2014-2020](#) describes our three Strategic Goals to achieve our mission: **empower Veterans to improve their well-being, enhance and develop trusted partnerships**, and manage and improve VA operations to **deliver seamless and integrated support**.

The Strategy explains, "VA is a customer service organization. We serve Veterans."

Veterans Affairs as the No. 1 customer-service agency in the Federal government—that's our vision.

Veterans preserved our nation's opportunities to prosper. And Veterans and their families deserve nothing less than a seamless, unified Veteran experience across the entire organization, and the country.

Veterans from Florida to California, Puerto Rico to Maine, Alaska to Guam, and all parts in between will see one VA—**MyVA**—that they can be proud to call their own.

So we're putting the needs, expectations, and interests of Veterans and their families first, putting Veterans in control of how, when, and where they wish to be served.

A world-class service provider.

Achieving that vision is in our reach.

Our Mission

Caring for Veterans. It's the heart of President Abraham Lincoln's charge to the Nation in his Second Inaugural Address. As the bloody Civil War was coming to a close, President Lincoln told all of us to care for those who have "borne the battle," and their families.

It's the most noble mission there is.

Our Values

We're proud of our admirable values, and they are foundational to doing the right thing for Veterans and being good stewards of taxpayer dollars.

They're our I-CARE Values of Integrity, Commitment, Advocacy, Respect, and Excellence.

Everything we are doing is built on the rock-solid foundation of our values.

Our Agency Priority Goals

Our four **2016-2017 Agency Priority Goals** are to **Improve Veterans Experience with VA, Improve VA Employee Experience, Improve Access to Health Care as Experienced by the Veteran, and Improve Dependency Claims Processing**.

And we're continuing to build on progress we've already made increasing access to care and services, ending Veteran Homelessness, and eliminating the compensation rating claims backlog.

MyVA Strategies

MyVA implements our Strategic Plan, and our Agency Priority Goals will help accelerate our transformation that's guided by our five MyVA strategies.

The five MyVA strategies are about rebuilding trust with Veterans, their families and survivors, and the American people. They're a concerted approach leveraging VA's immense scope and scale so we can give every Veteran an exceptional experience that's easy, consistent, and memorable.

To accomplish all that, we're focused on ...

- ✓ **Improving the Veteran experience.**
- ✓ **Improving the employee experience.**
- ✓ **Achieving support services excellence.**
- ✓ **Establishing a culture of continuous performance improvement.**
- ✓ **Enhancing strategic partnerships.**

MyVA is about looking at VA from a Veteran's perspective, doing everything we can to make the Veteran Experience effective and emotionally engaging.

MyVA is leaving old, unresponsive ways of doing business behind and changing VA into the high-performing organization it can be.

A High-Performing Organization

Veterans deserve and taxpayers expect a VA that is a high-performing organization. That means an organization with clear purpose, with strong values, and with sound strategies for designing systems and processes that anticipate and respond to customers' evolving needs and expectations.

VA has a clear purpose. Our I-CARE Values are strong. Our 5 MyVA strategies are sound. And we have a growing team of talented, enthusiastic, principles-focused business leaders and experienced government and health care professionals

making bold, innovative changes, building responsive, Veteran-centric systems and processes designed to meet Veterans' needs.

At VA, we are reorganizing for success ... perhaps the largest restructuring in the history of the department. We call that reorganization and our customer experience solution MyVA It's called MyVA because we want Veterans to view us as an organization that belongs to them, providing quality care in the ways they need and want to be served.

Secretary Bob McDonald
November 11, 2014

The American Customer Satisfaction Index rated our National Cemetery Administration (NCA) No. 1 in customer service five times running. For six years in a row, our Consolidated Mail Outpatient Pharmacy received J.D. Power's highest customer satisfaction score among the Nation's public and private mail-order pharmacies.

Building a High-Performing Organization means scaling that kind of excellence across the institution. It means unifying VA's federation as an integrated enterprise. It means leveraging our strategic advantage of scope and scale for every Veteran we serve.

