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|---|---|
| Description of document: | Department of Veterans Affairs (VA) records related to contractor Young & Rubicam aka Burson-Marsteller, 2012-2013 |
| Request date: | 27-March-2014 |
| Released date: | 20-May-2014 |
| Posted date: | 18-August-2014 |
| Source of document: | Department of Veterans Affairs<br>Veterans Affairs Central Office<br>FOIA/Privacy Act Officers<br>810 Vermont Avenue, NW<br>Washington, DC 20420<br>Email: vacofoiaservice@va.gov |

May 20, 2014

<u>Via email</u>

Re:  Freedom of Information Act Request 14-04059-F

This is our final response to your Freedom of Information Act (FOIA) request dated and received in this office on March 27, 2014.  You requested "…a copy of each deliverable report and presentation to VHA by contractor Young & Rubicam aka Burson-Marsteller…between January 1, 2011 and the present."

On April 28, 2014 you were categorized as an "Other" requester for the purpose of FOIA processing fees.  Per 38 C.F.R. § 1.556(c) and 5 U.S.C. § 552(a)(6)(B)(i), because we must search for, collect records from, and consult with field components and contracting officers, and because the requested records are voluminous, you were advised that we were taking the 10 business-day extension.

On May 2, 2014 you were advised that the estimated fees for processing your request totaled $291.20.  The fee estimate was based off of our identifying ten task orders as responsive to your request.  I requested confirmation of your willingness to pay fees totaling $291.20.  On May 2, 2014, via email, you stated:  "I limit my request to only those records that can be produced with the first three hours of search, of which the first 2 hours are at no charge.  I will accept that (in addition to getting the listing of ten task orders you have already retrieved) as the result of this request."  Please know that I considered your statement "…(in addition to getting the listing of ten task orders you have already retrieved)" to be a modification of your original request.  I interpreted this portion of your request to mean that you are only seeking a listing of the ten task orders and not a copy of the task orders themselves.

Pursuant to your request, I am providing you with a copy of the following items that were found responsive to your original request; please note these items were located within the first three hours of our search:

1)  01072013_VA_TOPR_24_Weekly_Status;

2)  03262012_VA_TOPR_24_Weekly_Status;

3) 04022012_VA_TOPR_24_Weekly_Status;

4) 05212012_VA_TOPR_24_Weekly_Status;

5) 06182012_VA_TOPR_24_Weekly_Status;

6) 07162012_VA_TOPR_24_Weekly_Status;

7) 08272012_VA_TOPR_24_Weekly_Status;

8) 09172012_VA_TOPR_24_Weekly_Status;

9) 10012012_VA_TOPR_24_Weekly_Status;

10) 11302012_VA_TOPR_24_Weekly_Status;

11) B-M – VA TOPR 24 Monthly Progress Report – Apr 2012 – 050412, (Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report – April 2012), (6 pages);

12) B-M – VA TOPR 24 Monthly Progress Report – Feb 2012 – 020512, (Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report – February 2012), (4 pages);

13) B-M – VA TOPR 24 Monthly Progress Report – June 2012 – 070212, FNAL (Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report – June 2012), (6 pages);

14) B-M – VA TOPR 24 Monthly Progress Report – Mar 2012 – 040212, (Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report – March 2012), (5 pages);

15) B-M – VA TOPR 24 Monthly Progress Report – May 2012 – 060412, (Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report –May 2012), (6 pages);

16) B-M – VA TOPR 24 Monthly Report – November 2012;

17) B-M – VA TOPR 24 Monthly Report – October 2012;

18) B-M – VA TOPR 24 Monthly Report – September 2012;

19) B-M-VA_TOPR24_Monthly_Progress_Report_July2012;

20) Copy of Copy of TOPR 29 PMP – 10 19 12;

21) Burson-Marsteller Team TOPR 24 – VHA Office of Informatics and Analytics (OIA) Monthly Progress Report – January 2012, (5 pages);

22) OIA_Presentation_FINAL_20120405, (34 pages);

23) Topr 29 Recap Notes – 10 23 12_FINAL, (3 pages);

24) TOPR 29 Strategic Plan_FINAL FINAL, (Office of Tribal Government Relations Strategic Plan Calendar Years 2013-2015), (107 pages);

25) VA eHealth Analytics Report March FINAL ([www.ehealth.va.gov](www.ehealth.va.gov) Analytics Report, February 2012), (12 pages); and,

26) VLER_AHIMA-8_12 (Department of Veterans Affairs' Virtual Lifetime Electronic Record and Nationwide Health Information Network – Our Journey Continues), (33 pages).

After reviewing the above 26 documents, I have determined that the documents are releasable in their entirety.

The following ten task order numbers are provided in response to the modified portion of your request:

1) VA798110003;

2) VA798110001;

3) VA79812J0001;

4) VA798100001;

5) VA798110002;

6) VA798110004;

7) VA79812J0155;

8) VA798110005;

9) VA79812J0025; and,

10) VA119A13J0015.

The fees associated with the processing of your FOIA request are as follows:

- Search: 3 hours – 2 hours free; 1 hour x $41.60 per hour = $41.60;
- Copy: No fee as documents to be provided electronically;

The total fees due for the processing of your request are **$41.60**. On May 2, 2014, via email, you agreed to fees for three hours search in which two hours were free. The fees due do not exceed the limits to which you agreed to pay. Please submit the **$41.60** fees, made payable to the Department of Veterans Affairs, to:

Richard Ha, FOIA Officer
US Department of Veterans Affairs, OAL
425 I Street N.W., 3rd Floor, Room 3E.636
Washington, DC 20593

Although this decision does not constitute a denial, should you wish to appeal these findings, you may administratively appeal in writing to:

General Counsel (024)
Department of Veterans Affairs
810 Vermont Avenue, N.W.
Washington, DC 20420

You must file your appeal within 60 days from the date of this letter. Please include a copy of this letter with your appeal, and clearly state why you disagree with this determination. Both the letter and the envelope should be clearly marked "Freedom of Information Act Appeal."

In the event you are dissatisfied with the results of any such appeal, judicial review will thereafter be available to you in the United States District Court for the judicial district in which you reside or have your principal place of business, or in the District of Columbia, which is also where the records you seek are located.

Sincerely,

Ruthann Parise
Government Information Specialist

Enclosures

| Task Number | Assignments | Status | Begin Date | | End Date |
|---|---|---|---|---|---|
| 2.2.2.1 (Stat Comm Plan) | Strategic Communication Plan. | Worked on template for gathering information for fact sheets that Dr. Fihn's ABI team leads can put fill out to describe their work and its impact. Sent template on 3/23.<br><br>Reviewed Gail Graham's feedback on Plan with Stacie and Courtney. Draft plan due on 3/27, along with the Project Plan.<br><br>In a 3/20 call and documents provided subsequently, VA provided clarification on some aspects of its social media policy that are being factored into the overall communications plan. Social media recommendations were submitted for the MyHealtheVet mini-campaign.<br><br>Next Steps: B-M team continues to work on the social media portion of the overall strategic communications plan. At a Glance Factsheet due on 3/27. | 3/26/2012 | | 3/31/2012 |
| 2.2.2.2 (Internal/External Comms Products) | **Current round of template development to establish Identity and Style Guide** is included in this task: 11 x 17 Poster Template (2 Options) + the 5 templates (e-newsletter, fact sheet, etc.)<br><br>According to the SOW, the deliverables will include talking points, reports and PPT presentations, but can be modified based on OIA's needs. Sage plans to use this task budget for **art direction and design services for branding and custom materials for high-profile programs** e.g. Bar Code Expansion, RAMP, VLR... (versus production of collateral in 2.2.4.1) | **BCRO Annual Report:**<br><br>Sage was assigned 2 tasks for BCRO (the Annual Report, which falls in this task, 2.2.2.2 and the newsletter, which falls under 2.2.4.1, below).<br><br>**Status:** The report has been approved. 508 compliance in progress and will deliver NLT 3/26 in both a lo and hi res PDF.<br><br>**Large Poster Presentation (8' x 4'):**<br><br>**Status:** Cancelled until further notice. Sage is waiting for OIA to provide final content and specific creative direction, if any, to proceed with this project.<br><br>**Note:** Sage would deliver this as a PDF (recommended to produce a higher quality product). This would however, not be editable by OIA.<br><br>**PPT Presentation:**<br><br>**Status:** Sage delivered this on 3/7 and waiting for feedback, if any.<br><br>**MyHealthe Vet Brochure & 4 Fact Sheets:**<br><br>**Status:** Sage received feedback on the fact sheets on 3/22 from OIA. Sage to deliver revised designs the week of 3/26.<br><br>**BCRO E-Newsletter:**<br><br>**Status:** Sage sent OIA a mock-up on 3/16. Waiting for feedback/approval on design before proceeding to build HTML version.<br><br>**MyHealtheVet Toolkit - Pocket folder/booklet w/tabbed inserts/pages** | 3/26/2012 | | 3/31/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | The B-M team submitted a front-end organization chart, individual service page design, SharePoint options and the process to generate the initial phase of the directory of services. In a 3/23 in-person meeting with VA, it was agreed to update the Directory of Services memo and screenshots previously provided as the initial deliverable for 3/30.<br><br>Next steps: VA to provide the most up-to-date organization chart. B-M team will continue working to gain access to VA server and OIA SharePoint. In parallel, B-M team will continue brainstorming on best ways to build out an OIA online contact directory on OIA SharePoint and utilize SharePoint functionality to improve communications among VA employees. | 3/26/2012 | | 3/31/2012 |

| Task Number | Assignments | Status | | Begin Date | | End Date |
|---|---|---|---|---|---|---|
| 2.2.3.1 (Corporate Branding Assessment) | This task includes creating a style guide for OIA, based on VA and VHA's style guides, and will utilize the templates developed in 2.2.2.2. | The OIA style guide is in progress and will be developed based on VA's overarching style guide. The items the OIA templates will be included in the guide as placeholders, since Sage has not received official approval on these items.<br><br>**OIA Style Guide**<br><br>**Status:** In progress by Sage. Due to client NLT 3/30.<br><br>**OIA Templates:**<br><br>Sage revised the 11x17 poster and built out the following templates based on OIA's feedback/direction on the poster:<br>1. E-newsletter<br>2. Fact sheet<br>3. Tray liner<br>4. Bookmark<br>5. Web contact card (based on direction provided on 2/27)<br>6. Web contact bookmark (requested in 2/27 feedback).<br>Status: Sage received final feedback from OIA by 3/16 and will delivered final template designs on 3/23 for client to review/approve. | | 3/26/2012 | | 3/31/2012 |
| 2.2.4.1 (Communication Products) | Production of collateral (60 products) is included in this task. Once templates from 2.2.3.1 and 2.2.2.2 are approved, the effort shifts to this Task for flowing in content and layout. | **BCRO Newsletter Template (*high-priority item):**<br><br>**Status:** Approved.<br><br>**MyHealthe Vet Toolkit - Invitation, Postcard Mailer, Physician Bio Cards, E-Newsletters (2)**<br><br>**Status:** Toolkit items due on 3/30.<br><br>Other deliverables on hold until templates from 2.2.3.1 and 2.2.2.2 are established. | | 3/26/2012 | | 3/31/2012 |
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | Held 3/20 conference call with Paula Sageser about Microsoft Search Server Express. Technical questions were answered, and the next steps will be to discuss with VA team if implementation is prudent.<br><br>B-M team will continue working to gain access to VA server and OIA SharePoint. | | 3/26/2012 | | 3/31/2012 |
| 2.2.4.3 (e-tools) | E-tools and templates for online communication. | Next steps: B-M team will continue brainstorming on a set of tools and metrics to assess the effectiveness of communication products and distribution mechanisms. | | 3/26/2012 | | 3/31/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Compiled weekly updates into SharePoint list.<br><br>Uploaded weekly updates into OIA's SharePoint site. | | 3/26/2012 | | 3/31/2012 |
| 6 (Professional Web Mgt & Maint. Support) | Website Assessment of www.ehealth.va.gov | B-M team reviewed discovery session notes from meeting with OIA on the eHealth website.<br>B-M team created content inventory of existing website<br>Next Steps: B-M team working on user task analysis and draft information architecture<br>B-M team is working on March's quality assurance reports and website usage report.<br>Next Steps: B-M team will continue working to gain VPN access to VA's internal server. | | 3/26/2012 | | 3/31/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.1 (Stat Comm Plan) | Strategic Communication Plan. | BM Team wrote project plan, revised draft deck, and spoke with client for direction. Deck and project plan delivered on 3/27.<br><br>Social media action items were included in the high-level communications plan presentation and project plan.<br><br>Next Steps: B-M team will work to execute the social media portion of the overall strategic communications plan. B-M will work with OIA to connect with the VHA Web Communications Office to submit an application for OIA social media channels and learn the process for getting OIA content posted to the existing VHA channels. | 4/2/2012 | 4/7/2012 |
| 2.2.2.2 (Internal/External Comms Products) | **Current round of template development to establish Identity and Style Guide** is included in this task: 11 x 17 Poster Template (2 Options) + the 5 templates (e-newsletter, fact sheet, etc.)<br><br>According to the SOW, the deliverables will include talking points, reports and PPT presentations, but can be modified based on OIA's needs. Sage plans to use this task budget for **art direction and design services for branding and custom materials for high-profile programs** e.g. Bar Code Expansion, RAMP, VLR... (versus production of collateral in 2.2.4.1) | **BCRO Annual Report:**<br>Sage was assigned 2 tasks for BCRO (the Annual Report, which falls in this task, 2.2.2.2 and the newsletter, which falls under 2.2.4.1, below).<br><br>**Status:** The report has been approved -- 508 compliance was delivered to OIA on 3/26 in both a lo and hi res PDF.<br><br>**Large Poster Presentation (8' x 4'):**<br><br>**Status:** Cancelled until further notice (Note: Sage would deliver this as a PDF (recommended to produce a higher quality product). This would however, not be editable by OIA.).<br><br>**PPT Presentation:**<br><br>**Status:** Approved.<br><br>**My Health_e_ Vet:**<br>Brochure: Sage received feedback on the fact sheets on 3/22. Sage updated text and design and returned to OIA for feedback on 3/30.<br>4 Fact Sheets: Sage received feedback on the fact sheets on 3/22. Sage updated text, design for one as a template and returned to OIA for feedback on 3/30.<br>Messsages and Blog Post: B-M submitted on 3/16; OIA sent feedback on 3/22. Messages were revised and submitted on 3/26 for final approval.<br>Toolkit Items: B-M drafted content and submitted for review on 3/26. Sage designed pocket folder, which was submitted for review on 3/30."<br><br>**Status:** Once the new design for these has been approved, Sage will put the remaining fact sheets into the approved design template. B-M, Sage awaiting feedback on design, text to begin second round of edits.<br><br>**VA Healthcare Gender Report**<br><br>**Status:** Submitted design and communications timeline on 3/27. Awaiting final report to begin communications plan, design elements.<br><br>**OIA Field Analytics**<br><br>**Status:** Team reviewed request. Sage and Definitive Logic meeting on 4/2 to access existing images and design. B-M to lead group call on deliverables for week of April 2 to assess next steps and timeline.<br><br>*Sage/B/M need to discuss and define other deliverables with OIA that will fall under this task. | 4/2/2012 | 4/7/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | The B-M team submitted an updated memo and screenshots for the SharePoint Directory of Services - including a organization chart and search format - for review by OIA leadership during meeting on 3/23. Memo submitted 3/27 for OIA review.<br><br>**Next steps:** VA to provide the most up-to-date organization chart. B-M team will continue working to gain access to VA server and OIA SharePoint. Meetings scheduled the week of 4/2 to outline implementation schedule. In parallel, B-M team will continue working with OIA to build out content for the OIA online contact directory on SharePoint. | 4/2/2012 | 4/7/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.3.1 (Corporate Branding Assessment) | This task includes creating a style guide for OIA, based on VA and VHA's style guides, and will utilize the templates developed in 2.2.2.2. | The OIA style guide is in progress and will be developed based on VA's overarching style guide. The items the OIA templates will be included in the guide as placeholders, since Sage has not received official approval on these items.<br><br>**OIA Style Guide**<br><br>**Status:** Delivered to OIA on 3/30.<br><br>**OIA Templates:**<br><br>Sage revised the 11x17 poster and built out the following templates based on OIA's feedback/direction on the poster:<br>1. E-newsletter<br>2. Fact sheet<br>3. Tray liner<br>4. Bookmark<br>5. Web contact card (based on direction provided on 2/27)<br>6. Web contact bookmark (requested in 2/27 feedback).<br><br>**Status:** Sage delivered the final revised templates to OIA on 3/23 and received comments/feedback on 3/28. Waiting for additional feedback, if any to finalize the deliverables. | 4/2/2012 | 4/7/2012 |
| 2.2.4.1 (Communication Products) | Production of collateral (60 products) is included in this task. Once templates from 2.2.3.1 and 2.2.2.2 are approved, the effort shifts to this Task for flowing in content and layout. | **BCRO Newsletter Template:**<br><br>**Status:** Approved. Word template version in progress and will deliver the week of 4/2.<br><br><br>Other deliverables on hold until templates from 2.2.3.1 and 2.2.2.2 are established. | 4/2/2012 | 4/7/2012 |
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | Held internal conference call on 3/29 to discuss uploading deliverables to OIA network share. Michelle submitted request for Mike Salvaggio be granted access to the network share on 3/30. | 4/2/2012 | 4/7/2012 |
| 2.2.4.3 (e-tools) | E-tools and templates for online communication. | The B-M team submitted memo on 3/30 outlining the set of tools and metrics that will be used to assess the effectiveness of communication products and distribution mechanisms. | 4/2/2012 | 4/7/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Compiled weekly updates into SharePoint list.<br><br>Uploaded weekly updates into OIA's SharePoint site. | 4/2/2012 | 4/7/2012 |
| 2.2.6 (Professional Web Mgt & Maint. Support) | Website Assessment of www.ehealth.va.gov | (1) B-M team submitted a content inventory of the existing eHealth.va.gov website that can be used as a reference point for considering content needs for the refreshed website.<br>(2) B-M team submitted a first draft of a user task analysis to aid in understanding requirements and content needs for each site audience.<br>(3) B-M team submitted a first draft of new eHealth.va.gov homepage wireframe, based on the discovery session conducted with OIA in March.<br><br>Next Steps: OIA to provide feedback on submitted materials or set up follow up call for discussion.<br><br>6.2: B-M team submitted the quality assurance tracking report covering current compatibility and functional issues as tested on March 20, 2012 using our documented standardized review and quality assurance process.<br><br>6.3: B-M team submitted February's analytics report on website usage of the eHealth.va.gov website.<br><br>Next Steps: B-M team will continue working to gain access to VA server and OIA SharePoint. | 4/2/2012 | 4/7/2012 |
| 2.2.8.1 (Project Timeline) | Provide timeline, script and storyboards for six videos. | Revised video deliverable memo and sent to OIA on 3/15. Discussed scope, number of videos and topics of videos. Delivered project timeline for My HealtheVet video on 3/23 with draft script. Received feedback on 3/26; delivered storyboards and revised script on 3/30. | 4/2/2012 | 4/7/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.1 (Stat Comm Plan) | Develop communications plan that is specific to OIA through the identification of a target audience. | Status: B-M provided a My Healthe Vet custom Facebook tab wireframe and social media content calendar for use by the local pilot sites for approval on 5/18.<br>Next Steps: B-M will provide a My HealtheVet custom Facebook tab design mockup upon receiving wireframe approval (by June 1) and is standing by for feedback on the Quality of Care and My HealtheVet social media calendars. | 5/21/2012 | 5/26/2012 |
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products | Assignment: VA Gender Health Care Report and Email Mock-up<br>Status: Sage/B-M delivered the first draft of the report on 5/11.<br><br>Assignment: Quality of Care Logo<br>Status: Sage delivered the revised logo options on 5/4. Waiting for client feedback/approval.<br><br>Assignment: My HealtheVet PPT Presentation<br>Status: Sage delivered the My HealtheVet-branded PowerPoint on 5/4. Waiting for client feedback/approval.<br><br>Assignment: MyHealtheVet Fact Sheet/ VA Blue Button<br>Status: Sent to client on 4/13. Approved by PM.<br><br>Assignment: Large Poster Presentation (8' x 4')<br>Status: Cancelled until further notice.<br><br>Assignment: BCRO Annual Report<br>Status: Complete. 508 compliance was delivered to OIA on 3/26 in both a lo and hi res PDF.<br><br>Assignment: My HealtheVet/ Brochure<br>Status: Complete. Sage prepared and uploaded the printer-ready files and GPO forms on 5/1 to the B-M SharePoint.<br><br>Assignment: BCRO E-Newsletter (Winter Edition)<br>Status: Complete. Sage delivered the approved HTML template to OIA on 3/30.<br><br>Assignment: MyHealtheVet Folder/booklet with tabbed insert pages<br>Status: Complete. Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M. | 5/21/2012 | 5/26/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | Status: John Kerski found workaround to get SharePoint Designer to work with Rescue VPN. Received information from Support Operations, ABI, HIG, and HI. Most of the search content is built and John Kerski is running tests. Currently SharePoint Farm crawls once a week (every Friday) due to a technical issue.<br><br>Next Steps: Trial version should be released week of 5/21. | 5/21/2012 | 5/26/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Identify and implement a set of tools and metrics to assess the effectiveness of products. | Assignment: Design metrics for effectiveness and implement.<br>Status: Memo provided 3/31. OIA revised 4/16; updated and enhanced version provided 5/11.<br>Next Steps: OIA approval; B-M to implement. | | |
| 2.2.3.1 (Corporate Branding Assessment) | OIA Identity and Style Guide | Assignment: OIA Identity and Style Guide<br>Status: Sage received edits to the Style Guide on 5/17 and will deliver revised document 5/21. Once the client approves the document, Sage will move forward with 508 compliance to close out the task. | 5/21/2012 | 5/26/2012 |
| 2.2.3.1 (Corporate Branding Assessment) | OIA Templates, including:<br>1. E-newsletter<br>2. Fact sheet<br>3. Tray liner<br>4. Bookmark<br>5. Web contact card<br>6. Web contact bookmark | Assignment: OIA Templates<br>Status: Sage posted the final revised OIA templates to the B-M SharePoint on 4/26 for client review/approval. PM approval given on 5/14, will secure in writing. | 5/21/2012 | 5/26/2012 |
| 2.2.4.1 (Communication Products) | Layout for a variety of Internal and External Communication Products (based on templates established in 2.2.3.1 and 2.2.2.2). | Assignment: BCRO E-newsletter (Spring Edition)<br>Status: Complete. Sage revised and delivered the final HTML template on 5/7.<br><br>Assignment: OIA Field Analytics SharePoint Banners (4)<br>Status: Delivered PSD files via OIA SharePoint on 4/13. Sage provided a recommendation on an image per the screen shot provided by OIA on 4/19. Considered closed/accepted by PM.<br><br>Assignment: Additional MyHealtheVet Items, including a Pocket Card, FAQ Sheet, Poster, Tray Liner, Phone Tent, Banner and Web Banner Ads<br>Status: Print-ready files and GPO forms submitted via network share on 5/18 for Pocket Card, Poster, Tray Liner, Phone Tent. Additional edits recieved to FAQ sheet on 5/18. Awaiting feedback on banner and web banner ads.<br><br>Assignment: Fact Sheet (DHSLogOn)<br>Status: Sage delivered creative ony 5/4. Waiting for client feedback/approval.<br><br>Assignment: Mini Campaign House Messages (Fact Sheet for Field Use)<br>Status: OIA feedback on 5/9; delivered updated version 5/11. Additional edits received 5/18, will submit new version on 5/22.<br><br>Assignment: My HealtheVet Fact Sheets (3), including VA Immunizations, VA Problem List and VA Vitals and Reading<br>Status: Status: Complete, approved by PM.<br><br>Assignment: MyHealtheVet Toolkit Items, including an Invitation, Postcard, Physician Bio Card, and an E-Newsletter<br>Status: Complete. Uploaded printer-ready files and GPO forms to network share 5/2. Edits to e-newsletter delivered 5/4.<br><br>Assignment: MyHealtheVet Tabbed Inserts (4), including, Online Tools, Preventative Care and Secure Messaging, Emergency Support and PACT<br>Status: Complete. Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: OIA Publisher Banner<br>Status: Complete. Sage sent OIA the banner graphics needed for Publisher on 4/25. | 5/21/2012 | 5/26/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | Status:  Several drafts and deliverables uploaded this week to 10P2. | 5/21/2012 | 5/26/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Status:  Uploaded weekly updates on 5/14.

Next steps:  Continuing to update OIA's and BM's SharePoint sites as needed. | 5/21/2012 | 5/26/2012 |
| 2.2.6 (Professional Web Mgt & Maint. Support) | Website Assessment ofwww.ehealth.va.gov | Assignment: Design for updated OIA intranet pages
Status: Received final approval from OIA on designs. Developing page in HTML and CSS for delivery.
Next Steps: Will submit developed pages to OIA for integration into intranet site.

Assignment: Wireframes for updated eHealth.va.gov website
Status: Accepted by OIA.
Next Steps: Awaiting next steps from OIA.

Assignment: VPN Access
Status: B-M successfully logged into VA network via CAG access.
Next Steps: B-M requests instructions on next steps to access needed workspace areas. | 5/21/2012 | 5/26/2012 |
| 2.2.7.1 (Full-Time Writer) | Writing, editing and reviewing briefing materials, reports and internal or external communications presentations, award submissions, communications plans and special project. Communication products to include posters, brochures, fact sheets, bookmarks, table top displays. | Assignment: Quality of Care Communications Plan
Status: Revised communications plan, press release. Drafted VSO memo and social media content. Delivered on 5/11. Revised VSO memo and plan, delivered on 5/17. Blog post copy provided on 5/17.
Next Steps: Review by OIA.

Assignment: DS Logon and My HealtheVet Communications Plan
Status: Revised communications plan, press release. Delivered on 5/11.
Next Steps: Review by OIA.

Assignment: Gender Report Communications Outline
Status: Draft communications plan outline and email text delivered on 5/11. Delivered press release, fact sheet on 5/18.
Next Steps: Review by OIA. B-M to deliver press release, fact sheet.

