

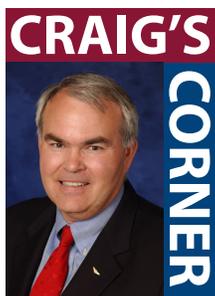


OHI News You Can Use

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Innovation and Transformation



A little over two months into 2010 and OHI has seen a blizzard of activity (pun intended) and has experienced an amazing and productive start to the New Year. As Under Secretary for Health, Dr. Robert Petzel stated during his December confirmation hearing, "Our foremost responsibility is to provide safe, effective, patient-centered health care for America's Veterans. Building the best health care system for America's Veterans has been my life's work." OHI is dedicated to helping him achieve

his vision because it is the basis of ours as well. We are proud to be guided by his strong leadership and continue to be zealous in our commitment to Veterans. To be people-centric, results-driven, and forward-looking, we must remain steadfast in our resolve to provide the best care anywhere. To that end, OHI was recently involved in two tremendously successful programs.

The first, a partnership between the Department of Veterans Affairs (VA) and Kaiser Permanente, was launched at the beginning of the year. The program involved a tremendous amount of effort and preliminary work performed by talented staff from OHI. The pilot health information data exchange program, located in San Diego, employed the Nationwide Health Information Network (NHIN) and enables clinicians from VA and Kaiser Permanente to obtain a more comprehensive view of a patient's health using electronic health information, including information about medications and allergies. The Department of Defense (DoD) joined the program on January 29, 2010. You can read more about the pilot on page 2.

OHI also led the way on the Veterans Health Administration's (VHA) Innovation Initiative and helped tailor the electronic tools and communication materials used for the overwhelmingly successful start to this program. The initiative was launched in early February and right up until the closing, the action and participation were outstanding. When the competition closed on February 28

there were 44,110 active users; more than 6,500 ideas had been posted; 9,727 comments were received; and 552,606 votes were cast. A review and voting panel will make recommendations to Roger Baker, VA's Assistant Secretary for Information Technology and Dr. Robert Petzel who will determine the top 25 ideas. We will continue to keep you updated in the coming months on the results of the Innovation Initiative. You can also follow the progress at: <http://www.ehealth.va.gov/EHEALTH/VHAINnovationInitiative.asp>.

I'd like to thank OHI staff for their continued dedication in making VHA the provider of choice for our nation's heroes. These two high profile programs and their successful implementations define the caliber of people on the OHI team.

Your Resident Patient,



Craig B. Luigart
Chief Information Officer



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Craig's Rules[®]

"In all conduct and dealings, stay on the (ethical) high ground. The credibility that honesty and transparency provides is a shield and mantel to your position that all will recognize when issues are being muddled around you".

VA/KP Partnership Makes History in Improving Patient Care

By Stacie Rivera and Cynthia Butler

The San Diego VA Medical Center helped OHI make history and usher in a new era January 2010. The groundbreaking achievement took place when patient data was electronically exchanged via the Department of Health and Human Services (HHS) NHIN between the San Diego VA Medical Center and private health care provider Kaiser Permanente. 450 patients agreed to take part in the pilot. The new electronic health information sharing system, NHIN, used by other Federal entities (e.g., Social Security Administration, Centers for Disease Control) and now by three larger providers, VA, the Department of Defense (DoD), and Kaiser Permanente allows providers at these institutions to view and share patient treatment information in “real-time,” meaning the information is updated in both systems within seconds to a few minutes.

Both VHA OHI and the San Diego VA Medical Center have been incubators for health information interoperability and have spearheaded the role of NHIN, including piloting VA data exchange within VA, the DoD and with Kaiser Permanente. With visionaries such as Robert M. Smith, MD with VA San Diego Healthcare System and Steve Steffenson of DoD under the leadership of OHI staff like Tim Cromwell, PhD, Director of Standards and Interoperability, and Chief Health Informatics Officer, Linda Fischetti, RN, MS the pilot health information exchange program today allows clinicians from VA and Kaiser Permanente in San Diego to share health data for consenting patients using electronic health information. Patient data is limited at this point to medications, allergies, and problem lists.

In 2009, President Obama announced his goal for a VA-DOD Virtual Lifetime Electronic Record (VLER) program that would allow continuity of care from the day an individual enlists, throughout their military career, and continuing on through Veteran status. DoD signed onto the program on January 29, 2010. With a Veteran’s military health information included, the system will be one step closer to achieving the VLER system.