And we're doing just that.

2016 Breakthrough Priorities

We've established a productive operating rhythm, and we're increasingly delivering better and better outcomes for Veterans.

But we were convinced we could go faster, accelerate change.

So we talked to our stakeholders, evaluated our processes, and studied the execution cadence of high-performing organizations.

From that work, we established and resourced VA's **12 Breakthrough Priorities for 2016**. Reflecting our Vision, Mission, and Values, these Priorities are designed to achieve meaningful, near-term improvements for Veterans while propelling us toward long-term success of the MyVA Strategy.

In January, we introduced these Breakthrough Priorities to Congress. We shared them with the House Committee on Veterans' Affairs, and the Senate Committee on Veterans' Affairs invited us to a hearing on the Priorities.

Designed to improve the delivery of timely care and benefits to Veterans, our Breakthrough Priorities are helping VA concentrate efforts on serving Veterans and their families and survivors while aligning resources for success.

Eight of the 12 Priorities are about directly improving service to Veterans. Four of the Priorities represent critical enablers to reform internal systems and give employees the tools and resources they need to consistently deliver an exceptional Veteran experience.

Our eight priorities for Veterans will quickly improve the **Veteran Experience**, increase **Access to Health Care**, **improve Community Care**, deliver a **Unified Veteran Experience**, modernize **Contact Centers**, improve the **Compensation & Pension Examination**, develop a **Simplified Appeals Process**, and continue to **Reduce Veteran Homelessness**.

Improving the **Employee Experience**, staffing **Critical Positions**, transforming our **Office of Information & Technology**, and transforming our **Supply Chain** are *four critical enablers* to achieving all our priorities for Veterans.

We're rigorously managing each Priority.

One senior executive is responsible for each Breakthrough Priority. A cross-functional, cross-Departmental team is in support. Teams meet bi-weekly with the Secretary or Deputy Secretary to focus on each Priority, discuss progress, identify roadblocks, and find solutions. Weekly updates to Department leadership and our Department-wide Dashboard track progress against established metrics.

Meeting these **12 Breakthrough Priorities** is a challenge.

But we're committed to results for Veterans.

Improve the Veteran Experience. At the points where Veterans engage VA, we'll be fully staffed with employees trained in Veteran-centric courtesy and supported by our operational Veterans Experience Office and Human-Centered Design thinking.

For example, Medical Support Assistants (MSAs) are often the first people Veterans meet in our Medical Centers. So hiring will be faster, selections will be customer-service oriented, and MSAs will be equipped with a consistent

onboarding experience and standardized training. Our 25,000 MSAs who are already serving Veterans will be trained on creating exceptional Veteran experiences.

And for the first time ever, we'll measure trust, effectiveness, and experience with standardized, enterprise-wide Veteran Experience metrics.

Increase access to health care (same day primary care, suicide prevention, seamless care). Veterans' clinical needs will be addressed the same day they call or visit primary care at a VA Medical Center. Veterans calling for new mental health appointments will receive a suicide risk assessment and immediate care if they need it. And Veterans already benefiting from mental health care who need urgent attention will speak with a provider that same day. Of course, we'll focus on taking care of Veterans' most urgent needs first.

VistA technology enhancements will mean Veterans get medically necessary care, information, and efficiently and accurately scheduled appointments seamlessly and conveniently at any Medical Center, not just where they've traditionally received care.

Improve community care. With the help of Congress, we'll have consolidated and streamlined Community Care Network access and an improved relationship with our community providers and core partners. We'll be able to clarify eligibility requirements, strengthen VA's high-performing network, streamline clinical and administrative processes, and implement a care coordination model across the continuum of care.

Enacted into law, our proposed legislation will mean that authorization timelines are shorter, and Veterans will see community providers within 30 days of referral. We'll be processing 85 percent of "clean" Community Care claims

within 30 days, and the claims inventory will be less than 10 percent of the total inventory.