Assignment: Gail Graham Talking Points - 2011 Accomplishments
Status: Produced talking points draft and delivered 5/11.
Next Steps: Review by OIA. | 5/21/2012 | 5/26/2012 |
| 2.2.8.1 (Video Project Timeline) | Deliver one timeline per video assignment. | Assignment: Deliver project timeline for My HealtheVet video on Secure Messaging.
Status: Delivered to OIA 3/27. Revised 4/2.
Next Steps: Completed. | | |
| 2.2.8.2 (Video Storyboard) | Project storyboard for each video assignment. | Assignment: Deliver storyboard for My HealtheVet video on Secure Messaging.
Status: Completed. First draft delivered on 3/27, OIA edits on 4/6, revised version delivered 4/6. | | |
| 2.2.8.3 (Final Script) | Provide script for each video. | Assignment: Provide completed script for My HealtheVet video on Secure Messaging.
Status: Script delivered for review 3/27, revised per OIA edits 4/11. Final edits made, accepted 4/26.
Next Steps: PDF and bound copies to be delivered on 5/22. | | |
| 2.2.8.4 (Multi-media message) | Production of video. | Assignment: Deliver rough cut, then final version of video including web files, BETA and DVD copies.
Status: Rough cut delivered 4/6; revised 4/27. Final version of video delivered via courier and network share (web files, CD for HD web files, BETA) by 4/18.
Next Steps: Approval of final product. | | |
| 2.2.8.5 (DVD Copies) | Deliver up to 500 caption and non-caption DVDs per video. | Assignment: Deliver 250 DVD's with captioning, no captioning through a menu screen for My HealtheVet video on Secure Messaging.
Status: In progress. Final videos sent for dubbing on 5/21.
Next Steps: Deliver final copies on 5/24. | | |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **IN PROGRESS:**<br><br>Assignment: OIA PowerPoint Slide/Chart - VistaStats (June)<br>Status: Sage received this assignment on 6/14 and will deliver the first draft of creative early next week.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - With Help Desk/Blue Button  (June)<br>Status: Complete. Sage delivered the final revised printer-ready table tent files on 6/12. OIA to send to print.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - Revised Size - Version 2 (May)<br>Status: Sage uploaded the first round of creative to the B-M SharePoint on 5/31. Approved.<br><br>Assignment: VA Gender Health Care Report (May)<br>Status: Sage the uploaded the final revised report to the B-M SharePoint on 6/13. Additional edits delivered 6/15. Waiting for client approval to proceed with 508 compliance.<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April)<br>Status: Email PNG uploaded to the B-M SharePoint on 6/1. Waiting for client approval and next steps.<br><br>Assignment: My HealtheVet DS LogOn PPT Presentation (April)<br>Status: Sage delivered the My HealtheVet-branded PowerPoint on 5/4. Waiting for client feedback/approval.<br><br>Assignment: MyHealtheVet Fact Sheets (4) including VA Blue Button, VA Immunizations, VA Problem List and VA Vitals and Reading (February)<br>Status: Sent to client on 4/13. Currently on hold and awaiting client feedback/approval.<br><br>Assignment: DHSLogOn Fact Sheet (April)<br>Status: Sage delivered creative on 5/4. Waiting for client feedback/approval. | 6/18/2012 | 6/23/2012 |
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **COMPLETED:**<br><br>Assignment: OIA Templates, including e-newsletter, fact sheet, tray liner, bookmark (January)<br>Status: Complete. Client approved final templates on 5/23. Confirmed with client that no 508 compliance will be needed to close out this task, as these are just templates and covered in the Style Guide, which is a 508 compliant document (under 2.2.3.1).<br><br>Assignment: BCRO Annual Report  (February)<br>Status:  508 compliance was delivered to OIA on 3/26 in both a lo and hi res PDF.<br><br>Assignment: My HealtheVet/ Brochure (February)<br>Status: Sage prepared and uploaded the printer-ready files and GPO forms on 5/1 to the B-M SharePoint.<br><br>Assignment: OIA PowerPoint (March)<br>Status:  Approved and sent to client on 3/7.<br><br>Assignment: MyHealtheVet Toolkit Items, including an Invitation, Postcard and Physician Bio Card and E-Blast (March)<br>Status: Sage deliveredd the printer-ready files and GPO forms to the B-M SharePoint on 5/1. Final e-blast delivered on 5/8.<br><br>Assignment: Additional MyHealtheVet Items, including a Pocket Card, Tray Liner, Phone Tent /Version (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17 for the pocket card, tray liner and phone tent<br><br>Assignment: My HealtheVet Fact Sheets: FAQ, Mini campaign messages (April)<br>Status: Delivered revised FAQ fact sheet on 5/25. Approved 6/8.<br><br>Assignment: BCRO E-newsletter/Spring Edition (April)<br>Status: Complete. Sage revised and delivered the final HTML template on 5/7. | 6/18/2012 | 6/23/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | Status:  Feedback received on Directory of Services.  Update 2 provided for review regarding chart layout.<br><br>Next Steps:  Receive further feedback on latest version. | 6/18/2012 | 6/23/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Identify and implement a set of tools and metrics to assess the effectiveness of communication products and distribution mechanisms. | Status: B-M is aggregating the weekly enrollment statistics from the My HealtheVet pilot sites provided by OIA and continues to move forward with measurement programs as outlined in the effectiveness assessment.<br><br>Next Steps: B-M will provide a SharePoint and Intranet traffic analysis report on 6/30 and My HealtheVet wrap report when the pilot program has completed. | 6/18/2012 | 6/23/2012 |
| 2.2.3.1 (Corporate Branding Assessment) | OIA Identity and Style Guide | **COMPLETED:**<br><br>Assignment: OIA Identity and Style Guide<br>Status: Complete. Sage uploaded the final 508 compliant PDF of the Style Guide to the B-M SharePoint on 5/30. | 6/18/2012 | 6/23/2012 |
| 2.2.4.1 (Communication Products) | Layout for a variety of Internal and External Communication Products (based on templates established in 2.2.3.1 and 2.2.2.2). | **IN PROGRESS:**<br>Assignment: Quality of Care Logo (April)<br>Status: Sage uploaded the final revised logo options to the B-M SharePoint on 5/31. Client to share revised logo with focus group.<br><br>**COMPLETED:**<br><br>Assignment: MyHealtheVet Folder (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: MyHealtheVetSecure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: OIA Field Analytics SharePoint Banners (4), including Field Analytics, Web & Mobile Solutions, Field Analytics Pilot Sites and Pilot SitesLos Angeles, CA (March)<br>Status: Sage delivered the layered PSD files for each of the banners requested for the OIA SharePoint on 4/13. Waiting for feedback, if any, or approval. Sage provided a recommendation on an image for the SharePoint per the screen shot provided by OIA on 4/19.<br><br>Assignment: Additional MyHealtheVet Part 2, including a  Banner and Web Banner Ads (April)<br>Status: Sage delivered revised  banners on 6/1.<br><br>Assignment: OIA Publisher Banner (April)<br>Status: Sage sent OIA the banner graphics needed for Publisher on 4/25.<br><br>Assignment: OIA Templates, including web contact card and web contact bookmark (February)<br>Status:  Approved on 5/23.<br><br>Assignment: BCRO Newsletter Template/Winter Edition/PDF Format (February)<br>Status: Sage delivered the final 508 compliant PDF on 4/6. | 6/18/2012 | 6/23/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | Several drafts and deliverables uploaded this week to 10P2. | 6/18/2012 | 6/23/2012 |
| 2.2.4.3 (e-tools) | E-tools and templates for online communication. | **HTML Conversion (from approved designs):**<br><br>**IN PROGRESS:**<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April) - HTML Conversion<br>Status: Email PNG uploaded to the B-M SharePoint on 6/1. Waiting for client approval and next steps.<br><br>**COMPLETED:**<br><br>Assignment: BCRO E-Newsletter/Winter Edition (February)<br>Status: Complete. Sage delivered the approved HTML template to OIA on 3/30.<br><br>Assignment: MyHealtheVet Toolkit E-blast (March)<br>Status: Complete. Delivered revised e-blast on 5/8. Waiting for client approval.<br><br>Assignment: BCRO E-newsletter/Spring Edition (April)<br>Status: Complete. Sage revised and delivered the final HTML template on 5/7. | 6/18/2012 | 6/23/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Status:  Uploaded weekly updates on 6/11.<br><br>Next Steps:  Continuing to update OIA's and BM's SharePoint sites as needed. | 6/18/2012 | 6/23/2012 |
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Support) | Maintain, update and review internal and external content. Updates include publications, staff meeting information, flash products, online announcements and other media. | Assignment: Updated OIA Communications Resource Page<br>Status: The intranet page design is being updated based upon feedback. The HTML and CSS will be updated once design is finalized.<br>Next Steps: B-M to provide updated Communications Resource Page.<br><br>Assignment: Updated eHealth.va.gov wireframe<br>Status: Wireframe updated based upon feedback from 6/12 call with OIA. Submitted 6/13, Edits on 6/15.<br>Next Steps: B-M to begin design.<br><br>Assignment: Deliver updates on design modifications to internet, intranet sites.<br>Status: Current month's report in progress.<br>Next Steps: Deliver next report on 6/30. | 6/18/2012 | 6/23/2012 |
| 2.2.7.1 (Full-Time Writer) | Writing, editing and reviewing briefing materials, reports and internal or external communications presentations, award submissions, communications plans and special project. Communication products to include posters, brochures, fact sheets, bookmarks, table top displays. | Status: B-M has installed the My HealtheVet custom Facebook tab on the Overton, Salt Lake and Roseburg facility pages. B-M reviewed the pilot site social media activities to promote My HealtheVet and provided an update to OIA.<br>Next Steps: B-M is standing by for the other VA facilities to add the B-M contact as an administrator to the local Facebook page .<br><br>Assignment: Review Concurrence SOP (June)<br>Status: Two edited version reconciled and comments addressed where possible, delivered on 6/15.<br>Next Steps: Review by OIA<br><br>Assignment: Fact Sheet on EHR (June)<br>Status: Draft to be delivered by 6/22.<br><br>Assignment: VHA Conference Call Announcement (June)<br>Status: Editing announcement, deliver by 6/19.<br><br>Assignment: CITL Study (June)<br>Status: Assigned 6/4. Edits incorporated into plain language summary and recommendations made 6/7. Additional round of edits on 6/15.<br>Next Steps: Review by OIA<br><br>Assignment: VA-HIS Press Release and Blog Post (June)<br>Status: Assigned 6/4. Drafts delivered 6/8. Edits incorporated and comments addressed in both, returned 6/13.<br>Next Steps: Review by OIA<br><br>Assignment: VANTS-Team AdVAntage Report (June)<br>Status: Copyedits made to document 6/8 and process of rearranging per recommendations started<br>Next Steps: B-M to deliver copy edited and reorganized report by 6/18.<br><br>Assignment: Gender Report Materials (April)<br>Status: Restarted June 18, Discuss next steps with OIA.<br><br>Assignment: Quality of Care Materials (April)<br>Status: PENDING | 6/18/2012 | 6/23/2012 |
| 2.2.8.1 - 2.2.8.7 (Video) | BETA, DVD and internet format of video including quicktime, windows media, real player and avi.mov | Assignment: Remaining Five OIA Videos<br>Status: B-M delivered TOPR 24 Memo on 6/6 outlining scope of work, timeline and next steps for remaining videos. OIA has reviewed memo and supplied edits.<br>Next Steps: OIA's approval of scope and interview timelines. | 6/18/2012 | 6/23/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **IN PROGRESS:**<br><br>Assignment: Quality and Safety Report Graphics - Executive Summary Design (July)<br>Status: Sage/B-M are waiting for the client to provide approved text (anticipated the week of 7/16).<br><br>Assignment: Quality and Safety Report Graphics - Pull Out Box Designs (July)<br>Status: Sage/B-M are waiting for the client to provide approved text (anticipated the week of 7/16).<br><br>Assignment: Quality and Safety Report Graphics - Header/Footer and Cover Design (July)<br>Status: Sage sent B-M the first round on creative on 7/13 for review. Will be sent to OIA during beginning of week of 7/16.<br><br>Assignment: VA Web Feature - "Hey VA" (June)<br>Status: Sage sent three image options to B-M on 7/13. Will be sent to OIA during beginning of week of 7/16.<br><br>Assignment: OIA Fact Sheet - CITL Study (June)<br>Status: Sage/B-M received feedback on 7/5 and will deliver the revised fact sheet early next week.<br><br>Assignment: OIA PowerPoint Slide/Chart - VistaStats (June)<br>Status: Sage/B-M submitted first round of creative to OIA on 6/22. Waiting for client feedback/approval.<br><br>Assignment: My HealtheVet DS LogOn PPT Presentation (April)<br>Status: Sage delivered the My HealtheVet-branded PowerPoint on 5/4. Waiting for client feedback/approval.<br><br>Assignment: MyHealtheVet Fact Sheets (4) including VA Blue Button, VA Immunizations, VA Problem List and VA Vitals and Reading (February)<br>Status: Sent to client on 4/13. Currently on hold and awaiting client feedback/approval.<br><br>Assignment: DHSLogOn Fact Sheet (April)<br>Status: Sage delivered creative on 5/4. Waiting for client feedback/approval. | 7/16/2012 | 7/21/2012 |
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **COMPLETED:**<br>Assignment: VA Gender Health Care Email PNG Mock-up (April)<br>Status: Sage delivered the final design to B-M on 7/6.<br><br>Assignment: OIA SHEP PowerPoint (July)<br>Status: Sage delivered the creative on 7/3.<br><br>Assignment: VA Gender Health Care Report (May)<br>Status: Sage delivered the final 508 compliant PDF on 6/29.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - With Help Desk/Blue Button - Version 3 (June)<br>Status: Sage delivered the final revised printer-ready table tent files on 6/12. OIA to send to print.<br><br>Assignment: OIA Templates, including e-newsletter, fact sheet, tray liner, bookmark (January)<br>Status: Final templates approved on 5/23. Confirmed with client that no 508 compliance will be needed to close out this task, as these are just templates and covered in the Style Guide, which is a 508 compliant document (under 2.2.3.1).<br><br>Assignment: BCRO Annual Report (February)<br>Status: 508 compliance was delivered to OIA on 3/26 in both a lo and hi res PDF.<br><br>Assignment: My HealtheVet/ Brochure (February)<br>Status: Sage prepared and uploaded the printer-ready files and GPO forms on 5/1 to the B-M SharePoint.<br><br>Assignment: OIA PowerPoint (March)<br>Status: Approved and sent to client on 3/7.<br><br>Assignment: MyHealtheVet Toolkit Items, including an Invitation, Postcard and Physician Bio Card and E-Blast (March)<br>Status: Sage delivered the printer-ready files and GPO forms to the B-M SharePoint on 5/1. Final e-blast delivered on 5/8.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - Revised Size - Version 2 (May)<br>Status: Approved. Sage uploaded creative to the B-M SharePoint on 5/31.<br><br>Assignment: Additional MyHealtheVet Items, including a Pocket Card, Tray Liner, Phone Tent /Version (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17 for the pocket card, tray liner and phone tent | 7/16/2012 | 7/21/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | Status: Feedback received and updates made. Ready for roll-out.<br>Next Steps: Maintain the DoS with up-to-date information. | 7/16/2012 | 7/21/2012 |
| 2.2.3.1 (Corporate Branding Assessment) | OIA Identity and Style Guide | **COMPLETED:**<br>Assignment: OIA Identity and Style Guide<br>Status: Sage uploaded the final 508 compliant PDF of the Style Guide to the B-M SharePoint on 5/30. | 7/16/2012 | 7/21/2012 |
| 2.2.4.1 (Communication Products) | Layout for a variety of Internal and External Communication Products | **IN PROGRESS:**<br><br>Assignment: FOIA Fact Sheet and Alert Sheet Templates (June)<br>Status: Sage uploaded the initial template design to the B-M SharePoint on 6/27. Once approved by OIA, Sage will convert to Word.<br><br>**COMPLETED:**<br><br>Assignment: Quality of Care Logo (April)<br>Status: Sage delivered the approved logo in both web and print formats on 7/5.<br><br>Assignment: MyHealtheVet Folder (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: MyHealtheVetSecure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: OIA Field Analytics SharePoint Banners (4), including Field Analytics, Web & Mobile Solutions, Field Analytics Pilot Sites and Pilot SitesLos Angeles, CA (March)<br>Status: Sage delivered the layered PSD files for each of the banners requested for the OIA SharePoint on 4/13. Waiting for feedback, if any, or approval. Sage provided a recommendation on an image for the SharePoint per the screen shot provided by OIA on 4/19.<br><br>Assignment: Additional MyHealtheVet Part 2, including a Banner and Web Banner Ads (April)<br>Status: Sage delivered revised banners on 6/1.<br><br>Assignment: OIA Publisher Banner (April)<br>Status: Sage sent OIA the banner graphics needed for Publisher on 4/25.<br><br>Assignment: OIA Templates, including web contact card and web contact bookmark (February)<br>Status: Approved on 5/23.<br><br>Assignment: BCRO Newsletter Template/Winter Edition/PDF Format (February)<br>Status: Sage delivered the final 508 compliant PDF on 4/6. | 7/16/2012 | 7/21/2012 |
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | **IN PROGRESS:**<br>Status: Several drafts and deliverables uploaded last week to 10P2.<br><br>Assignment: Community of Practice Recommendations for Communications/Collaboration<br>Status: B-M provided initial recommendations for the VA/DoD SharePoint collaboration site, Community of Care Wiki, Intranet site, and online Collaboration strategy.<br>Next Steps: B-M to provide questions for Tiger Team and participate in upcoming meeting to discuss next steps. | 7/16/2012 | 7/21/2012 |
| 2.2.4.3 (e-tools) | E-tools and templates for online communication. | **HTML Conversion (from approved designs):**<br><br>**IN PROGRESS:**<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April) - HTML Conversion<br>Status: Final PNG mock-up sent to B-M on 7/6. HTML Conversion on 7/18.<br><br>**COMPLETED:**<br><br>Assignment: BCRO E-Newsletter/Winter Edition (February)<br>Status: Complete. Sage delivered the approved HTML template to OIA on 3/30.<br><br>Assignment: MyHealtheVet Toolkit E-blast (March)<br>Status: Complete. Delivered revised e-blast on 5/8. Waiting for client approval.<br><br>Assignment: BCRO E-newsletter/Spring Edition (April)<br>Status: Complete. Sage revised and delivered the final HTML template on 5/7. | 7/16/2012 | 7/21/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Status: Uploaded weekly updates on 7/02.<br><br>Next Steps: Continuing to update OIA's and BM's SharePoint sites as needed. | 7/16/2012 | 7/21/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.6.1 (Quality Assurance) | Maintain, update and review internal and external content. Updates include publications, staff meeting information, flash products, online announcements and other media. | **IN PROGRESS:**<br>Assignment: Communication Resource Page (Intranet)<br>Status: OIA provided 508 compliance feedback on the Communications Resources & Tools page HTML files.<br>Next Steps: B-M is updating the HTML files and will deliver with next week's deliverables.<br><br>Assignment: eHealth.va.gov home page design<br>Status: BM made two minor tweaks to the final home page design per OIA feedback.<br>Next Steps: B-M to turn final design into HTML/CSS and provide with next week's deliverables.<br><br>Assignment: Deliver updates on design modifications to internet, intranet sites.<br>Status: The current month's report is in progress.<br>Next Steps: Deliver next report on 7/31. | 7/16/2012 | 7/21/2012 |
| 2.2.6.2 (Standardized Review) | Develop and document review and quality assurance process to improve integrity of website mechanics | **IN PROGRESS:**<br>Assignment: Deliver monthly report on standardized review, quality assurance.<br>Status: The current month's report is in progress.<br>Next Steps: Deliver next report on 7/31. | 7/16/2012 | 7/21/2012 |
| 2.2.6.3 (Use and Functionality) | Monitor and report statistics on use and functionality to improve websites readability, use and data. | **IN PROGRESS:**<br>Assignment: Deliver monthly report on use and functionality.<br>Status: The current month's report is in progress.<br>Next Steps: Deliver next report on 7/31. | 7/16/2012 | 7/21/2012 |
| 2.2.7.1 (Full-Time Writer) | Writing, editing and reviewing briefing materials, reports and internal or external communications presentations, award submissions, communications plans and special project. Communication products to include posters, brochures, fact sheets, bookmarks, table top displays. | **IN PROGRESS:**<br>Assignment: My Healthe Vet social media campaign<br>Status: B-M is standing by to provide any assistance to the pilot sites and is collecting statistics on the posted content.<br>Next Steps: Deliver pilot site social media statistics in My HealtheVet wrap report.<br><br>Next Steps: B-M is standing by for the other VA facilities to add the B-M contact as an administrator to the local Facebook page in order to install the custom Facebook tab, as well as any other requests for social media assistance<br><br>Assignment: Gender Report Fact Sheet<br>Status: Drafted Gender Report fact sheet and sent to OIA on 7/10<br>Next Steps: Review by OIA<br><br>Assignment: CITL Plain Language Summary<br>Status: Revised CITL plain language summary fact sheet and sent to OIA on 7/10<br>Next Steps: Review by OIA<br><br>Assignment: VA Mobile Health Comms Plan<br>Status: Submitted comms plan to OIA on 7/10<br>Next Steps: Review by OIA<br><br>Assignment: My Healthe Vet: Structures and Processes in Health Care Systems PPT<br>Status: Submitted copyedited PPT on 7/13. OIA provided feedback on 7/16.<br><br>Assignment: Field Analytics HACP<br>Status: Submitted revised national press release, local press release, congrats! letter, comms plan, blog post and Hey VA! post on 7/13. OIA submitted edits on 7/16; B-M sent revisions back on 7/16.<br>Next Steps: Review by OIA. | 7/16/2012 | 7/21/2012 |
| 2.2.8.1 - 2.2.8.7 (Video) | BETA, DVD and internet format of video including quicktime, windows media, real player and avi.mov | **IN PROGRESS:**<br>Assignment: Remaining Five OIA Videos<br>Status: B-M delivered a revised memo on 7/12 with questions for interviews on 7/18. Received OIA feedback and updated on 7/16.<br>Next Steps: Video team to interview staff on 7/18; continue coordinating interviews and second shoot day. | 7/16/2012 | 7/21/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | IN PROGRESS:<br><br>Assignment: Quality and Safety Report Graphics - Executive Summary Design (July)<br>Status: B-M provided the final and 508 compliant executive summary design on 8/24.<br>Next steps: OIA feedback/approval.<br><br>Assignment: Quality and Safety Report Graphics - 3 Sets of Pull Out Box Designs (July)<br>Status: B-M submitted on 8/13. OIA sent to SMEs. Feedback returned 8/27<br>Next Steps: Sage/B-M to make final edits.<br><br>Assignment: Quality and Safety Report Graphics - Header/Footer and Cover Design (July)<br>Status: B-M submitted on 8/13 as the full report, inserted into header/footer. OIA sent to SMEs. Feedback returned 8/27<br>Next Steps: Sage /B-M to make final edits.<br><br>Assignment: My HealtheVet DS LogOn PPT Presentation (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: MyHealtheVet Fact Sheets (4) including VA Blue Button, VA Immunizations, VA Problem List and VA Vitals and Reading (February)<br>Status: B-M submitted on 4/13.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: DHSLogOn Fact Sheet (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: OIA feedback/approval. | 8/27/2012 | 9/1/2012 |
| 2.2.2.2 (Internal/External Comms Products) | COMPLETED:<br><br>Assignment: NUKA PowerPoint (August)<br>Status: B-M Submitted on 8/14.<br><br>Assignment: OIA Key Initiatives PowerPoint (August)<br>Status: B-M submitted on 8/8.<br><br>Assignment: VA Web Feature - "Hey VA" (June)<br>Status: B-M provided final version on 8/10. OIA approved on 8/13.<br><br>Assignment: Gail Graham PowerPoint (August)<br>Status: B-M provided update version on 8/7.<br><br>Assignment: OIA Fact Sheet - CITL Study (June)<br>Status: B-M submitted on 7/11.<br><br>Assignment: OIA PowerPoint Slide/Chart - VistaStats (June)<br>Status: Sage/B-M submitted first round of creative to OIA on 6/22.  Approved on 7/9.<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April)<br>Status: Sage delivered the final design to B-M on 7/6.<br><br>Assignment: OIA SHEP PowerPoint (July)<br>Status: B-M submitted on 7/3.<br><br>Assignment: VA Gender Health Care Report (May)<br>Status: B-M submitted on 7/6.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - With Help Desk/Blue Button - Version 3 (June)<br>Status: B-M submitted on 6/12.<br><br>Assignment: OIA Templates, including e-newsletter, fact sheet, tray liner, bookmark (January)<br>Status: Final templates approved on 5/23. Confirmed with client that no 508 compliance will be needed to close out this task, as these are just templates and covered in the Style Guide, which is a 508 compliant document (under 2.2.3.1). | 8/27/2012 | 9/1/2012 |
| 2.2.2.3 (Directory of Services) | Status:  Editor training set up for 8/30 at 2pm.<br>Next Steps:  Prepare for training & set up GoToMeeting. | 8/27/2012 | 9/1/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Assignment: My HealtheVet Pilot Program Analytics Report<br>Status: B-M provided the final version of the My HealtheVet pilot program report. | 8/27/2012 | 9/1/2012 |
| 2.2.3.1 (Corporate Branding Assessment) | COMPLETED:<br><br>Assignment: OIA Identity and Style Guide<br>Status: 508 compliant guide shared with OIA.<br>Next Steps: Image Library | 8/27/2012 | 9/1/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.4.1 (Communication Products) | **IN PROGRESS:**<br><br>Assignment: OIA VistA Screen Shots (August)<br>Status: Sage submitted recommendations on 8/23.<br>Next steps: OIA feedback and approval to proceed.<br><br>Assignment: OIA Logotype Set (August)<br>Status: Sage submitted suggestions and questions on 8/23.<br>Next steps: OIA feedback and approval to proceed.<br><br>**COMPLETED:**<br><br>Assignment: FOIA Fact Sheet and Alert Sheet Templates (June)<br>Status: B-M submitted on 7/27. OIA approval on 8/7.<br><br>Assignment: OIA Patient Safety Bookmark (July)<br>Status: B-M submitted on 7/30.<br><br>Assignment: OIA/HIM Internship Flyer (July)<br>Status: B-M submitted on 8/2.<br><br>Assignment: Quality of Care Logo (April)<br>Status: Sage delivered the approved logo in both web and print formats on 7/5.<br><br>Assignment: MyHealtheVet Folder (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: MyHealtheVetSecure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: OIA Field Analytics SharePoint Banners (4), including Field Analytics, Web & Mobile Solutions, Field Analytics Pilot Sites and Pilot Sites Los Angeles, CA (March)<br>Status: Sage delivered the layered PSD files for each of the banners requested for the OIA SharePoint on 4/13. Sage provided | 8/27/2012 | 9/1/2012 |
| 2.2.4.2 (Shared Directory) | Assignment: Community of Practice Recommendations for Communications/Collaboration<br>Status: B-M provided background questions for the next Tiger Team meeting.<br>Next Steps: OIA to relay answers and date for next meeting to B-M once received from Tiger Team. | 8/27/2012 | 9/1/2012 |
| 2.2.4.3 (e-tools) | Assignment: Email Templates<br>Status: B-M has provided the BCRO Messenger Newsletter email template files to OIA.<br>Next Steps: B-M is standing by for feedback on the BCRO Messenger email template and content for the next email template request. | 8/27/2012 | 9/1/2012 |
| 2.2.5.1 (SharePoint) | Status: Uploaded weekly updates on 8/20.<br>Next Steps: Continuing to update OIA's and BM's SharePoint sites as needed. | 8/27/2012 | 9/1/2012 |
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Support) | Assignment: eHealth.va.gov home page<br>Status: B-M has made final edits to the eHealth HTML files on the ECMS system and provided updated alt text. B-M is working on adding the My HealtheVet video to the official VA media server for linking on the site. OIA approved Alt Text and missing links. B-M made final edits<br>Next Step: B-M working with OIA to review and secure final approval.<br><br>Assignment: Mobile Health Page<br>Status: OIA and B-M held an exploratory call with OHI on the Mobile Health page request.<br>Next Steps: B-M to send mock-up by 8/29.<br><br>Assignment: Deliver updates on design modifications to internet, intranet sites.<br>Status: The current month's report is being finalized.<br>Next Steps: Deliver next report on 8/31.<br><br>Assignment: Deliver monthly report on standardized review, quality assurance.<br>Status: The current month's report is being finalized.<br>Next Steps: Deliver next report on 8/31.<br><br>Assignment: Deliver monthly report on use and functionality.<br>Status: The current month's report is being finalized.<br>Next Steps: Deliver next report on 8/31. | 8/27/2012 | 9/1/2012 |
| 2.2.7.1 (Full-Time Writer) | **IN PROGRESS:**<br><br>Assignment: Human Factors Newsletter<br>Status: B-M provided edits on 8/27.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: Letter on PCMH Survey Change to Labor Partners<br>Status: Drafted plain language letter on PCMH survey change and turned in on 8/22.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: Mobile Health Talking Points for Leadership<br>Status: B-M provided talking points on 8/21.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: HACP Talking Points<br>Status: Drafted HACP talking points for the lead SME to do an announcement on the national VHA public affairs officer call about the program. Provided on 8/20.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My HealtheVet Facebook tab<br>Status: B-M added a "learn how to use My HealtheVet" button to the existing Facebook tab on the three pilot sites and installed the tab on the Texas Valley page.<br>Next Steps: B-M stands by to install the tab on other facility Facebook pages as needed.<br><br>**COMPLETED:**<br>Assignment: NUKA PowerPoint<br>Status: B-M submitted on 8/14.<br><br>Assignment: Review VLER Presentation for AHIMA<br>Status: B-M submitted on 8/14.<br><br>Assignment: VAnguard Article<br>Status: B-M submitted on 8/2. Written content approved on 8/10.<br><br>Assignment: G Graham Presentation | 8/27/2012 | 9/1/2012 |
| 2.2.8.1 - 2.2.8.7 (Video) | Interviews with leadership staffers scheduled for Monday, September 17th.<br><br>Finalizing list of interview subjects for inclusion the OIA Overview Video, The Values of OIA and Field Analytics.<br><br>Secured conference room space at VA OIA office to conduct interviews.<br><br>Additional questions are being drafted on staffers' specific program areas. | 8/27/2012 | 9/1/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **IN PROGRESS:**<br><br>Assignment: Quality and Safety Report Graphics - Executive Summary Design/Version 2 (August)<br>Status: Sage delivered the creative to B-M on 9/5; B-M provided updated version on 9/10.<br>Next steps: OIA feedback/approval.<br><br>Assignment: Quality and Safety Report Graphics - Header/Footer and Cover Design (July)<br>Status: B-M submitted the full report (with the OIA lock-up) on 9/14.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My HealtheVet DS LogOn PPT Presentation (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: MyHealtheVet Fact Sheets (4) including VA Blue Button, VA Immunizations, VA Problem List and VA Vitals and Reading (February)<br>Status: B-M submitted on 4/13.<br>Next Steps: On hold until features are completed.<br><br>Assignment: DHSLogOn Fact Sheet (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: SME review and response. | 9/17/2012 | 9/22/2012 |
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **COMPLETED:**<br><br>Assignment: Quality and Safety Report Graphics - 3 Sets of Pull Out Box Designs (July)<br>Status: B-M submitted on 8/13.<br><br>Assignment: Quality and Safety Report Graphics - Executive Summary Design (July)<br>Status: Sage delivered the 508 compliant PDF on 8/24.<br><br>Assignment: NUKA PowerPoint (August)<br>Status: B-M Submitted on 8/14.<br><br>Assignment: OIA Key Initiatives PowerPoint (August)<br>Status: B-M submitted on 8/8.<br><br>Assignment: VA Web Feature - "Hey VA" (June)<br>Status: B-M provided final version on 8/10. OIA approved on 8/13.<br><br>Assignment: Gail Graham PowerPoint (August)<br>Status: B-M provided update version on 8/7.<br><br>Assignment: OIA Fact Sheet - CITL Study (June)<br>Status: B-M submitted on 7/11.<br><br>Assignment: OIA PowerPoint Slide/Chart - VistaStats (June)<br>Status: Sage/B-M submitted first round of creative to OIA on 6/22. Approved on 7/9.<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April)<br>Status: Sage delivered the final design to B-M on 7/6.<br><br>Assignment: OIA SHEP PowerPoint (July)<br>Status: B-M submitted on 7/3.<br><br>Assignment: VA Gender Health Care Report (May)<br>Status: B-M submitted on 7/6. | 9/17/2012 | 9/22/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | Status: Training completed on 8/30.<br>Next Steps: Maintain the Directory of Services and help customers update their respective offices. | 9/17/2012 | 9/22/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Identify and implement a set of tools and metrics to assess the effectiveness of communication products and distribution mechanisms. | Assignment: My HealtheVet Pilot Program Analytics Report<br>Status: B-M provided the final version of the My HealtheVet pilot program report. | 9/17/2012 | 9/22/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.3.1 (Corporate Branding Assessment) | OIA Identity and Style Guide. | **COMPLETED:**<br><br>Assignment: OIA Identity and Style Guide<br>Status: Sage uploaded the final 508 compliant PDF of the Style Guide to the B-M SharePoint on 5/30.<br>Next Steps: Sage/B-M to revisit request on image library.  Sage/B-M/OIA need to discuss implications with OIA logotypes produced as part of 2.2.4.1 -- contract modification to incorporate logotypes? | 9/17/2012 | 9/22/2012 |
| 2.2.4.1 (Communication Products) | Layout for a variety of Internal and External Communication Products . | **IN PROGRESS:**<br><br>Assignment: OIA Logotype Set (August)<br>Status: B-M provided word editable doc on 9/10. Logo was incorporated into the VHA Quality and Care Full report and executive summary.<br>Next steps: OIA review and feedback on other items in this set.<br><br>**COMPLETED:**<br><br>Assignment: OIA VistA Screen Shots (August)<br>Status: Sage sent revised images to B-M on 8/31. OIA approved on weekly phone call on 9/11.<br><br>Assignment: FOIA Fact Sheet and Alert Sheet Templates (June)<br>Status: B-M submitted on 7/27. OIA approval on 8/7.<br><br>Assignment: OIA Patient Safety Bookmark (July)<br>Status: B-M submitted on 7/30.<br><br>Assignment: OIA/HIM Internship Flyer (July)<br>Status: B-M submitted on 8/2.<br><br>Assignment: Quality of Care Logo (April)<br>Status: Sage delivered the approved logo in both web and print formats on 7/5.<br><br>Assignment: MyHealtheVet Folder (March)<br>Status:  Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: MyHealtheVetSecure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status:  Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: OIA Field Analytics SharePoint Banners (4), including Field Analytics, Web & Mobile Solutions, Field Analytics Pilot Sites and Pilot Sites Los Angeles, CA (March) | 9/17/2012 | 9/22/2012 |
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | Assignment: Community of Practice Recommendations for Communications/Collaboration<br>Status: B-M provided background questions for the next Tiger Team meeting.<br>Next Steps: OIA to relay answers and date for next meeting to B-M once received from Tiger Team. | 9/17/2012 | 9/22/2012 |
| 2.2.4.3 (e-tools) | e-tools and templates for online communication. | Assignment: Email Templates<br>Status: B-M has provided the BCRO Messenger Newsletter email template files to OIA.<br>Next Steps: B-M is standing by for feedback on the BCRO Messenger email template and content for the next email template request. | 9/17/2012 | 9/22/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Status:  Uploaded weekly updates on 9/10.<br>Next Steps:  Continuing to update OIA's and BM's SharePoint sites as needed. | 9/17/2012 | 9/22/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Su | Maintain, update and review internal and external content. Updates include publications, staff meeting information, flash products, online announcements and other media.<br><br>Develop and document review and quality assurance process to improve integrity of website mechanics.<br><br>Monitor and report statistics on use and functionality to improve websites readability, use and data. | Assignment: eHealth.va.gov home page<br>Status: B-M sent the final eHealth files for approval on 9/6 and they were approved by OIA to go live on 9/7.<br>Next Steps: B-M to maintain site - site is live.<br><br>Assignment: eHealth news page<br>Status: The Most Wired hospital announcement was added to the eHealth site as a rotating banner on the home page and an individual landing page for the release - these items are live.<br>Next Steps: B-M standing by for feedback from OIA on content to build the long term news page.<br><br>Assignment: Mobile Health home page<br>Status: B-M provided a second draft of the Mobile Health page design on 9/10.<br>Next Steps: B-M is standing by for feedback to provide an updated design and/or to begin work creating HTML files for the page.<br><br>Assignment: Prepare process document to maintain eHealth site and correct broken links, etc.<br>Status: B-M is drafting document for OIA review. Will deliver draft by 9/17.<br><br>Assignment: Deliver updates on design modifications to internet, intranet sites.<br>Status: Last month's report was delivered on 8/31.<br>Next Steps: Deliver next report on 9/30.<br><br>Assignment: Deliver monthly report on standardized review, quality assurance.<br>Status: Last month's report was delivered on 8/31.<br>Next Steps: Deliver next report on 9/30.<br><br>Assignment: Deliver monthly report on use and functionality.<br>Status: Last month's report was delivered on 8/31.<br>Next Steps: Deliver next report on 9/30. | 9/17/2012 | 9/22/2012 |
| 2.2.7.1 (Full-Time Writer) | Writing, editing and reviewing briefing materials, reports and internal or external communications presentations, award submissions, communications plans and special project. Communication products to include posters, brochures, fact sheets, bookmarks, table top displays. | **IN PROGRESS:**<br><br>Assignment:  VA/DoD Patient privacy/info sharing project<br>Status: Received feedback from OIA on 9/13 and submitted updated comms plan on 9/14.<br>Next Steps: OIA feedback and discussion about next steps.<br><br>Assignment: eConnected Health Task Force: Report<br>Status:  B-M submitted report outline on 9/14.<br>Next Steps: OIA/B-M to discuss additional project logistics/next steps on 9/18 call.<br><br>Assignment: eConnected Health Task Force: Case Studies<br>Status: B-M to submit by 9/17.<br>Next Steps: OIA/B-M to discuss additional project logistics/next steps on 9/18 call.<br><br>Assignment: PRSA Award Application<br>Status: B-M will provide draft by 9/21.<br>Next Steps:  OIA/B-M to discuss additional project logistics on 9/18 call.<br><br>Assignment: My HealtheVet National Roll Out<br>Status: B-M to submit timeline by 9/19.<br>Next Steps: OIA/B-M to discuss additional project logistics on 9/18 call.<br><br>Assignment: Gail Graham blog series<br>Status:  Revised schedule for four weeks of posts. Submited POW/MIA blog post on 9/10. Received feedback Secure Messaging and POW/MIA Day posts for future reference. B-M submitted telehealth blog post on 9/14.<br>Next Steps:  Drafting FY accomplishments post. Draft additional posts as deadlines approach.<br><br>**COMPLETED:**<br><br>Assignment: Copyedit and ReformatCurtis PPT<br>Status: B-M submitted on 9/14.<br><br>Assignment: My Health*e*Vet PPT for Medicine 2.0 Conference<br>Status: B-M submitted on 9/11. | 9/17/2012 | 9/22/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.8.1 - 2.2.8.7 (Video) | BETA, DVD and internet format of video including quicktime, windows media, real player and avi.mov. | Assignment:  VA OIA Video Series (September)<br>Status:  Held walk through of space on 9/14. Revised/specialized questions and send to interviewees on 9/14.<br>Next Steps:  Video shoot at VACO on 9/17. Schedule upcoming video shoot.<br><br>Assignment: Revise HHS/Blue Button Video to Incoporate OIA look<br>Status: Reviewing materials.<br>Next Steps: Call on 9/19 with HHS and OIA to discuss video. | 9/17/2012 | 9/22/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **IN PROGRESS:**<br><br>Assignment: DoD Notice of Privacy Fact Sheet (1), Pocket Card, Poster, Table Topper and ""HeyVA!"" Image (September)<br>Status: Kick of meeting held on 9/27.<br>Next steps: Sage to begin design concept for fact sheet and brochure (in 2.2.4.1) to establish look/feel by 10/5.<br><br>Assignment: Quality and Safety Report Graphics - Executive Summary Design/Version 2 (August)<br>Status: B-M submitted on 9/10.<br>Next steps: OIA feedback/approval.<br><br>Assignment: Quality and Safety Report Graphics - Header/Footer and Cover Design (July)<br>Status: B-M submitted updated full report replacing the first page on 9/24.<br>Next Steps: Sage to compile pricing and recommended options to complete 508 compliance as requested by OIA.<br><br>Assignment: My Health*e* Vet DS LogOn PPT Presentation (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My Health*e* Vet Fact Sheets (4) including VA Blue Button, VA Immunizations, VA Problem List and VA Vitals and Reading (February)<br>Status: B-M submitted all fact sheets on 4/13. B-M submitted updated Blue Button fact sheet on 9/27.<br>Next Steps: OIA feedback/approval. B-M/OIA to discuss additional changes to VA Immunizations fact sheet.<br><br>Assignment: DHSLogOn Fact Sheet (April)<br>Status: B-M submitted on 5/4.<br>Next Steps: OIA feedback/approval. | 10/1/2012 | 10/6/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | Develop a Variety of Internal and External Communication Products. | **COMPLETED:**<br><br>Assignment: Quality and Safety Report Graphics  - Executive Summary Design (July)<br>Status: Sage delivered the 508 compliant PDF on 8/24.<br><br>Assignment: NUKA PowerPoint (August)<br>Status: B-M Submitted on 8/14.<br><br>Assignment: OIA Key Initiatives PowerPoint (August)<br>Status: B-M submitted on 8/8.<br><br>Assignment: VA Web Feature - "Hey VA" (June)<br>Status: B-M provided final version on 8/10. OIA approved on 8/13.<br><br>Assignment: Gail Graham PowerPoint (August)<br>Status: B-M provided update version on 8/7.<br><br>Assignment: OIA Fact Sheet - CITL Study (June)<br>Status: B-M submitted on 7/11.<br><br>Assignment: OIA PowerPoint Slide/Chart - VistaStats (June)<br>Status: Sage/B-M submitted first round of creative to OIA on 6/22.  Approved on 7/9.<br><br>Assignment: VA Gender Health Care Email PNG Mock-up (April)<br>Status: Sage delivered the final design to B-M on 7/6.<br><br>Assignment: OIA SHEP PowerPoint (July)<br>Status: B-M submitted on 7/3.<br><br>Assignment: VA Gender Health Care Report (May)<br>Status: B-M submitted on 7/6.<br><br>Assignment: My HealtheVet 3-Panel Table Top Display - With Help Desk/Blue Button - Version 3 (June)<br>Status: B-M submitted on 6/12. | 10/1/2012 | 10/6/2012 |
| 2.2.2.3 (Directory of Services) | Create an online contact directory of OIA's employees, or a "yellow pages" so to speak. This list will serve as a centralized resource that OIA employees across the country can access. It also will help with moving away from printing lists. | Status:  Training completed on 8/30.<br>Next Steps:  Maintain the Directory of Services and help customers update their respective offices. | 10/1/2012 | 10/6/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Identify and implement a set of tools and metrics to assess the effectiveness of communication products and distribution mechanisms. | Assignment: My Health*e* Vet Pilot Program Analytics Report<br>Status: B-M provided the final version of the My HealtheVet pilot program report. | 10/1/2012 | 10/6/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.3.1 (Corporate Branding Assessment) | OIA Identity and Style Guide. | **COMPLETED:**<br><br>Assignment: OIA Identity and Style Guide<br>Status: Sage uploaded the final 508 compliant PDF of the Style Guide to the B-M SharePoint on 5/30.<br>Next Steps: Sage/B-M to revisit request on image library.  Sage/B-M/OIA need to discuss implications with OIA logotypes produced as part of 2.2.4.1 | 10/1/2012 | 10/6/2012 |
| 2.2.4.1 (Communication Products) | Layout for a variety of Internal and External Communication Products . | **IN PROGRESS:**<br><br>Assignment: DoD Notice of Privacy Banners, Brochure (1), PowerPoint  (September)<br>Status: Kick off meeting held on 9/27.<br>Next steps: Sage to begin design concept for fact sheet (in 2.2.2.2) and brochure to establish look/feel by 10/5.<br><br>Assignment: OIA Logotype Set (August)<br>Status: Sage sent editable Word document on 9/7.<br>Next steps: OIA review and feedback on other items in this set.<br><br>**COMPLETED:**<br><br>Assignment: OIA VistA Screen Shots (August)<br>Status: Sage sent revised images to B-M on 8/31. OIA approved on 9/11 on phone.<br><br>Assignment: FOIA Fact Sheet and Alert Sheet Templates (June)<br>Status: B-M submitted on 7/27. OIA approval on 8/7.<br><br>Assignment: OIA Patient Safety Bookmark (July)<br>Status: B-M submitted on 7/30.<br><br>Assignment: OIA/HIM Internship Flyer (July)<br>Status: B-M submitted on 8/2.<br><br>Assignment: Quality of Care Logo (April)<br>Status: Sage delivered the approved logo in both web and print formats on 7/5.<br><br>Assignment: MyHealtheVet Folder (March)<br>Status:  Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: MyHealtheVetSecure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status:  Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M. | 10/1/2012 | 10/6/2012 |
| 2.2.4.2 (Shared Directory) | Create an online shared directory where OIA employees across the country can upload their program's collateral materials (e.g., brochures, fact sheets, etc.) so anyone within OIA can see/download them, and not ask OIA HQ every time. | B-M updated naming conventions for files in Network Share. | 10/1/2012 | 10/6/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.4.3 (e-tools) | e-tools and templates for online communication. | Assignment: Email Templates<br>Status: B-M has provided the BCRO Messenger Newsletter email template files to OIA.<br>Next Steps: B-M is standing by for feedback on the BCRO Messenger email template and content for the next email template request. | 10/1/2012 | 10/6/2012 |
| 2.2.5.1 (SharePoint) | Upload weekly updates on Monday to OIA SharePoint. | Assignment: Weekly Updates<br>Status: Uploaded weekly updates on 9/3.<br>Next Steps: Continuing to update OIA's and BM's SharePoint sites as needed.<br><br>Assignment: My HealtheVet National OIA Roll Out<br>Status: Plan for SharePoint page and content retrieval.<br>Next Steps: Work with OIA to develop plan for SharePoint page. | 10/1/2012 | 10/6/2012 |
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Support) | Maintain, update and review internal and external content. Updates include publications, staff meeting information, flash products, online announcements and other media.<br><br>Develop and document review and quality assurance process to improve integrity of website mechanics.<br><br>Monitor and report statistics on use and functionality to improve websites readability, use and data. | Assignment: eHealth.va.gov home page<br>Status: B-M sent the final eHealth files for approval on 9/6 and they were approved by OIA to go live on 9/7.<br>Next Steps: B-M to maintain site - site is live.<br><br>Assignment: eHealth news page<br>Status: B-M provided initial recommendations on the newsroom page and banner rotation. B-M sent homepage banner on 9/28.<br>Next Steps: B-M to deliver an initial draft of the newsroom page.<br><br>Assignment: Mobile Health home page<br>Status: B-M is standing by for feedback on the latest Mobile Health design draft.<br>Next Steps: OIA to forward feedback from the Mobile Health team.<br><br>Assignment: Prepare process document to maintain eHealth site and correct broken links, etc.<br>Status: B-M is working through the first batch of quality assurance fixes on the eHealth site.<br>Next Steps: B-M and OIA to hold call on October 2 to discuss fixes and B-M to deliver first batch by October 5.<br><br>Assignment: Deliver updates on design modifications to internet, intranet sites.<br>Status: This month's report was delivered on 9/28.<br>Next Steps: Deliver next report on 10/31.<br><br>Assignment: Deliver monthly report on standardized review, quality assurance.<br>Status: This month's report was delivered on 9/28.<br>Next Steps: Deliver next report on 10/31.<br><br>Assignment: Deliver monthly report on use and functionality.<br>Status: This month's report was delivered on 9/28.<br>Next Steps: Deliver next report on 10/31. | 10/1/2012 | 10/6/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.7.1 (Full-Time Writer) | Writing, editing and reviewing briefing materials, reports and internal or external communications presentations, award submissions, communications plans and special project. Communication products to include posters, brochures, fact sheets, bookmarks, table top displays. | **IN PROGRESS:**<br><br>Assignment: VA/DoD Privacy Campaign<br>Status: B-M submitted updated VA/DoD Privacy Plan on 10/1.<br>Next Steps: Calls with stakeholders for revisions; B-M to provide deliverables based on timeline.<br><br>Assignment: PRSA Award Application<br>Status: Received OIA feedback and resubmitted on 9/28.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My Health*e* Vet National Roll Out<br>Status: B-M submitted updated plan on 9/27 with Facebook tab & social media; B-M to submit "how to" guide on 10/5.<br>Next Steps: Submit guide; OIA feedback & discussion about next steps.<br><br>Assignment: Gail Graham blog series<br>Status:  Received feedback on  FY12 accomplishments blog post and resubmitted on 9/28.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: eConnected Health Task Force Report and Use Cases<br>Status: B-M submitted on 9/24.<br>Next Steps: Coordination call with K. Frisbee.<br><br>Assignment: RO Messenger Fall 2012 Volume 8 Issue 35 Newsletter<br>Status: in Progress.<br>Next Steps: B-M to submit by COB on 10/3.<br><br>Assignment: National Data Systems Presentation Copyedit<br>Status: B-M submitted on 9/28.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My HealtheVet Immunization Launch<br>Status: B-M submitted HeyVA! Post on 9/26; News Release & Talking Points on 10/1.<br>Next Steps: OIA feedback/approval. | 10/1/2012 | 10/6/2012 |