“VA met the challenge of aggressive timelines and project visibility established by White House interest in the health information exchange pilot.”

Under the auspices of HHS, NHIN is a federal initiative that links health information exchanges, integrated delivery networks, pharmacies, government health facilities, labs, providers, and other stakeholders into a “network of networks.” To participate in NHIN, health organizations need a gateway application that reaches out across the Internet to talk to other NHIN health organizations plus an adapter that interfaces with the organization’s gateway. Dr. Cromwell is instrumental in many of the Federal and National NHIN initiatives.

Assisted by a team of clinicians, project managers, and technical support staff across the Nation, VA met the challenge of aggressive timelines and project visibility established by White House interest in the health information exchange pilot. Approximately three out of four Veterans, nationally, get joint or co-managed medical care from VA and other private care providers.

The NHIN pilot will continue to expand and include more types of health information such as x-rays and lab reports as well as Veteran benefits information.



From left: Stephen Ondra, M.D., Senior Policy Advisor for Health Affairs, U.S. Department of Veterans Affairs
Robert Smith, M.D., Acting Chief of Staff, VA San Diego Healthcare System
John Mattison, M.D., Chief Medical Information Officer, Kaiser Southern California
Andy Wiesenthal, M.D., Associate Executive Director, Kaiser Permanente
Peter Levin, Ph.D., Chief Technology Officer, U.S. Department of Veterans Affairs
Tim Cromwell, Ph.D., Director, Standards and Interoperability, Office of Health Information Field Office, Salt Lake City



From left: Annie Tuttle, Public Affairs Officer, VA Loma Linda Healthcare System
Lawrence Baumgardner, VA San Diego Healthcare System-Kaiser Permanente Patient



From left: Graham Nixon, Director, Clinical Informatics, VA San Diego Healthcare System
Heather Chambers, Reporter, San Diego Business Journal
Peter Taft, MD., San Diego HealthConnect Champion, Kaiser Permanente

Photos courtesy of San Diego VA Medical Center

OHI's Fab Four Email Practices

1. **Sending Email:** Prior to sending an email, the sender has determined it is the most effective way to communicate the message (call or visit if time critical).

Guidelines for sending emails / filling out the basic information:

To – Those being directly addressed and/or need to take action .

Cc – Recipients should know why they are receiving the email (use sparingly).

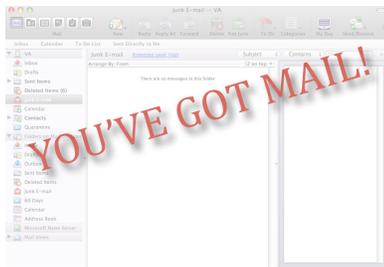
Bcc– Do not use – need open communication/awareness of who receives what.

Subject – A short, meaningful summary of the content

- If it is an action, include the due date
- If there are multiple actionees
 - identify who is responsible for what in the email body

Good example: "Action: Comments on the Chicago Notes needed by COB 7/31/09"

Bad example: "Comments needed" or "Due Thursday" (which Thursday?)



2. **Replying to Email:** Use discretion when responding to e-mails. There are clearly times when a response is desired, required and expected. While other times, responding only contributes to inbox clutter. Learn to determine the difference and reply to those e-mails where you know the other side is seeking confirmation or information from you.

Guidelines for Replying to Emails:

Reply to the original sender and others who need the information being provided

Answer all questions asked and pre-empt further questions/emails: answer all questions in the original email to minimize email traffic and frustration.

Moreover, if you are able to pre-empt relevant questions, your recipient will be grateful and impressed with your efficient and thoughtful email etiquette.

Reply All - Use Sparingly: use only when confident "all" will be interested in or need the content or awareness of your response.

Example Stats: if I send a dozen people an e-mail asking if they are available at a certain time for a meeting I should get a dozen replies and that's it. However, if each person hits the "Reply to All" button not only do I get a dozen everyone else for a t

3. **Forwarding Email:** Prior to forwarding, think carefully about the value of the message– is it accurate, necessary, etc. Forward only those emails of value to the recipient – do not forward chain letters

Guidelines for Forwarding Emails

Remove unnecessary headers, email addresses, and commentary prior to forwarding.

Include the pertinent information upfront, describing why you forwarded the email and any action you expect them to take.