Deliver a unified Veteran experience. Vets.gov will be the single source for Veteran self-service, contact information, military service history, and Veteran status. It'll provide Veterans, their families, and their caregivers with a user-friendly, high-performance digital platform to access the VA benefits and services they've earned.

All our current content, features, and forms on public facing VA websites will be redesigned, rewritten in plain

"Vets.Gov . . . it's the future of federal government digital development. . . . they should be proud they're taking a bold step and setting the standard for how federal websites should be built."

GovFresh.com
November 11, 2015

language, and migrated to **Vets.gov**. Single sign-on functionality will enable the site to pre-populate forms and save Veterans' time.

Modernize our contact centers (to include Veterans Crisis Line). Veterans in crisis will speak to experienced responders on the Veteran Crisis Line 24/7. And during normal business hours on MyVA's 311 line, Veterans can get accurate information on services VA provides. Every VA Medical Center will have four standard call-center components: scheduling, nurse triage, pharmacy, and general operator capabilities.

Veterans can expect their questions to be answered on first contact with VA.

Improve the Compensation & Pension Examination.

Veterans across the nation will be engaged as partners in the Compensation & Pension process, and they will have a standardized, more satisfying experience. The positive impact will be measured through direct Veteran feedback.

Develop a simplified appeals process. With the help of Congress and thanks to hard work of Veterans Service Organizations (VSOs), State Directors and Commissioners of Veterans Affairs and their National Association of State Directors of Veterans Affairs (NASDVA) and other Veteran advocates, Veterans will be looking forward to a simplified, streamlined, and fair appeals process. In five years, Veterans could have 90 percent of their appeals resolved within one year of filing.

Continue to reduce Veteran homelessness. More and more Veterans and their families who are homeless or at-risk of becoming homeless will be permanently housed, rapidly rehoused, or prevented from falling into homelessness. They'll have greater opportunities to rejoin and contribute to the strength, vibrancy, and economic vitality of their communities.

Improve the employee experience (to include leadership development and employee engagement).

VA leaders will be engaging, inspiring, and empowering their employees to deliver a seamless, integrated, and responsive Veteran Experience. Leaders will be fostering a culture of trust, inclusion, and accountability. A culture of principles-based—rather than rules-based—decision-making will be encouraging innovative change.

Performance management systems will resonate with employees, encourage continuous improvement and excellence, and provide clear performance expectations and continuous feedback.

And employees—trained on advanced business skills and establishing high customer-service standards—will have the tools to achieve excellence.

Staff critical positions. Lean principles will inform regulation and policy changes, creating more efficient and streamlined hiring processes. Human-Centered Design principles will ensure a positive application experience for new talent. Time to fill vacancies will be reduced by 30 percent, and critical staffing levels will smartly balance access with clinical productivity. At least 95 percent of our Medical Center Directors will be permanent, and 90 percent of other management and critical shortages will have been addressed.

*VA has an extraordinary opportunity,
and we're seizing it.*

Deputy Secretary Sloan Gibson
February 23, 2016

Transform the Office of Information & Technology (OI&T). A single IT Enterprise Strategy supported by the key principles of transparency, accountability, innovation and teamwork will transform VA into the partner of choice for our employees and Veterans. It will drive all leadership performance goals, and performance plans will be linked directly to the goals of transformation and MyVA.

Transform Supply Chain. We'll be leveraging VA's scale and achieving significant cost avoidance by way of our enterprise-wide integrated supply chain, increasing responsiveness and reducing operating costs.

By year's end, our Medical-Surgical supply chain will have delivered \$150 million in cost avoidance that's been redirected to priority Veteran programs and outcomes.

Leading Change

Guided by our **Vision**, inspired by our **Mission**, committed to our **Values**, focused by our **MyVA Strategies**, and driven by our **12 Breakthrough Priorities**, we've come a long way since July 2014.

In the first 12 months after the access crisis, we completed seven million more appointments than we did during the same period the year prior: 2.5 million were at VA, 4.5 million were in the community.