| Task Number | Assignments | Status | Begin Date | End Date |
|---|---|---|---|---|
| 2.2.8.1 - 2.2.8.7 (Video) | BETA, DVD and internet format of video including quicktime, windows media, real player and avi.mov. | Assignment:  VA OIA Video Series (October)<br>Status: 2nd shoot day set for 10/12 at VACO<br>Next Steps: Set up interviews with add'l staff members; Arrange timeline for delivery of OIA Overview and VA Values videos.<br><br>Assignment:  Privacy Video<br>Status: Concept and timeline discussed on 9/27<br>Next Steps:  Deliver concept memol; Arrange interview time with Privacy Officer Stephanie Griffin.<br><br>Assignment: Revise HHS/Blue Button Video to Incorporate OIA look<br>Status: Assessing the production complexity and incurred cost of updating the existing video<br>Next Steps: OIA to discuss internally and advise BM on next steps | 10/1/2012 | 10/6/2012 |
| 2.2.9.1 (Wrap Report) | Provide year-end evaluation | Assignment: My Health*e* Vet Wrap Report<br>Status: Drafts of an executive summary and PowerPoint summary submitted on 9/28.<br>Next Steps: B-M to deliver, revisions by 10/5. | 10/1/2012 | 10/6/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | **IN PROGRESS:**<br><br>Assignment: Blue Button Enhancements Fact Sheet and Brochure<br>Status: B-M submitted design sample on 11/30.<br>Next Steps: Sage to incorporate text changes; OIA feedback/approval.<br><br>Assignment: VA/DoD Privacy Plan Pocket Card, Table Topper and "Hey VA!" Image (September)<br>Status: B-M submitted updated text for all design deliverables on 11/14.<br>Next Steps: OIA feedback. B-M to proceed with final copy edits to design items. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | **COMPLETED:**<br><br>Assignment: DS Logon Fact Sheet (April)<br>Status: B-M submitted 508 compliant version on 11/26.<br><br>Assignment: 508 update to Quality and Safety Report (November)<br>Status: B-M sent 508 compliant report on 11/26.<br><br>Assignment: My Health*e* Vet Fact Sheets -VA Problem List and VA Vitals and Reading (February)<br>Status: OIA closed on 11/21 - still awaiting edits/comment from SMEs.<br><br>Assignment: My HealtheVet DS LogOn PPT Presentation (April)<br>Status: B-M submitted on 5/4; OIA closed on 11/16.<br><br>Assignment: My HealtheVet Creative Updates for National Roll-Out (October)<br>Status: B-M sent 508 compliant design materials on 11/6.<br><br>Assignment: Fact Sheet template update (1 page version)<br>Status: OIA approved on 11/1.<br><br>Assignment: Quality and Safety Report Graphics  - Header/Footer and Cover Design - Full Report (July)<br>Status:  B-M delivered the 508 compliant PDF on 10/23.  Received approval on LOE and to bill in December 2011 deliverables.<br><br>Assignment: My HealtheVet Fact Sheets: VA Blue Button and VA Immunizations - Version 2 (October)<br>Status: B-M delivered final 508 compliant fact sheets on 10/10. OIA approved on 10/16.<br><br>Assignment: Quality and Safety Report Graphics  - Executive Summary Design/Version 2 (August)<br>Status: B-M delivered the 508 compliant PDF on 10/5. OIA approved on  10/16.<br><br>Assignment: Quality and Safety Report Graphics  - 3 Sets of Pull Out Box Designs (July)<br>Status: B-M submitted on 8/13.<br><br>Assignment: Quality and Safety Report Graphics  - Executive Summary Design (July)<br>Status: Sage delivered the 508 compliant PDF on 8/24. | 12/3/2012 | 12/8/2012 |
| 2.2.2.3 (Directory of Services) | Status:  Training completed on 8/30.<br>Next Steps:  Update Directory of Services based on reorg information provided by OIA.<br><br>Assignment: Final Update<br>Status: Completed on 11/30. | 12/3/2012 | 12/8/2012 |
| 2.2.2.4 (Effectiveness Assessment) | Completed | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.3.1 (Corporate Branding Assessment) | **COMPLETED:**<br><br>Assignment: OIA Identity and Style Guide<br>Status: Sage uploaded the final 508 compliant PDF of the Style Guide to the B-M SharePoint on 5/30. | 12/3/2012 | 12/8/2012 |
| 2.2.4.1 (Communication Products) | **IN PROGRESS:**<br><br>Assignment: VA/DoD Privacy Plan Banners, Brochure, PowerPoint, Fact Sheet, Poster (September)<br>Status: Status: B-M submitted PowerPoint on 11/6; PowerPoint and brochure on 11/8; Updated brochure on 11/9; Updated PPT on 11/29. OIA provided feedback on 11/29.<br>Next Steps: OIA feedback. B-M to proceed with final copy edits to design items.<br><br>**COMPLETED:**<br><br>Assignment: OIA Logotype Set (August)<br>Status: B-M submitted updated Word editable document with fixed glitch on 10/8. OIA approved on 10/16.<br><br>Assignment: OIA VistA Screen Shots (August)<br>Status: Sage sent revised images to B-M on 8/31.<br><br>Assignment: FOIA Fact Sheet and Alert Sheet Templates (June)<br>Status: B-M submitted on 7/27. OIA approval on 8/7.<br><br>Assignment: OIA Patient Safety Bookmark (July)<br>Status: B-M submitted on 7/30.<br><br>Assignment: OIA/HIM Internship Flyer (July)<br>Status: B-M submitted on 8/2.<br><br>Assignment: Quality of Care Logo (April)<br>Status: Sage delivered the approved logo in both web and print formats on 7/5.<br><br>Assignment: MyHealtheVet Folder (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M.<br><br>Assignment: My HealtheVet Secure Messaging Poster (April)<br>Status: Sage submitted the printer-ready files and completed GPO forms on 5/17.<br><br>Assignment: MyHealtheVet w/5 Tabbed Inserts (March)<br>Status: Sage prepared and sent the printer-ready files and GPO forms on 5/3 to B-M. | 12/3/2012 | 12/8/2012 |
| 2.2.4.2 (Shared Directory) | B-M updated naming conventions for files in Network Share. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.4.3 (e-tools) | **COMPLETE:**<br><br>Assignment: Layout of RO Messenger Fall 2012 Volume 8 Issue 35 Newsletter<br>Status: B-M submitted on 10/15. OIA approved on 11/1 call. | 12/3/2012 | 12/8/2012 |
| 2.2.4.4 (Spanish Translation) | Assignment: My Health*e* Vet National Roll Out Materials Spanish Translation<br>Status: OIA approved materials to be translated on 11/9. B-M provided translated materials on 11/24. OIA to post materials. | 12/3/2012 | 12/8/2012 |
| 2.2.5.1 (SharePoint) | Assignment: Weekly Updates<br>Status:  Uploaded weekly updates on 11/12<br>Next Steps:  Continuing to update OIA's and B-M's SharePoint sites as needed. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Support) | Assignment: eHealth homepage and newsroom page<br>Status: The next eHealth home page news banner for the homepage (Blue Button mobile app contest) went live on 10/25. An updated version of the Blue Button banner was added to ECMS on 11/1. The final newsroom page was added on 11/6 and a Veteran's Day banner on 11/8. The final home page banner was added for approval on the ECMS on 11/16. The Veterans Day banner was removed from the ECMS on 11/21. B-M to remove the ASPIRE link from the home page by 11/30. B-M provided transition document on 11/29.<br><br>Assignment: My Health*e* Vet National Roll Out web components<br>Status: Final language for the Intranet page was provided on 10/24. B-M provided mock-up on 10/26. OIA approved mockup on 11/1. The intranet HTML files were provided on 11/16. OIA's SharePoint resource is adding the Spanish files provided 11/26 to the intranet page, working with B-M.<br>Next Steps:  Page is complete.<br><br>Assignment: Prepare process document to maintain eHealth site and correct broken links, etc.<br>Status: B-M delivered the second batch of site fixes on 10/22. B-M delivered the third batch of site fixes on 11/6. OIA approved video transcription on 11/13. B-M provided the transcripts and OIA returned edits/approval. B-M added video transcripts to the eHealth Media Gallery and VA-DoD page on the ECMS as the final batch of QA fixes on 11/27.<br>Next Steps: QA fixes are complete.<br><br>Assignment: VA-DoD Privacy page (eHealth)<br>Status: B-M submitted draft language for the page on 10/17. OIA provided feedback and B-M sent revised language on 11/14.<br>Next Steps:  OIA feedback on content. B-M to provide mock-up once copy is finalized.<br><br>Assignment: VA-DoD Privacy page (Intranet)<br>Status: B-M submitted draft language for the page on 10/17. OIA provided feedback and B-M sent revised language on 11/14.<br>Next Steps:  OIA feedback on content. B-M to provide mock-up once copy is finalized.<br><br>Assignment: Deliver updates on design modifications to Internet, intranet sites.<br>Status: The current month's report was delivered on 11/29.<br>Next Steps: Final report has been delivered.<br><br>Assignment: Deliver monthly report on standardized review, quality assurance.<br>Status: The current month's report was delivered on 11/29. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.7.1 (Full-Time Writer) | **IN PROGRESS**<br><br>Assignment: BB Enhancements Press Release<br>Status: OIA provided updated Press Release on 11/28.<br>Next Steps: Task closed.<br><br>Assignment: FedScoop 50 Awards press release.<br>Status: B-M submitted on 11/29.<br>Next Steps: Task closed.<br><br>Assignment: CDW Transition Comm plan and docs<br>Status: OIA assigned on 11/26.<br>Next Steps: Task closed.<br><br>Assignment: VA/DoD Privacy Campaign<br>Status: B-M submitted pocket card, fact sheet, table topper, letter from undersecretary, poster, web banner letter to congress, internal blog post, Hey VA! Post, external blog post intranet and eHealth text on 11/14.<br>Next Steps: Task closed.<br><br>Assignment: Library Communications Plan Doc<br>Status: B-M submitted updated doc on 11/30.<br>Next Steps: Task closed.<br><br><br>**COMPLETED:**<br><br>Assignment: Certification Press Release<br>Status: OIA assigned on 11/20. B-M submitted on 11/26.<br><br>Assignment: Microscopy Fact Sheet<br>Status: B-M submitted on 10/17.<br><br>Assignment: Connected Health Summary PPT<br>Status: B-M submitted on 11/16. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.8.1 - 2.2.8.7 (Video) | Assignment:  VA OIA Video Series<br>Status: Interviews with key staffers shot on 10/12 at VACO and 11/19 at Puget Sound Health. Label mock-ups revised, per OIA feedback.<br>Next Steps: Insert additional staffers into OIA Overview and VA Values videos. Complete videos.<br><br>Assignment: VA OIA Video Series-  Values and Overview<br>Status: B-M submitted rough cut on 11/29.<br>Next Steps: Insert Dr. Fihn into the OIA Overview and My Health*e* Vet Coor. into Values. Complete Videos.<br><br>Assignment:  VA/DoD Privacy Video<br>Status: Inserting Dr. Stephen Hunt into the VA/DoD Video<br>Next Steps: Follow-up with DoD regarding interview to include in the video. Complete Video.<br><br>Assignment: Revise HHS/Blue Button Video to Incorporate OIA look.<br>Status:  OIA/HHS rough cut feedback addressed. Final cut is being prepped for delivery.<br>Next Steps: B-M to deliver video deliverables. | 12/3/2012 | 12/8/2012 |
| 2.2.9.1 (Wrap Report) | **In Progress:**<br><br>Assignment: FY 2012 Accomplishments Project: Modification for YE Evaluation<br>Next Steps: B-M submitted updated PPT on 11/30.<br>Next Steps: Task closed.<br><br>**Completed:**<br><br>Assignment: FY 2012 Accomplishments Project<br>Status: B-M submitted on 11/21. OIA approved on 11/26.<br><br>Assignment: My HealtheVet Wrap Report<br>Status: OIA approved on 11/6. | 12/3/2012 | 12/8/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.2.2 (Internal/External Comms Products) | **IN PROGRESS:**<br><br>Assignment: My Health*e* Vet – VA Blue Button Enhancement Brochure<br>Status: OIA assigned on 1/2.<br>Next Steps: B-M and OIA to discuss timeline and specifics.<br><br>Assignment:  My Health*e* Vet  - VA Blue Button Enhancement Fact Sheet<br>Status: OIA assigned on 1/2 - HOLD for final version.<br>Next Steps:  B-M and OIA to discuss timeline and specifics.<br><br>Assignment: VA/DoD Design Elements (Pocket Card, Table Topper)<br>Status: B-M received feedback on 1/4.<br>Next Steps: OIA & B-M to discuss edits; B-M to provide by 1/11.<br><br>Assignment: BCRO PAR report (2 deliverables)<br>Status:  OIA assigned on 1/2.<br>Next Steps: B-M to provide timeline. | 11/26/2012 | 12/1/2012 |
| 2.2.2.2 (Internal/External Comms Products) | **COMPLETED:** | 11/26/2012 | 12/1/2012 |
| 2.2.2.3 (Directory of Services) | | 11/26/2012 | 12/1/2012 |
| 2.2.2.4 (Effectiveness Assessment) | | 11/26/2012 | 12/1/2012 |
| 2.2.3.1 (Corporate Branding Assessment) | | 11/26/2012 | 12/1/2012 |
| 2.2.4.1 (Communication Products) | **IN PROGRESS:**<br><br>Assignment: VA/DoD Design Elements (Fact sheet, poster, brochure, PPT, banner, "at-a-glance" fact sheet"<br>Status: B-M received feedback on 1/4/13.<br>Next Steps: OIA & B-M to discuss edits; B-M to provide by 1/11. | 11/26/2012 | 12/1/2012 |
| 2.2.4.2 (Shared Directory) | | 11/26/2012 | 12/1/2012 |
| 2.2.4.3 (e-tools) | | 11/26/2012 | 12/1/2012 |
| 2.2.4.4 (Spanish Translation) | | 11/26/2012 | 12/1/2012 |

| Task Number | Status | Begin Date | End Date |
|---|---|---|---|
| 2.2.5.1 (SharePoint) | | 11/26/2012 | 12/1/2012 |
| 2.2.6.1-2.2.6.3 (Professional Web Mgt & Maint. Support) | **IN PROGRESS:**<br><br>Assignment: VA/DoD Web Rotating Images<br>Status: OIA provided feedback on 1/4.<br>Next Steps: OIA/B-M to discuss on call. | 11/26/2012 | 12/1/2012 |
| 2.2.7.1 (Full-Time Writer) | **IN PROGRESS:**<br><br>Assignment:  My Health*e* Vet  Extracts Communications Plan<br>Status: OIA assigned on 1/2; B-M submitted on 1/4.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: My Health*e* Vet Blue Button Enhancements Press Release<br>Status: OIA assigned on 1/2; B-M submitted on 1/4.<br>Next Steps: OIA feedback/approval.<br><br>Assignment: VA/DoD Written Products (External blog post, internal blog post, communications plan, USH memo, HeyVA! Post, Letter to Congress, Internal toolkit page, Updated HEC/JEC Presentation on progress)<br>Status: B-M received feedback on 1/4/13.<br>Next Steps: OIA & B-M to discuss edits; B-M to provide by 1/11 (except HEC/JEC Presentation; due on 9th). | 11/26/2012 | 12/1/2012 |
| 2.2.8.1 - 2.2.8.7 (Video) | | 11/26/2012 | 12/1/2012 |

| Task and Description | Tasks/Activities for January | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for February |
|---|---|---|---|
| *Task 1 - Project Management* | Held Kick-Off Meeting on December 28, 2011 and a follow-up to the Kick-Off Meeting on January 11, 2012.<br><br>On February 3, Replaced Key Personnel Ken Hartmann with Stacey Penn-Lazar and Phil Perry. Replaced Key Personnel Jason Lobo with Joelle Ziemian.<br><br>Completed and submitted all TMS Trainings for all team members (except for Phil Perry and Joelle Ziemian).<br><br>OIA approved Staff Roster and PMP for Task 2 on January 26. | | Achieve VPN Access for appropriate B-M team members.<br><br>Complete and submit all TMS trainings for new team members.<br><br>Will update Staff Roster with new team members and circulate. |

| Task and Description | Tasks/Activities for January | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for February |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | Reviewed existing materials and website to understand existing messages and tactics.<br><br>Held brainstorming discussion with team about broad theme and initial elevator speech messaging.<br><br>Conducted initial interviews on OIA Programs, including these participants:<br>o Gail Graham, Assistant Deputy Under Secretary for Health, Informatics and Analytics<br>o Jeanie Scott, Acting Director, Jill Powers, Deputy Director of VHA Support Service Center (VSSC)<br>o Murielle Beene, Acting Director, Health Informatics<br>o Betty Mims, Acting Deputy Director, Health Informatics<br>o Ruthie Shulaw-Grogg, VSSC Management and Program Analyst, Business/Administrative Ops<br>o Tim Cromwell, Director/Lead, VLER Health<br>o Elaine Hunolt, Manager, VLER Health<br>o Theresa Hancock, Director of My Health*e*Vet | | Finalize initial interview process.<br><br>Work with internal team to develop initial recommendations for how to support each program area and build umbrella strategy.<br><br>Organize framework/outline for written communications strategy deliverable.<br><br>Conduct initial one-hour interviews with:<br>o Marcia Insley, Director, Health Information Governance<br>o Dr. Joe Francis, Chief Quality and Performance Officer/OIA<br>o Dr. Stephan Fihn, Director, Office of Analytics and Business Intelligence<br><br>Schedule Remaining interviews:<br>o Jeanie Scott , Hi2, VeHU (possibly)<br><br>Focus on making recommendations to address short-term need for initial OIA awareness building: messaging, elevator speech, collaterals and tactics. Expect to share drafts with OIA on February 10. |

| Task and Description | Tasks/Activities for January | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for February |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA) [cont.]* | o   Jamie Bennett, Community Coordinator lead, VLER Health<br>o   Chris Tucker, Lead/Director Bar Code Resource Office<br>o   Rhonda Boling, POC – Bar Code Expansion<br><br>Developed recommendations for MHV Issues Management strategy (process, toolkit elements, broad messages points). | | |
| *Task 3 - Development of OIA identity and guidance and support for OIA "branding" and sub-brands* | B-M team reviewed the VA/VHA style guides and is working to develop a style guide for OIA. | | B-M will deliver first drafts this month. Final document will be presented at the end of March. |
| *Task 4 - Graphics support and graphic arts specialist* | B-M team sent and presented two creative concepts for the first four communications products templates (fact sheet, poster, tray liner, e-newsletter) to OIA on January 30 via conference call.  OIA provided immediate feedback on the call.  On February 3, B-M team presented a second draft of the poster with two creative concepts. | | B-M team is awaiting feedback from OIA, and expects to finalize the templates in the next two weeks. |
| | | | |

| Task and Description | Tasks/Activities for January | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for February |
|---|---|---|---|
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Michael Salvaggio requested and received access to the OIA SharePoint site on January 25.<br><br>Began an initial hands-on review of the OIA SharePoint implementation.<br><br>Held a conference call with OIA SharePoint leads to understand the background history, current implementation, pain points and potential areas for improvement.<br><br>Began developing a set of recommendations for the OIA SharePoint site that will introduce advanced features utilizing SharePoint workflows.<br><br>Held a discussion with OIA SharePoint leads on January 25 and February 1 to understand the current installation of SharePoint and the potential opportunity to migrate from SharePoint 2007 to SharePoint 2010. Researched benefits, level of effort and potential issues for a migration. | John Kerski is still waiting for access to both the VA VPN and the OIA SharePoint site.<br><br>Michael Salvaggio received OIA SharePoint access on January 25. | Continue efforts to get access OIA SharePoint site for John Kerski.<br><br>Develop recommendations for the OIA SharePoint site that will help increase user acceptance and automate manual business processes.<br><br>Begin implementing SharePoint Workflows that will increase user acceptance.<br><br>Deliver a document describing the benefits of migrating to SharePoint 2010 and layout a set of next steps to investigate this potential. |
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | Held a conference call with OIA SharePoint leads on January 25 and February 1 to understand the background history and vision for updating www.ehealth.va.gov. | Stacey Penn-Lazar and Mouddo Thiam still waiting for access to both the VA VPN. | Deliver an assessment of the www.ehealth.va.gov website by February 10. |

| Task and Description | Tasks/Activities for January | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for February |
|---|---|---|---|
| *Task 7 – Writer/Editor* | On January 27, composed a memo on the My HealtheVet communications plan, along with a list of internal and external FAQs. | | Once we are given feedback, we will draft messages and communications materials (e.g., fact sheet, PowerPoint, etc.). |
| *Task 8 - Professional video, podcast and photo production services* | Team sent memo outlining ideas and process to OIA on January 25. | | Develop a list of interviewees and start scripting out the overview video. |
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on February 6. | | Send Monthly Report on March 5. |

**Burson-Marsteller Team**
**TOPR 24 – VHA Office of Informatics and Analytics (OIA)**
**Monthly Progress Report – February 2012**

| Task and Description | Tasks/Activities for February | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for March |
|---|---|---|---|
| *Task 1 - Project Management* | On February 22, replaced Ana Lucia Escudero with Michelle Lancaster.<br><br>Completed and submitted all TMS Trainings for all team members (except for Michelle Lancaster and Joelle Ziemian).<br><br>Completed and submitted all VPN Access forms for all team members, pending appropriate documentation of training for Mouddo Thiam and fingerprints for Phil Perry. | Team members experienced difficulty with accessing TMS trainings and other requirements. | Coordinate appropriate documentation for trainings for Mouddo Thiam for VPN Access.<br><br>Phil Perry to submit fingerprints by March 9.<br><br>Achieve VPN Access for appropriate B-M team members.<br><br>Complete and submit all TMS trainings for new team members. |

| Task and Description | Tasks/Activities for February | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for March |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | Completed appropriate interviews to inform the initial interview process for the Strategic Communications Plan. Developing and organizing plan into PowerPoint deck.<br><br>Submitted first draft of "At a Glance" fact sheets and elevator speech on February 13. OIA provided feedback during the Message House messaging session call on February 21.Submitted updated "At a Glance" on February 27.<br><br>Submitted blog post on February 17.<br><br>On February 22, B-M sent the revised 11X17 poster and e-newsletter, fact sheet, tray liner, bookmark and web contact card templates to OIA. OIA provided feedback and, on March 3, B-M team sent revised materials to OIA.<br><br>Sent BCRO Newsletter template to OIA on February 16. OIA provided feedback and B-M team sent updated newsletter on March 1.<br><br>Drafting Leadership PowerPoint content and template for delivery on March 7. | | Deliver formatted Leadership PowerPoint on March 7.<br><br>Deliver Strategic Communications Plan on March 31.<br><br>Call to discuss on March 6. Deliver Directory of Services on March 31.<br><br>Deliver Evaluation Assessment on March 31.<br><br>To proceed with word templates and .png file for newsletter template, OIA need to provide approval of templates submitted on March 2.<br><br>Submit first draft of My Health*e*Vet mini-campaign messaging document on March 16 and final on March 23. |
| *Task 3 – Corporate Branding Assessment* | Deliverables under 2.2.2.2 to be finalized before proceeding with this task. | | Deliver Corporate Branding Assessment on March 31. |

| Task and Description | Tasks/Activities for February | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for March |
|---|---|---|---|
| *Task 4 - Graphics support and graphic arts specialist* | On February 3, B-M team presented a second draft of the poster with two creative concepts.<br><br>B-M team sent BCRO Annual Report to OIA for review on February 29.<br><br>Submitted update on shared directory and Microsoft Server Search Benefits document to OIA on February 29. | | Hold Call on March 6 to discuss Shared Directory.<br><br>Revise BCRO Annual Report based on OIA feedback.<br><br>Submit first draft of My Health*e*Vet mini-campaign toolkit on March 30. |
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Provided weekly updates via email and on SharePoint during February.<br><br>Submitted recommendations for upgrading to SharePoint 2010 on February 10. | John Kerski is waiting for access to both the VA VPN and the OIA SharePoint site. | Achieve VPN Access for John Kerski.<br><br>Send weekly updates. |
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | Submitted web usability assessment for www.ehealth.va.gov on February 10. OIA provided feedback on usability assessment.<br><br>B-M team sent 2011 website traffic statistics on February 29.<br><br>B-M sent quality assurance assessment on February 29. | Stacey Penn-Lazar, Mouddo Thiam and Tatyana Redozubova waiting for access to both the VA VPN and the OIA SharePoint site. | Submit monthly website traffic statistics.<br><br>Submit social media use plan and messages for My Health*e*Vet mini-campaign on March 23. |
| *Task 7 – Writer/Editor* | On February 24, team submitted My Health*e*Vet factsheets and brochure. OIA provided feedback and team finalized on March 2, with the exception of quotes requested for the brochure. | | Provide final and formatted factsheets and brochure on March 7 for My Health*e*Vet. |

| Task and Description | Tasks/Activities for February | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for March |
|---|---|---|---|
| *Task 8 - Professional video, podcast and photo production services* | OIA provided feedback on video memo sent on Janaury2 5. | | Conduct ideation session for My Health*e*Vet mini-campaign video. Submit video plan and script on March 23. |
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on March 5. | | Send Monthly Report on April 2. |

**Burson-Marsteller Team**
**TOPR 24 – VHA Office of Informatics and Analytics (OIA)**
**Monthly Progress Report – March 2012**

| Task and Description | Tasks/Activities for March | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for April |
|---|---|---|---|
| *Task 1 - Project Management* | Completed and submitted all TMS Trainings for Michelle Lancaster and Joelle Ziemian.<br><br>Submitted appropriate documentation of training for Mouddo Thiam and fingerprints for Phil Perry, for VPN Access.<br><br>Stacey Penn-Lazar and Tatyana Redozubova received VPN Access on March 19. | Team members experienced difficulty with accessing TMS trainings and other requirements. | Achieve VPN Access for remaining appropriate B-M team members, including Mouddo Thiam, John Kerski, Phil Perry and Michelle Lancaster.<br><br>Submit training for Jase Patrizio and complete TMS process for Michelle Lancaster. |

| Task and Description | Tasks/Activities for March | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for April |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | After meeting on March 6, B-M team sent updated communications plan to OIA on March 7. After feedback, updated draft submitted on March 12, and delivered final Communications Plan and Project Plan on March 27.<br><br>Team sent SharePoint and Intranet screenshots, along with ideas for the Directory of Services on March 22. Following a meeting on March 23, team sent updated deliverables to OIA on March 28, which were accepted by Courtney Coduri on March 29.<br><br>Submitted OIA ABI Fact Sheet Template on March 23.<br><br>After receiving feedback on March 21, submitted updated "At a Glance" on March 27.<br><br>OIA provided feedback on revised 11X17 poster and e-newsletter, fact sheet, tray liner, bookmark and web contact card templates thorough March; B-M team sent revised final materials to OIA on March 23, received feedback on March 28 and awaiting additional feedback.<br><br>B-M delivered PPT on March 7, which was approved by Program Managers.<br><br>Team sent revised BCRO Annual Report to OIA on March 13. B-M team sent final BCRO Annual Report to OIA for review on March 26; COTR approved as final on March 30.<br><br>B-M sent My Health*e*Vet brochures and factsheets on March 9. OIA provided feedback on brochure and factsheets on March 22; B-M updated text and design for review on March 30. Sent My Health*e*Vet social media recommendations on March 23. Team sent My Health*e*Vet designed toolkit items, with draft text, on March 30.<br><br>Delivered Evaluation Assessment plan on March 30. | | Continue to develop Directory of Services, along with the Evaluation Assessment plan.<br><br>Finalize toolkit items, along with all My Health*e*Vet items for the April 27 deadline.<br><br>2 |

| Task and Description | Tasks/Activities for March | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for April |
|---|---|---|---|
| *Task 3 – Corporate Branding Assessment* | Team sent OIA Identity and Style Guide on March 30. | | Finalize the OIA Identity and Style Guide. |
| *Task 4 - Graphics support and graphic arts specialist* | Team sent revised BCRO Newsletter to OIA on March 13. Team sent BCRO e-newsletter mock-up on March 16. B-M team sent final BCRO Newsletter to OIA for review on March 26; COTR approved as final on March 29.<br><br>Submitted update on shared directory and Microsoft Server Search Benefits document to OIA on February 29 and resent on March 9. OIA provided feedback on March 13 and team had follow-up call. COTR approved this memo on March 29. | | Design and finalize Gender Report, upon receiving final report.<br><br>Design and finalize Field Analytics project site graphics.<br><br>Meet to discuss final plans, timeline for Shared Directory. |
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Provided weekly updates via email and on SharePoint during March. | John Kerski is waiting for access to both the VA VPN and the OIA SharePoint site. | Achieve VPN Access for John Kerski.<br><br>Send weekly updates.<br><br>Assist with SharePoint tasks of Field Analytics project site. |

| Task and Description | Tasks/Activities for March | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for April |
|---|---|---|---|
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | B-M sent draft content inventory, homepage wireframe and the user task analysis on March 29.<br><br>COTR approved 2011 website traffic statistics as final on March 29.<br><br>B-M sent February website traffic statistics on March 30, along with the quality assurance assessment. | Mouddo Thiam waiting for access to both the VA VPN and the OIA SharePoint site. | Submit monthly website traffic statistics.<br><br>Further website update plans (wireframe, etc.) after receiving feedback from OIA.<br><br>Finalize social media use plan and messages for My Health*e*Vet mini-campaign by April 27. |
| *Task 7 – Writer/Editor* | Submitted updated My Health*e*Vet messages and message house on March 16. Based on OIA feedback, sent updated messages and message house on March 26.<br><br>Submitted blog post "Using Information in Amazing Ways" on March 15, and a second draft on March 26.<br><br>On March 23, team sent MyHealth*e*Vet text for toolkit items, with the exception of the folder factsheets.<br><br>On March 30, team sent MyHealth*e*Vet text for folder factsheets. | | Submit monthly blog post.<br><br>Revise My Health*e*Vet toolkit text, which must be finalized by April 27.<br><br>Draft and finalize Gender Report communications document, upon receiving final report.<br><br>Design and finalize Field Analytics project text, as needed. |

| Task and Description | Tasks/Activities for March | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for April |
|---|---|---|---|
| *Task 8 - Professional video, podcast and photo production services* | Based on OIA feedback, B-M sent updated memo on videos to OIA on March 15. First memo approved on March 29 by COTR.<br><br>B-M submitted initial draft of My Health*e*Vet video script on March 23. Sent updated script, based on OIA feedback, and styleframes for My Health*e*Vet video on March 30. | | Finalize video for My Health*e*Vet mini-campaign by April 27. |
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on April 2. | | Send Monthly Report on May 7. |

