

Caption QC for hi² Product 7 Video
Dec. 13, 2013



For over 30 years, the VA has developed and deployed software that's been transformative, not only within the VA, but outside the VA because we've been such a leader in this space. So a lot of the things we've developed—computerized provider order entry—were way before what you saw happening in the private space. So we've created VistA, and we've created CPRS, which is really the graphical user interface for VistA. What we know is we need to evolve VistA, and that's actually the term we've been using—VistA Evolution. We need to figure out how to have the interface, which is what patients and providers will interact with, be more modern, be able to respond quickly to the needs of our providers. We're going to do that using VistA as our core.

The VA's been really lucky in some ways. We've had the opportunity to develop certain initiatives that have enabled us to really be at this cutting edge, this creative edge, of "What should we do next?" The Health Informatics Initiative is a great example of that, and really in fact, the leading example of that in the health IT space. There's tremendous lessons learned in the Health Informatics Initiative. And not only now, but what we anticipate is that there will continue to be lessons learned. You know, the only way you can do successful health information technology is to have somebody out there on the leading edge, the sharp point, saying "This is where you need to go," and that's what the Health Informatics Initiative has done.

So in 2014, we've made a commitment, along with our secretary, to deploy a new VistA Evolution graphical user interface at two sites. This is consistent with the commitment that we've made over the last few years. That new deployment will include additional functionality. The functionality is designed to ensure that we're responding to what we know are our clinical needs. They include things like an info button—a button that enables you to contextually query and get information related to what's wrong with your patient at that time. The hope is that it makes the system more efficient and it definitely should make the provider more efficient. So we want to move towards a health IT system that's patient-centered, that's interoperable, that ensures coordination of care, that makes sure that at all the different levels of health information technology, we're providing access to our patients, our providers.

The goal of all this is really the driver, however. That goal is to improve health status. It's to become more efficient and effective in our health care delivery systems. We believe—and we know there's good data to support this now—that health information technology provides the tools to do that. Obviously they're just one of the tools in the armamentarium of providers but they're a major tool, and they're a critical part of how we deliver care.

So ultimately, if we give them tools that make them more efficient, that means they can sit more at the bedside. That means they can have different conversations with the patients. That means that they're able to touch and comfort in a way that they may not have been able to do before because they either didn't have the time or they didn't have the information.