Altogether in FY 2015, we completed nearly 57 million appointments inside VA and over 21 million in communities—nearly 2 million more than FY 2014. More than 97 percent of the appointments were inside 30 days of the clinically indicated or Veteran's preferred date—1.4 million more than FY 2014.

And we're making the sweeping changes necessary for VA to be a high-performing organization.

We'll know we're getting there when, by design, Veterans' needs shape all our systems, processes, and our culture.

Twelve of our top 17 executives are new since July 2014, and they're creating opportunities for even greater progress.

And we're making important progress—both for the near-term, and the long-term—thanks to the President's unwavering devotion to Veterans and the strong support of Congress, Veterans Services Organizations, stakeholders, and other partners.

Building Momentum

The breadth and depth of VA's benefits and services are unmatched, anywhere.

Besides health care, VA is Veterans' resource for important non-medical determinants of health. These are services like career transition support, education services, vocational rehabilitation, fiduciary services, pension resources, disability compensation, home loan guaranties, insurance, and others.

That's one reason we're so proud of the Veteran Benefits Administration (VBA) and its massive transformation.

VBA employees have been processing Veterans' claims at record-setting paces for six years now. The backlog of disability claims pending more than 125 days that peaked in 2013 is down nearly 90 percent, and they finished 2015 with the lowest claims inventory since 2008.

Today, 99.8 percent of all disability compensation claims are processed electronically. That positions us for an unconstrained national workload strategy that will increase production capacity, improve consistency, and reduce wait times.

Average days pending for claims? It's now just 89 days.

Eligibility determinations—often Veterans' first VA touch—are critical to a memorable Veteran experience.

So progress redesigning our **Compensation & Pension Examination** around Human-Centered Design principles is important to us, and our surveys are telling us we're moving in the right direction.

The incremental, agile software development of Veterans Benefits Management System (VBMS) shows just what technology means to transformational change—it means designing and deploying IT systems that can quickly respond to rapidly changing requirements and fielding solutions that answer Veterans' and employees' needs.

The **Office of Information & Technology's transformation** is well-underway. And with new and innovative functions like strategic sourcing, cloud computing, and data management, the effects will extend far into the future. OI&T's Enterprise Program Management Office (EPMO) is the new control tower for VA software development, ensuring alignment of program portfolios to strategic objectives and providing visibility and governance to all of VA's IT initiatives. The EPMO's Veteran-focused Integration Process (VIP) focuses on doing rather than documenting, with a reduction in documents from more than 50 to just seven, plus an Authority to Operate.

We're aggressively using technology to **increase access to health care**. VA leads the Nation in telehealth services. Last year, 12 percent of enrolled Veterans received telehealth-based care—that's over 2 million telehealth visits serving nearly 678,000 Veterans. And we're expanding that access to VA care in more than 45 clinical areas.

VistA Scheduling Enhancements are on track to be completely fielded by the end of 2016 so schedulers can

more quickly and accurately make appointments. That's better customer-service experiences for Veterans.

OneVA Pharmacy, another VistA enhancement, is on track to be fielded by the end of the year, too. That will mean Veterans can get prescriptions filled at any VA pharmacy, even when they're away from home.

We've built on Joint Legacy Viewer (JLV) capacity. JLV is already providing groundbreaking agency-to-agency interoperability, combining and sharing data to give VHA clinicians a composite view of Veterans' complete Electronic Health Record. We've grown from 18,000 to over 101,000 users with JLV access, so far. We'll have over 120,000 by year's end.

And we're on track to finish fielding our Enterprise Health Management Platform (eHMP)—transformational technology expanding our capacity to see the Veteran's complete health history.

JLV and eHMP are both examples of technologies that are by design Veteran-centric, not facility-centric.

We're putting information Veterans want at their fingertips with a growing array of mobile apps. We're field testing our Veteran Appointment Request (VAR) app—another VistA enhancement—so Veterans can view, schedule, track, and cancel Primary Care and Mental Health appointments. VAR is being piloted at 10 sites, and it'll be available to all Veterans by end of 2016.