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 1 - Project Management* | Completed and submitted all TMS Trainings for Meghan Curtiss.<br><br>Submitted all documentation for VPN Access for Michelle Lancaster, Pava Cohen, Kelly O'Donnell, Robert Martin and Kathryn Steele.<br><br>John Kerski received VPN Access on April 18. | Team members experienced difficulty with accessing TMS trainings and other requirements. | Achieve VPN Access for remaining appropriate B-M team members, including Michelle Lancaster, Pava Cohen, Kelly O'Donnell, Robert Martin and Kathryn Steele.<br><br>Submit full trainings for Keena Jones.<br><br>Team to finalize VPN Access for Stacey Penn-Lazar, Phil Perry, Mouddo Thiam and Tatyana Redozubova. |

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | Team sent revised screenshot of Directory of Services chart on April 10, along with documents requesting information for Support Operations, HIG, HI and ABI.<br><br>OIA Toolkit templates and instructions sent on April 13. OIA provided feedback on April 19. Final Toolkit posted on April 27.<br><br>Submitted brand/logo mock-up on April 20 for Quality of Care; OIA provided feedback on April 26.<br><br>B-M submitted revised design for the My Health*e*Vet branding brochure and VA Blue Button factsheet on April 13. OIA provided feedback on April 20 and final posted on April 27.<br><br>OIA submitted feedback on My Health*e*Vet social media plan on April 20.<br><br>OIA submitted feedback on Effectiveness Assessment on April 13. | | Continue to develop Directory of Services, along with the Evaluation Assessment plan.<br><br>Design Gender Report during week of May 11. |

2

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 3 – Corporate Branding Assessment* | OIA provided feedback on Identity and Style Guide on April 19. Final Guide posted on April 27. | | Finalize the OIA Identity and Style Guide. |
| *Task 4 - Graphics support and graphic arts specialist* | Submitted design/logo guidance for Field Analytics on April 13; OIA submitted feedback on April 19.<br><br>B-M submitted revised design for the My Health*e*Vet branding factsheets on April 13. OIA provided feedback on April 20 and final posted on April 27.<br><br>OIA provided feedback on my Health*e*Vet mini-campaign invitation, postcard, bio card, e-newsletter template, folder and inserts on April 6. B-M revised design on April 13. OIA submitted final feedback on April 20. Final posted on April 27.<br><br>Submitted design of spring BCRO e-newsletter on April 27, after a call on April 13. Team working to resolve delivery issues. | | Submit DS Logon Campaign design on May 4.<br><br>Finalize new My Health*e*Vet designed items (pocket card, poster, tray liners, factsheet, phone tent card, web ads and banner). |

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Provided weekly updates via email and on SharePoint during April. | | Send weekly updates. |
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | OIA submitted feedback on wireframe on April 3. B-M sent updated wireframe on April 12.\n\nB-M sent March website traffic statistics on April 27, along with the quality assurance assessment. | Team waiting for access to both the VA VPN and the OIA SharePoint site. | Submit monthly website traffic statistics.\n\nFurther website update plans (wireframe, etc.) after receiving feedback from OIA. |

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 7 – Writer/Editor* | Submitted Quality of Care Communications Plan outline on April 13. Submitted draft communications plan and press release on April 20; held call with OIA to review edits on  April 26.<br><br>OIA submitted feedback on My Health*e*Vet messaging on April 6; B-M submitted revised on April 10, with OIA submitting final feedback on April 20. Final messaging posted on April 27.<br><br>The My Health*e*Vet blog post was edited and approved on April 6.<br><br>B-M submitted revised text for the My Health*e*Vet branding brochure and factsheets on April 10, team incorporated in design on April 13, OIA provided feedback on April 20 and final posted on April 27.<br><br>OIA provided feedback on my Health*e*Vet mini-campaign invitation, postcard, bio card, e-newsletter template, folder and five inserts on April 6. B-M revised text on April 10 and design on April 13. OIA submitted final feedback on April 20. Final posted on April2 7.<br><br>B-M drafted Health*e*Vet mini-campaign blog post on April 10 and posted final on April 27.<br><br>B-M submitted content for Field Analytics landing page on April 13.<br><br>Submitted copyedited VLER Health - Patient Identity PowerPoint on April 9. Submitted copyedited Interoperability and Standards in Global Health System: Maintaining Privacy and Security PowerPoint on April11. Submitted copyedited Spring BCRO newsletter on April 18. Submitted copyedited BCRO Back to Basics PowerPoint on April 16. Sent copyedited IHTSDO Newsletter on April 23. | | Draft and finalize Gender Report communications document during week of May 11.<br><br>Submit final DS Logon Campaign communications plan and press release on May 4, along with design. |
| *Task 8 - Professional video, podcast and photo production services* | B-M submitted rough cut of video for My Health*e*Vet mini-campaign on April 17; OIA submitted feedback on April 20. Final video submitted on April 27. | | Resolve formatting issues of My Health*e*Vet video and resend on May 7. |

| Task and Description | Tasks/Activities for April | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for May |
|---|---|---|---|
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on May 7. | | Send Monthly Report on June 4. |

| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 1 - Project Management* | Completed and submitted all TMS Trainings for Keena Jones. | Team members experienced difficulty with accessing TMS trainings and other requirements. | Achieve VPN Access for remaining appropriate B-M team members, including Michelle Lancaster, Pava Cohen, Kelly O'Donnell, Robert Martin and Kathryn Steele.<br><br>Team to finalize VPN Access for Stacey Penn-Lazar, Phil Perry, Mouddo Thiam and Tatyana Redozubova. |

| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | Team began implementing changes to Directory of Services, working with Paula, throughout May. Team began testing the Shared Directory on May 23.<br><br>BCRO Spring e-newsletter was revised and delivered in final format on May 7.<br><br>Final OIA Toolkit templates and instructions sent on May 23.<br><br>Submitted revised brand/logo mock-up on May 4 for Quality of Care; team held call to review on May 24. Delivered revised options on May 31.<br><br>B-M submitted printer-ready files for the My Health*e*Vet branding brochure and GPO forms on May 1.<br><br>My Health*e*Vet toolkit invitations, postcard, bio card and e-newsblast delivered on May 8 as printer ready files with GPO forms. Final e-newsblast delivered on May 4.<br><br>My Health*e*Vet toolkit (second round) phone tent, tray liner, pocket card, FAQ and campaign messages sent on May 4, with revisions on May 8. Revised versions sent on May 11. OIA provided feedback on May 15; B-M submitted revisions to OIA on May 18. My Health*e*Vet toolkit (second round) phone tent, tray liner and pocket card were approved on May 18. Did You Know? FAQ and campaign messages were approved on May 25.<br><br>Delivered Communications Resource webpage on May 15; approved on May 17.<br><br>Submitted revised My Health*e*Vet table tent on June 1.<br><br>DS LogOn PowerPoint and Fact sheet delivered on May 4.<br><br>Gender Health Care Annual Report, Communications Plan Outline and Email PNG on May 11. OIA provided feedback on May 30. B-M delivered final on June 1.<br><br>B-M submitted revised Effectiveness Assessment on May 18. OIA sent revisions on May 29. Considered final by OIA at that date. | | Paula reviewing need for 508 compliance for OIA toolkit templates and instructions.<br><br>John Kerski to continue working on search issues with OIA team for Directory of Services. |

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| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 3 – Corporate Branding Assessment* | Identity and Style Guide approved on May 24. Final 508 compliant Identity and Style Guide posted on May 31. | | |
| *Task 4 - Graphics support and graphic arts specialist* | OIA web contact card delivered to OIA and approved on May 24.<br><br>B-M submitted final My Health*e*Vet folder and inserts on May 3, along with the GPO forms.<br><br>Printer-ready files for My Health*e*Vet mini-campaign invitation, postcard, bio card and e-newsletter template submitted on May 1, along with GPO forms.<br><br>Additional My Health*e*Vet toolkit items (animated web banner, static banner) were submitted on sent on May 4, with revisions from OIA on May 8. Revised versions sent on May 11, with OIA feedback on May 15. B-M sent final versions on the May 22. Updated static banner was submitted on May 22 and June 1.<br><br>My Health*e*Vet Secure Messaging (SM) poster was submitted with GPO forms on May 18. | | |

| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Provided weekly updates via email and on SharePoint during May. | | Send weekly updates. |
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | OIA submitted leadership feedback to wireframe on May 18. B-M submitted final wireframe and next steps on May 22.<br><br>B-M sent combined monthly website deliverables (6.1, 6.2 and 6.3), with April's website statistics and May's updates, on May 31. | Team waiting for access to both the VA VPN and the OIA SharePoint site. | Submit monthly website traffic statistics.<br><br>Further website update plans (wireframe, etc.) after receiving feedback from OIA. |

| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 7 – Writer/Editor* | Revised Quality of Care Communications Plan and press release and drafted VSO memo and social media content on May 11. Delivered blog posts on May 15.<br><br>DS Logon and My HealtheVet Communications Plan and press release were revised and delivered on May 11.<br><br>Draft Gender Report Communications Plan outline and email text delivered on May 11. Press release and fact sheet delivered on May 18. OIA provided edits to the plan and email on May 30. B-M sent OIA plan edits on May 31.<br><br>B-M delivered draft talking points for Gail Graham on the 2011 accomplishments on May 11.<br><br>Delivered edits to Human Factors Newsletter on May 17.<br><br>B-M provided the revised My Health*e*Vet social media plan, along with the Facebook tab design and instructions on May 24. Sent revised content calendar on May 24. B-M sent final and updated Facebook tab/instructions and content calendar on June 2.<br><br>B-M provided edits to the Mobile Health Fact Sheet on May 22.<br><br>Provided edits to bio for Gail Graham on May 23; provided internal and external bios for Gail Graham on May 30.<br><br>B-M drafted and delivered the series of three blog posts (internal and external) for OIA leadership on May 25.<br><br>B-M edited VA Mobile Health PowerPoint and delivered to OIA on May 29.<br><br>B-M edited PAID PowerPoint and the My VeHU Campus news and delivered to OIA on May 29. | | |
| *Task 8 - Professional video, podcast and photo production services* | B-M uploaded final My Health*e*Vet video formats on May 24. Tagged pdf delivered 5/23. DVD copies delivered on May 31. | | Begin work on remaining OIA videos. |

| Task and Description | Tasks/Activities for May | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for June |
|---|---|---|---|
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on June 4. | | Send Monthly Report on July 2. |

| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 1 - Project Management* | Updated staff roster to reflect additions of Emily Bolton, Tim Holmgren and Allison Yeaman. Submitted all TMS forms.<br><br>Submitted December-May Invoice (not including Task 4) on June 29. | Team members experienced difficulty with accessing TMS trainings and other requirements. | Achieve VPN Access for remaining appropriate B-M team members, including Michelle Lancaster, Pava Cohen, Kelly O'Donnell, Robert Martin and Kathryn Steele.<br><br>Team to finalize VPN Access for Phil Perry.<br><br>Complete and submit trainings for Emily Bolton, Tim Holmgren and Allison Yeaman. |

| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 2 - Development, implementation, maintenance and ongoing refinement of a communications strategy for the VHA Office of Information and Analytics (OIA)* | Team received feedback throughout the month on Directory of Services and made updates as appropriate.<br><br>Submitted revised My Health*e*Vet table tent on June 1.<br><br>Submitted first round of design for VistaStats PowerPoint on June 2.<br><br>Submitted design for CITL Fact sheet June 21.<br><br>Edits to Gender Health Care Annual Report received on June 21; 508 compliant Report sent to OIA on June 29.<br><br>B-M submitted draft My Health*e*Vet wrap report with metrics on June 30. Included analytics for OIA Intranet and SharePoint in monthly Task 6 report, which was submitted on June 29. | | Team to receive further feedback on Directory of Services on July 2, and will update accordingly.<br><br>Team to complete design portion of "Hey VA!" web feature once approved content has been received. |

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| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 3 – Corporate Branding Assessment* | Included final OIA Identity and Style Guide in June 29 invoice. | | |
| *Task 4 - Graphics support and graphic arts specialist* | Updated/final static banner for My Health*e*Vet was submitted on June 1.<br><br>Team submitted initial template design of FOIA fact sheet and alert sheet templates to OIA on June 27.<br><br>Team submitted HTML conversion of the VA Gender Health Care Email PNG on June 1. | | Once FOIA fact sheet and alert sheet templates are finalized, team to convert to Word. |
| *Task 5 - Professional management and maintenance support for the OIA Communications SharePoint site* | Provided weekly updates via email and on SharePoint during June. | | Send weekly updates. |

| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 6 - Professional web management and maintenance support for the OIA intranet and Internet websites* | Updated ehealth.va.gov wireframe submitted to OIA, based on feedback from call, on June 11. OIA submitted feedback on June 12 and B-M sent revised wireframe on June 13. OIA submitted final feedback and approval to move forward with design on June 15. B-M sent homepage designs to OIA on June 26.<br><br>Communications Resources and Tools page design, HTML and CSS were submitted to OIA on June 11. Revised/final sent on June 29, based on OIA feedback from June 12.<br><br>B-M sent combined monthly website deliverables (6.1, 6.2 and 6.3), with May's website statistics and June's updates, on June 29. | Team waiting for access to both the VA VPN and the OIA SharePoint site. | Submit monthly website traffic statistics.<br><br>Further develop ehealth.va.gov website build-out.<br><br>Submit web/research assignment recommendations. |

| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 7 – Writer/Editor* | Throughout the month of June, B-M helped pilot sites set up their social media materials (Facebook and Twitter) for the My Health*e*Vet campaign.<br><br>Edited and delivered National Association of County Veterans Service Officers PPT on June 4.<br><br>Submitted copyedits and recommendations to the Team AdVAntage StratComm Report on June 8. After OIA feedback, rearranged and copyedited document submitted on June 19.<br><br>B-M submitted VA-IHS COMP first draft of press release and blog post on June 8. OIA submitted feedback on June 13. B-M submitted revised versions on June 13.<br><br>B-M drafted plain language summary of CITL Study and submitted on June 8. OIA submitted feedback on June 13. B-M submitted revised version on June 15.<br><br>B-M reconciled and edited two versions of Concurrence SOP; delivered on June 15.<br><br>B-M submitted copyedited conference call announcement for VHA on June 19.<br><br>Submitted draft EHR fact sheet on June 22.<br><br>Submitted copyedited VA Mobile Health fact sheet on June 20, along with draft blog post on June 25.<br><br>B-M submitted Field Analytics draft communications plan, local press release, national press release, Hey VA! post and blog post submitted to OIA on June 29.<br><br>B-M submitted VHA Facility Quality and Safety Report Plain Language Summary on June 29. | | |

| Task and Description | Tasks/Activities for June | Challenges/Hurdles to Accomplishing Tasks | Tasks/Activities for July |
|---|---|---|---|
| *Task 8 - Professional video, podcast and photo production services* | Final My Health*e*Vet DVDs delivered on June 1.<br><br>Revised memo on remaining videos submitted on June 6; OIA provided feedback on June 13.<br><br>B-M met internally to discuss multiple options to revise video memo to suit OIA's needs. | | Submit revised memo/outline.<br><br>Begin work on remaining OIA videos. |
| *Task 9 - Comprehensive process improvement strategy for OIA communication processes and activities* | N/A | | N/A |
| *Task 11- Monthly Reports* | Sent Monthly Report on July 2. | | Send Monthly Report on August 6. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|---|---|---|---|---|---|---|
| **Task 1- Project Management** | | | | | | |
| | Trainings for Emily Bolton, Tim Holmgren, Allison Yeaman and Huy Ngo sent to COTR. VPN Access forms for Dan Forrest sent in. | Complete | N/A | N/A | | Achieve VPN Access for remaining appropriate B-M team members. |
| **Task 2- 2.2.2.2- Communications Products** | | | | | 8 | |
| | VHA Quality of Care - Header/Footer and Cover Design | Complete | B-M sent images on 7/17 | 7/17/2012 | | Team to receive feedback and/or approval on deliverables. |
| | VHA Quality of Care - Executive Summary | OIA Review | B-M sent executive summary design on 7/27 | 7/27/2012 | | |
| | VHA Quality of Care - Pull Outs | OIA Review | B-M sent pull outs on 7/27 | 7/27/2012 | | |
| | SHEP PowerPoint Redesign | Complete | B-M sent PPT on 7/3 | 7/3/2012 | | |
| | Field Analytics: Hey VA! Web Post Image and Format | Ongoing | B-M provided recommended picture on 7/23 OIA approved picture B-M working to finalize | 7/23/2012 | | |
| | OIA Fact sheet - CITL Study | OIA Review | B-M sent fact sheet on 6/25 OIA provided feedback on 7/5 B-M sent update on 7/10 | 7/10/2012 | | |
| **Task 2- 2.2.2.3- Directory of Services** | | | | | | |
| | DOS User Guide | OIA Review | B-M delivered user guide on 7/31 | 7/31/2012 | | Team to receive feedback and/or approval on deliverables. |
| **Task 2- 2.2.2.4- Effectiveness Assessment** | | | | | | |
| | My Health*e* Vet Pilot Program Analytics | Ongoing | Incorporated in Final EIG Report in excel and PPT. | 8/2/2012 | | Team to receive feedback and/or approval on deliverables. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|------|------------------------|--------|----------------------------|-------------------------------|----------------------------------|----------------------|
| **Task 4- 2.2.4.1- Communications Products** | | | | | 3 | |
| | HIM fact sheet/flyer | Complete | OIA requested updates on 7/13<br>B-M provided update on 7/20<br>OIA requested updates on 7/23<br>OIA requested additional updates on 7/25<br>B-M provided updates on 7/26<br>OIA requested 508 compliant version on 7/30<br>B-M provided 508 compliant version on 8/2 | 8/2/2012 | | OIA to provide feedback and/or approval. |
| | Informatics Patient Safety bookmark | Complete | OIA requested updates on 7/16<br>B-M provided link to bookmark on 7/23<br>OIA requested update on 7/30<br>B-M provided 508 compliant version on 7/30 | 7/30/2012 | | |
| | FOIA Fact Sheet and Alert Sheet Template | Complete | OIA requested updates on 6/20<br>B-M provided updates on 7/10<br>OIA requested updates on 7/24<br>B-M provided final on 7/27 | 7/27/2012 | | |
| **Task 4-2.2.4.2- Shared Directory** | | | | | | |
| | Regular updates to network share files | OIA Review | Several updates provided weekly | 7/31/2012 | | |
| **Task 4- 2.2.4.3- E-tools and Templates** | | | | | 3 | |
| | HTML Templates for BCRO + OIA Newsletter | Complete | OIA requested changes to footer of templates on 7/26<br>B-M sent revised templates on 8/1 | 8/1/2012 | | |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|---|---|---|---|---|---|---|
| | HTML of BCRO Messenger Newsletter | Complete | B-M sent HTML on 7/24<br>OIA provided edits on 7/25<br>B-M sent revised version on 7/25<br>OIA provided edits on 7/26<br>B-M sent final on 7/27 | 7/27/2012 | | |
| | HTML of Gender Report Email PNG | Complete | B-M sent HTML version of email on 7/19 | 7/19/2012 | | |
| **Task 5-2.2.5.1- Weekly Reports** | | | | | | |
| | Upload weekly updates | ng | Sent weekly updates every Monday in July. | 7/30/2012 | | Send weekly updates. |
| **Task 6- 2.2.6.1- Website Quality Assurance** | | | | | | |
| | Communications Resource Page | Complete | OIA provided feedback on 7/3<br>B-M provided updated and 508 compliant page on 7/20<br>Page is now live | 7/20/2012 | | B-M will continue to work quickly to resolve all eHealth issues. B-M to meet with Team Tiger if requested. B-M to provide Task 6 monthly report on 8/31. |
| | Community of Practice Recommendations | OIA Review | B-M provided recommendations on 7/3<br>B-M provided additional questions on 7/16<br>OIA to review with Team Tiger | 7/16/2012 | | |
| | eHealth home page and website | Ongoing | B-M sent wireframes for approval on 6/28<br>OIA provided feedback on 7/3<br>B-M sent updates on 7/10<br>OIA provided feedback and approval on 7/10<br>B-M provided finals on 7/12<br>OIA provided edits on 7/13<br>B-M provided CSS and HTML pages on 7/25<br>B-M and OIA encountered difficulties with format and access, which we have been working to resolve as quickly as possible. | Ongoing | | |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|---|---|---|---|---|---|---|
| | Report on updates on design modifications to internet, intranet sites | Complete | B-M provided report on 7/31 | 7/31/2012 | | |
| **Task 6- 2.2.6.2- Website Standardized Review** | | | | | | |
| | Report on standardized review | Complete | B-M provided report on 7/31 | 7/31/2012 | | B-M to provide Task 6 monthly report on 8/31. |
| **Task 6- 2.2.6.3- Use and Functionality Reports** | | | | | | |
| | Report on use and functionality | Complete | B-M provided report on 7/31 | 7/31/2012 | | B-M to provide Task 6 monthly report on 8/31. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|---|---|---|---|---|---|---|
| **Task 7- 2.2.7.1- Full-Time Writer** | | | | | | |
| Gender Report | | | | | | |
| | Fact Sheet | SMEs | OIA provided edits on 7/2 <br> B-M sent revised text on 7/3 | 7/3/2012 | | Team to approve or provide feedback. |
| CDW Transition | | | | | | |
| | VHA Conference Call announcement | SMEs | OIA requested revisions on 7/16 <br> B-M provided updates on 7/24 | 7/24/2012 | | Team to approve or provide feedback. |
| | Communications plan with talking points | SMEs | OIA requested revisions on 7/16 <br> B-M provided updates on 7/24 | 7/24/2012 | | |
| | News Blast | SMEs | OIA requested revisions on 7/16 <br> B-M provided updates on 7/25 | 7/24/2012 | | |
| Field Analytics HACP | | | | | | |
| | Communications Plan w/ Talking Points | Complete | OIA requested revisions on 7/10 <br> B-M provided updates on 7/13 | 7/24/2012 | | Team to approve or provide feedback. |
| | HACP Congrats Letter | Complete | OIA requested revisions on 7/16 | 7/24/2012 | | |
| | Press Release (Local) | Complete | B-M provided revisions on 7/17 | 7/24/2012 | | |
| | Press Release (National) | Complete | OIA requested revisions on 7/20 | 7/24/2012 | | |
| | HACP Blog Post | Complete | B-M provided revisions on 7/24 | 7/24/2012 | | |
| | HACP Hey VA! Post | Text Complete | | 7/24/2012 | | |
| | VAnguard article | OIA Review | B-M sent first draft on 8/2 | 8/2/2012 | | |
| EIG Project | | | | | | |
| | Report/ Project Plan, including matrix and timeline | Ongoing | OIA requested revisions on 7/17 <br> B-M provided plan on 7/31 <br> OIA provided additional feedback on 8/1 | 7/31/2012 | | Team to continue to work with OIA to finalize. |
| | Summary Fact Sheet | Ongoing | | 7/31/2012 | | |
| | PowerPoint | Ongoing | | 7/31/2012 | | |
| | Results PPT | Ongoing | | 7/31/2012 | | |
| | Results Spreadsheet | Ongoing | | 7/31/2012 | | |
| Other | | | | | | |
| | My Health*e* Vet standard presentation | Complete | OIA requested copyedit on 7/16 <br> B-M provided edited version on 7/19 | 7/19/2012 | | Team to approve or provide feedback. |
| | Most Wired news release | Complete | OIA requested copyedit on 7/17 <br> B-M provided edited on 7/19 | 7/19/2012 | | |
| | My Health*e* Vet Vietnam Veterans of America Leadership Conference | Complete | OIA requested copyedit on 7/20 <br> B-M provided copyedited version on 7/23 | 7/23/2012 | | |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|------|------------------------|--------|----------------------------|-------------------------------|----------------------------------|------------------------|
| | EHR Fact Sheet | Complete | OIA provided edits on 7/20 B-M sent edited version in OIA factsheet template on 7/20 | 7/20/2012 | | |
| | HealthELink Media Alert | Complete | OIA requested copyedit on 7/20 B-M provided copyedited version on 7/25 | 7/25/2012 | | |
| | SHEP PPT editing | Complete | B-M sent PPT on 7/3 | 7/3/2012 | | |
| | NDS poster | Complete | B-M sent edits on 7/6 | 7/6/2012 | | |
| | BCRO summer newsletter (copy editing) | Complete | B-M sent edited copy on 7/6 | 7/6/2012 | | |
| | vVehu 2012 pay stub and Hey VA Announcements | Complete | B-M sent copyedits and recommendations on 7/6 | 7/6/2012 | | |
| | HealthELink Release | Complete | OIA requested copyedit on 7/20 B-M provided copyedited version on 7/25 | 7/25/2012 | | |
| | HEALTHeLINK Talking Points | Complete | OIA requested copyedit on 7/20 B-M provided copyedited version on 7/25 | 7/25/2012 | | |
| | Mobile Health FAQ | Complete | B-M sent copyedited version on 7/18 | 7/18/2012 | | |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for August |
|---|---|---|---|---|---|---|
| **Task 8- Video** | | | | | | |
| | Remaining OIA Videos | Ongoing | OIA and B-M worked to establish remaining videos and shoot dates, after concluded not to complete 7/10 shoot. Coordinating with Gail's team to schedule for 9/17. | | | Work to schedule room and participants for 9/17 shoot. |
| **Task 11- Monthly Reports** | | | | | | |
| | Monthly Report | Complete | B-M sent monthly report for July on 8/6. | 8/6/2012 | | B-M to send monthly report on 9/3. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for October |
|---|---|---|---|---|---|---|
| **Task 1- Project Management** | | | | | | |
| 2.2.2.1 | | | | | | Achieve VPN Access for remaining appropriate B-M team members. |
| **Task 2- 2.2.2.2- Communications Products** | | | | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | | | | |
| 2.2.2.2 | Fact Sheet | In progress | OIA assigned on 9/4. Team drafted communications plan with outline of deliverables. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/17. | N/A | 6 | Items to be designed once further direction is achieved. |
| 2.2.2.2 | Pocket Card | In progress | OIA assigned on 9/4. Team drafted communications plan with outline of deliverables. Phone call for further background held on 9/27. B-M to deliver design on 10/17. | N/A | | |
| 2.2.2.2 | Poster | In progress | OIA assigned on 9/4. Team drafted communications plan with outline of deliverables. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/17. | N/A | | |
| 2.2.2.2 | Table Topper | In progress | OIA assigned on 9/4. Team drafted communications plan with outline of deliverables. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/17. | N/A | | |
| 2.2.2.2 | HeyVA! Image | In progress | OIA assigned on 9/4. Team drafted communications plan with outline of deliverables. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/19. | N/A | | |
| **Other** | | | | | | |
| 2.2.2.2 | VHA Quality of Care - Header/Footer and Cover Design (Note: this is "**full report**") | In progress | B-M submitted full report with logo on 9/14. OIA submitted final edits for report on 9/20. B-M submitted updated full report replacing the first page on 9/24. B-M pursuing 508 compliant report. | 9/24/2012 | | OIA/B-M/Sage to discuss 508 compliant options. |
| 2.2.2.2 | VHA Quality of Care - Executive Summary (With Logo) | OIA Review | OIA requested incorporation of logo into executive summary on 8/28. B-M submitted on 9/6. B-M submitted with updated logo on 9/14. | 9/14/2012 | | Complete 508 compliance for summary. |
| 2.2.2.2 | My Health*e* Vet Fact sheets: Blue Button | In progress | OIA provided feedback on 9/14. B-M submitted updated Blue Button Fact Sheet on 9/27. OIA provided feedback on 9/28. | 9/27/2012 | | OIA and B-M to discuss language changes. |
| 2.2.2.2 | My Health*e* Vet Fact sheets: Immunization | In progress | OIA assigned on 9/19. OIA provided updated content on 9/28. | N/A | | B-M to submit updated fact sheet by 10/2. |
| **Task 2- 2.2.2.3- Directory of Services** | | | | | | |
| | Directory of Services | Ongoing | Updates as needed. | N/A | | Team to receive feedback and/or approval on deliverables. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates |
|---|---|---|---|
| **Task 4- 2.2.4.1- Communications Products** | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | |
| 2.2.4.1 | Banner | In progress | OIA assigned on 9/4. Team addressed outline in first draft of plan. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/17. |
| 2.2.4.1 | Brochure | In progress | OIA assigned on 9/4. Team addressed outline in first draft of plan. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/19. |
| 2.2.4.1 | PowerPoint | In progress | OIA assigned on 9/4. Team addressed outline in first draft of plan. Sage provided feedback on 9/20. Phone call for further background held on 9/27. B-M to deliver design on 10/19. |
| **Other** | | | |
| 2.2.4.1 | Informational Graphics: OIA Logotype Set | OIA Review | OIA requested logos on 8/22. B-M provided logos on 8/30. B-M incorporated logos into VHA Full Report and Executive Summary (see 2.2.2 for details). B-M provided word editable document on 9/10. OIA review or approval. |
| 2.2.4.1 | OIA VistA Screen Shots | Complete | B-M submitted on 8/31. OIA approved on phone 9/11. |
| **Task 4-2.2.4.2- Shared Directory** | | | |

| 2.2.4.2 | Regular Updates to Network Share Files | OIA Review | Updated file naming conventions on network share. |
|---|---|---|---|

| **Task 4- 2.2.4.4 Spanish Translation** | | | |
|---|---|---|---|
| 2.2.4.4 | My Health*e* Vet National Roll Out: Spanish Translation Deliverables List/Quote | Complete | B-M provided list on 9/19. OIA provided feedback on 9/20. B-M submitted quotes on 9/21. OIA approved on 9/24. |
| 2.2.4.4 | VA DoD Privacy Brochure | In progress | OIA confirmed on 9/24. |
| 2.2.4.4 | HIM Fact Sheet/Flyer (maybe) | In progress | OIA confirmed on 9/24. |
| 2.2.4.4 | Gender Report Fact Sheet (maybe) | In progress | OIA confirmed on 9/24. |
| 2.2.4.4 | My Health*e* Vet Spanish Translation | In progress | Deliverables for translation: Video Script, Tri Brochure, Fact Sheet: Immunizations, Fact Sheet: Blue Button, Fact Sheet: Did You Know, Toolkit: Invite, Toolkit Folder Insert: Online Tools, Toolkit Folder Insert: Secure Messaging, Toolkit Folder Insert: Emergency Support, Toolkit Folder Insert: PACT, Toolkit Folder Insert: Value of My HealtheVet |

| **Task 5-2.2.5.1- Weekly Reports** | | | |
|---|---|---|---|
| 2.2.5.1 | Upload Weekly Updates | Complete | Sent weekly updates every Monday in September. |

| **Task 6- 2.2.6.1- Website Quality Assurance** | | | |
|---|---|---|---|
| 2.2.6.1 | Mobile Health Page Mock-Up | OIA Review | B-M provided mobile health mock-up on 8/29. OIA provided edits on 9/4. B-M provided update on 9/10. OIA provided edits on 9/19. B-M provided updated version on 9/21. |
| 2.2.6.1 | eHealth Banner on Research Study | In progress | B-M provided banner on 9/28. OIA provided feedback on 10/1. |

| 2.2.6.1 | eHealth News Page | In progress | B-M provided initial thoughts on 9/28. OIA provided feedback on 10/1. |
|---------|-------------------|-------------|-----------------------------------------------------------------------|
| 2.2.6.1 | eHealth Home Page | Complete | B-M sent final eHealth files for approval on 9/6. OIA approved to go live on 9/7. Site is now live. Updates will be made when requested. |
| 2.2.6.1 | My Health*e* Vet National Roll Out: online display memo & timeline | OIA Review | OIA assigned on 9/13. B-M submitted on 9/28. |
| 2.2.6.1 | Monthly Report on Updates (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 9/28. |
| **Task 6- 2.2.6.2- Website Standardized Review** | | | |
| 2.2.6.2 | Monthly Report on Standardized Review (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 9/28. |
| **Task 6- 2.2.6.3- Use and Functionality Report** | | | |
| 2.2.6.3 | Monthly Report on Use and Functionality (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 9/28. |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for October |
|---|---|---|
| N/A | | |
| N/A | | |
| N/A | | |
| 9/10/2012 | | OIA review or approval. |
| 8/31/2012 | | |
| | | |

| | | |
|---|---|---|
| | | |
| 9/24/2012 | | OIA and B-M to solidify dates/timelines for completion and submission of Spanish materials. Currently on hold pending possible My Health*e* Vet edits. |
| N/A | | |
| N/A | | |
| N/A | | |
| N/A | | |
| | | |
| 9/24/2012 | | Send weekly updates. |
| | | |
| 9/21/2012 | | Complete edits; OIA approval of mockup; build and complete sub-page. |
| 9/28/2012 | | B-M to develop banner. |

