SECVA ALL EMPLOYEE TOWN HALL



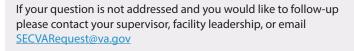
FREQUENTLY ASKED QUESTIONS

HELD JUNE 16, 2022—2:00-3:00PM ET



This event can be viewed at: https://site-2124030.bcvp0rtal.com

TOPICS COVERED					
<u> </u>	Total Questions Submitted	%		otal Questions Submitted	%
H.R. 3967—PACT Act of 2021	1	0.24	క్ర్ట్ర్ క్ర్మ్ క్స్ క్ర్మ్ క్స్ క్స్ క్ర్మ్ క్స్ క్స్ క్ర్మ్ క్ర్మ్ క్స్ క్స్ క్స్ క్స్ క్స్ క్స్ క్స్ క	31	7.52
Safety	17	4.13	Harassment	8	1.94
Employee Experience	64	15.53	Hiring	45	15.53
Retention	123	29.85	Telework	44	10.68
Electronic Health Record (EHR)	6	1.46	Infrastructure	13	3.16
RAISE Act	45	15.53			







H.R.3967 - HONORING OUR PACT ACT OF 2021

Title IX of the PACT Act focuses on our employees and includes provisions to strengthen our workforce and build upon efforts in the 10-point human infrastructure plan.

If enacted, the Act will:

- Bring relief to hiring restrictions on housekeeping aides, one of the most understaffed and hardest to hire positions.
- Allow for waiver of pay limits for work done related to toxic exposure.
- Give VA authority to pay recruitment, relocation, and retention incentives up to 50% of base pay and special contribution awards up to \$25,000.
- Increase limits on repayment of student loans and increase limits on hiring students and college graduates.
- Increase limits and use of critical pay and special salary rates.

Study after study demonstrates Veterans in VA care do better — and this legislation could bring up to 3.5 million more Veterans into our care. The PACT Act would be one of the largest substantive health and benefit expansions in VA's history, comparable in scale and impact to the Agent Orange Act. It would codify many of the ongoing efforts by the department to improve its process for establishment of presumptions of service connection due to toxic exposure, reducing the burden for Veterans and increasing transparency.



Sergeant First Class Heath Robinson Honoring Our Promise to Address Comprehensive Toxics (PACT) Act of 2022 will enhance VA by:

- Expanding VA health care eligibility
- Improving VA's presumption process
- Bolstering VA's toxic exposure resources
- Strengthening toxic exposure research
- Increasing VA claims processing capacity
- Strengthening VA's workforce
- Investing in VA health care facilities

The Act expands VA health care eligibility for toxic exposed Veterans and extends the period of health care enhanced eligibility for Post-9/11 combat Veterans.

VA will improve the presumptions process for future toxic exposure-related presumptions of service connection.

Every Veteran will be able to receive a toxic exposure screening at VA medical appointments.

VA health care and benefits personnel will receive toxic exposure-related education and training.

The Act includes studies on mortality of veterans who served in Southwest Asia during the Gulf War, Post-9/11 Veterans' health trends, and Veterans' cancer rates.



The Act has 53 sections spread across VBA and VHA and requires collaboration between VA and DoD. Department level integration is being led by VA Office of Enterprise Integration. VBA and VHA are working collaboratively to address all sections and identify areas with cross administration impacts.

Ensuring the health and safety of our workforce continues to be our highest priority. We are tracking local conditions and adhere to the latest safety guidance from the Centers for Disease Control and Prevention (CDC) and Safer Federal Workforce Task Force.

Based on Task Force guidance, we are taking a layered approach to safety protocols including vaccination, masking, testing, ventilation and telework flexibilities. Facility leaders have the discretion to layer these tools based on local conditions to keep the workforce safe.

If an employee tests positive for COVID-19 or has been exposed, they must immediately notify their supervisor.

Their supervisor should report the incident to their watch officer, space/facility liaison and all potentially impacted associates who may have been in contact with the infected person. To maintain confidentiality, the supervisor should not disclose the name of the infected or exposed employee.

If an employee tests positive for COVID-19, they should isolate and follow CDC isolation guidance according to vaccination status. Likewise, if an employee is exposed to COVID-19, they should follow the CDC guidance on guarantining.