Our Distance Hearing Aid Fitting app links to Bluetooth so distant audiologists can remotely make hearing aid adjustments for Veterans at home. Home-based tele-mental health apps give Veterans flexible access to mental health services. Advances in secure, encrypted messaging

VA must have an exemplary IT organization to provide the highest level of service to our Veterans. . . . We are establishing a strong technical foundation that ensures alignment with VA's mission, data visibility, and accessibility; data interoperability; infrastructure interoperability; information security; and enterprise services. . . . We are measuring success, ensuring accountability, investing in the capabilities of OI&T employees, and collaborating across VA to build trust.

LaVerne H. Council
Assistant Secretary for Information and Technology
March 16, 2016

links Veterans with Primary Care Teams, Specialty Care Teams, Mental Health providers, and pharmacists.

We're overhauling the Health Care Enrollment Process to increase Veterans' access to care. For instance, we've tailored regulations so that beginning in June Veterans can use Enroll by Phone to access their VA health care.

No paper. No signature. Just a call.

MyVA Access is focusing our staff, tools, and systems to give timely, Veteran-centric access to health care. MyVA Access means Veterans seeking primary care get clinically appropriate health care encounters the very same day.

That could be a same day appointment with a primary care doctor. It could be a call from a nurse with medical advice. It could mean a telehealth or mental-telehealth encounter. It could be a secure message, a prescription refill, or a walk-in to a clinic or emergency facility. Thirty-four facilities are already providing Veterans same-day service for their urgent needs.

During the second National Access Stand Down at the end of February, VA physicians and other clinicians treated

16,000 Veterans on that one Saturday. In Level 1 clinics where we provide our most critical services like cardiology and oncology, 99 percent of the 81,000 patients waiting more than 30-days for care were individually assessed. Over 80 percent of Veterans waiting more than seven days on the Electronic Wait List in Level 1 clinics have been given an appointment.

Access Stand Downs prioritize Veterans needing care most urgently and accelerate care when that's the next best step for them.

Sustaining that kind of Veteran access will continue long after Access Stand Downs.

We're continually expanding capacity by **improving VA Community Care**, increasing productivity, **staffing critical positions**, and expanding our space.

Our integrated system of VA community care has grown by 20 percent since just last October—VHA offers an extensive community network of over 289,000 providers through the PC3/Choice network.

In one year (Mar. 1, 2015 – Feb. 29, 2016), Veterans received over 3 million authorizations for care in the community. That's a 10 percent increase over the year prior. And over 80 percent Veterans' authorized clean claims are getting processed in 30 days or less.

Clinical workload is up over 20 percent in the last two years. That's a nearly 18 percent increase inside VA and a 38 percent increase with **VA community care**. It's over 7 million additional hours of care for Veterans.

Over the last year (Mar 1, 2015 – Feb 29, 2016) we completed nearly 57.5 million appointments. That's 1.6 million more than the same period the prior year. We're scheduling about 160,000 appointments every day.

And in February, we completed over 96 percent of appointments within 30 days of the clinically indicated or preferred date.

Employees and leaders are applying Lean principles to create more efficient and streamlined hiring processes. And Human-Centered Design principles are improving new talent's hiring experience.

Thanks to focused efforts to **staff critical positions**, VHA has increased staff by more than 18,000 employees (net) since October 2014. That's over than 6,300 more nurses, nearly 1,600 more physicians, almost 100 more psychiatrists, and 460 more psychologists caring for Veterans.

And we're were working hard to attract talent from the private sector so we can strengthen our ranks with diverse thinking and experiences. With just 74 percent of VA Medical Center Director positions filled with permanent appointments, we still have a lot of work to do.

By rethinking our systems, working with our current partners, and exploring new public-private partnerships . . . VA is transitioning from a loose federation of regional systems to a highly integrated enterprise.

Under Secretary for Health Dr. David Shulkin
March 17, 2016

Our Healthcare Leadership Talent Institute is reinvigorating leader talent searches, cultivation, and succession planning so we have a reliable pipeline of highly skilled medical center leaders for the future.