| | | |
|---|---|---|
| 9/28/2012 | | B-M to begin mock-up. |
| 9/6/2012 | | B-M to maintain home page as needed. |
| 9/28/2012 | | OIA to provide feedback. |
| 9/28/2012 | | B-M to provide Task 6 monthly report on 10/31. |
| | | |
| 9/28/2012 | | B-M to provide Task 6 monthly report on 10/31. |
| | | |
| 9/28/2012 | | B-M to provide Task 6 monthly report on 10/31. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for October |
|---|---|---|---|---|---|---|
| **Task 7- 2.2.7.1- Full-Time Writer** | | | | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | | | | |
| 2.2.7.1 | Project Outline Report/Plan | In progress | OIA assigned on 8/28. B-M provided preliminary project outline draft on 9/10. B-M provided updated doc on 9/12 OIA provided feedback on phone call on 9/13. B-M provided updated plan on 9/14. B-M provided updated plan on 9/21. B-M provided updated plan on 10/1. | 10/1/2012 | | OIA to provide feedback; B-M to submit deliverables outlined in timeline. |
| 2.2.7.1 | Fact Sheet | In progress | OIA assigned on 9/4. B-M to submit on 10/5. | N/A | | |
| 2.2.7.1 | Poster | In progress | OIA assigned on 9/4. B-M to submit on 10/5. | N/A | | |
| 2.2.7.1 | Table topper | In progress | OIA assigned on 9/4. B-M to submit on 10/5. | N/A | | |
| 2.2.7.1 | Pocket Card | In progress | OIA assigned on 9/4. B-M to submit on 10/5. | N/A | | |
| 2.2.7.1 | Brochure | In progress | OIA assigned on 9/4. B-M to submit on 10/5. | N/A | | |
| 2.2.7.1 | Hey VA! Post | In progress | OIA assigned on 9/4. B-M to submit on 10/12. | N/A | | |
| 2.2.7.1 | Email to Congressional Staff | In progress | OIA assigned on 9/4. B-M to submit on 10/12. | N/A | | |
| 2.2.7.1 | Banner Post | In progress | OIA assigned on 9/4. B-M to submit on 10/12. | N/A | | |
| 2.2.7.1 | PPT Presentation | In progress | OIA assigned on 9/4. B-M to submit on 10/12. | N/A | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 2.2.7.1 | Memo from Undersecretary of Health | In progress | OIA assigned on 9/4. B-M to submit on 10/12. | N/A | | |
| **GG Blog Posts** | | | | | | |
| 2.2.7.1 | VLER: Helping Veterans and VA be more efficient: Blog | Complete | OIA assigned on 9/4. B-M submitted on 9/18. | 9/18/2012 | | B-M to make note of edits/changes and stand by for additional blog assignments. |
| 2.2.7.1 | Secure Messaging Video Promotion blog | Complete | OIA assigned on 9/4. B-M turned in on 9/6. OIA provided feedback on SharePoint version on 9/12 (no further action needed). | 9/6/2012 | | |
| 2.2.7.1 | Advances in Telehealth blog | Complete | OIA assigned on 9/4. B-M submitted on 9/14. OIA provided feedback on 9/19 (edits on SharePoint version). | 9/14/2012 | | |
| 2.2.7.1 | Recap of Fiscal Year accomplishments: Talking Points | OIA review | OIA assigned on 9/4. B-M submitted on 9/24. | 9/24/2012 | | |
| 2.2.7.1 | Recap of Fiscal Year accomplishments: Blog | OIA review | OIA assigned on 9/4. B-M submitted on 9/24. OIA provided feedback on 9/27. B-M provided update on 9/28. | 9/28/2012 | | |
| **Health*e* Vet National Roll Out** | | | | | | |
| 2.2.7.1 | Health*e* Vet National Roll Out: Communications Plan | In progress | OIA assigned on 9/13. B-M provided report on 9/26. B-M provided updated report with Facebook tab and social media on 9/27. | 9/27/2012 | | B-M to submit all final deliverables by October 19. |
| 2.2.7.1 | "How to" Guide | In progress | OIA assigned on 9/13. B-M to submit on 10/5. | N/A | | |
| **VA Immunization** | | | | | | |

| 2.2.7.1 | News Release | OIA review | OIA assigned on 9/19.<br>B-M submitted on 9/21.<br>OIA provided edits on 9/28.<br>B-M submitted on 10/1. | 10/1/2012 | | OIA to approve/provide feedback. |
|---|---|---|---|---|---|---|
| 2.2.7.1 | Hey VA! Post | OIA review | OIA assigned on 9/19.<br>B-M submitted on 9/26. | 9/26/2012 | | |
| 2.2.7.1 | Talking points | OIA review | OIA assigned on 9/19.<br>B-M submitted on 9/26.<br>OIA provided edits on 9/28.<br>B-M submitted on 10/1. | 10/1/2012 | | |
| **eConnected** | | | | | | |
| 2.2.7.1 | eConnected Report | In progress | OIA assigned on 9/11.<br>B-M submitted report outline on 9/14.<br>B-M submitted updated report on 9/24. | 9/24/2012 | | OIA to approve/provide feedback & updates on case study component. |
| 2.2.7.1 | eConnected Case Studies | On hold | N/A | N/A | | |
| **Other** | | | | | | |
| 2.2.7.1 | My Health*e* Vet PPT for Medicine 2.0 conference | Complete | OIA assigned on 9/10.<br>B-M submitted on 9/11. | 9/11/2012 | | |
| 2.2.7.1 | PRSA Award Application | OIA review | OIA assigned on 9/13.<br>B-M submitted first draft on 9/21.<br>OIA provided feedback on 9/27.<br>B-M submitted on 9/28.<br>OIA to submit to PRSA. | 9/28/2012 | | |
| 2.2.7.1 | iEHR SME announcement | Complete | OIA assigned on 9/20.<br>B-M submitted on 9/20. | 9/20/2012 | | |
| 2.2.7.1 | Blog: POW MIA DAY SUPPORT PACKAGE | Complete | OIA assigned on 9/4.<br>B-M submitted on 9/10.<br>OIA provided feedback on 9/12. | 9/10/2012 | | |

| | | | | | |
|---|---|---|---|---|---|
| 2.2.7.1 | Comprehensive Recap of Work to Date | Complete; update as needed. | OIA assigned on 8/27. B-M submitted on 8/31. OIA provided feedback on 9/4. B-M submitted updated version on 9/4. | 9/4/2012 | |
| 2.2.7.1 | Curtis PPT | Complete | OIA assigned on 9/12. B-M submitted on 9/14. | 9/14/2012 | |
| 2.2.7.1 | Blog: Most Wired Hospitals Announcement | Complete | OIA assigned on 9/4. B-M submitted on 9/5. | 9/5/2012 | |
| 2.2.7.1 | National Data Systems Presentation Copyedit | Complete | OIA assigned on 9/28. B-M submitted on 9/28. | 9/28/2012 | |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date |
|---|---|---|---|---|
| **Task 8- Video** | | | | |
| | VA OIA Video Series | In progress | Interviews were shot at VACO on 9/17. | 9/17/2012 |
| | DoD/VA Privacy Plan: concept for privacy video memo | In progress | B-M submitted memo & timeline on 10/2. | 10/1/2012 |
| | Blue Button Video | OIA Feedback | Participated in call with OIA 9/20. Participated in call with OIA, HHS on 9/20. | N/A |
| **Task 9- Health*e* Vet Wrap Report** | | | | |
| | Outreach/My Health*e* Vet: summary | OIA Review | OIA assigned on 9/13. B-M submitted on 9/28. | 9/28/2012 |
| | Outreach/My Health*e* Vet: PowerPoint | OIA Review | OIA assigned on 9/13. B-M submitted on 9/28. | 9/28/2012 |
| **Task 11- Monthly Reports** | | | | |
| | Monthly Report | Complete | B-M sent monthly report for September on 10/1. | 10/1/2012 |

| Total Deliverables (If Relevant) | Activities for October |
|---|---|
| | |
| | B-M scheduling upcoming shoot for 10/12. |
| | OIA to provide update on direction and status of project. |
| | |
| | OIA feedback/approval. |
| | OIA feedback/approval. |
| | |
| | B-M to send monthly report on 11/5. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for November |
|---|---|---|---|---|---|---|
| **Task 1- Project Management** | | | | | | |
| 2.2.2.1 | Project Management | N/A | B-M transitioned Meghan Curtiss into the Full-time writer role and brought on Stacy Merrick as an additional qualitative reviewer. OIA added Valerie Mullins to the team. | N/A | | Achieve VPN Access for remaining appropriate B-M team members. |
| **Task 2- 2.2.2.2- Communications Products** | | | | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | | | | |
| 2.2.2.2 | Fact Sheet | In progress | OIA assigned on 9/4.<br>B-M delivered design sample on 10/8.<br>OIA provided feedback on 10/9.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25.<br>B-M to hold edits until all feedback received from | 10/25/2012 | 7 | Items to be revised once edits received, finalized and translated. |
| 2.2.2.2 | Pocket Card | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25.<br>OIA feedback via calls.<br>B-M to hold edits until all feedback received from week of 10/28. | 10/25/2012 | | |
| 2.2.2.2 | Poster | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25. | 10/25/2012 | | |
| 2.2.2.2 | Table Topper | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25.<br>OIA feedback via calls.<br>B-M to hold edits until all feedback received from week of 10/28. | 10/25/2012 | | |
| 2.2.2.2 | HeyVA! Image (& post) | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25.<br>B-M to hold edits until all feedback received from week of 10/28. | 10/25/2012 | | |
| **Other** | | | | | | |
| 2.2.2.2 | VHA Quality of Care - Header/Footer and Cover Design (Note: this is "**full report**") | Complete | OIA confirmed billing logistics on 10/19.<br>B-M submitted 508 compliant full report on 10/23. | 10/23/2012 | | |
| 2.2.2.2 | VHA Quality of Care - Executive Summary (With Logo) | Complete | OIA approved on 10/2.<br>B-M submitted 508 compliant version on 10/5.<br>OIA approved on 10/16 call. | 10/5/2012 | | |
| 2.2.2.2 | My Health*e* Vet Creative Updates for National Roll Out | In progress | B-M provided LOE on 10/12.<br>B-M provided updated materials on 10/16.<br>B-M provided updated materials on 10/23.<br>OIA approved materials on 10/29.<br>B-M to provide 508 compliant files on 11/6. | 10/23/2012 | | B-M to provide 508 compliant designs by 11/6. |
| **Task 2- 2.2.2.3- Directory of Services** | | | | | | |
| | Directory of Services | Ongoing | Updates as needed. | N/A | | Make final updates to Directory of Services. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates |
|------|------------------------|--------|----------------------------|
| **Task 4- 2.2.4.1- Communications Products** | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | |
| 2.2.4.1 | Banner | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated text on 10/25.<br>B-M to hold edits until all feedback received from week of 10/28. |
| 2.2.4.1 | Brochure | In progress | OIA assigned on 9/4.<br>B-M delivered design sample on 10/8.<br>B-M submitted on 10/17.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated text and design version on 10/25. |
| 2.2.4.1 | PowerPoint | In progress | OIA assigned on 9/4.<br>B-M submitted on 10/18.<br>OIA feedback via calls.<br>B-M submitted on 10/24.<br>OIA feedback via calls.<br>B-M submitted updated version on 10/25.<br>OIA feedback via calls.<br>B-M submitted updated version on 10/31. |
| 2.2.4.1 | Fact Sheet (2) | In progress | OIA assigned on 10/23.<br>B-M sent questions regarding content on 11/2. |
| 2.2.4.1 | Poster (2) | In progress | OIA assigned on 10/23.<br>B-M sent questions regarding content on 11/2. |
| **Other** | | | |
| 2.2.4.1 | Informational Graphics: OIA Logotype Set | Complete | B-M provided updated word editable doc on 10/8.<br>OIA approved on 10/16 call. |

| 2.2.4.1 | My Health*e* Vet Fact sheets: Blue Button | Complete | OIA provided feedback on 9/14. B-M submitted updated Blue Button Fact Sheet on 9/27. |
|---------|-------------------------------------------|-------------|--------------------------------------------------------------------------------------|
| 2.2.4.1 | New Fact Sheet Template | In progress | OIA assigned on 10/18. B-M submitted on 10/24. OIA approved on 11/1 call. |
| 2.2.4.1 | My Health*e* Vet Fact sheets: Immunization | Complete | OIA assigned on 9/19. OIA provided updated content on 9/28. B-M provided 508 compliant version on |

**Other**

| 2.2.4.1 | Informational Graphics: OIA Logotype Set | Complete | B-M provided updated word editable doc on 10/8. OIA approved on 10/16 call. |
|---------|------------------------------------------|----------|----------------------------------------------------------------------------|

**Task 4-2.2.4.2- Shared Directory**

| 2.2.4.2 | Regular Updates to Network Share Files | In progress | Updated file naming conventions on network share. |
|---------|----------------------------------------|-------------|---------------------------------------------------|

**Task 4-2.2.4.3- eTools**

| 2.2.4.3 | RO Messenger Fall 2012 Volume 8 Issue 35 Newsletter | Complete | B-M submitted HTML version on 10/15. OIA approved on 11/1 call. |
|---------|-----------------------------------------------------|----------|----------------------------------------------------------------|

**Task 4- 2.2.4.4 Spanish Translation**

| 2.2.4.4 | My Health*e* Vet Spanish Translation | In progress | Once team has final files, Operational Solutions will translate in 9 business days. |
|---------|--------------------------------------|-------------|------------------------------------------------------------------------------------|

**Task 5-2.2.5.1- Weekly Reports**

| 2.2.5.1 | Upload Weekly Updates | Complete | Sent weekly updates every Monday in October. |
|---------|-----------------------|----------|----------------------------------------------|

**Task 6- 2.2.6.1- Website Quality Assurance**

| 2.2.6.1 | Mobile Health Page | Complete | B-M provided mobile health page on ECMS on 10/19 for approval to go live. B-M received approval to go live on 10/23. Mobile Health page is now live. |
|---------|--------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------|

| 2.2.6.1 | eHealth Newsroom Page | In progress | B-M delivered mock-up on 10/9. <br> OIA provided feedback on 10/10. <br> B-M delivered second mock-up on 10/18. <br> OIA approved on 10/18. <br> B-M building out Newsroom page for approval. |
|---|---|---|---|
| 2.2.6.1 | eHealth Home Page Rotating Banners | In progress | B-M updated rotating banner on home page with My Health*e* Vet research study. <br> OIA approved 2nd mock up and next home page banner design provided by B-M on 10/18. <br> Blue Button Winner banner was sent on 10/25. |
| 2.2.6.1 | eHealth Home Page | Complete | B-M completed first batch of fixes and received approval to go live on 10/5. <br> B-M delivered second set of fixes on 10/23. <br> B-M delivered another set of fixes on 11/6. |
| 2.2.6.1 | My Health*e* Vet National Roll Out: web components | In progress | B-M provided final recommendations on 10/5. <br> B-M provided display memo on 10/9. <br> B-M provided updated memo on 10/12. <br> B-M provided final language for the Intranet page on 10/24. <br> B-M provided mock-up on 10/26. <br> OIA provided edits on 11/2 call. <br> B-M working to build intranet page. |
| 2.2.6.1 | Monthly Report on Updates (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 10/31. |
| **Task 6- 2.2.6.2- Website Standardized Review** | | | |
| 2.2.6.2 | Monthly Report on Standardized Review (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 10/31. |
| **Task 6- 2.2.6.3- Use and Functionality Report** | | | |

| 2.2.6.3 | Monthly Report on Use and Functionality (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 10/31. |
|---------|----------------------------------------------------------------|----------|---------------------------------------------------|

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for November |
|---|---|---|
| | | |
| | | |
| 10/24/2012 | 3 | Incorporate additional feedback; finalize deliverables. |
| 10/25/2012 | | |
| 10/31/2012 | | |
| 11/2/2012 | | |
| 11/2/2012 | | |
| | | |
| 10/8/2012 | 4 | |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for November |
|---|---|---|

| | | |
|---|---|---|
| 10/10/2012 | | |
| 10/24/2012 | | |
| 10/10/2012 | | |
| | | |
| 10/8/2012 | 1 | |
| | | |
| | | Finalize Network Share file updates. |
| | | |
| 10/15/2012 | 1 | |
| | | |
| N/A | | B-M to proceed with Spanish translation upon receipt of final files. |
| | | |
| 10/29/2012 | | Send weekly updates. |
| | | |
| 10/23/2012 | | |

| | | |
|---|---|---|
| 10/18/2012 | | Newsroom to go live during week of 11/5. |
| 10/18/2012 | | |
| 11/2/2012 | | Deliver final rounds of Quality Assurance fixes. |
| 10/26/2012 | | Build intranet page and push live. |
| 10/31/2012 | | B-M to provide Task 6 monthly report on 11/30. |
| | | |
| 10/31/2012 | | B-M to provide Task 6 monthly report on 11/30. |
| | | |

| 10/31/2012 | | B-M to provide Task 6 monthly report on 11/30. |
| --- | --- | --- |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) |
|---|---|---|---|---|---|
| **Task 7- 2.2.7.1- Full-Time Writer** | | | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | | | |
| 2.2.7.1 | Communications Plan | In progress | B-M provided updated plan on 10/2. OIA provided feedback on 10/3. B-M provided updated plan on 10/4 OIA provided feedback on 10/10. B-M provided updated report on 10/24. OIA feedback via calls. B-M provided updated report on 10/25. OIA feedback via calls. B-M provided updated report on 10/31 and 11/5. | 11/5/2012 | |
| 2.2.7.1 | Email to Congressional Staff | In progress | OIA assigned on 9/4. B-M submitted on 10/13. B-M provided updated email on 10/24. B-M provided updated email on 10/25. | 10/25/2012 | |
| 2.2.7.1 | Memo from Undersecretary of Health | In progress | OIA assigned on 9/4. B-M to submit on 10/15. B-M provided updated memo on 10/24. B-M provided updated memo on 10/25. | 10/25/2012 | |
| 2.2.7.1 | Internal and External Blog Posts | In progress | OIA assigned on 10/23. B-M drafted and will send with new poster and factsheet text. | N/A | |
| 2.2.7.1 | NOTE: All text for design items incorporated in 2.2 and 4.1 updates to avoid confusion. | | | | |
| **Gail Graham Blog Post Series** | | | | | |

| | | | | |
|---|---|---|---|---|
| 2.2.7.1 | VLER: Helping Veterans and VA be more efficient: Blog | Complete | OIA assigned on 9/4.<br>B-M submitted on 9/18.<br>OIA approved on 10/2 call. | 9/18/2012 |
| 2.2.7.1 | Secure Messaging Video Promotion blog | Complete | OIA assigned on 9/4.<br>B-M turned in on 9/6.<br>OIA provided feedback on SharePoint version on 9/12.<br>OIA approved on 10/2 call. | 9/6/2012 |
| 2.2.7.1 | Advances in Telehealth blog | Complete | OIA assigned on 9/4.<br>B-M submitted on 9/14.<br>OIA provided feedback on 9/19.<br>OIA approved on 10/2 call. | 9/14/2012 |
| 2.2.7.1 | Recap of Fiscal Year accomplishments: Talking Points | Complete | OIA assigned on 9/4.<br>B-M submitted on 9/24.<br>OIA approved on 10/2 call. | 9/24/2012 |
| 2.2.7.1 | Recap of Fiscal Year accomplishments: Blog | Complete | OIA assigned on 9/4.<br>B-M submitted on 9/24.<br>OIA provided feedback on 9/27.<br>B-M provided update on 9/28.<br>OIA approved on 10/2 call. | 9/28/2012 |
| 2.2.7.1 | My HealtheVet National Rollout/Pilot Program Blog Post | In progress | OIA assigned on 10/2.<br>B-M submitted first draft on 10/11.<br>OIA provided feedback on 10/11.<br>B-M provided update on 10/12. | 10/12/2012 |
| 2.2.7.1 | VA Blue Button Winners | In progress | OIA assigned on 10/22.<br>B-M submitted on 10/24. | 10/24/2012 |
| 2.2.7.1 | Q&A with Dr. Agarwal | In progress | OIA assigned on 10/2.<br>B-M submitted questions on 10/29.<br>B-M submitted updated questions on 11/2. | 11/2/2012 |

**Health*e* Vet National Roll Out**

| 2.2.7.1 | Health*e* Vet National Roll Out: Communications Plan | In progress | OIA assigned on 9/13.<br>OIA provided feedback on 10/10.<br>B-M submitted on 10/12.<br>B-M sent as package w/design elements on 10/23. | 10/23/2012 | |
|---------|---------|---------|---------|---------|---------|
| 2.2.7.1 | "How to" Guide (Communications Resource Page and My HealtheVet Product Page access instructions) | In progress | B-M submitted on 10/9.<br>OIA provided feedback on 10/10.<br>B-M submitted on 10/12.<br>B-M sent as package w/design elements on 10/23.<br>OIA provided feedback on 11/2 call.<br>B-M updated text for build out of intranet | 10/23/2012 | |
| **VA Immunization** | | | | | |
| 2.2.7.1 | News Release | Complete | OIA assigned on 9/19.<br>B-M submitted on 9/21.<br>OIA provided edits on 9/28.<br>B-M submitted on 10/1.<br>B-M resubmitted as a package on 10/4.<br>OIA approved on 10/9 on call. | 10/4/2012 | |
| 2.2.7.1 | Hey VA! Post | Complete | OIA assigned on 9/19.<br>B-M submitted on 9/26.<br>B-M resubmitted as a package on 10/4.<br>OIA approved on 10/9 on call. | 10/4/2012 | |
| 2.2.7.1 | Talking points | Complete | OIA assigned on 9/19.<br>B-M submitted on 9/26.<br>OIA provided edits on 9/28.<br>B-M submitted on 10/1.<br>B-M resubmitted as a package on 10/4.<br>OIA approved on 10/9 on call. | 10/4/2012 | |
| **eConnected** | | | | | |

| 2.2.7.1 | eConnected Report & Case Studies | In progress | OIA assigned on 9/11.<br>B-M submitted report outline on 9/14.<br>B-M submitted updated report on 9/24.<br>OIA provided feedback on 10/4.<br>B-M provided updated version on 10/9.<br>VA/B-M held call on 10/16. | 10/9/2012 | |
|---|---|---|---|---|---|
| **Other** | | | | | |
| 2.2.7.1 | PRSA Award Application | Complete | OIA assigned on 9/13.<br>B-M submitted first draft on 9/21.<br>OIA provided feedback on 9/28.<br>B-M submitted on 9/28.<br>OIA approved on 10/2 on phone call. | 9/28/2012 | |
| 2.2.7.1 | VA/DoD AHIMA Meeting Presentation | Complete | OIA assigned on 10/1.<br>B-M submitted on 10/2.<br>OIA approved on 10/2 call. | 10/2/2012 | |
| 2.2.7.1 | RO Messenger Fall 2012 Volume 8 Issue 35 Newsletter | Complete | OIA assigned on 10/1.<br>B-M submitted edited text on 10/3. | 10/3/2012 | |
| 2.2.7.1 | Comprehensive Recap of Work to Date | Update as needed | B-M provided update on 10/2. | 10/2/2012 | |
| 2.2.7.1 | FY2012 accomplishments PPT | In progress | OIA assigned on 10/2.<br>B-M provided initial outline on 10/10. | 10/10/2012 | |
| 2.2.7.1 | My HealtheVet PPT for NAQC Symposium (copy edit) | Complete | OIA assigned on 10/4.<br>B-M submitted on 10/5. | 10/5/2012 | |
| 2.2.7.1 | IPS DRAFT Communications Plan | Complete | OIA assigned on 10/4.<br>B-M submitted on 10/5. | 10/5/2012 | |
| 2.2.7.1 | OIA-IPS-fact-sheet | Complete | OIA assigned on 10/10<br>B-M submitted on 10/11. | 10/11/2012 | |
| 2.2.7.1 | Microscopy Fact Sheet | Complete | OIA assigned on 10/10.<br>B-M submitted on 10/17. | 10/17/2012 | |
| 2.2.7.1 | Microscopy Fact Sheet | OIA review | OIA assigned on 10/10.<br>B-M submitted on 10/17. | 10/17/2012 | |

| | | | | | |
|---|---|---|---|---|---|
| 2.2.7.1 | Communications plan - notes from interviews | Complete | OIA assigned on 10/10.<br>B-M submitted on 10/12.<br>B-M submitted additional notes from Beene on 10/16. | 10/16/2012 | |
| 2.2.7.1 | Tracker of Requests and Deliverables | Complete | OIA assigned on 10/12.<br>B-M submitted on 10/19.<br>OIA provided additions and sent final/approved on 10/23. | 10/19/2012 | |
| 2.2.7.2 | Presentations SOP Document | In progress | OIA assigned on 10/12.<br>B-M to provide initial thoughts/ideas. | N/A | |
| 2.2.7.1 | AMIA presentation | Complete | OIA assigned on 10/15.<br>B-M submitted on 10/16. | 10/16/2012 | |
| 2.2.7.1 | Mobile Apps Governance and Certification Brief (copy edit) | OIA review | OIA assigned on 10/16.<br>B-M submitted on 10/17. | 10/17/2012 | |
| 2.2.7.1 | Health Eligibility Handbook for Veterans (copy edit) | OIA review | OIA assigned on 10/16.<br>B-M submitted on 10/18. | 10/18/2012 | |
| 2.2.7.1 | Mobile Health Award Blog Post | OIA review | OIA assigned on 10/22.<br>B-M submitted on 10/24. | 10/24/2012 | |
| 2.2.7.1 | Health Informatics Initiative PPT (copy edit) | OIA review | OIA assigned on 10/25.<br>B-M submitted on 10/25. | 10/25/2012 | |
| 2.2.7.1 | PPTs for Editing (copy edit) | OIA review | OIA assigned on 10/31.<br>B-M submitted on 11/1. | 11/1/2012 | |

**Activities for November**

B-M to incorporate feedback and finalize items.
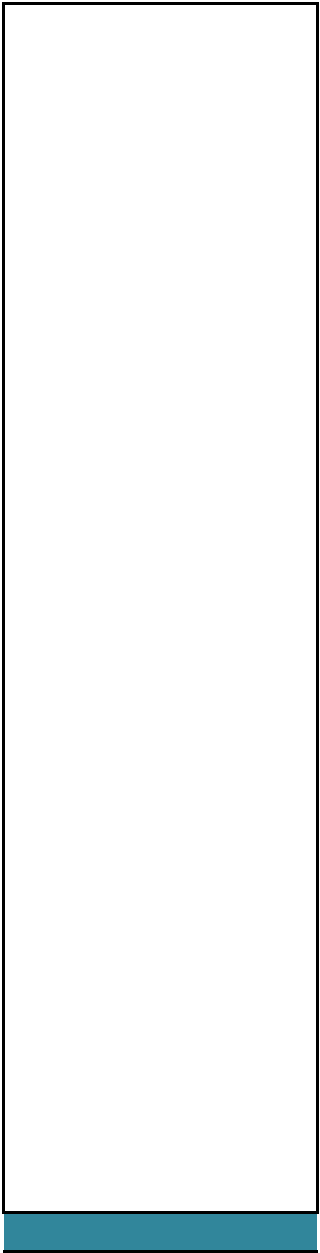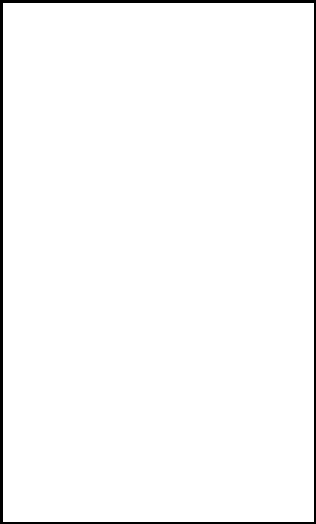
N/A

| |
|---|
| B-M standing by to update/make changes to document. |
| |
| |
| |
| |
| Update as needed. |
| |
| |
| |
| |
| |
| OIA feedback/approval |

| Task | Project Name/Activities | Status | Relevant Transmission Dates |
|---|---|---|---|
| **Task 8- Video** | | | |
| | VA OIA Video Series | In progress | Interviews were shot at VACO on 10/12. B-M provided timeline/justification memo for travel to Seattle on 10/16. OIA approved memo on 10/17. B-M submitted questions for Dr. Fihn and My HealtheVet Coordinators for shoot on 10/26. OIA provided feedback on questions on 10/26. B-M provided updated questions on 10/29, along with schedule and original memo to Seattle team. Seattle shoot originally scheduled for 10/31 cancelled due to Hurricane Sandy. Seattle shoot tentatively rescheduled for 11/19 with Dr. Fihn, Dr. Hunt and My HealtheVet Coordinators participating. |
| | DoD/VA Privacy Plan Video | In progress | B-M submitted memo & timeline on 10/2. B-M provided rough cut of video and script on 10/18. |
| | Blue Button Video | In progress | B-M submitted VA/HHS Blue Button Style Frames and Timeline on 10/26. HHS, OIA and B-M had call to discuss options on 11/2. B-M submitted notes on 11/2 outlining decisions for approval. |
| **Task 9- Year End Evaluation** | | | |
| **My Health*e* Vet Wrap Reports** | | | |
| 2.2.9.1 | Outreach/My Health*e* Vet: summary | OIA Review | OIA provided feedback on 10/4. B-M submitted on 10/8. OIA provided feedback on 10/22. B-M provided updated version on 10/23. |

| 2.2.9.1 | Outreach/My Health*e* Vet: PowerPoint | OIA Review | OIA provided feedback on 10/4. B-M submitted on 10/8. OIA provided feedback on 10/22. B-M provided updated version on 10/23. |
|---|---|---|---|
| 2.2.9.1 | Outreach/My Health*e* Vet: Air Force Conference | OIA Review | B-M submitted on 10/23. |
| 2.2.9.1 | Outreach/My Health*e* Vet: Marine Conference | OIA Review | B-M submitted on 10/23. |
| **Task 11- Monthly Reports** | | | |
| | Monthly Report | Complete | B-M submitted monthly report on 11/5. |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for November |
|---|---|---|
| | | |
| 10/29/2012 | 2 | B-M to execute final shoot and finish OIA Video Series, Privacy and HHS Blue Button Videos. |
| 10/18/2012 | 1 | |
| 10/26/2012 | 1 | |
| | | |
| | | |
| 10/23/2012 | | OIA feedback/approval. |
| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for November |

| | | |
|---|---|---|
| 10/23/2012 | | OIA feedback/approval. |
| 10/23/2012 | | OIA feedback/approval. |
| 10/23/2012 | | OIA feedback/approval. |
| | | |
| 11/5/2012 | | B-M to send monthly report on 11/30. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates |
|---|---|---|---|
| **Task 1- Project Management** | | | |
| 2.2.2.1 | Maggie Glaize added to team; completed training and updated staff roster. | Complete | B-M sent copies of training certificates for OIA records on 11/30. |
| **Task 2- 2.2.2.2- Communications Products** | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | |
| 2.2.2.2 | Pocket Card | In Progress | B-M submitted updated text on 11/14. |
| 2.2.2.2 | Table Topper | In Progress | B-M submitted updated text on 11/14. |
| 2.2.2.2 | HeyVA! Image (& post) | In Progress | B-M submitted updated text on 11/14. |
| 2.2.2.2 | Fact Sheet | In Progress | B-M submitted updated text on 11/14. |
| 2.2.2.2 | Poster | In Progress | B-M submitted updated text on 11/14. |
| **Other** | | | |
| 2.2.2.2 | My Health*e* Vet Blue Button Enhancements Brochure and Fact Sheet | In progress | OIA assigned on 11/9. B-M provided text for the brochure and fact sheet on 11/13. OIA provided additional fact sheets to incorporate on 11/16. B-M provided update on 11/16. OIA provided edited brochure on 11/27. B-M provided additional edits to the brochure, fact sheet and press release on 11/28. B-M provided draft copy in design for brochure and fact sheet on 11/30. |
| 2.2.2.2 | VHA Quality of Care - Header/Footer and Cover Design (Note: this is "**full report**") | Complete | OIA assigned new 508 compliant report to incorporate new links. B-M submitted final 508 compliant report on 11/26. |
| 2.2.2.2 | My Health*e* Vet Creative Updates for National Roll Out | Complete | OIA approved materials on 10/29. B-M provided 508 compliant files on 11/6. |
| 2.2.2.2 | DSLogOn Fact Sheet | Complete | OIA provided edits on 11/13. B-M provided final copy on 11/15. OIA approved on 11/20. B-M provided final 508 compliant fact sheet on 11/26. |

| 2.2.2.2 | DSLogOn PowerPoint | Complete | B-M provided fact sheet on 5/4. <br> OIA closed deliverable on 11/16 call. |
|---|---|---|---|
| **Task 2- 2.2.2.3- Directory of Services** | | | |
| | Directory of Services | Complete | Updated throughout the month of November. |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for December |
|---|---|---|
| | | |
| 11/30/2012 | | Task closed. |
| | | |
| | | |
| 11/14/2012 | 5 | Incorporate additional feedback; finalize deliverables as part of no cost contract extension. |
| 11/14/2012 | | |
| 11/14/2012 | | |
| 11/14/2012 | | |
| 11/14/2012 | | |
| | | |
| 11/30/2012 | 2 | TBD. |
| 11/26/2012 | | Task closed. |
| 11/6/2012 | | Task closed. |
| 11/26/2012 | | Task closed. |

| | | |
|---|---|---|
| 5/4/2012 | | Task closed. |
| | | |
| N/A | | Task closed. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates |
|---|---|---|---|
| **Task 4- 2.2.4.1- Communications Products** | | | |
| **VA/DOD Patient Privacy and Info Sharing Project** | | | |
| 2.2.4.1 | Banner | In progress | B-M provided updated banner on 11/14. |
| 2.2.4.1 | Brochure | In progress | B-M provided updated brochure on 11/8. OIA provided feedback on 11/8. B-M provided updated brochure on 11/9. |
| 2.2.4.1 | PowerPoint | In progress | B-M provided updated PPT on 11/2. B-M provided updated PPT on 11/6. B-M provided updated PPT on 11/8. |
| 2.2.4.1 | Second Fact Sheet | In progress | B-M sent questions regarding factsheet content on 11/8. |
| 2.2.4.1 | Second Poster | In progress | B-M sent questions regarding factsheet content on 11/8. |
| **Other** | | | |
| 2.2.4.1 | One-Page OIA Fact Sheet Template | Complete | OIA assigned on 10/18. B-M submitted on 10/24. OIA approved on 11/1 call. |
| **Task 4-2.2.4.2- Shared Directory** | | | |
| 2.2.4.2 | Regular Updates to Network Share Files | Complete | Updated file naming conventions on network share. |
| **Task 4-2.2.4.3- eTools** | | | |
| 2.2.4.3 | RO Messenger Fall 2012 Volume 8 Issue 35 Newsletter | Complete | B-M submitted HTML version on 10/15. OIA approved on 11/1 call. |
| **Task 4- 2.2.4.4 Spanish Translation** | | | |
| 2.2.4.4 | My Health*e* Vet Spanish Translation | Complete | OIA approved materials to be translated on 11/9. B-M provided translated deliverables on 11/24. |
| 2.2.4.4 | VA/DoD Project Spanish Translation | In progress | B-M to have VA/DoD deliverables translated after completing final 508 compliant deliverables. |
| **Task 5-2.2.5.1- Weekly Reports** | | | |

| 2.2.5.1 | Upload Weekly Updates | Complete | Sent weekly updates every Monday in November and final weekly report on 11/30. |
|---|---|---|---|
| **Task 6- 2.2.6.1- Website Quality Assurance** | | | |
| 2.2.6.1 | eHealth Newsroom Page | Complete | B-M provided the final newsroom page on 11/6. |
| 2.2.6.1 | eHealth Home Page Rotating Banners | Complete | B-M provided an updated version of the Blue Button banner to ECMS on 11/1. B-M provided a Veterans Day banner on 11/8. B-M added the final home page banner for approval on the ECMS on 11/16. B-M removed the Veterans Day banner from the ECMS on 11/21. B-M removed the ASPIRE link from the home page on 11/30. |
| 2.2.6.1 | eHealth Home Page | Complete | B-M completed first batch of site fixes on 11/6. <span style="color:red">OIA approved video transcription on 11/13.</span> B-M added video transcripts to the eHealth Media Gallery and VA-DoD page on the ECMS as the final batch of QA fixes on 11/27. B-M provided transition document on 11/29. |

| 2.2.6.1 | My Health*e* Vet National Roll Out: eHealth and intranet page | Complete | OIA approved final language on intranet page on 10/24. B-M provided mockup of intranet page on 10/26. OIA approved mockup of intranet page on 11/1. B-M provided final intranet HTML files were provided on 11/16. B-M added the brochure to eHealth homepage. The opt-in video was added to the VHA YouTube and updated on the Facebook tab on 11/16. B-M provided Spanish translation files on 11/23, which were shared with OIA intranet team for posting on 11/26. |
|---|---|---|---|
| 2.2.6.1 | VA/DoD eHealth and intranet page | In Progress | B-M provided updated text for intranet and eHealth pages on 11/14. |
| 2.2.6.1 | Document describing website maintenance | Complete | B-M provided guide on 11/29. |
| 2.2.6.1 | Monthly Report on Updates (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 11/29. |
| **Task 6- 2.2.6.2- Website Standardized Review** | | | |
| 2.2.6.2 | Monthly Report on Standardized Review (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 11/29. |
| **Task 6- 2.2.6.3- Use and Functionality Report** | | | |
| 2.2.6.3 | Monthly Report on Use and Functionality (Combined Task 6) | Complete | B-M provided combined report for Task 6 on 11/29. |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for December |
|---|---|---|
| | | |
| | | |
| 11/14/2012 | 6 | Finalize deliverables as part of no cost contract extension. |
| 11/14/2012 | | |
| 11/8/2012 | | |
| 11/8/2012 | | |
| 11/8/2012 | | |
| | | |
| 10/24/2012 | | Task closed. |
| | | |
| | | Task closed. |
| | | |
| 10/15/2012 | 1 | Task closed. |
| | | |
| | | Task closed. |
| | | Finalize deliverables as part of no cost contract extension. |
| | | |

| Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for December |
|---|---|---|

| | | |
|---|---|---|
| 11/30/2012 | | Task closed. |
| | | |
| 11/6/2012 | | Task closed. |
| 11/30/2012 | | Task closed. |
| 11/30/2012 | | Incorporate videos upon completion as a part of no cost contract extension. |

| | | |
|---|---|---|
| 11/23/2012 | | Task closed. |
| 11/14/2012 | | Will build out intranet page and update eHealth as a part of no cost contract extension. |
| 11/29/2012 | | Task closed. |
| 11/29/2012 | | Task closed. |
| | | |
| 11/29/2012 | | Task closed. |
| | | |
| 11/29/2012 | | Task closed. |