Respect the privacy of others:

If you must forward to more than one person, put your email address in the "TO:" field and all the others in the "BCC:" field. This protects email addresses from being published. Also remember from above – to **remove** unnecessary headers, email addresses, and commentary prior to forwarding. This will further protect the privacy of your co-workers.

Good Example: Each addressee is scrutinized to ensure they require the information being forwarded

Bad Example: Forwarding to large group of people via email listservs

4. **Email Strings/Threads:** Maintain the same subject line throughout the thread (includes responses, forwards, etc.)

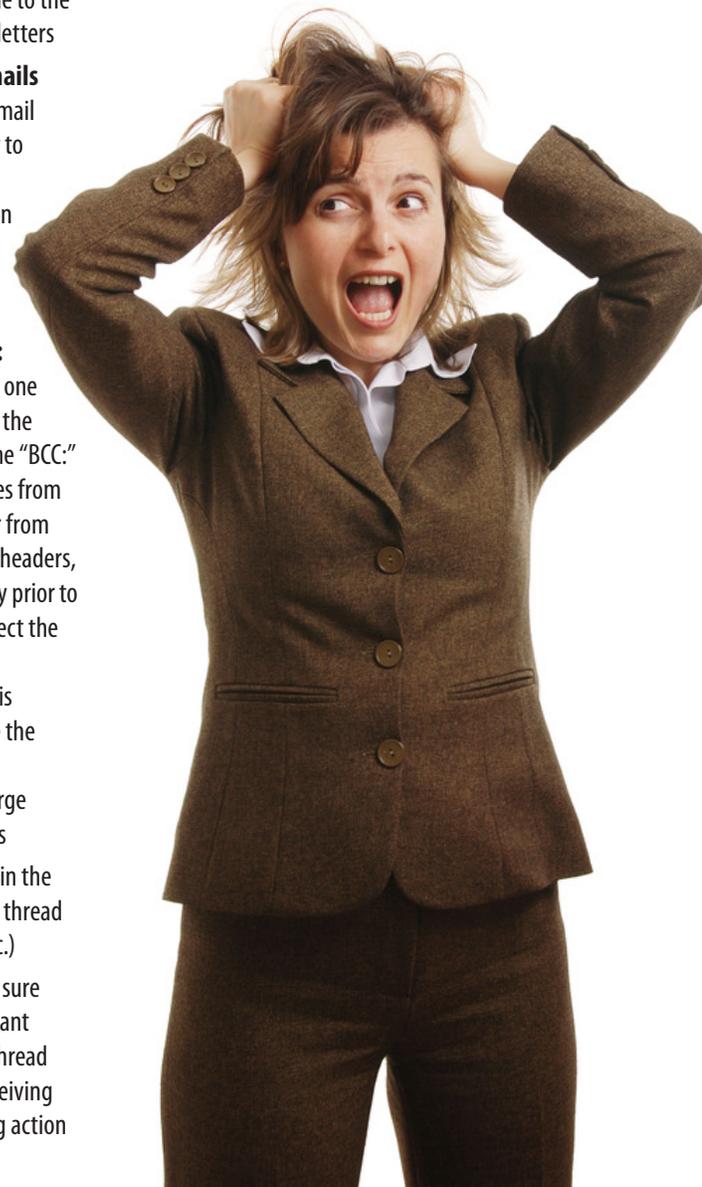
Essence of the Message: make sure the essence of the message, relevant points, and/or actions on a long thread are moved to the top so those receiving it and those responsible for taking action

can easily find the important information. Let the recipients know up front what your contribution to the thread is – keep it brief, but provide enough context so no one has to wade through screens of information to figure out what's going on.

Good Example: The following actions must be completed by COB 3/28/10:

- Review attached word document for clarity and consistency
- Validate numbers in Excel spreadsheet
- Send questions / comments to Jane Doe

Bad Example: Please see the below and attached and let me know what you think by dates noted in below string



My HealthVet Scores Big with Veterans

My HealthVet is VA's award-winning portal (www.myhealth.va.gov) that provides Veterans, active duty Service members and others with trusted health information, resources, and other VA services via the web. Launched nationwide in 2003, My HealthVet is a free online Personal Health Record (PHR), providing access to VA prescription refill requests, Mental Health Screening Tools and more. Authenticated VA patients can also view their VA prescription history and get customized VA Wellness Reminders.