We're increasing space where demand is increasing. Last year we activated over 2 million more square feet of space for clinical, mental health, long-term care, and support facilities to care for Veterans.

Social service support is a critical non-medical determinant of Veteran health, so **continuing to reduce Veteran homelessness** remains a priority for us. And we're making important progress.

Across the Nation, Veteran homelessness dropped 36 percent between 2010 and 2015. More than 365,000 Veterans and their family members have been permanently housed, rapidly rehoused, or prevented from falling into homelessness as a result of VA's homeless continuum of services and targeted community resources. In in the first three months of this year, more than 29,000 Veterans and their family members were either housed or prevented from becoming homeless.

The VA Grant and Per Diem (GPD) Program is engaged in a programmatic transformation focusing on transitioning Veterans to permanent housing. As of March 2016, exits to permanent housing are at nearly 72 percent, exceeding our FY 2016 target of 65 percent.

We applaud 23 communities and two states—Virginia and Connecticut—that ended Veteran homelessness, thanks to collaborative networks extending from the White House, across the Federal government and state and local governments, and with both non-profit and for-profit organizations.

That’s exactly what President Lincoln meant when he charged the Nation: Care for those who have “borne the battle,” and their families.

To improve the Veteran Experience, our Veterans Experience office is standing up, bringing new capabilities in customer service measurement and service design. That way, we can more rapidly and efficiently deliver exceptional experiences.

For the first time, we have standard, enterprise-wide Veteran Experience metrics so we can bring precision to the process of shaping Veterans’ experiences.

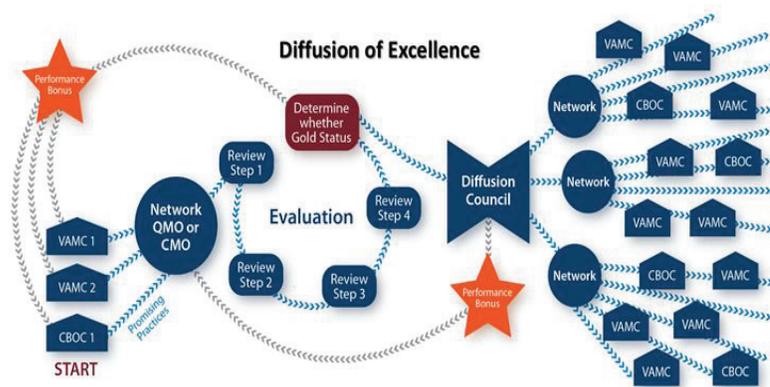
Tools like our Survey of Health Experience of Patients (SHEP) and VetLink measure access and customer satisfaction by what Veterans tell us. For instance, our kiosk-based VetLink indicates about 90 percent of Veterans are either completely satisfied or satisfied in getting the appointment when they wanted it. We have more work to do for those Veterans who weren’t satisfied.

And our Welcome to VA (W2VA) Initiative means all newly enrolled Veterans will receive a courtesy call from VA’s Health Resources Center to tell them about health care services and benefits, help

them schedule their first appointment, and answer their questions.

Vets.Gov is launched. It’s on-track. It’s a single, one-stop shop of self-service features and information for Veterans

and those caring for them. **Vets.Gov** will be fully operationally by year’s end. That means over 400 Veteran-facing websites will collapse into one Veteran-friendly interface.



Vets.Gov will feature True Online Enrollment with hyper-text markup language (HTML) forms to automate processes and reducing processing time.

To reduce emotional stress prior to the time of need, the NCA is developing a pre-need eligibility process and enhancing engagement and outreach to Veterans about interment and memorialization preferences.

NCA is continuing the largest expansion of its system of national cemeteries since the Civil War to serve Veterans. In addition to five new national cemeteries in major metropolitan areas, we're establishing eight new national cemeteries to serve Veterans in rural areas. In five urban areas we're establishing columbaria-only facilities that will enhance service.