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) |
|------|------------------------|--------|----------------------------|------------------------------|----------------------------------|
| Task 7- 2.2.7.1- Full-Time Writer | | | | | |
| VA/DOD Patient Privacy and Info Sharing Project | | | | | |
| 2.2.7.1 | Communications Plan | In progress | OIA provided feedback on 11/2. B-M provided updated plan on 11/5. B-M provided updated plan on 11/8. | 11/8/2012 | |
| 2.2.7.1 | Executive Summary | In progress | B-M provided updated executive summary on 11/8. | 11/8/2012 | |
| 2.2.7.1 | Joint PPT | In progress | B-M submitted on 11/18. OIA provided feedback throughout the month with final feedback on 11/27. B-M provided updated version on 11/29. OIA provided feedback on 11/29. B-M provided updated version on 11/30. | 11/30/2012 | |
| 2.2.7.1 | Email to Congressional Staff | In progress | B-M provided updated version on 11/14. | 11/14/2012 | |
| 2.2.7.1 | Memo from Undersecretary of Health | In progress | B-M provided updated version on 11/14. | 11/14/2012 | |
| 2.2.7.1 | Internal and External Blog Posts | In progress | B-M provided updated version on 11/14. | 11/14/2012 | |
| NOTE: All text for design items incorporated in 2.2 and 4.1 updates to avoid confusion. | | | | | |
| Blog Series | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| 2.2.7.1 | Blog Post: Q&A with Dr. Agarwal | Complete | OIA assigned on 10/2.<br>B-M submitted questions on 10/29.<br>B-M submitted updated questions on 11/2.<br>OIA cancelled post on 11/7. | 11/2/2012 | |
| 2.2.7.1 | Blog Post: Veterans Day | Complete | OIA assigned on 11/2.<br>B-M submitted on 11/6. | 11/6/2012 | |
| 2.2.7.1 | Blog Post: Reorganization | Complete | OIA assigned on 11/7 (originally Dr. Agarwal post).<br>B-M submitted on 11/8. | 11/8/2012 | |
| 2.2.7.1 | Blog Post: AMIA Accomplishments | Complete | OIA assigned on 11/12.<br>B-M submitted on 11/13. | 11/13/2012 | |
| **Other** | | | | | |
| 2.2.7.1 | AMIA Accomplishments Press Release | Complete | OIA assigned on 11/12.<br>B-M submitted on 11/13. | 11/13/2012 | |
| 2.2.7.1 | SOP Document | Complete | B-M submitted on 11/5.<br>OIA provided feedback on 11/5.<br>B-M submitted on 11/9.<br>OIA closed on 11/13. | 11/9/2012 | |
| 2.2.7.1 | Connected Health Summary | Complete | OIA assigned on 11/14.<br>B-M submitted on 11/16. | 11/16/2012 | |
| 2.2.7.1 | Copyedit: Mobile Health Presentations | Complete | OIA assigned on 11/14.<br>B-M submitted on 11/15. | 11/15/2012 | |
| 2.2.7.1 | Copyedit: Nursing PPT for HIMSS | Complete | OIA assigned on 11/13.<br>B-M submitted on 11/19. | 11/19/2012 | |
| 2.2.7.1 | Copyedit: VHA and Blue Button Engagement | Complete | OIA assigned on 11/15.<br>B-M submitted on 11/15. | 11/15/2012 | |
| 2.2.7.1 | Library Communications Plan | Complete | OIA assigned on 11/6.<br>B-M submitted on 11/12.<br>OIA submitted feedback on 11/26.<br>Team held call on 11/29.<br>B-M submitted final communications plan on 11/30. | 11/12/2012 | |

| | | | | |
|---|---|---|---|---|
| 2.2.7.1 | HeyVA! Military Medicine Announcement | Complete | OIA assigned on 11/8.<br>B-M submitted on 11/13. | 11/13/2012 |
| 2.2.7.1 | Certification Press Release | Complete | OIA assigned on 11/20.<br>B-M submitted on 11/26. | 11/26/2012 |
| 2.2.7.1 | CDW Transition Comm Plan, Hey VA! Post and Conference Call Announcement | Complete | OIA assigned on 11/26.<br>B-M to submit on 11/27. | 11/27/2012 |
| 2.2.7.1 | Blue Button Enhancements Press Release, Overall Fact Sheet and Brochure Text | Complete | OIA assigned on 11/9.<br>B-M submitted on 11/13.<br>OIA provided feedback on 11/27.<br>B-M submitted updated text on 11/28. | 11/13/2012 |
| 2.2.7.1 | My Health*e* Vet Extracts Communications Plan | Complete | OIA assigned on 11/16.<br>B-M submitted on 11/26. | 11/26/2012 |
| 2.2.7.1 | My HealtheVet Extracts Individual Fact Sheets | Complete | OIA assigned on 11/16.<br>B-M submitted on 11/26. | 11/26/2012 |

**Activities for December**

Task closed.

Task closed.

| Task | Project Name/Activities | Status | Relevant Transmission Dates | Most Recent B-M Delivery Date | Total Deliverables (If Relevant) | Activities for December |
|---|---|---|---|---|---|---|
| **Task 8- Video** | | | | | | |
| 2.2.8.1 | VA OIA Video Series: Values and Overview Videos | In progress | B-M submitted head shots from videos on 11/16.<br>B-M provided rough cut and transcripts on 11/16.<br>OIA provided feedback on 11/17.<br>Seattle video shoot on 11/19.<br>B-M provided label and menu mock-ups on 11/27.<br>B-M provided second rough cut of values and overview videos on 11/30. | 11/30/2012 | 2 | Finalize deliverables under no cost contract extension. |
| 2.2.8.1 | DoD/VA Privacy Plan Video | In progress | B-M provided rough cut on 11/18.<br>B-M provided label mock-ups on 11/27.<br>OIA provided feedback on 11/27.<br>DoD to have shoot on 12/5. | 11/27/2012 | 1 | |
| 2.2.8.1 | HHS Blue Button Video | In progress | B-M provided style frames and timeline on 10/26.<br>Team held call to discuss on 11/2.<br>B-M provided recap notes for agreement on 11/2.<br>B-M provided updated style frames on 11/7.<br>HHS and OIA approved approach on 11/7.<br>B-M provided rough cut on 11/16.<br>Team signed off on rough cut on 11/19.<br>B-M provided credits on 11/20.<br>B-M delivered video on 11/30.<br>B-M to deliver DVD copies in December. | 11/14/2012 | 1 | |
| **Task 9- Year End Evaluation** | | | | | | |
| 2.2.9.1 | FY 12 Accomplishments Deck | Complete | B-M submitted deck on 11/21.<br>OIA approved on 11/27. | 11/28/2012 | | Task closed. |
| 2.2.9.1 | FY 12 Accomplishments, Metrics and Recommendations Deck | Complete | B-M submitted on 11/30. | 11/30/2012 | | |
| **Task 11- Monthly Reports** | | | | | | |
| | Monthly Report | Complete | B-M submitted monthly report on 11/30. | 11/30/2012 | | Task closed. |

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|---|---|---|---|---|
| Note: red copy denotes OTGR review/approval items | | | | |
| | | | | |
| 2.2.1 - Task 1: Kick-Off Meeting | Duration | Start | Finish | Notes |
| 2.2.1.1 Deliverable | | | | |
| Kick-off Meeting | | | | |
| Kick-off Meeting | 1 day | 10/17/12 | 10/17/12 | |
| Provide meeting minutes | 1 day | 10/18/12 | 10/19/12 | |
| Project Management Plan and Schedule | | | | |
| Draft PMP provided to OTGR for review and approval | 2 day | 10/17/12 | 10/19/12 | |
| Review PMP and provide feedback/edits to B-M | 7 days | 10/22/12 | 10/30/12 | |
| Revised PMP provided to OTGR for review and final approval | 2 days | 10/31/12 | 11/02/12 | |
| OTGR approves PMP | 2 days | 11/05/12 | 11/07/12 | |
| Staff Roster | | | | |
| Coordinate Staff Contact Information for Staff Roster | 2 days | 10/18/12 | 10/19/12 | |
| Draft Staff Roster provided to OTGR | 1 day | 10/18/12 | 10/19/12 | |
| OTGR provides feedback on Staff Roster | 2 days | 10/22/12 | 10/24/12 | |
| Send out and collect all background and training forms | 3 days | 10/19/12 | 10/24/12 | |
| Send all forms to OTGR | 1 day | 10/25/12 | 10/25/12 | |
| B-M delivers Staff Roster to OTGR | 1 day | 10/25/12 | 10/25/12 | |
| OTGR approves Staff Roster | 2 days | 10/26/12 | 10/30/12 | |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

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|---|---|---|---|---|
| **Note: red copy denotes OTGR review/approval items** | | | | |
| | | | | |
| **2.2.2 - Task 2: Web Maintenance** | **Duration** | **Start** | **Finish** | **Notes** |
| **2.2.2.1 Deliverable** | | | | |
| New content is provided to B-M | 15 days | | By the 15th of each calendar month | |
| Content is updated to website including copy and pictures | 5 days | | By the 1st of each calendar month | |
| Content is approved by OTGR | 5 days | | By the 5th of each calendar month | |
| Website is updated | 10th day of every month | | By the 10th of each calendar month | *Note: Need to define more narrowly with VHA. |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

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|---|---|---|---|---|
| **Note: red copy denotes OTGR review/approval items** | | | | |
| | | | | |
| **2.2.3 - Task 3: Strategic Planning Services** | **Duration** | **Start** | **Finish** | |
| **2.2.3.1 Deliverable** | | | | |
| Initial meeting with OTGR to discuss their vision of the 5-year strategic plan and a specific model will be chosen | 1 day | 11/01/12 | 11/01/12 | |
| B-M to host a brainstorm meeting with OTGR to discuss project process, participants, objectives, scope, challenges and key proposal elen | 1 day | 11/01/12 | 11/01/12 | |
| B-M conducts intital research to develop a comprehensive understanding of OTGR | 2 days | 11/02/12 | 11/06/12 | |
| B-M compiles initial and submits research for OTGR review | 2 days | 11/07/12 | 11/09/12 | |
| OTGR provides reaction | 2 days | 11/12/12 | 11/14/12 | |
| OTGR provides B-M with a list of key personnel and stakeholders | 2 days | 11/15/12 | 11/19/12 | |
| B-M conducts telephone interviews | 3 days | 11/20/12 | 11/27/12 | Note: Includes Thanksgiving Week |
| B-M compiles interviews for OTGR review | 2 days | 11/27/12 | 11/29/12 | |
| OTGR provides reaction | 2 days | 11/30/12 | 12/04/12 | |
| B-M coordinates and facilitates a strategic planning session with key personnel | 1 day | 11/27/12 | 11/27/12 | Optional: 11/27, 11/28, 11/29 |
| B-M processes information gathered from interviews | 3 days | 11/28/12 | 12/03/12 | |
| B-M presents Strategic Outreach Plan outline to OTGR | 1 day | 12/04/12 | 12/04/12 | |
| OTGR provides feedback and edits to Strategic Outreach Plan outline | 3 days | 12/05/12 | 12/10/12 | |
| B-M submits a revised Strategic Outreach Plan outline to OTGR for approval | 2 days | 12/11/12 | 12/14/12 | Leave for holidays |
| OTGR approves Outreach Plan Outline | 3 days | 01/02/13 | 01/04/13 | |
| B-M presents first draft of Strategic Outreach Plan to VA | 7 days | 01/07/13 | 01/15/13 | |
| VA provides edits and feedback to the Strategic Outreach Plan | 5 days | 01/16/12 | 01/22/13 | |
| B-M delivers revised Strategic Outreach Plan to VA | 5 days | 01/23/13 | 01/30/13 | |
| VA provides edits and feedback to the revised Strategic Outreach Plan | 3 days | 01/31/13 | 02/04/12 | |
| B-M delivers Strategic Outreach Plan to VA for approval | 3 days | 02/05/13 | 02/11/13 | |
| VA Approves Strategic Outreach Plan | 2 days | 02/12/12 | 02/13/12 | |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

| PMP - TOPR 29 Graphic Design, Custom Computer Programming and Administrative Management and General Management Consulting Services | | | | |
|---|---|---|---|---|
| **Note: red copy denotes OTGR review/approval items** | | | | |
| | | | | |
| **2.2.4 - Task 4: Branding** | **Duration** | **Start** | **Finish** | |
| **2.2.4.1 Deliverable** | | | | |
| B-M assesses OTGR corporate branding in Kick-Off meeting with OTGR representative | 1 day | 11/01/12 | 11/01/12 | |
| Develop Mood Boards with two brand approaches for OTGR with sub-identifier options | 10 days | 11/02/12 | 11/15/12 | |
| OTGR reviews Mood Boards and provides feedback; selecting one to proceed with | 5 days | 11/16/12 | 11/28/12 | Note: Includes Thanksgiving Week |
| B-M to attend strategic planning meeting | 1 day | 11/27/12 | 11/27/12 | Optional: 11/27, 11/28, 11/29 |
| B-M conducts first round of edits and develops templates for poster, fact sheet and email | 5 days | 11/28/12 | 12/05/12 | |
| OTGR reviews templates and provides feedback | 3 days | 12/06/12 | 12/10/12 | Leave for holidays |
| B-M conducts second round of edits | 2 days | 12/11/12 | 12/13/12 | |
| OTGR approves templates | 2 days | 01/02/12 | 01/04/12 | |
| Develop Identity and Style guide | 12 days | 01/15/12 | 01/31/12 | |
| OTGR reviews and provides feedback on Identity and Style Guide | 3 days | 02/01/12 | 02/05/12 | |
| Incorporate OTGR edits | 3 days | 02/06/12 | 02/08/12 | |
| OTGR provides feedback/edits on Identity and Style Guide | 3 days | 02/11/12 | 02/13/12 | |
| Identity and Style Guide delivered to OTGR, incorporating approved PPT and Brochure Templa | 2 days | 02/14/12 | 02/18/12 | |
| OTGR provides feedback/edits on Identity & Style Guide | 2 days | 02/19/12 | 02/21/12 | |
| Final Identity and Style guide delivered | 1 day | 02/22/12 | 02/22/12 | |
| OTGR Approves Identity and Style Guide | 1 day | 02/25/12 | 02/25/12 | |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

| PMP - TOPR 29 Graphic Design, Custom Computer Programming and Administrative Management and General Management Consulting Services | | | | |
|---|---|---|---|---|
| Note: red copy denotes OTGR review/approval items | | | | |
| | | | | |
| 2.2.5 - Task 5: PowerPoint Template | Duration | Start | Finish | |
| 2.2.5.1 Deliverable | | | | |
| Kick-off meeting to discuss PowerPoint template with OTGR | 1 day | 11/01/12 | 11/01/12 | |
| OTGR approves Templates (Task 4) | | | 01/04/12 | |
| Develop Initial Proof of the PowerPoint Template | 5 days | 01/04/13 | 01/11/13 | |
| OTGR provides feedback on initial proof for PowerPoint template | 5 days | 01/14/13 | 01/18/13 | |
| Provide Second Proof of PowerPoint Template | 3 days | 01/21/13 | 01/23/12 | Note: Includes Thanksgiving Week |
| OTGR provides feedback/edits on PowerPoint template | 3 days | 01/24/13 | 01/28/13 | |
| Third (Final) Proof of PowerPoint template submitted for OTGR approval | 2 days | 01/29/13 | 01/30/13 | |
| OTGR approves PowerPoint template | 2 days | 01/31/13 | 02/01/13 | |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

| PMP - TOPR 29 Graphic Design, Custom Computer Programming and Administrative Management and General Management Consulting Services | | | | |
|---|---|---|---|---|
| Note: red copy denotes OTGR review/approval items | | | | |
| | | | | |
| 2.2.6 - Task 6: Brochure | Duration | Start | Finish | |
| 2.2.6.1 Deliverable | | | | |
| Kick-off meeting to discuss brochure with OTGR | 1 day | 11/01/12 | 11/01/12 | |
| OTGR provides raw content to BM for content review and edits | 3 day | 11/02/12 | 11/06/12 | |
| BM edits provided content | 5 days | 11/07/12 | 11/14/12 | |
| OTGR provides feedback on content edits | 2 days | 11/15/12 | 11/19/12 | |
| Revised content to the VA | 2 days | 11/20/12 | 11/27/12 | Note: Includes Thanksgiving Week |
| OTGR approves content to flow into brochure layout | 1 day | 11/28/12 | 11/28/12 | |
| OTGR approves Templates (Task 4) | | | 01/04/12 | |
| First draft of brochure | 5 days | 01/04/13 | 01/11/13 | |
| OTGR provides feedback/edits on brochure | 5 days | 01/14/13 | 01/18/13 | |
| Second draft of brochure | 3 days | 01/21/13 | 01/23/12 | |
| OTGR provides feedback/edits on brochure | 3 days | 01/24/13 | 01/28/13 | |
| Final draft brochure submitted for OTGR approval | 2 days | 01/29/13 | 01/30/13 | |
| OTGR approves brochure | 2 days | 01/31/13 | 02/01/13 | |
| *Important note: these dates are not flexible; any delay in approval or actions steps will mean at least one day delay in distribution* | | | | |

# The Office of Informatics and Analytics (OIA)

Placing crucial health information into the right hands
– when it matters.

Gail L. Graham, Assistant Deputy Under Secretary for Health, Informatics and Analytics

VA HEALTH CARE | Defining EXCELLENCE in the 21st Century

# The Office of Informatics and Analytics

The Office of Informatics and Analytics (OIA) is integral to the Veterans Health Administration (VHA) programs that provide patient-centered health care to Veterans.

Offering advanced and secure enterprise data systems, sophisticated analytic and measurement solutions, decision support, business intelligence and web solutions, OIA facilitates evidence-based decisions for individual Veterans and their families, patient populations, clinicians and those managing health care delivery systems.

Customer focused training and support along with transparent oversight and governance ensure that enterprise tools are used most effectively to serve Veterans and VHA.

# OIA's Crucial Role

- We **ensure that VA fully utilizes health informatics** to improve the operation of our medical facilities and the delivery of patient care.
- We **analyze, protect, and deliver** data so Veterans and their health care teams have the information they need to make the right decisions at the right time.
- We are the health care data analysts, clinical informatics experts and health information specialists **who provide guidance and national expertise to safeguard and most effectively utilize** our Veterans' health information.

# Who We Serve

We support our Nation's Veterans, the clinicians who treat them, the staff who run VA health care facilities, and the leaders making decisions about improving Veterans' health.

Veterans and their families, patient populations, clinicians and those managing health care delivery systems are empowered to make evidence-based decisions that improve health and wellness.

# The Faces of OIA

OIA's expert clinicians, health information managers, industry leaders, informaticists, and other professionals are dedicated to improving the health of Veterans and how VHA providers and staff administer that care.

# OIA's Team in Action

Our team also:

- **Partners** with national and field staff to ensure the safety, privacy and security of Veteran patients information is gold-standard
- **Promotes and manages** e-tools, products and services to improve patient-provider collaboration

This is accomplished  through three main focus areas:

| Health Informatics | Health Information Governance | Analytics and Business Intelligence |

# Our Guiding Principles

- OIA ensures excellence in business practices as it brings health information close to the patient and the provider.
- OIA strives to be:
  - People-centric – focused on Veterans and their families
  - Forward-looking – providing VA health care teams with advanced tools that help them predict and prevent health problems
  - Results-driven – using analytics-driven management to make the best decisions

# Driving OIA: Under Secretary for Health's Priorities

- Align the organization to meet the vision
- Create health care value by reducing cost while     maintaining quality
- Enhance the Veteran experience and access to health care
- Innovate new models of health care
- Eliminate Veteran homelessness
- Improve Veterans' mental health
- Continue to advance research and development
- Transform health care delivery through health informatics

# Key OIA Initiatives

OIA accomplishes its mission through several key initiatives and programs:

| Nationwide Health Information Network (NwHIN) & Virtual Lifetime Electronic Record (VLER) | Integrated Electronic Health Record (iEHR) & PACT Evaluation | My Health*e*Vet –Personal Health Record & Mobile Apps | Hi$^2$, Field Analytics, & RAMP |
|---|---|---|---|

Results-Driven Advancements

# VA/DoD Joint Initiatives



"Both Departments will work together to define and build a system that will ultimately contain administrative and medical information from the day an individual enters military service throughout their military career, and after they leave the military."

President Barack Obama

April 09, 2009

VA and DoD share several joint initiatives aimed at improving the quality, efficiency and effectiveness of the delivery of benefits and services to Veterans, Service members, military retirees and their families.

# Nationwide Health Information Network (NwHIN)

**NwHIN Direct**

- Trusted Network or Point-to-Point business agreements
- "Push" of clinical information using secure e-mail
- Standard or non-structured notes and reports

**NwHIN Exchange**

- Trusted Network
- Query and Retrieve methodology
- Standards-based exchange of relevant clinical information
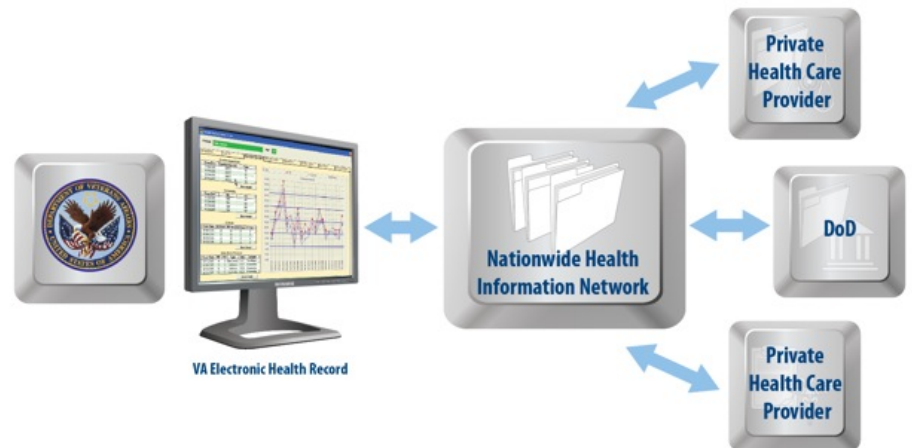
# NwHIN's Reach
## (as of September 2011)



○ VA, DoD, Private Sector Exchange

○ VA, Private Sector Exchange

○ VA Direct
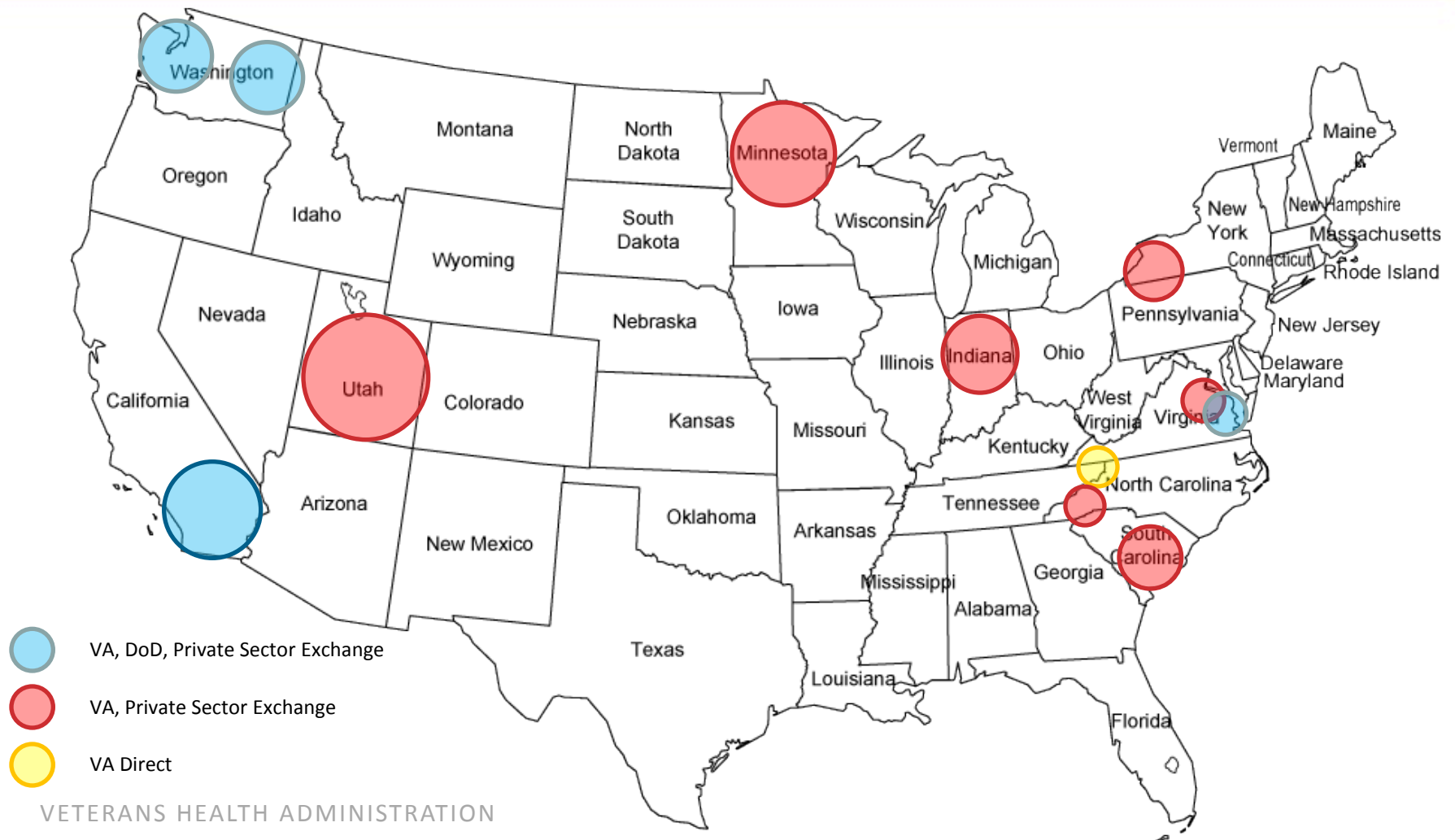
# Virtual Lifetime Electronic Record (VLER)

VA's Virtual Lifetime Electronic Record (VLER) is a multi-faceted business and technology initiative that includes a portfolio of health, benefits, personnel, and administrative information sharing capabilities.

It enables VA <u>and its partners</u> to **proactively** provide the full continuum of services and benefits Veterans have earned **via Veteran-centric processes** made possible by effective and efficient, *standards-based information sharing*.

# VLER and its Partners



VA and DoD

VA and DoD's partners
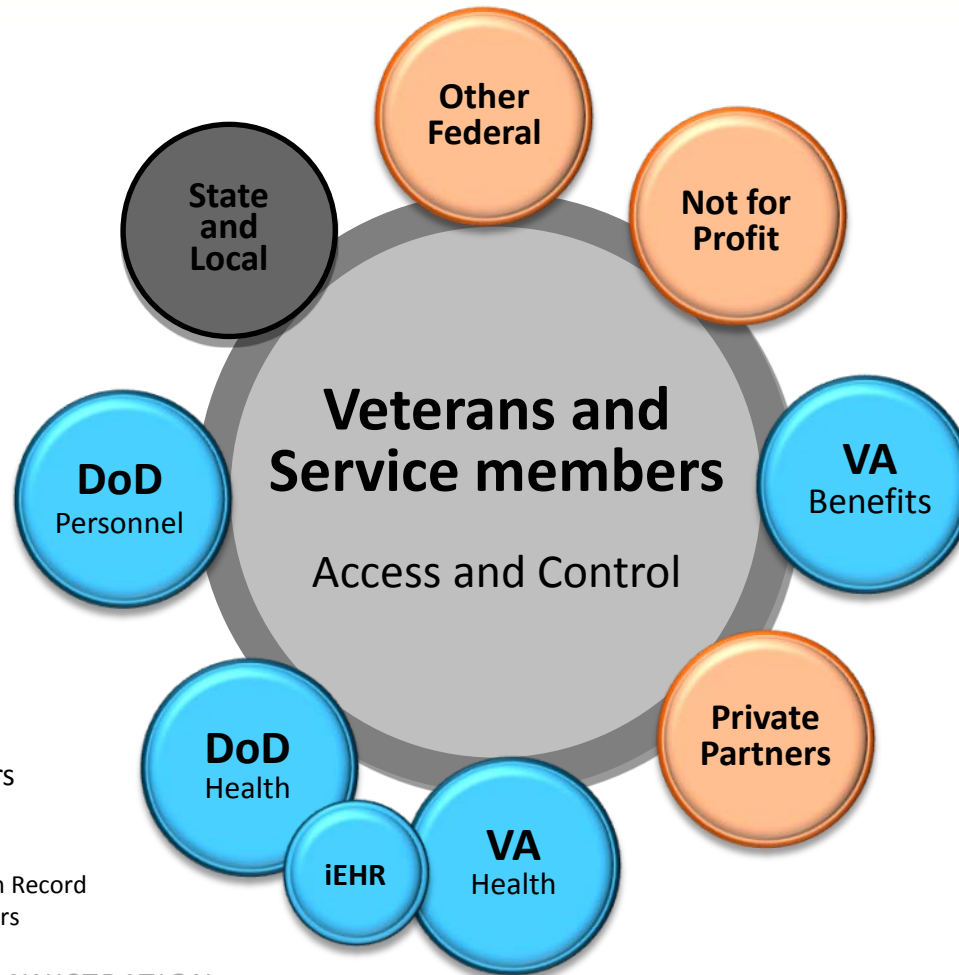
DoD = Department of Defense
iEHR = Integrated Electronic Health Record
VA = Department of Veterans Affairs

# VLER Health/NwHIN Today

| 171,002 Shared patients/beneficiaries covered via current connectivity | |
|---|---|
| 1,081 Unique Patients (Inbound)<br>350 Unique Users (Inbound ) | 91 Unique Patients (Outbound)<br>39 Unique Users (Outbound) |
| 42,773 Patient Authorizations | (85.5% of national goal) |
| 39,529 Patients Opted-In | (92.4% of patient authorizations) |

| 21,052 Patients Correlated with Private Partners (53.3% of patients opt-in) | |
|---|---|
| 1,241 Inbound Disclosures to VA from Private Partners | 1,036 Outbound Disclosures from VA to Private Partners |
| 91 Unique Patients (Outbound) | 39 Unique Users (Outbound) |
| 10 Private Sector Health Information Exchanges (HIE) | |
| 154 Participating NwHIN Business Partner Facilities | 822 Participating NwHIN Exchange Users |

**Statistics/data from VLER Health Resource Office (March 2012)**

# VLER Health Today, cont.

- Distribution of VLER Private Sector Health Care Users:
  - 332 (40%) Physicians
  - 260 (32%) Nurses
  - 94 (11%) Pharmacy
  - 70   (9%) Other Clinical Providers
  - 66   (8%) All Others

- Department of Defense:
  - 6 Medical Treatment Facilities
  - 16,786 Inbound Data to VA from DoD
  - 2,843 Outbound Data from VA to DoD

Statistics/data obtained from VLER Health Resource Office (Mar. 2012)

# Integrated Electronic Health Record (iEHR)

"Secretary Gates and Secretary Shinseki formally agreed that **our two Departments would work cooperatively toward a joint common electronic health record**.  We call this effort the " integrated Electronic Health Record," or iEHR…

…our functional and technical experts are meeting to develop and draft detailed plans on executing an overall concept of operations that the two Secretaries will utilize to determine the best approach to achieving this complex goal.  Once completed, **the iEHR will be a national model for capturing, storing, and sharing electronic health information**."