My HealthVet is a proven vital and popular tool with more than 916,000 registered users, 35M visits, and nearly 13.2M VA prescription refill requests as of December 2009. Since October 2007 the American Customer Satisfaction Index (ACSI) survey has been used to measure Veteran satisfaction with My HealthVet. The

NUMI Application Released

The Enterprise Systems Management (ESM) Office, Health Provider Systems (HPS) portfolio is pleased to announce the release of the National Utilization Management Integration – NUMI application.

NUMI is a web-based application that supports field Utilization Management (UM) staff in standardizing the UM process and documenting reviews for clinical appropriateness in the acute care setting. The new application eliminates the need to perform paper based UM assessments. NUMI will save data entry time retrieving patient

VHA Section 508 Office Offers Exceptional Service

In OHI we are always striving to support our partners in providing optimum care and service to Veterans. Our VHA Section 508 Office offers consultation, education, and support to ensure the information technology and electronic content you develop is accessible to people with disabilities. Partnering with the VHA Section 508 Office early in development and procurement processes makes it easier for teams to understand and comply with accessibility requirements, meet Section 508, and improve overall quality

ACSI is an industry standard tool that focuses on the "Voice of the Customer." Recent survey results demonstrate that Veterans are highly satisfied with the My HealthVet Program (8.3/10.0), highly likely to return to the site (9.1/10.0), and highly likely to recommend it to other Veterans (8.6/10.0). Site visitors score satisfaction notably higher than key benchmarks, and survey results strongly influence future requirements and enhancements by capturing direct Veteran feedback, including the desire for VA appointment views, lab results, electronic communication, and access to select electronic medical records.

The My HealthVet Annual Review provides a comprehensive summary of ACSI data for My HealthVet, including user characteristics, needs, and preferences. Check it out here and share it with your stakeholders:

<http://www.ehealth.va.gov/EHEALTH/MHV2.asp>

data from VistA, make Interqual criteria available online, and create a national UM database for reporting and analysis.

The utilization reviews are considered core data to support efficiency, quality improvement, and business/compliance functions central to VA's mission. In 2004, the Under Secretary for Health required Office of Quality and Performance (OQP) to establish a standardized national UM Program so that VHA would have a consistent policy and national data that could be analyzed and used for ongoing quality improvement purposes. The OQP will use NUMI as the standardized UM data collection tool.

of electronic materials. One customer, a VA e-learning producer, recently contacted the VHA Section Office to offer this compliment: "The willingness to offer your experience and knowledge is way above the average. It's exceptional . . . content is of the highest quality meeting the needs of all the users in our system . . . Your extra effort and input makes this process much more relevant and understandable to me and that enables better development and design in the front end of the project." To learn more about the support and guidance VHA Section 508 Office can offer you, visit <http://vista.med.va.gov/508workgroup/>

Commitment to High Quality Care for Our Nation's Heroes

"DoD/VA Data Sharing – Successes to Date" was the topic of a joint VA-DoD panel discussion, during the 2010 Military Health System (MHS) Conference held in National Harbor, Maryland the week of January 25th.

Panel members included Lois Kellett, Director of External Relationship Management, MHS/CIO; Katherine Murray, MHS Chief of Interagency Coordination; and Peyton Isaac, Senior Management Analyst, VHA/OHI VA/DoD Health Information Sharing Directorate.

Panel members provided details on the scope of health operations, types of patient health data shared and future interoperability plans. A prevailing theme of the panel was the commitment of VA and DoD to provide the highest quality of care for those who have so honorably served our Nation.

"Our first priority is to provide quality care for Service members and Veterans," said Isaac. "It's the right thing to do."

OHI Supports VHA Field Training

Since 2008, OHI has conducted site visits to 38 VA Medical Centers and Community Based Outpatient Clinics in an effort to support health care services provided to Operation Enduring Freedom (OEF)/ Operation Iraqi Freedom (OIF) Veterans. During these visits, OHI staff noted a lack of awareness of the availability and steps to access DoD health information in CPRS and VistA Web. OHI staff quickly responded by offering on-site training to demonstrate access to DoD health information and provide practical tips for setting up CPRS system parameters. Training on Remote Data Views, VistA Web and VistA Imaging was provided to over 700 VHA physicians, nurses, social workers, pharmacists and administrative staff with an impressive 98 percentile rate of positive feedback.