And we've realigned our nine disjointed organizational boundaries and structures. Our new single framework promotes internal coordination, collaboration among business lines, and provides consistent and exceptional customer service.

Improving the Veteran Experience goes hand-in-glove with **improving the Employee Experience**.

For the employees serving Veterans, a high-performing organization means teams intellectually equipped to dramatically improve care and service delivery to Veterans.

Private-sector experts are teaching employees cutting-edge business skills like Lean Strategies, Human-Centered Design, and other performance improvement capabilities. They're helping our people see their roles in new ways. They're helping us grow a principles-based culture of continuous improvement, from the bottom up.

Our Leaders Developing Leaders (LDL) initiative is spreading best practices across VA, and it's accelerating enterprise-wide change. We launched LDL last November with 450 senior field leaders, and over 9,000 are already trained. By year's end we'll have trained more than 12,000.

We also trained and provided Employee Engagement Playbooks to approximately 400 senior leaders VA-wide to equip them with the knowledge and tools necessary to empower staff to deliver high performance service to our Veterans. The Playbook is distributed at training events for new senior executives and is posted on-line for easy reference.

Our Reports, Approvals, Measurements, Meetings, and Policies initiative (RAMMP) is eliminating bureaucracy and non-value-added work across VA. That's freeing time and people to make innovative contributions.

Our Diffusion of Excellence Initiative is another systematic way we're continuously elevating best practices in care delivery from the field.

The diffusion process spreads promising best practices across the health care system. It helps minimize variability. It empowers employees' innovation sharing. And it helps solve some of VHA's most pressing challenges in care delivery and creates a learning health system.

In addition to our Joint Legacy Viewer (JLV) and Enterprise Health Management Platform (eHMP), other knowledge management tools like Strategic Analytics for Improvement and Learning (SAIL) and our Healthcare Operations Dashboard are technological advantages empowering staff with actionable information. That way, they serve Veterans fast, and better.

SAIL measures, evaluates, and benchmarks quality and efficiency at medical centers. It's our roadmap for delivering progressively better health care outcomes by assessing quality, patient safety, patient satisfaction, and access—among 22 other criteria.

Most health-care industry report cards are updated annually—telling you today where they were two years ago.

SAIL reports quarterly at every facility so medical centers can track and improve performance.

How good is SAIL?

The chief marketing officer of one of the largest health care organizations in America said that if the world knew what VA's doing with SAIL, they'd beat a path to our door. He said that if he had SAIL in his organization, he'd implement it tomorrow.

The Healthcare Operations Dashboard gives clinicians actionable intelligence and situational awareness. Facilities are monitoring operational effectiveness and efficiency through real-time operations data analysis. It's the authoritative source supporting effective communication, reporting, and information dissemination to both internal and external stakeholders.

Transforming our supply chain is one more example of achieving support services excellence. Our new, integrated supply chain is already paying dividends, like \$750 million cost avoidance (50 percent savings) through renegotiated pricing for Hepatitis C treatment and over \$24 million in supply chain costs avoidance.

And in April, we awarded our new Medical-Surgical Prime Vendor contract which will give us better pricing on over

10,000 items and 85 percent of all medical and surgical supplies.

These are savings redirected to Veteran outcomes.

It's about being good stewards of taxpayer dollars.

But we know we can't achieve everything Veterans deserve alone. That's why we're working collaboratively with world-class institutions like USAA, Cleveland Clinic, Wegmans, Starbucks, Marriott and Ritz-Carlton, NASA, Kaiser Permanente, Hospital Corporation of America, Virginia Mason, Department of Defense (DoD), and GSA, among others.

We're expanding strategic partnerships with external organizations and capitalizing on their good will, resources, and expertise. Our partners include respected organizations like IBM, Philips, Johnson & Johnson, Amazon, YMCA, the Elks, the PenFed Foundation, Coursera, Google, Walgreens, academic institutions, other Federal agencies, and many more.