Deputy Secretary Gould

May 18 2011

# Why iEHR?

- Migrate to a tiered architecture that will allow integration of:
  - Commercial off the shelf (COTS) products
  - Government developed (GOTS) products
  - Open source products
- Leverages modern technology found in other industries
- Offers opportunity to buy and integrate proven commercial products
- Provides the ability to "swap-out" components as new products improve
- Creates a platform where VA developed, open source and commercial products can be integrated based on a single standard

# My Health*e*Vet

People-Centric Advancements

# Making Life Easier for Veterans

- We make life easier and better for the entire Veteran community by putting comprehensive health information at the fingertips of Veterans and their loved ones.
- My Health*e*Vet offers anywhere, anytime access to Veterans and their families.
- Rather than chasing paper records or waiting for responses from clinicians, Veteran patients can quickly access key components of their VA health records and find other valuable health information at My Health*e*Vet.

# My Health*e*Vet

A personal My Health*e*Vet account provides Veterans with 24/7 online access to a variety of tools to manage their health care.



Communicate with Participating Patient Aligned Care Team Members
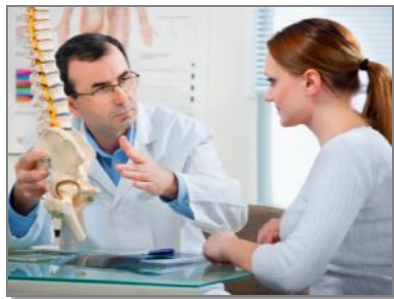


View Appointments and Other Health Information



Refill VA Prescriptions



Download and Share Personal Health Record

# My Health*e*Vet

Veterans can also:

- **Ask their VA health care team** about their health with secure online messaging.
- **Find trusted information and answers** in a customized extensive online medical library, complete with videos, interactive modules and more.
- **Enter and track their military health information**, and access their DoD Military Service Information if eligible.

# My Health*e*Vet (www.myhealth.va.gov)

# Expanding On-the-Go Resources

**A new generation of Veterans and providers are used to instant data access via mobile technologies – OIA is shaping how core health care services are delivered in this new environment.**

**6** mobile apps piloted in 2011

**20** apps in development 2012

**29,000+**

Downloads via iTunes

and Android Market
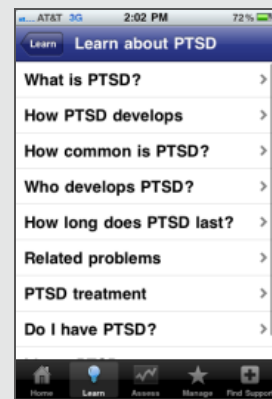
# Where We Are Going

OIA not only collects and manages Veterans' health information, but also utilizes that data to ensure better patient safety, predict future health problems, and enhance transparency and accountability.

- We are using **analytics-driven management** to make better decisions about:
  - Cost
  - Quality
  - Access
  - Satisfaction

# Predicting and Preventing

OIA is utilizing VA's vast data stores to elicit more predictive and preventive information – to help Veterans lead healthier lives.

# Predicting and Preventing

Great health care delivery tomorrow depends on whether the right data is collected and analyzed – today.

- Our work helps make it possible for providers and scientists to anticipate and predict Veterans' medical challenges and diseases, earlier in the patient's care.
- Our goal is to know and provide what health care Veterans need before and when they have a problem.
  - **Viewing patient medical records instantly** in the case of an emergency or routine visit.
  - **Reducing clinical errors through technology** that provides updated and consistent patient information.

# Enhancing Transparency and Accountability

VA provides more public data about quality and safety than any health care system in the world.
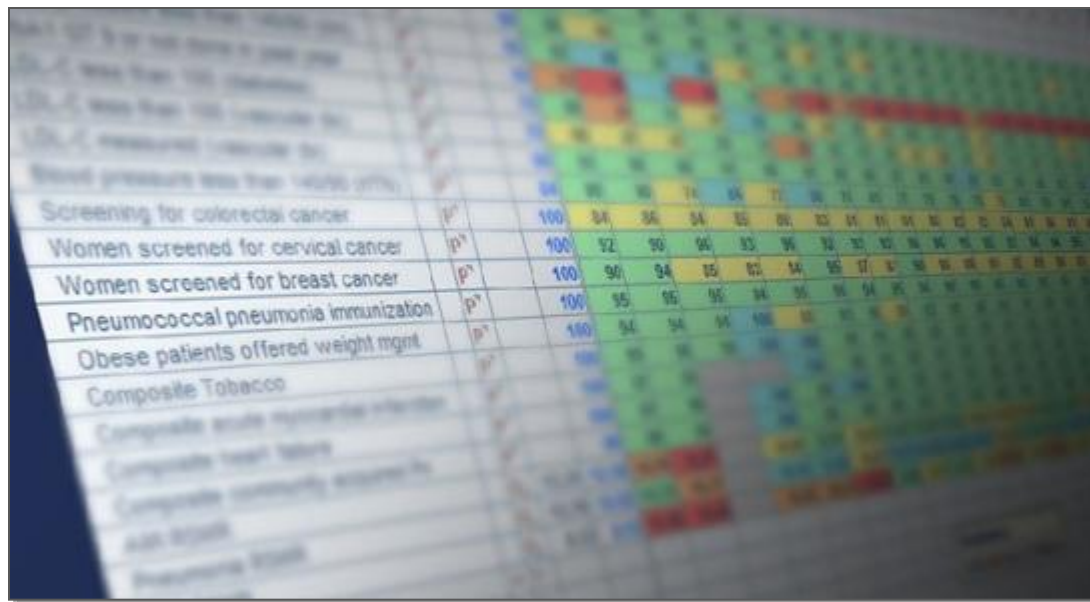
# Enhancing Transparency and Accountability

OIA helps improves how internal and external leaders and advocates make decisions through:

- **Secure, online, and accessible reports** that measure quality, safety, health outcomes and patient satisfaction at each VA facility and throughout the VA enterprise;

- **Enhanced capacity for data analysis** at local levels and across the VA system; and

- **New, transparent and standardized reporting system** called ASPIRE to share quality and safety goals and performance for all VA hospitals.

# Enhancing Transparency and Accountability

We have enhanced transparency and accountability by posting online comparisons of all VA medical centers based on patient outcomes at:

## www.hospitalcompare.va.gov

and

## www.hospitalcompare.hhs.gov.

# Field Analytics


Insight   Analysis
Action

- Leverages analytics expertise onsite, at the medical centers
- Emphasizes teamwork and collaboration
- Provides analytics and consultative support to field staff at 12 selected VA facilities
- Supports Leadership consultation
- Educates frontline staff
- Provides hands-on consultative support
- Participates in the online Healthcare Analytics Certificate Program at the University of Nebraska
- Assists in leveraging onsite systems redesign capabilities

# OIA – Making the Difference

- No business is more information-intense than health care.

- By providing timely, relevant information and data services that support improvements in Veterans' health, OIA is an indispensible partner to VHA clinicians, managers and leaders.

Thank you. Questions?

CONTACT:
VHA10P2OIACommunications@va.gov

## RECAP NOTES

| | |
|---|---|
| TODAY'S DATE: | October 23, 2012 |
| DATE OF MEETING: | October 17, 2012 |
| TO: | Terry Bentley<br>Erika Moott<br>Stephanie Elaine Birdwell |
| FROM: | Mary Crawford |
| RE: | Veterans Affairs TOPR 29 Meeting Recap Notes |

## Participants

<u>Veterans Affairs (VA):</u> Terry Bentley, Erika Moott, Stephanie Elaine Birdwell
    Note: Justin Stephenson was unable to attend the meeting

<u>Burson-Marsteller (B-M):</u> Maggie Easterlin, Emily Bolton

<u>Sage:</u> Pava Cohen, Jim McIntyre, Claudia Raffman

## Summary:

- **Program Management**
  - o **Action Item:** VA, B-M and Sage introduced team members.
  - o **Action Item:** B-M established point of contact to be Maggie Easterlin (Maggie.Easterlin@bm.com).
  - o **Action Item:** VA to provide B-M with information regarding security clearances.
  - o **Action Item:** B-M to provide team member staff roster October 19, 2012.

- **PMP**
  - o **Deliverable:** B-M submitted initial PMP on October 17, 2012.
  - o **Action Item:** B-M to adjust PMP timeline around the holiday season. B-M will not include dates between December 17th and January 2nd and will deliver an updated PMP by October 19, 2012.

- **Website**
  - o **Action Item:** VA to provide clarification on HSPD12 clearance and HSPD12 existing clearance transfer and remote accessibility timeline and process.
  - o **Action Item:** VA announced there will be a new website user interface rolled out on October 30th and will still be the same content management system.

- o **Action Item:** VA/B-M/Sage to arrange meeting to speak with the people that oversee the website.
- o **Action Item:** VA established some website tasks will include making updates on pictures, stories, policy documents, bios for staff members, not rebuilding the current website.
- o **Action Item:** VA confirmed that the current website is a teamsite that is a content management format.

- **Strategic Planning**
  - o **Action Item:** VA to provide discussed existing strategic planning proposal. VA to provide existing strategic plan documents for reference.
  - o **Action Item:** B-M to attend one to one and a half day brainstorming session either November 27, 28, 29 with staff to discuss the agenda moving forward.
  - o **Action Item:** VA and B-M to hold strategic planning kick-off meeting on November 1.

- **Branding/PowerPoint/Brochure**
  - o **Action Item:** Sage will provide two mood boards that feature fonts, color palates, photos or illustrations, and other items. After discussions, Sage will provide templates for poster, fact sheet and email— ultimately producing an identity guide.
  - o **Action Item:** The mood boards will be shown to VA stakeholders at the meeting held at the end of November. The VA will choose a visual concept from the mood boards.
  - o **Action Item:** Based on VA visual concept choice and feedback, Sage will develop a Style Guide Manual to show how to use the visual templates and will be written for design professionals as well as laypersons.
  - o **Action Item:** VA/B-M/Sage to hold design kick-off meeting on November 1, 2012 at 10:30 a.m. at VA's facility at 810 Vermont Ave. NW to discuss branding/PowerPoint/brochure.
  - o **Action Item:** The VA will provide the interim brochure that was produced internally for reference. The new brochure will need to be more polished and professional.
  - o **Action Item:** PMP must build in time for brochure content development and refinement and image research.

**Next Steps:**
- B-M/Sage: Provide Meeting Notes by COB 10/19 (done)
- B-M/Sage: Update the PMP with revised dates by COB 10/19 (done)
- VA: Determine whether web edits can be accomplished remotely or on site
- VA: Determine the security clearance process for Sage staff
- VA: Provide current strategic plan documents and any other reference materials
- VA: Provide current brochure
- VA: Provide details for end of November meeting
- VA/BM/Sage: Set up technical meeting with VA Webmaster

**Scheduled Meetings:**
- 11/1/12 10:30 a.m. Branding Project Launch Meeting
- 11/1/12 12:00 p.m. Strategic Plan Launch Meeting

# Strategic Plan

## Calendar Years 2013-2015

**Stephanie Birdwell, M.S.W**

U.S. Department of Veterans Affairs
Director, Office of Tribal Government Relations

**Prepared by Burson-Marsteller**

**May 16, 2013**

## Table of Contents

## Introduction

American Indian tribes exercise inherent sovereign powers over their members and tribal lands. The United States has long recognized this right of American Indian tribes to self-govern[1] and a government-to-government relationship between the federal government and tribes was established as early as 1787, when the United States adopted its Constitution.[2]

On November 6, 2000, President Clinton signed Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, to establish regular and meaningful consultation and collaboration with tribal officials in the development of Federal policies that have tribal implications, to strengthen the United States government-to-government relationships with Indian tribes and to reduce the imposition of unfunded mandates upon Indian tribes. On November 5, 2009, President Obama signed a Memorandum on Tribal Consultation to fully implement Executive Order 13175 stating that tribal consultations are a critical ingredient of a sound and productive federal-tribal relationship. The Presidential Memorandum directed all federal agencies to develop a detailed plan to fully implement consultation and coordination with American Indian/Alaska Native (AI/AN) tribal governments. Currently, there are 566 federally recognized tribes – which would make Indian Country the fourth largest state in the United States if all the lands were combined.[3] The United States Government seeks to establish and maintain a relationship with the tribes to increase access to care for AI/AN Veterans.

In January 2011, the United States Department of Veterans Affairs (VA) established the Office of Tribal Government Relations (OTGR) to spearhead relationship-building with tribal governments and thereby better serve AI/AN Veterans. The new office is aligned within the Office of the Deputy Assistant Secretary for Intergovernmental Affairs (DAS-IGA), Office of Public and Intergovernmental Affairs (OPIA) and VA. The office is expected to carry out the responsibilities of establishing, maintaining and coordinating a nation-to-nation, federal-tribe relationship with tribal governments in the United States.

The AI/AN population values honor, loyalty and pride that inspire service to our country – some have referred to it as the "warrior spirit."[4] For over two hundred years, American Indians and Alaska Natives have bravely served in the United States military,[5] and as of March 2012, the Department of Defense reported that 22,248 American Indians and Alaska Natives currently serve our country.[6]

Approximately 11 percent of AI/AN Veterans are female compared to about seven percent of Veterans in other groups.[7] Additionally, AI/AN service members are younger as a cohort than all other service members comparatively.[8]

It is important to note that overall, AI/AN Veterans have lower incomes, lower educational attainment and higher unemployment than Veterans of other groups.[9] AI/AN Veterans are also more likely to lack health insurance and to have a disability, service-connected or otherwise, than Veterans of other groups.[10] Yet

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[1] *Oklahoma Tax Commission v. Citizen Band Potawatomi Indian Tribe*, 498 U.S. 505 (1991), citing *Cherokee Nation v. Georgia*, 8 L.Ed. 25 (1831).  See also *United States v. Wheeler*, 435 U.S. 313, 323 (1978); *Merrion v. Jicarilla Apache Tribe*, 455 U.S. 103 (1982).

[2] U.S. Const. art. I, §8. The "Indian Commerce Clause" of the Constitution provides that "Congress shall have the Power  . . . to regulate Commerce . . . with the Indian tribes."

[3] "Geographic & Demographic Profile of Indian Country," National Congress of American Indians – NCAI Policy Research Center, November 2012

[4] "Honoring Native American, Alaska Native heritage," U.S. Army, November 22, 2010

[5] "Honoring Native American, Alaska Native heritage," U.S. Army, November 22, 2010

[6] "Geographic & Demographic Profile of Indian Country," National Congress of American Indians – NCAI Policy Research Center, November 2012

[7] "American Indian and Alaska Native Servicemembers and Veterans," U.S. Department of Veterans Affairs, September 2012

[8] Ibid.

[9] Ibid.

[10] Ibid.

many AI/AN Veterans do not fully avail themselves of the services and benefits offered to them, underscoring the importance of OTGR's role in reaching out to AI/AN Veterans.

With OTGR as its driving force, VA is engaging with tribal governments to improve awareness of services and benefits available to AI/AN Veterans, and to identify and overcome any barriers that may impede AI/AN Veterans' use of those benefits and services.[11]

### *OTGR Mission, Vision and Goals*
The mission of OTGR is to facilitate positive intergovernmental communication between the VA and tribal governments. OTGR will advise, communicate, coordinate, provide policy guidance, consult, problem-solve, inform and serve as an intergovernmental liaison and tribal relations subject matter expert between the Department of Veterans Affairs and tribal governments, as well as with other stakeholders and partnership organizations, regarding the functional areas of the VA, including the Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA).

OTGR aims to fulfill its mission by enhancing government-to-government relationships with AI/AN tribal governments; engaging in education, communication, collaboration and outreach with internal and external stakeholders; serving as a clearinghouse for information regarding AI/AN Veterans; and advising on, assisting with the development of, and advocating for policy and legislative issues affecting AI/AN tribal governments.

OTGR's Vision Statement paints a clear picture of the results it strives to achieve over time. It states: "VA has positive relationships with American Indian and Alaska Native (AI/AN) tribal governments and is part of the landscape of Indian Country. Every Veteran receives excellent services that are holistic in nature and that lead to optimal health. AI/AN tribal governments view the VA as an organization of integrity that advocates for their needs. The VA demonstrates its commitment to Veterans by being culturally competent, respecting the unique sovereign status of tribes, and reaching Veterans in Indian Country. Veterans know how to access all VA services and benefits and are woven into the fabric of the VA."

### *OTGR Accomplishments and Progress to Date*
The work of OTGR to date provides a solid foundation for continued work in 2013-2015. In support of its three goals, OTGR's work has been highlighted by:

Office Organization, Goal-Setting and Staffing: The establishment of OTGR brought with it the start-up challenges of organizing a new office, setting goals and priorities and recruiting the staff necessary to carry out its mandate. VA clearly signaled the importance of this new office by housing it within the OPIA, directly under the Office of the Secretary, and by appointing Stephanie Birdwell, a knowledgeable leader with 20 years experience working in Indian Affairs and the daughter of a Cherokee Veteran of the Vietnam War, as its director.

From the outset, OTGR took a collaborative and consultative approach to its work, convening a group of 22 stakeholders from throughout VA in an extensive planning and goal-setting session in July 2011. Representatives and leadership from VHA, VBA, Veterans Affairs Central Office (VACO), NCA, VHA's Office of Rural Health (ORH), VA Chaplain Service and VBA's Vocational Rehabilitation and Employment Service participated, ensuring the breadth of VA programs. The participants had a stake in tribal government relations and impact on AI/AN Veterans which collectively had a voice in charting the path of OTGR for its first year in operation.

In keeping with its mission to develop strong relationships with tribal governments, OTGR adopted a field structure to place office representatives in regions aligned with tribal areas, outside Washington, DC,

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[11] American Indian and Alaska Native Servicemembers and Veterans," U.S. Department of Veterans Affairs, September 2012

close to the tribal governments themselves. OTGR's five Tribal Government Relations Specialists have become the "face" of OTGR across the country.

## Office of Tribal Government Relations
### Regional Map

[map of the United States showing regional divisions]
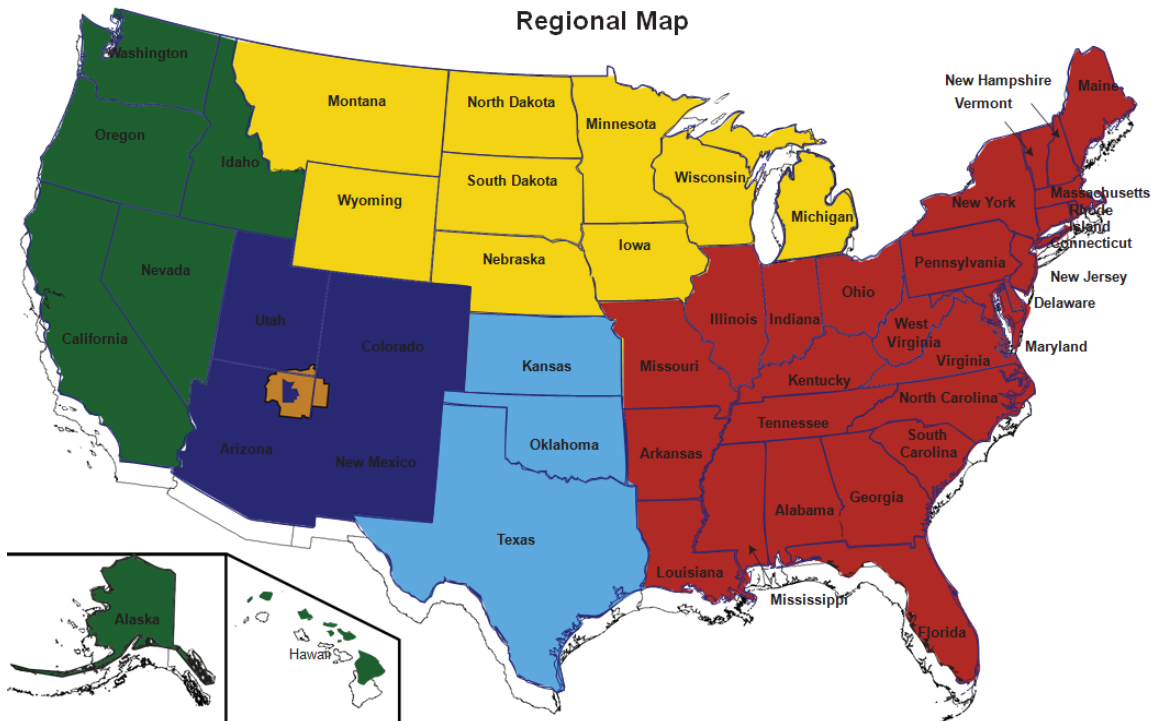
## Legend

**Eastern Region:**
Office of Tribal Government Relations Specialist: Peter Vicaire (**Northeast**)
Phone: (612) 405-5676

Office of Tribal Government Relations Specialist: Mary Culley (**Southeast**)
Phone: Phone: (405) 456-3876

**Central Region:**
Office of Tribal Government Relations Specialist: Peter Vicaire
Phone: (612) 629-7587

**Southern Plains Region:**
Office of Tribal Government Relations Specialist: Mary Culley
Phone: (405) 456-3876

**South Western Region:**
Office of Tribal Government Relations Specialist: LoRae Homana Pawiki
Phone: (928) 776-5306

**Western Region:**
Office of Tribal Government Relations Specialist: Terry Bentley
Phone: (541) 440-1271

- Tribal Outreach: OTGR has conducted significant outreach to tribes across the country aiming to bring attention to the quality and accessibility of health care, benefits and memorial services to AI/AN Veterans. Below are several examples of the outreach that OTGR has been able to accomplish.

  **Tribal listening sessions** were hosted by OTGR in seven communities across the country to hear tribal perspectives on increasing access to healthcare and benefits for Veterans in Indian Country. Listening sessions were held in Albuquerque, NM, Bethel, AK, Anchorage, AK, Billings, MT, Bismarck, ND, Denver, CO, and Pine Ridge, SD. Over 50 tribes participated, as well as representatives from the Indian Health Services (IHS), Congressional staff, inter-tribal organizations and Regional Indian Health Boards. Key themes that emerged from these sessions included:

- ○ AI/AN Veterans who are, or previously were, consumers of VA care expressed satisfaction with the quality of care received.
- ○ AI/AN Veterans not enrolled or receiving care expressed limited awareness about the scope of services and benefits that VA offers.
- ▪ AI/AN Veterans often expressed a lack of consistency in follow-up, relationship-building between the VA and tribes, outreach and perceived lack of inter-agency collaboration.

**Site visits** were conducted by OTGR Director, Stephanie Birdwell, and staff to key operations sites and locations that deliver services to AI/AN Veterans which spurred productive dialogue about ways best leverage and/or improve Veteran services. Visits included Consolidated Mail Outpatient Pharmacy (CMOP) in Leavenworth, KS; to tribal courts in Navajo Nation, Hopi and Laguna Pueblo tribes; to patients receiving home-based primary care services; to tribal and IHS health facilities; and to tribal communities in South Dakota.

**Regional training meetings** hosted in Grande Ronde, OR, Spokane, WA, Minneapolis, MN, Milwaukee, WI, Albuquerque, NM, Norman, OK, and Washington DC, gathered together tribal leaders and over 600 attendees – including local VA points of contact, sister federal agencies and state government leadership – to offer training focused on a diverse and extensive range of topics. Topics included enrollment and eligibility training, the cemetery grant program, the VA/IHS MOU, tribal Veterans representatives, the Native American Direct Loan (NADL) program, behavioral health issues affecting Veterans, the VA caregivers program, Veterans courts, listening sessions with VA and state directors, special topics for women Veterans to name a few. The goal of these trainings was – and is – to increase the awareness of, access to and availability of all VA services and benefits for Veterans living in tribal communities. Through consultation, relationship-building and intergovernmental engagement, the VA is able to acquire a better understanding of the tribes' priorities for Veterans services as well as what barriers to access Veterans are facing.

**National events** put OTGR staff and VA resources front-and-center using informational booths at the National Congress of American Indians annual convention, Gathering of Nations Pow-Wow, IHS Self-Governance Conference, and the first National Indian Health Board Annual Consumer Conference during which U.S. Secretary of Veteran Affairs gave the keynote address. Veterans attending these national events had the opportunity to enroll in VA's health care system, learn about benefits for which they may be eligible and connect with online resources such as eBenefits and My Health*e*Vet.

Indian Health Services (IHS) Collaboration**:** On October 1, 2010, VA and IHS signed an updated MOU from 2003. The Memorandum's principal goal is for VA and IHS to promote patient-centered collaborations in consultation with tribes and, in so doing, bring together the strengths and expertise of each organization to actively improve the care and services provided by both agencies. VA and IHS staff have been working together to develop specific recommendations and action items related to the MOU. The MOU has 13 work groups focused on national implementation of the agreement, and ORH is responsible for oversight of the MOU and its associated work groups. OTGR specialists participate in the workgroups on a national level and support local technical assistance requests from tribes interested in incorporating aspects of the MOU into local partnerships with the VA.

**Cross-agency training:** Attention to cultural awareness and increasing culturally competent care for VA and IHS beneficiaries is the focus of IHS and VA staff who are developing a three-tiered cultural awareness training program, with each tier having a different level of intensity and immersion into cultural issues.

**Reimbursement agreements:** HHS/IHS and VA signed the National Reimbursement Agreement in December, 2012. The National Agreement facilitates VA reimbursement for direct care services provided to eligible AI/AN Veterans by IHS and participating tribal health programs.

**Veteran Emergency Responders Program work group:** IHS and VA staff are working together on emergency, disaster and pandemic preparedness and response by sharing contingency planning and preparedness efforts, joint development of materials targeting AI/AN Veterans, and joint exercises and coordination of emergency response. Current activities include working with the Federal Emergency Management Agency to supply materials for training of tribal emergency response teams.

**Consolidated Mail Outpatient Pharmacy (CMOP) program:** IHS and VA staff have also undertaken pharmacy collaborations and have successfully completed a pilot program between the VA CMOP and IHS, with expansion to the following sites: Phoenix, AZ, Claremore, OK, Yakama, WA, and Rapid City, SD. In fiscal year 2011, over 19,000 medications were dispensed through the CMOP program, and to date, over 50,000 prescriptions have been dispensed within the IHS through the CMOP program. The IHS, VA, and Department of Defense (DOD) have also partnered to train pharmacy technicians.

**Suicide prevention collaboration:** Staff is focusing on suicide prevention and working to develop an AI/AN-specific version of Operation SAVE, a VA gatekeeper training program, for use in Indian country; 157 tribal outreach activities conducted to date.

**Long-term care:** Staff focused on long-term care services has increased the number of AI/AN Veterans served through the VA Home-Based Primary Care (HBPC) program with IHS and tribal nations has more than quadrupled from 55 in December, 2010 to 234 by September, 2011.[12] Currently, a considerable number of AI/AN Veterans remain actively enrolled in this program.

**Alaska Veteran Outreach:** A specific workgroup was established in September 2011 at the direction of VA Under Secretary for Health, Dr. Robert Petzel, to address the unique needs of Alaska Native Veterans. The Alaska areas of focus were to increasing access to service and benefits by expanding Tribal Veteran Representative (TVR) program; improving coordination of care (dissemination of best practices); and developing payment and reimbursement polices (sharing and coordination of services). To date, Alaska has trained over 109 TVR's; increased Veteran enrollment in 2012 by 1.7 percent; provided systematic registration training for benefits coordinators at tribal health programs; and developed a culturally appropriate communication materials "outreach tool kit" funded by the OTGR. Alaska has 27 reimbursement sharing agreements signed and they are working on a contract with a native health organization for a system redesign to integrate Veteran identification, enrollment, verify eligibility and assist with updating annual means test,

Sharing Agreements: To further the VA's goal of facilitating increased access to care, sharing agreements among tribal governments and the VA were created to address topics such as home-based primary care, space, facilities and maintenance, telepsychology and patient care psychology services, human resources, Information Technology (IT), pharmacy and communication.

Tribal Consultation: OTGR facilitated formal VA-specific tribal consultation sessions in Washington, DC, Alaska, Nebraska and Colorado, with approximately 50 leaders representing over 40 tribes in 2012. Tribal leaders had an opportunity to voice their concerns on issues that affect the well-being of Veterans and their families. With a direct link to the tribes through OTGR, the sessions offered a forum for tribes to

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[12] U.S. Congress. Committee on Indian Affairs United States Senate. "Programs and Services for Native Veterans." Yvette Roubideaux, Director Indian Health Service Department of Health and Human Services (Date: May 25, 2012). Text from: U.S. Department of Health & Human Services. Accessed: 2/15.13.

provide comments before new VA policies and procedures are implemented or ongoing policies are extended. The sessions also invited tribes to provide feedback and recommendations on consultation topics. Notably, the consultation in Washington, DC included a joint session with IHS.

Internal VA Collaboration: A crucial part of OTGR's role is bringing the right people to the table to work with tribal governments, which requires internal VA collaboration. OTGR's collaboration with other VA offices is integral to its daily work and has led to collaborative training sessions featuring subject matter experts from VHA, VBA and NCA as well as other federal, state and non-profit organizations focused on serving Veterans. NCA for example, uses the training sessions as a forum to raise awareness of the tribal cemetery grant funding opportunity. To date, four tribes have been awarded these grants: Oglala Sioux Tribe, $6.5 million for a tribal Veterans cemetery; Rosebud Sioux Tribe, $6.9M for a new Veterans cemetery; Yurok Tribe, $3.3M for a new Veterans cemetery and the Pascua Yaqui Tribe, $322K for improvements to an existing Veterans cemetery. In fiscal year (FY) 2013, two tribes, the Big Sandy Rancheria tribe (Aubrey, CA) and the Seminole Nation of Oklahoma, advanced to the opportunity stage for grant award consideration.

VHA uses the training sessions as an opportunity to provide training to tribal leaders and service providers on the VA Medical Benefits package, reimbursement agreement process and enrollment and eligibility training. Additionally, working in consultation with VHA, OTGR researched and drafted a Veterans Court Resource Guide for tribal justice systems focused on providing options for meeting the needs of cases involving Veterans.

Congressional Engagement: OTGR's engagement with Congress included:

- Alaska visit and listening session with Senator Mark Begich (AK)
- Field hearing in Rapid City, SD, with Senator Tim Johnson (SD)
- Testimony before Senate Subcommittee on Indian Affairs to discuss VA programs and services for Native Veterans
- Briefings with Senate Veterans Affairs Committee (SVAC), House Veterans Affairs Committee (HVAC), SAC, HAC
- Individual briefings with staff of Sens. Begich and Murkowski (AK), Tester (MT), Thune (SD) and Cole (OK)

***Internal Stakeholder Perspectives***
In developing this Strategic Plan for 2013-2015, OTGR once again took the pulse of stakeholders within VA whose active engagement is essential to the continued enhancement of VA's service to AI/AN Veterans.

In individual interviews, 15 of the stakeholders who participated in the original July 2011 OTGR strategic planning session provided their current perspectives on how OTGR can maximize its effectiveness going forward. Director Stephanie Birdwell and Tribal Government Relations Specialists convened for a full-day strategic planning session, bringing the lessons they have learned from the field and their insights into the needs of tribal communities to the planning process.

The OTGR team uniformly expressed concern that OTGR's mission and function is widely misunderstood. While its mandate is to develop relationships with tribal governments and facilitate improved coordination between VA, tribal governments and other agencies providing related services to AI/AN Veterans, many stakeholders mistakenly assume OTGR is responsible for the actual delivery of services and programs to AI/AN Veterans. The persistence of this misunderstanding was verified in some of the stakeholder interviews conducted to inform this plan, pointing to the need for aggressive education and outreach by OTGR within VA and to sister agencies serving AI/AN Veterans.

Stakeholders identified several needs to facilitate greater collaboration and spur improvements in VA's service to AI/AN Veterans. They would like to see cultural and tribal government competence training to

help non-American Indian and Alaska Natives within VA communicate effectively with tribal governments. Additionally, they mentioned that outreach to educate offices within VA as well as other federal agencies serving AI/AN Veterans about working with OTGR to enhance service and program delivery to tribal Veteran populations would be beneficial. This outreach includes regular, ongoing communication to inform stakeholders of OTGR's communications initiatives, share best practices and explore collaboration. OTGR may conduct monthly or quarterly conference calls with other VA offices (e.g., VBA, VHA, VACO, NCA, ORH) and other federal agencies (e.g., HHS, IHS). OGTR may create a one-page description of its purpose, current initiatives and capabilities (See Appendix R for an example) to provide an at-a-glance look at the offices and its role.

Other suggestions included increased face-to-face interaction with tribal governments, with the understanding that OTGR staff is limited as is budget, and an enhancement of the OTGR website to include robust resource materials (e.g., webinars, brochures, newsletters, toolkits).

***Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis***
A SWOT analysis is a simple, but digestible, means of evaluating the strengths, weaknesses, opportunities and threats of an organization. Using the stakeholder interviews and information gathered from the in-person strategic planning meeting, this SWOT analysis below was compiled.

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**Strengths**
- OTGR has the weight of the Presidential Memorandum on Tribal Consultation behind it, underscoring the validity and importance of its portfolio and mission. VA's establishment of the office with a direct line to the Secretary's Office further reinforces the high-level attention it commands.
- OTGR has completed its initial staffing, appointing seasoned Indian Affairs expert, Stephanie Birdwell, to direct the office and recruit knowledgeable Tribal Government Relations Specialists as the "front line" of the office in the field.
- OTGR is in sync with VA's Master Strategic Plan, having adopted goals that contribute to achievement of the agency's overall goals and objectives.
- OTGR staff has built relationships with over 400 tribal governments and enjoyed early successes collaborating with other VA offices and Federal agencies to improve service to AI/AN Veterans.

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**Weaknesses**
- While one-to-one, face-to-face meetings are widely accepted as the most effective way to build relationships with tribal governments, OTGR's staffing level and budget will not accommodate such meetings with each of the 566 federally recognized tribes across the nation. This makes OTGR's task more challenging, as the team must, therefore, rely heavily on other methods of outreach (such as telephone calls, newsletters, emails and large-group conferences) that may not be as ideally suited for relationship-development.
- Within VA and among external stakeholders, there is often a lack of understanding of OTGR's purpose, capabilities and of the benefits of working with the office.
- Many stakeholders do not feel connected to OTGR and are largely unaware of the office's activities, thus hindering their engagement.
- While the internet is the first place most Americans turn to for information, OTGR's website falls short of providing the robustness of information and resources needed to actively engage its stakeholders.
- A lack of widespread competence in tribal culture and governance within VA stands as a barrier to broader agency engagement with tribal governments.
- Tribal governments are largely in the dark about Veteran status of tribal members and total Veteran population, so the value of collaboration with VA is not readily apparent to them.