The impacted VA facility will determine areas where the employee may have been, retrace their steps and immediately dispatch a team to deep-clean and sanitize impacted areas in accordance with CDC guidelines.

COVID-MASKS

Masks are a critical public health tool for preventing the spread of COVID-19.

We use mask wearing as one of multiple mitigation strategies to protect the workforce.

When it comes to masking requirements, we follow the latest guidance from the Safer Federal Workforce Taskforce, CDC and Occupational Safety and Health Administration (OSHA).

Based on this guidance, we currently have two sets of requirements for mask wearing - one for non-healthcare facilities and the other for healthcare settings.

For non-healthcare facilities, we will continue to follow Task Force guidance that requires mask wearing in facilities when the CDC COVID -19 Community Level is high in the county where the facility is located.

For healthcare settings, we will continue to follow the OSHA healthcare temporary standard and require universal masking for all patients, staff, and visitors.

COVID-NEW PANDEMICS

The number of cases of monkeypox in the United States is very low and has been increasing very slowly. VA clinicians are aware of the outbreak and are evaluating patients for the disease. At this time, VA has not identified any confirmed cases at its medical centers and remains in a state of preparedness should the situation change.

- VA attends interagency briefings (e.g. By the CDC, DHS, and Executive Office of the President) to remain apprised of the current state of monkeypox.
- VA has a heightened awareness for identification of cases and reporting cases to the appropriate local public health jurisdictions.
- Communications about the evolving situation, to include informational web presentations about diagnosis and treatment of monkeypox, have been distributed to VA Infectious Diseases providers.
- VA has adequate personal protective equipment at this time.
- If needed, vaccine and therapeutic drugs will be obtained through the CDC using well-established channels.

Current VA Actions:

- Issue Brief Reporting
- Guidance via HOC Field Ops distributed on 5/26/22
- Standardized Lab Order and Results under development (This has been completed and disseminated to all VAMCs today)
- Testing will primarily be performed by state public health labs
- VHA Public Health Reference Laboratory will serve as backup and for surge (PHRL and state public health labs will conduct orthodox screening. Any positives need to be confirmed at CDC)
- Standardized Note Template under development
- Facilitate consistent documentation and enable systematic monitoring/surveillance
- Developing approach for post-exposure prophylaxis

Actions for the Field:



- Identify, Isolate, Communicate
 - CDC provided clinical guidance Monkeypox | Poxvirus | CDC
 - Providers to work with Infection Control and Infectious Disease to coordinate testing and reporting with local/state DOH



- Infection Control and Environmental Cleaning
 - Infection Control: Hospital | Monkeypox | Poxvirus | CDC
- Follow CDC Guidance for Healthcare Worker Exposure
 - Monitoring People Who Have Been Exposed | Monkeypox | Poxvirus | CDC
 - Local Occ Health and Infection Control perform contact investigation



• Report via Issue Brief Guidance



• Implement standardized testing in VistA laboratory systems (ongoing as of today)



Ensuring the health and safety of our workforce continues to be our highest priority.

VA has a diverse footprint of facilities across the country. If the local environment drives VA to increase the security posture of our facilities, we are prepared to implement additional security measures commensurate with the perceived threat.

Across VHA, Medical Center Directors and their Chiefs of Police are always evaluating their current security posture to ensure they have the required measures in place to protect our Veterans, staff, visitors, and facilities. If needed, additional security measures are implemented to address the perceived threat while providing minimal impact on the Veterans' access to care.

In addition to our Medical Centers, VA Police also support our national cemeteries managed by NCA. For those NCA properties geographically separated from VA medical center grounds, VA has established memorandums of understanding with local law enforcement entities to provide the necessary security and response capabilities to incidents that occur on cemetery grounds.

Finally, VA employees that work in federal buildings managed by the General Services Administration are protected by the Federal Protective Service (FPS) within the Department of Homeland Security. VA maintains daily coordination with FPS and maintains a joint Common Operating Picture to provide awareness of all threats across the Nation.

