STATEMENT OF DR. CAROLYN CLANCY DEPUTY UNDER SECRETARY FOR HEALTH AND ORGANIZATIONAL EXCELLENCE

VETERANS HEALTH ADMINISTRATION (VHA)
DEPARTMENT OF VETERANS AFFAIRS (VA)
BEFORE THE

HOUSE COMMITTEE ON VETERANS' AFFAIRS SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS U. S. HOUSE OF REPRESENTATIVES

SEPTEMBER 18, 2017

Good morning, Chairman Bergman, Ranking Member Kuster, and Members of the Subcommittee. Thank you for the opportunity to participate in this hearing to discuss VA's response to the concerns raised at the Manchester, New Hampshire VA Medical Center (VAMC). I am accompanied today by Dr. Michael Mayo-Smith, Network Director for VA New England Healthcare System (Veterans Integrated Service Network (VISN) 1), and Mr. Alfred Montoya, Jr., Acting Medical Center Director at the Manchester VAMC. I would like to specifically note the appreciation that we have for Mr. Montoya stepping forward into a tough situation and handling it admirably.

First, let me begin by saying that VA appreciates the actions taken by whistleblowers when it comes to safeguarding care for our Veterans. We are committed to always protecting those whistleblowers from retaliation. VA has and will continue to take immediate action when responding to whistleblower concerns at any VA facility across the country. The Office of the Medical Inspector (OMI) and the Office of Accountability and Whistleblower Protection (OAWP) were sent to conduct a top-to-bottom review of the Manchester VAMC. In response to the allegations, the Secretary rapidly recognized the need for a new leadership team. We look forward to this

opportunity to build trust between VA and our Veterans and to keep Congress up-todate on our progress.

Our focus in Manchester is now on the way forward and ensuring that high quality and timely access to care is the standard in all aspects of Medical Center operations. Currently, the Medical Center is executing a plan that focuses on five key areas which include the following: rebuilding leadership, restoring trust, improving care, fixing the Veterans Choice Program's local operations, and designing the future.

One focus of the whistleblower concerns was the lack of consistent leadership in key positions at the Medical Center. Currently, we are actively recruiting for the Medical Center Director, Chief of Staff, Nurse Executive, Chief of Medicine, Chief of Surgery, Chief of Primary Care, Director of Urgent Care, and a physician leader for the newly created Office of Community Care. In order to attract the highest caliber candidates to these key positions, we are recruiting nationally.

Second, we are also working on restoring the trust of our Veterans, staff, and community stakeholders. Medical Center leadership has taken swift action to ensure that all members of the Medical Center, including clinical staff, are included in key decisions. VA acted swiftly and immediately by asking OMI and OAWP to review the allegations raised in a Boston Globe article. Additionally, the Secretary directed a top-to-bottom review of all aspects of the VAMC's operations, which provided key action plans for improvement. We also requested a non-VA review, conducted by Lumentra Healthcare Solutions, a peer review network, of our myelopathy cases and the above-mentioned OMI investigations. Finally, there has been consistent, structured public

reporting and listening sessions with Veterans, staff, and community stakeholders to discuss progress at the Manchester VAMC.

Our third area of focus is improving timely access to care. To do this at the Manchester VAMC, we have committed over \$5 million to hiring additional staff. This includes several key positions on the cardiology staff and two new patient-aligned care teams (PACT) for Primary Care. In addition, we have accelerated community and academic partnerships to support the Medical Center. In a first-of-its-kind collaboration with a private hospital in Manchester, we have seen dozens of Veterans for endoscopic procedures with VA providers using the hospital's space. We are well underway to securing a second arrangement for general surgery, orthopedics, interventional pain, and urology procedures. In addition, we have successfully recruited an academically affiliated cardiologist who started last week. The Acting Chief of Staff is working with Dartmouth Hitchcock to discuss physician leaders in Manchester securing Dartmouth College affiliations. We are looking to open an accredited rehabilitation program for chronic pain and purchase needed equipment for surgery. We have also restarted nuclear medicine tests at the VAMC with the goal of adding stress tests by October. We have successfully hired two suicide prevention coordinators, a Women's Health Medical Director, and a Women Veterans Program Manager. We are also working hard to ensure that all areas affected by the flood at the Medical Center are open and operational by the end of December 2017.

Using VA providers and staff to perform outpatient procedures at a number of our community providers has enhanced the experience that our Veterans in New Hampshire receive. However, our Veterans, providers, and community stakeholders

have made us aware of the serious work needed to improve the Veterans Choice Program, which is why our fourth focus is on enhancing the experience of all involved in this Program. On July 26, 2017 we created a new Office of Community Care in Manchester that consists of over 30 staff, including 17 new positions, dedicated to ensuring our Veterans have assistance in navigating all aspects of Care in the Community. This Office processed and cleared a backlog of approximately 3,300 pending consults. With a change in process, 95 percent of all pending consults are being taken care of within 2 business days. Additionally, we have taken a proactive approach with our community providers and assisted in ensuring that bills from our providers within the Veterans Choice Program network and our community care providers are being processed in a timely manner. We have established routine calls with our Veterans Choice Program network's field operations staff, embedded a Veterans Choice Program network representative full-time within our staff, and fostered a relationship of collaboration. We are positioning the Manchester VA Office of Community Care to be able to handle any changes to the Veterans Choice Program in the future.

Finally, Secretary Shulkin will be creating a subcommittee of VA's Special Medical Advisory Group (Advisory Group), one of VA's Federal advisory committees, to make recommendations to the Advisory Group on the future VA care delivery model for New Hampshire Veterans. The subcommittee membership will consist of strong representation from New Hampshire Veterans, VAMC staff (including representation from whistleblowers), regional and national subject matter experts, and leaders of the New Hampshire hospital and provider communities. Under the direction of the Advisory

Group, the subcommittee will undertake a careful review of data and develop innovative options for improvement. Its goal will be to provide recommendations to the Advisory Group regarding the future vision of what VA must do to best meet the needs of New Hampshire Veterans. The subcommittee will take the grave infrastructure issues at the Manchester VAMC into account when developing its recommendations to the Advisory Group. The subcommittee will make recommendations to the Advisory Group, and the Advisory Group will in turn make recommendations to the Secretary, through the Under Secretary for Health, by January 2018.

We look forward to this opportunity for our new leadership to restore the trust of our Veterans and continue to improve access to care inside and outside VA. Our objective is to give our Nation's Veterans the top quality care they have earned and deserve. Mr. Chairman, we appreciate this Subcommittee's support and encouragement in identifying and resolving challenges as we find new ways to care for Veterans. My colleagues and I are prepared to respond to any questions you may have.