We're consulting experts and listening to good advice on our transformation. Our MyVA Advisory Committee, MVAC, is a diverse group of business leaders, medical professionals, experienced government executives, and Veteran advocates.

We're helping communities get involved, too. We've enabled a national network of 55 Community Veterans Engagement Boards (CVEBs), so far. The number grows weekly. CVEBs leverage community assets, not just VA assets, to meet local Veteran needs. Eight more communities are in development right now, and 30 are exploring this opportunity.

Our goal is 100 CVEBs by the end of the year.

Help We Will Need

We are steadfast in our commitment to doing everything we can for Veterans.

But important priorities for transformational change require congressional action.

The President's FY2017 Budget Submission is another tangible sign of his unfaltering loyalty to Veterans and VA's transformation. Any reductions to the request will hurt Veterans, impede some critical initiatives necessary to transform VA into the high-performing organization Veterans deserve.

More than 100 legislative proposals for VA are in the President's 2017 Budget and 2018 Advance Appropriations requests. Over 40 are new this year. Some are absolutely critical to maintaining our ability to purchase non-VA care. They all require congressional action.

We need Congress's help **modernizing and clarifying VA's purchased care** authorities. Above all else, this needs to get done to ensure a strong foundation for Veterans' access to Community Care.

We need Congress's help **streamlining VA's Care in the Community systems** and programs. Last October, we submitted our plan to consolidate and simplify the overwhelming number of different programs and improve access to VA Care in the Community.

We need Congress to enact legislation that will allow us to **better compete with the private sector** to get the best medical professionals to choose VA. That means flexibility on the 80-hour pay period limit for certain medical professionals and compensation reforms for network and hospital directors.

Likewise, we need to treat health care career executives more like their private-sector counterparts. That means **expanding the Title 38 hiring authority** to VHA Senior-Executive-level Medical Center Directors, VISN Directors, and other health care executive leadership positions. Then, we could hire these employees more quickly with flexible, competitive salaries. And they'd operate under stronger accountability policies.

We have to be more responsive to Veterans' emerging needs. So, we're asking for **modest flexibility to overcome artificial funding restrictions** on Veterans' care and benefits.

And we simply cannot serve Veterans well without **ambitious action on our disability claim appeals** system.

It's a heavy lift.

But this Congress with today's VA's leadership team can enable these transformational changes—and more—for Veterans.

Then, we'll look back on this year as the year VA turned the corner for Veterans.

It was President Ronald Reagan who gave Veterans "a seat at the table of our national affairs" nearly three decades ago.

Our aim is to keep Veterans in control of how, when, and where they wish to be served.

It will be important in 2017 to maintain our momentum and preserve our focus to capitalize on the significant progress of 2016.

In October we'll detail VA's progress against our **Breakthrough Priorities 2016** and chart a course for **Breakthrough Priorities 2017**.

Resources & Connections

Explore MyVA and watch the transformation at . . .

- VA Fiscal Year 2014-2020 Strategic Plan <http://www.va.gov/performance/> and <https://www.performance.gov/>
- MyVA Website <http://www.va.gov/opa/myva>
- MyVA Integrated Plan Overview 1.0, July 2015 http://www.va.gov/opa/myva/docs/myva_integrated_plan_overview.pdf
- Testimony to Senate Veterans Affairs Committee, January 21, 2016 <http://www.veterans.senate.gov/imo/media/doc/VA%20Sec%20Testimony%2001.21.2016.pdf>
- MyVA Communities <http://www.va.gov/nace/myVA/index.asp>
- Vets.gov <https://www.vets.gov/>
- VA Facebook <https://www.facebook.com/VeteransAffairs>
- VA Twitter <https://twitter.com/DeptVetAffairs/>
- MyVA Email myvaops@va.gov
- MyVA for Employees <https://myva.va.gov>
- VA Apps Store www.Mobile.VA.Gov/appstore

Administrations
change. Our
collective
commitment
to Veterans
shouldn't.



VA



U.S. Department
of Veterans Affairs

*my***VA**
Putting Veterans First