VA published Handbook 5979, Harassment Prevention Program (HPP) Procedures, in March 2022. It is a comprehensive policy that addressing processing of allegations of harassment and other disruptive behaviors in VA facilities. VA 5979 introduces agency-wide procedures for the Harassment Prevention Program at VA in accordance with the "Enforcement Guidance: Vicarious Employer Liability for Unlawful Harassment by Supervisors" from the Equal Employment Opportunity Commission (EEOC). It stipulates mandatory policies and procedures by which facility directors must comply. Of note, upon receipt of a harassment allegation, management is required to address the allegation within five business days.

Additionally, medical center directors and VISN directors are required to complete a facility remediation plan to address five or more substantiated sexual harassment/sexual assault allegations reported during the current fiscal year. The facility remediation plan is routed through the respective higher level of reporting through the Deputy Under Secretary for Health Operations to the VA Office of Resolution Management and Diversity and Inclusion for review and oversight.



EMPLOYEE EXPERIENCE

As leaders, we must foster a culture of work-life balance where meeting your mental and physical health is just as important as meeting mission.

An important part of the 10-point infrastructure plan is to make sure that employees are engaged, supported, heard, and empowered.

To help set the tone for employee experience at VA, we developed an Employee Engagement Framework that identifies five drivers of engagement:

- Servant leadership behaviors
- Employee's voice
- Innovative environment
- People focused
- Connection to the mission

All these drivers create a place where employees want to work and feel a sense of purpose, dedication, and commitment.

We want to create a place where employees are respected, and their diverse backgrounds and experiences deliver exceptional customer service.

In our FY22 strategic plan I made it a point to ensure that we weave in the importance of focusing on the employee experience:

- 1) by ensuring we listen and anticipate needs of our team members,
- 2) that we build trust with our team members, and
- 3) that we transform our human capital capabilities to empower a collaborative culture.

All these are now hardwired into our long-term planning which I think is key to making any kind of sustained changes.

I think we all have the responsibility not just leaders to help set the tone to improve employee experiences. Someone's experience is not only shaped by their interaction with a supervisor or leader. It is also shaped by the work we do, the technology we use to do the work and connect with each other, how connected we are to the mission, and then also our overall well-being and our ability to show up at work authentically and not have to hide any part of who we are. I have the responsibility to make sure I set the conditions and lead from the top, but I'm also asking you to see what you can do in these areas to drive positive work experiences not just for yourself but for your team members.

To provide a world-class employee experience that empowers all team members to serve our Veterans, their families, caregivers, and survivors with pride. We also want to ensure an inclusive, responsive, seamless, and employee-centric experience through which all team members feel valued and supported as meeting mission.



We are working aggressively to improve hiring times by using expedited hiring authorities to reach Veterans, military spouses, students, college graduates, and individuals with disabilities.

We are holding job fairs where offers can be made on the spot, and we are improving the onboarding process by re-sequencing steps and getting employees on duty faster.

We also continue to work closely with the Office of Personnel Management and Congress to identify potential legislative changes to the hiring process.

We continue to grow each year in response to increased demand to meet services, improve access and enhance Veteran satisfaction.

To keep pace with this growth, we need to hire more HR specialists and invest in our Technical Career Field HR Intern Program.

Moreover, HR at VA is very complex and crosses three different personnel systems.

To help navigate this complexity, we are increasing automation and reducing manual work.

We are also streamlining HR processes to achieve more manageable workloads.



REBOOT: VA invests in its employees, not only because it's the right thing to do, but because it's an investment in Veterans. VA established the Reducing Employee Burnout and Optimizing Organizational Thriving (REBOOT) Taskforce in November 2021. This Taskforce is charged with developing a comprehensive strategy, including metrics and actions, to monitor and mitigate stress on the healthcare workforce, facilitate whole health and well-being, increase dissemination of mental health support resources, and enhance recruitment and retention. VA remains committed to addressing system stressors that contribute to burnout and fostering joy and wellbeing in the workplace.

EAP: The Department of Veterans Affairs recognizes that employees are one of its most valuable resources. While everyone experiences stress, sometimes the effects of too much stress can disrupt work performance and personal well-being. The Employee Assistance Program provides free confidential counseling and referrals for all employees and their immediate family members. EAP is designed to help VA employees and their families deal with problems before they become unmanageable.

Whole Health: Employee Whole Health is essential to our health and resiliency and represents a proactive model of well-being that is protective against stressors and challenges we face in our day to day lives. Focusing on "ME" through mindful awareness and self-discovery allows us to reflect on what matters most. This brings connection to our meaning, aspiration, and purpose and supports true work-life integration. We prioritize self-care, such as movement, sleep, nutrition, personal and professional development, and relationships, and seek professional care to support our physical and mental well-being. We create a community that is diverse, equitable, and inclusive and connects us through our common, shared experiences. Together, ALL of these equal Whole Health. Learn more at: Employee Whole Health - Home (sharepoint.com)



OPM requires positions not classified as remote to report a minimum of twice per pay period to their duty station. However, VA will continue to review and evaluate business practices in the future.

VA will continue to address the everchanging workplace landscape to ensure that VA answers its charge to provide excellent service to our Nation's Veterans and their families, as well as support our employees in their daily lives.

Prior to the pandemic, and the implementation of max telework, VA had a robust telework program in place. During the pandemic, VA has been able to complete a vast majority of our work in a virtual environment. VA performed well during the pandemic, and we attribute this to the dedication and resourcefulness of our employees during these unprecedented times.

As we implement our "return to the office" guidance to get employees safely back into the workplace on some cadence, we will continue to employ telework options, along with providing in-person assistance options for Veterans and their families. Regarding future plans on a remote environment, at this time, unless an employee is officially in a remote status, all of VA is adhering to an Office of Personnel Management (OPM) requirement that dictates employees are to report a minimum of twice per pay period to their duty station.

There have been notification requirements for bargaining unit employees which have resulted in some VBA locations appearing to remain in max telework while VBACO and other VBA locations without bargaining unit employees have already transitioned from max telework. The ability to telework remains an option for managerial discretion, but all employees are to be provided a notice of their eligibility to participate in telework on an annual basis.



Implementation of a new EHR in any organization is hard. Change across a health system as large and complex as VA is all but unprecedented. With the migration to VA's new EHR system, clinicians have to make a significant change in how they approach their day-to-day care for Veterans. Certain challenges are expected, and we are learning and improving because of them.

Importantly, however, this change to a standardized, enterprise-wide approach is also what will allow us to continue to deliver on the promise we've made to Veterans. It is key to ensuring our providers have the modern tools they need to deliver safe, world-class care.

Aside from anticipated challenges and lessons learned, overall adoption of the new system among site personnel is trending positively. Based on objective measures and feedback from leadership, the recent deployment sites are effectively using the system and making improvements in their delivery of care.

At Mann-Grandstaff VA Medical Center (VAMC) in Spokane, Washington, the new system has improved laboratory efficiency and streamlined procedures, as it is now capable of processing more lab samples than with the legacy system. At Jonathan M. Wainwright Memorial VAMC in Walla Walla, Washington, the new EHR has increased efficiency and radiology turnaround times and freed lab staff roughly three hours a day manually processing thousands of specimens. And at the VA Central Ohio Healthcare System in Columbus, Ohio, the surgery department is performing more surgeries than pre-deployment and there have been significant improvements in laboratory turn-around times compared to the legacy system.





Employees are VA's number one asset. Over the course of the COVID-19 pandemic, VA employees ensured that VA did not weaken or slow down.

We must take care of the people who have balanced the challenges of life during the pandemic and recruit additional staff to support Veterans.

Since February, we have taken many steps to implement the 10-point plan to include:

- Implemented the \$15 minimum wage increase along with the RAISE Act.
- Submitted additional legislative proposals for hiring and pay relief.
- Expanded opportunities to telework and work remotely.
- Increased the total family income for the childcare subsidy program.
- Worked across VHA to gather recommendations to combat burnout.
- Implemented measures to keep our employees protected from COVID-19



The RAISE Act allows us to offer competitive salaries in high-paying, high cost of living labor markets and strengthens our ability to recruit and retain nurses and physician assistants.

We are rapidly implementing the Act in a phased approach.

Since the Act was passed in March, VA has:

- · Published policy.
- Reviewed pay schedules for physician assistants, registered nurses, and advance practice registered nurses.
- Made changes to our HR and payroll systems.

This month, employees who were at the prior pay cap of \$176,300 will begin receiving retroactive pay and salary increases.

We are also already hiring physician assistants and nurses up to the higher limits.