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**Opportunities**

- A gap in cultural and tribal governance competence exists within VA and sister agencies that OTGR is uniquely positioned to fill and, thereby, enhance federal service delivery to AI/AN Veterans.
- OTGR is ideally positioned to serve as a bridge connecting the entire array of government programs and services that impact AI/AN Veterans and, in the process, improve the effectiveness and efficiency of those programs and services.
- Collaboration with tribal governments through OTGR is a new initiative, gives the office a nearly blank slate upon which to chart the best possible course for VA's engagement with tribes.
- As stakeholders become aware of OTGR and the possibilities it brings for enhanced relationships with VA, they react overwhelmingly positively; the environment is ripe for OTGR to successfully engage and make an impact.
- The needs of AI/AN Veterans have previously been served in a "tangential" way; in other words, they were served as Veterans but without the context of their status as tribal citizens. OTGR has the opportunity to significantly impact the way VA works with tribal governments in effectively serving Veterans in tribal communities. This in turn will result in improvements both in service and program delivery but also, ultimately, in the outcomes experienced by AI/AN Veterans.
- VA has an opportunity organization-wide to use OTGR as a vehicle to promote and increase awareness of the good work of the agency and increase its market penetration with the AI/AN community.

**Threats**

- The long-standing distrust of the federal government felt by many tribal leaders and tribal communities has the potential to spill over onto OTGR's reputation and hinder relationship-development. OTGR must prove it is "different" in its engagement with tribal governments, on a sustained basis, to avoid this threat.
- As OTGR becomes better known and establishes a track record of success, demand for its attention (by internal VA, other agencies, and/or tribal stakeholders) could well outstrip available resources.
  - If a request for assistance goes unanswered or unaddressed, OTGR's reputation could be damaged, therefore hindering its effectiveness going forward.
- OTGR is a convener and facilitator, not a direct service or benefit provider. Consequently, its ultimate success is largely dependent upon the actions of other offices, programs and even agencies. Should those other offices, programs and agencies refuse to collaborate because they have other priorities, lack resources, for example, OTGR's success would be compromised.

***Moving Forward: What is Next for 2013-2015?***

In 2013-2015, OTGR will build upon this solid foundation to deepen its relationship with tribal governments and facilitate greater collaboration across government to meet three primary goals:

1. Facilitate increased access to healthcare;
2. Promote economic sustainability; and
3. Implement the Tribal Consultation policy.

The collaboration of VA's services and benefits programs, as well as of other federal programs that serve AI/AN Veterans living in tribal communities, is paramount. OTGR's work thus heavily focuses on initiating, facilitating and managing this collaboration between and among VA's various programs, other relevant government programs and tribal governments.

Key initiatives to be undertaken by OTGR in 2013-2015 include:

Leverage Regional Training Summits to Create Greater Impact on AI/AN Veterans: OTGR will work to expand AI/AN Veteran involvement in VA programs and services, as well as in relevant programs and services offered by other federal agencies, such as the IHS, Labor Departments, Veteran Service Organizations and other relevant state government agencies through outreach during each summit. OTGR will also work with VA and IHS subject matter experts to coordinate technical assistance at the regional and local level for tribes regarding the VA/IHS Memorandum of Understanding (MOU) providing issue/topic guidance based on the local needs of Veterans and tribes.

Facilitate Reimbursement Agreements: OTGR will assist VA and tribal governments in communications related to reimbursement agreements as they present an important opportunity for tribes and the IHS to fully leverage VA health care benefits.

Increase the Number of Tribal Government/VBA MOUs for Native American Direct Loans (NADL): The Native American Direct Loan program is a mortgage product available to AI/AN Veterans who live on trust lands. This product is an important resource that can be used by Veterans in Indian Country to acquire permanent housing.  The product has, unfortunately, been underutilized by Veterans living in Alaska and the lower 48 United States. OTGR will work with VBA to identify the root causes of NADL underuse by AI/AN Veterans and collaborate with VBA to help increase use of this program.

Continue Tribal Consultation Policy Implementation: OTGR will improve the consultation process based on lessons learned to date. OTGR will also augment formal consultations with informal listening sessions to maximize input from tribal governments and continue to build relationships with tribal governments and their Veterans.

Foster Greater VA Effectiveness in Engaging with Tribal Governments: OTGR will facilitate cultural and tribal government competency training and education for the VHA, VBA and NCA organizations.

Increase Inter-agency Collaboration to Create Improved Access to Service and Benefits: OTGR will explore joint consultations with other federal agencies, integrate relevant agencies into OTGR-organized outreach and education events, and initiate discussions between tribal governments and relevant federal programs, as appropriate.

Increase and Improve VA Communications with Tribal Governments: OTGR will continue to build upon, increase trust and grow relationships among VA/OTGR and tribal governments in order to increase care and access to benefits for AI/AN Veterans and their families.

<u>Increase Communication with Other External Audiences</u>:
OTGR will educate state and local governments as well as community-based organizations about VA/OTGR's mission and work to raise awareness and increase collaboration in the service of AI/AN Veterans.

## Section One: Plan

When considering OTGR's Strategic Plan for 2013-2015, it is important to acknowledge and address the many stakeholders and audiences to whom the office answers. Each of these audiences influences and is affected by OTGR. These audiences influence one another, and each has their own priorities and concerns. In the pages that follow, OTGR lays out specific goals, initiatives and tactics to leverage the collective resources of these stakeholders for one purpose: to establish positive, collaborative relationships that lead to better service to America's AI/AN Veterans. Note, those italicized items below indicate tasks for the Central OTGR office.

**OTGR Goal One: Facilitate Increased Access to Healthcare**

*Initiative 1.1: Leverage Regional Training Summits To Create Greater Impact*
Each regional training summit is an ideal time to make a big impact and reach a significant number of tribal governments and their Veterans in a relatively short amount of time. It is also an opportunity to collaborate internally with other VA agencies, to form new relationships and tap into existing ones, with the goal of facilitating increased access to healthcare and benefits for AI/AN and their families. It is a chance to demonstrate the benefits of working with OTGR, to join forces as all internal VA offices are striving to improve the quality and accessibility of health care, benefits and memorial services while optimizing value. Additionally, it is a forum for providing the critical face-to-face time important for building relationships in the AI/AN community. It is a place to listen to the needs and concerns of the tribal governments to increase Veteran client satisfaction and address regional AI/AN needs.

In sum, each regional summit is a place that allows VA professionals to take a holistic approach to addressing the needs of AI/AN Veterans as comprehensively as possible; an environment in which various VA and non-VA programs and offices are working collaboratively to meet the Veterans' needs; an environment that approximates an efficient "one-stop shop" for participants to access the resources and expertise they need.

*Tactics*

<u>Tactic 1.1.1 (2013-2015)</u>: Integrate additional VA program offices and ensure buy-in by engaging representatives on planning committees leading up to each regional training summit.

<u>Tactic 1.1.2 (2013-2015)</u>: Conduct personalized outreach to VA offices and Subject Matter Experts (SMEs) that offer priority services/resources to secure summit participation and ensure it is a mutually beneficial venture for them (e.g., VBA, NCA, VHA, Office of Veteran Homelessness, Caregiver Support).

<u>Tactic 1.1.3 (2013-2015)</u>: Conduct personalized outreach to non-VA offices that offer priority services/resources to secure participation by presentation and/or information booth (e.g., Centers for Medicare and Medicaid Services [CMS], Social Security Administration [SSA], Department of Labor [DOL], Department of Housing and Urban Development [HUD], Indian Health Service [IHS], State Departments of Veterans Affairs [DVA], Veteran Service Organizations [VSO]).

Tactic 1.1.4 (2013-2015): Host listening sessions concurrent with each summit in each region. Topic of the sessions to be determined by the Specialists to mirror any concerns or topics of interest in the region.

Tactic 1.1.5 (2013-2015): Market the benefits of the summits and benefit to tribal leaders to encourage attendance.

Tactic 1.1.6 (2013-2015): Collect feedback by asking participants to complete a questionnaire prior to the summits' conclusions to guide future summit planning and OTGR work.

Tactic 1.1.7 (2013-2015): Following each summit, identify one critical issue that surfaced as a key need and make it a priority focus in that region for the remainder of the calendar year. Reinforce that participants were heard and that action is being taken as a result.

***Metrics (for each Regional Summit)***

Metric 1.1.1 (2013-2015): Increase the number of tribal participants by 10 percent each year.

Metric 1.1.2 (2013-2015): Secure participation by two new VA program offices each year.

Metric 1.1.3 (2013-2015): Secure participation by two new non-VA federal programs each year.

***Initiative 1.2: Facilitate Communications on Reimbursement Agreements***
VA marked a major milestone in late 2012 with the signing by VA and the IHS of the National Reimbursement Agreement. However, individual reimbursement agreements remain to be forged with tribes who operate their own healthcare programs. OTGR staff will act as facilitators to open discussions and then keep communications and information flowing within VA and externally with tribes on reimbursement agreement options. Through this role, OTGR will continue to develop relationships and contribute to achievement of the overall VA goal of increasing Veteran client satisfaction with health, education, training, financial, and burial benefits and services.

***Tactics***

Tactic 1.2.1 (2013):  Specialists to contact the tribes with Tribal Health Plans in their regions to make them aware of the reimbursement process and gauge interest in pursuing an agreement. Specialists will leverage reimbursement materials crafted by VHA and CBO for education purposes.

Tactic 1.2.2 (2013): Assist with initial meeting (or conference call) the appropriate parties for interested tribes to begin the agreement development process.

Tactic 1.2.3 (2013-2014): Stay in contact with involved parties to monitor progress and facilitate next steps if progress stalls. Build and maintain relationships with ORH liaisons. Seek one Veterans Integrated Service Network (VISN) representative as the coordinator of reimbursement agreements to create a central point of contact who is well informed on the subject matter.

***Metrics***

Metric 1.2.1 (2013): Create and maintain a report documenting outreach to all tribes, interest and steps taken toward agreements.

Metric 1.2.2 (2014-2015): Annually thereafter, follow-up with report on status of agreements.

**OTGR Goal Two: Promote Economic Sustainability**

*Initiative 2.1: Increase the number of Tribal Memoranda of Understanding (MOU) for Native American Direct Loans (NADL)*

NADL are historically underutilized. In keeping with OTGR's goal of promoting economic sustainability for AI/AN Veterans, OTGR will increase awareness of the NADL program among tribal governments and, where appropriate, facilitate the establishment of MOUs.

*Tactics*

Tactic 2.1.1 (2013): Specialists to conduct an analysis of MOUs in each region to determine the frequency of use*. OTGR Central Office to develop uniform template for regional analyses.* If NADL are underutilized, Specialists to identify the causes.

Tactic 2.1.2 (2013-2015): Specialists identify NADL recipients who could be potential "ambassadors" for the program*. In 2013, the OTGR Central Office to present VBA with regional analyses to determine if VBA could be more effective in AI/AN outreach to increase usage.*

*Metrics*

Metric 2.1.1 (2013): Each Specialist to complete a regional analysis by end of year.

Metric 2.1.2 (2013): Identify at least one potential "ambassador" identified for each region (in regions where MOUs exist and multiple loans have been made within the past 10 years).

Metric 2.1.3 (2014-2015): Work with VBA to increase Tribal MOUs and NADLs by 10 percent each year.

**OTGR Goal Three: Implement Tribal Consultation Policy**

*Initiative 3.1: Continue Tribal Consultation Policy Implementation*

The United States has a unique legal and political relationship with tribal governments. Executive departments and agencies are charged with engaging in regular and meaningful consultation and collaboration with tribal officials in the development of federal policies that have tribal implications, and are responsible for strengthening the government-to-government relationship between the United States and Indian tribes.

As noted by interviews with OTGR stakeholders, face-to-face interaction where possible and culturally sensitive relationship-building is critical when working government-to-government. Using lessons learned in 2011-2012, OTGR will fine-tune and continue the tribal consultation process.

*Tactics*

Tactic 3.1.1 (2013): Conduct informal listening sessions in Cherokee, NC, Pala, CA and Rapid City, SD.

Tactic 3.1.2 (2013): *OTGR Central Office to publish VA 2012 Tribal Consultation Summary Report.*

Tactic 3.1.3 (2013): *OTGR Central Office to schedule tribal consultation briefing and education sessions with VHA, VBA, NCA national and regional leadership (referencing 2012 report).*

Tactic 3.1.4 (2013): *OTGR Central Office to explore combined consultation with sister agencies (e.g., HHS, HUD, DOL, SBA).*

Tactic 3.1.5 (2014-2015): *OTGR Central Office to resume formal tribal consultations.*

*Metrics*

Metric 3.1.1 (2013): Cherokee, NC, Pala, CA and Rapid City, SD listening sessions conducted; reports completed.

Metric 3.1.2 (2013): *Assessment of feasibility of combined consultations with sister agencies completed.*

Metric 3.1.3 (2014-2015): *Invite 100 percent of tribes to formal consultations held; reports completed.*

Metric 3.1.4 (2014-2015): *Summary report listing how VA changed approach or practices in program/policy areas as a result of Tribal Consultation.*

**Initiatives That Address All OTGR Goals**

***Initiative 4.1: Foster Greater VA Effectiveness in Engaging With Tribal Governments***
History has shown a failure to communicate effectively with tribal governments has resulted in further mistrust of the federal government. OTGR will launch an initiative to educate VA employees about responsibilities and cultural sensitivities specific to tribal governments and AI/AN Veterans, and how to most effectively work with them to ultimately improve care and benefits.

*Tactics*

Tactic 4.1.1 (2013): Develop and test an educational webinar(s) to address effective ways of communicating with tribal governments. As the most user-friendly means of communicating cultural competency information, webinar(s) will be employed. Test webinar with a sampling of individuals, then fine-tune as necessary. Webinar should address statutory and regulatory obligations/responsibilities, cultural awareness and OTGR role.

Tactic 4.1.2 (2014-2015): Deploy cultural and intergovernmental competence training across VA.

Tactic 4.1.3 (2013-2015): Increase OTGR communications with internal VA audiences. *OTGR Central Office to contribute one guest blog post to the VA intranet each quarter to raise the awareness of the OTGR office. OTGR Central Office to host monthly or quarterly calls with VA program offices to update them on the issues facing AI/AN Veterans and discuss OTGR's progress.* Specialists to replicate the monthly/quarterly call with VA offices within each region.

Tactic 4.1.4 (2013): Create an evaluation questionnaire and ask participants to evaluate the effectiveness and value of the call after six months; fine-tune based on feedback.

Tactic 4.1.5 (2013-2015): Create and maintain database of VA contacts and relationships for each region.

Tactic 4.1.6 (2013): *OTGR Central Office to build out OTGR's website as a place to host outreach material and resources for other VA offices to use.*

Tactic 4.1.7 (2013-2015): *OTGR Central Office to contribute an article yearly to the Vanguard Magazine.*

Tactic 4.1.8 (2014-2015): *Accountability – OTGR Central Office to publish Annual Indian Country Accomplishments Report.*

*Metrics*

Metric 4.1.1 (2013): *Educational/training resources finalized and deployed by end of year.* By 2014, 50 percent of relevant VA employees will be reached by end of year and by 2015, 100 percent of relevant VA employees will be reached by end of year.

Metric 4.1.2 (Q3 2013-2015): *Blog postings quarterly.*

Metric 4.1.3 (Q2 2013-2015): *Monthly program office calls.*

Metric 4.1.4 (Q4 2013)*: Website enhancements completed.*

Metric 4.1.5 (2013-2015): Vanguard Magazine *article placement each year.*

***Initiative 4.2: Increase Collaboration With Other Federal Agencies***
OTGR must work to develop a network of people across sister agencies who are involved in delivering assistance to tribal constituencies, in order to make government delivery of assistance more efficient and more effective for AI/AN Veterans and their families.

*Tactics*

Tactic 4.2.1 (2013): One-to-one outreach between OTGR and 75 percent of relevant agencies to identify key point of contact (POC) and core areas for collaboration.

Tactic 4.2.2 (2014): One-to-one outreach between OTGR and remaining 25 percent of relevant agencies to identify key POC and core areas for collaboration. Capture POCs in database at both national and regional levels for reference.

Tactic 4.2.3 (2013): Explore monthly or quarterly conference call to coordinate across agencies. One national call, replicated in each region.

Tactic 4.2.4 (2015): Annual update to POC list.

*Metrics*

Metric 4.2.1 (2013): 75 percent of POCs identified nationally and in each region.

Metric 4.2.2 (2013): Consensus achieved on regular communication forum by end of 2013.

Metric 4.2.3 (2014): Remaining 25 percent of POCs identified.

Metric 4.2.4 (2015): POC list updated.

***Initiative 4.3: Increase and Improve Communications With Tribal Governments***
The heart of the OTGR mission is to facilitate positive inter-governmental communication between the VA and tribal governments. It is OTGR's goal – applying lessons learned from the first year – to leverage a range of communications channels available to increase and improve communications with tribal governments in order to understand their distinctive needs and determine the best way to improve service to Veterans.

*Tactics*

Tactic 4.3.1 (2013): Using Census and other publicly available data, cull statistics on Veterans within each tribe.

Tactic 4.3.2 (2013-2015): Increase face-to-face visits with tribes, pending available funding.

Tactic 4.3.3 2013-2015: Host three listening sessions per year in new locations.

Tactic 4.3.4 (2013): Ask each tribal government to designate an ongoing Veteran representative to streamline communications and establish an "advocate" within each tribe. From 2013 to 2015, the team will determine appropriate ongoing contact/communications to be carried out through the year.

Tactic 4.3.5 (2013): Develop a banner with the link to OTGR webpage and request that it be posted on websites of tribes, inter-tribal consortia, regional health boards and National Congress of American Indians (NCAI).

Tactic 4.3.6 (2013-2015): Distribute a monthly electronic national newsletter. Develop and maintain a comprehensive database for distribution within each region consisting of tribal government leaders, AI/AN Veterans, VA colleagues, community members. Each Specialist contributes to each newsletter; Peter Vicaire, Central Region Tribal Government Relations Specialist will serve as the editor.

*Metrics*

Metric 4.3.1 (Q3 2013): Veteran data collected.

Metric 4.3.2 (2013-2015): Three additional tribal visits per region, per year, budget permitting.

Metric 4.3.3 (2013-2015): Conduct three listening sessions per year.

Metric 4.3.4 (2013-2015): Veteran POC requested of all tribes; annual reporting on the number who have supplied one.

Metric 4.3.5 (2013): *OTGR Central Office to create website banner.* Specialists to market it to tribes for website posting. From 2013 (Q2) to 2015, an electronic newsletter will be distributed monthly with content contributed monthly by each Specialist.

*Initiative 4.4: Increase Communication With Other External Audiences*
While OTGR's primary role is government-to-government outreach, educating the members of the surrounding area is also an important part of building trust in the community. The more stakeholder groups are familiar with OTGR, the stronger OTGR's impact can be.

*Tactics*
Tactic 4.4.1 (2013-2015): Arrange to give presentations at community-based forums attended by relevant audiences, such as healthcare professionals and the education community.

Tactic 4.4.2 (2013-2015): Develop media outreach/communications plans for Specialist.

Tactic 4.4.3 (2013-2015): Conduct six community education presentations per year.

Tactic 4.4.4 (2013-2015): Conduct six media interviews per year (radio, television, newspaper – print or online).

## Section Two: Timeline

| | | 2013-2015 Strategic Plan Timeline | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Initiatives** | **Tactics** | **CY 2013 - Q1** | **CY 2013 - Q2** | **CY 2013 - Q3** | **CY 2013 - Q4** | **CY 2014** | **CY 2015** | **Person or Organization Responsible** | **Action Item POC** |
| **Note: Italics denote an action item for OTGR Central Office.** |
| *OTGR Goal One: Facilitate Increased Access to Healthcare* |
| Initiative 1.1: Leverage Regional Training Summits To Create Greater Impact | Tactic 1.1.1 (2013-2015): Integrate additional VA program offices and ensure buy-in by engaging representatives on planning committees leading up to each Regional Training Summit. | | | | | | | Tribal Government Relations Specialists (Specialists) | Individual Specialist |
| | Tactic 1.1.2 (2013-2015): Conduct personalized outreach to VA offices and Subject Matter Experts (SMEs) that offer priority services/resources to secure summit participation and ensure it is a mutually beneficial venture for them (e.g., VBA, NCA, VHA, Office of Veteran Homelessness, Caregiver Support). | | | | | | | Specialists | Individual Specialist |
| | Tactic 1.1.3 (2013-2015): Conduct personalized outreach to non-VA offices that offer priority services/resources to secure participation by presentation and/or information booth (e.g., Centers for Medicare and Medicaid Services [CMS], Social Security Administration [SSA], Department of Labor [DOL], Department of Housing and Urban Development [HUD], Indian Health Service [IHS], State Departments of Veterans Affairs [DVA], Veteran Service Organizations [VSO]). | | | | | | | Specialists | Individual Specialist |
| | Tactic 1.1.4 (2013-2015): Host listening sessions concurrent with each summit in each region. Topic of the sessions to be determined by the Tribal Government Relations Specialists (Specialists) to mirror any concerns or topics of interest in the region. | | | | | | | Specialists | Individual Specialist |
| | Tactic 1.1.5 (2013-2015): Market the benefits of the summits and benefit to tribal leaders to encourage attendance. | | | | | | | Specialists | Individual Specialist |
| | Tactic 1.1.6 (2013-2015): Collect feedback by asking participants to complete a questionnaire prior to the summits' conclusions to guide future Summit planning and OTGR work. | | | | | | | Specialists | Individual Specialist |
| | Tactic 1.1.7 (2013-2015): Following each summit, identify one critical issue that surfaced as a key need and make it a priority focus in that region for the remainder of the calendar year. | | | | | | | Specialists | Individual Specialist |

| Initiative 1.2: Facilitate Communications on Reimbursement Agreements | Tactic 1.2.1 (2013): Specialists to contact the tribes with Tribal Health Plans in their regions to make them aware of the reimbursement process and gauge interest in pursuing an agreement. Specialists will leverage reimbursement materials crafted by VHA and CBO for education purposes. | | | | | | Specialists | Individual Specialist |
|---|---|---|---|---|---|---|---|---|
| | Tactic 1.2.2 (2013): Assist with initial meeting (or conference call) with the appropriate parties for interested tribes to begin the agreement development process. | | | | | | Specialists | Individual Specialist |
| | Tactic 1.2.3 (2013-2014): Stay in contact with involved parties to monitor progress and facilitate next steps if progress stalls. Build and maintain relationships with Office of Rural Health (ORH) liaisons. Seek one Veterans Integrated Service Network (VISN) representative as the coordinator of reimbursement agreements to create a central point of contact who is well informed on the subject matter. | | | | | | Specialists | Individual Specialist |

| OTGR Goal Two: Promote Economic Sustainability | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Initiative 2.1: Increase the number of Tribal Memorandums of Understanding (MOU) for Native American Direct Loans (NADL) | Tactic 2.1.1 (2013): Specialists to conduct an analysis of MOUs in each region to determine the frequency of use. *OTGR Central Office to develop uniform template for regional analyses.* If NADL are underutilized, Specialists to identify the causes. | | | | | | Specialists/OTGR Central Office | Individual Specialist/Stephanie Birdwell |
| | Tactic 2.1.2 (2013-2015): Specialists identify NADL recipients who could be potential "ambassadors" for the program. *In 2013, the OTGR Central Office to present VBA with regional analyses to determine if VBA could be more effective in AI/AN* | | | | | | Specialists | Individual Specialist/Stephanie Birdwell |

| OTGR Goal Three: Implement Tribal Consultation Policy | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Initiative 3.1: Continue Tribal Consultation Policy Implementation | Tactic 3.1.1 (2013): Conduct informal listening sessions in Cherokee, NC, Pala, CA and Rapid City, SD | | | | | | | Specialists | Individual Specialist |
| | Tactic 3.1.2 (2013): *OTGR Central Office to publish VA 2012 Tribal Consultation Summary Report.* | | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 3.1.3 (2013): *OTGR Central Office to schedule tribal consultation briefing and education sessions with VHA, VBA, NCA national and regional leadership (referencing 2012 report).* | | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 3.1.4 (2013): *OTGR Central Office to explore combined consultation with sister agencies (e.g., HHS, HUD, DOL, SBA).* | | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 3.1.5 (2014-2015): *OTGR Central Office to resume formal tribal consultations.* | | | | | | | Specialists/OTGR Central Office | Individual Specialist/Stephanie Birdwell |

| OTGR – Initiatives That Address All OTGR Goals | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Initiative 4.1: Foster Greater VA Effectiveness in Engaging With Tribal Governments | Tactic 4.1.1 (2013): Develop and test an educational webinar(s) to address effective ways of communicating with tribal governments. As the most user-friendly means of communicating cultural competency information, webinar(s) will be employed. Test webinar with a sampling of individuals, then fine-tune as necessary. Webinar should address statutory and regulatory obligations/responsibilities, cultural awareness and OTGR role. | | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.1.2 (2014-2015): Deploy cultural and intergovernmental competence training across VA. | | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.1.3 (2013-2015): Increase OTGR communications with internal VA audiences. *OTGR Central Office to contribute one guest blog post to the VA intranet each quarter to raise the awareness of the OTGR office. OTGR Central Office to host monthly or quarterly call with VA program offices to update them on the issues facing AI/AN Veterans and discuss OTGR's progress.* Specialists to replicate the monthly/quarterly call with VA offices within each region. | | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.1.4 (2013): Create an evaluation questionnaire and ask participants to evaluate the effectiveness and value of the call after six months; fine-tune based on feedback. | | | | | | | OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.1.5 (2013-2015): Create and maintain database of VA contacts and relationships for each region. | | | | | | | OTGR Central Office | Individual Specialist |
| | Tactic 4.1.6 (2013): *OTGR Central Office to build out OTGR's website as a place to host outreach material and resources for other VA offices to use.* | | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 4.1.7 (2013-2015): *OTGR Central Office to contribute an article yearly to the Vanguard Magazine.* | | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 4.1.8 (2014-2015): *Accountability - OTGR Central Office to publish Annual Indian Country Accomplishments Report* | | | | | | | OTGR Central Office | Stephanie Birdwell |

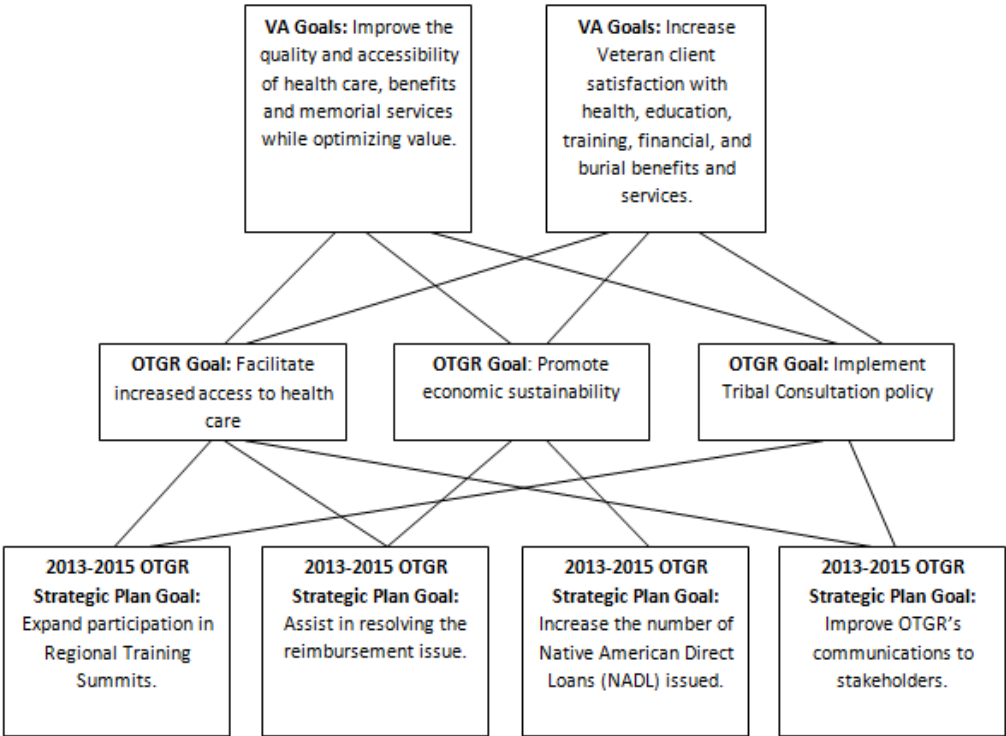| Initiative | Tactic | | | | | | Responsible | Lead |
|---|---|---|---|---|---|---|---|---|
| Initiative 4.2: Increase Collaboration With Other Federal Agencies | Tactic 4.2.1 (2013): One-to-one outreach between OTGR and 75 percent of relevant agencies to identify key point of contact (POC) and core areas for collaboration. | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.2.2 (2014): One-to-one outreach between OTGR and remaining 25 percent of relevant agencies to identify key POC and core areas for collaboration. Capture POCs in database at both national and regional levels for reference. | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |
| | Tactic 4.2.3 (2013): Explore monthly or quarterly conference call to coordinate across agencies. One national call, replicated in each region. | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 4.2.4 (2015): Annual update to POC list. | | | | | | Specialists | Individual Specialist |

| Initiative | Tactic | | | | | | Responsible | Lead |
|---|---|---|---|---|---|---|---|---|
| Initiative 4.3: Increase and Improve Communications With Tribal Governments | Tactic 4.3.1 (2013): Using Census and other publicly available data, cull statistics on Veterans within each tribe. | | | | | | Specialists | Individual Specialist |
| | Tactic 4.3.2 (2013-2015): Increase face-to-face visits with tribes, pending available funding. | | | | | | Specialists | Individual Specialist |
| | Tactic 4.3.3 2013-2015: Host three listening sessions per year in new locations. | | | | | | Specialists | Individual Specialist |
| | Tactic 4.3.4 (2013): Ask each tribal government to designate an ongoing Veteran representative to streamline communications and establish an "advocate" within each tribe. From 2013 to 2015, the team will determine appropriate ongoing contact/communications to be carried out through the year. | | | | | | Specialists | Individual Specialist |
| | Tactic 4.3.5 (2013): Develop a banner with the link to OTGR webpage and request that it be posted on websites of tribes, inter-tribal consortia, regional health boards and National Congress of American Indians (NCAI). | | | | | | OTGR Central Office | Stephanie Birdwell |
| | Tactic 4.3.6 (2013-2015): Distribute a monthly electronic national newsletter. Develop and maintain a comprehensive database for distribution within each region consisting of tribal government leaders, AI/AN Veterans, VA colleagues, community members. Each Specialists contributes to each newsletter; Peter Vicaire will serve as the editor. | | | | | | Specialists/OTGR Central Office | Stephanie Birdwell along with Individual Specialist |

| Initiative 4.4: Increase Communication With Other External Audiences | Tactic 4.4.1 (2013-2015): Arrange to give presentations at community-based forums attended by relevant audiences, such as healthcare professionals and the education community. | | | | | | Specialists | Individual Specialist |
|---|---|---|---|---|---|---|---|---|
| | Tactic 4.4.2 (2013-2015): Develop media outreach/communications plans for Specialists. | | | | | | OTGR Central Office | Individual Specialist/Stephanie Birdwell |
| | Tactic 4.4.3 (2013-2015): Conduct six community education presentations per year. | | | | | | Specialists | Individual Specialist |
| | Tactic 4.4.4 (2013-2015): Conduct six media interviews per year (radio, TV, newspaper – print or online). | | | | | | Specialists | Individual Specialist |

## Section Three: Interrelationship to VA Master Strategic Plan

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┌─────────────────────┐      ┌─────────────────────┐
│ VA Goals: Improve the│      │ VA Goals: Increase  │
│ quality and          │      │ Veteran client      │
│ accessibility of     │      │ satisfaction with   │
│ health care, benefits│      │ health, education,  │
│ and memorial services│      │ training, financial,│
│ while optimizing     │      │ and burial benefits │
│ value.               │      │ and services.       │
└─────────────────────┘      └─────────────────────┘

┌──────────────────┐  ┌──────────────────┐  ┌──────────────────┐
│ OTGR Goal:       │  │ OTGR Goal:       │  │ OTGR Goal:       │
│ Facilitate       │  │ Promote economic │  │ Implement Tribal │
│ increased access │  │ sustainability   │  │ Consultation     │
│ to health care   │  │                  │  │ policy           │
└──────────────────┘  └──────────────────┘  └──────────────────┘

┌──────────────┐ ┌──────────────┐ ┌──────────────┐ ┌──────────────┐
│ 2013-2015    │ │ 2013-2015    │ │ 2013-2015    │ │ 2013-2015    │
│ OTGR         │ │ OTGR         │ │ OTGR         │ │ OTGR         │
│ Strategic    │ │ Strategic    │ │ Strategic    │ │ Strategic    │
│ Plan Goal:   │ │ Plan Goal:   │ │ Plan Goal:   │ │ Plan Goal:   │
│ Expand       │ │ Assist in    │ │ Increase the │ │ Improve      │
│ participation│ │ resolving the│ │ number of    │ │ OTGR's       │
│ in Regional  │ │ reimbursement│ │ Native       │ │ communications│
│ Training     │ │ issue.       │ │ American     │ │ to           │
│ Summits.     │ │              │ │ Direct Loans │ │ stakeholders.│
│              │ │              │ │ (NADL) issued│ │              │
└──────────────┘ └──────────────┘ └──────────────┘ └──────────────┘
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## Appendix A: Executive Order 13175

**Federal Register**
Vol. 65, No. 218
Thursday, November 9, 2000
Title 3—The President

*Presidential Documents*
Executive Order 13175 of November 6, 2000
Consultation and Coordination With Indian Tribal Governments
67249

By the authority vested in me as President by the Constitution and the laws of the United States of America, and in order to establish regular and meaningful consultation and collaboration with tribal officials in the development of Federal policies that have tribal implications, to strengthen the United States government-to-government relationships with Indian tribes, and to reduce the imposition of unfunded mandates upon Indian tribes; it is hereby ordered as follows:

**Section 1**. Definitions. For purposes of this order:
(a)       ''Policies that have tribal implications'' refers to regulations, legislative comments or proposed legislation, and other policy statements or actions that have substantial direct effects on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.
(b)       ''Indian tribe'' means an Indian or Alaska Native tribe, band, nation, pueblo, village, or community that the Secretary of the Interior acknowledges to exist as an Indian tribe pursuant to the  Federally Recognized  Indian Tribe List Act of 1994, 25 U.S.C. 479a.
(c)       ''Agency'' means any authority of the United States that is an ''agency'' under 44  U.S.C. 3502(1), other than those  considered to  be independent regulatory agencies, as defined in 44 U.S.C. 3502(5).
(d)       ''Tribal officials'' means elected or duly appointed officials of Indian tribal governments or authorized intertribal organizations.

**Sec. 2.**  Fundamental Principles. In formulating or implementing policies that have tribal implications, agencies shall be guided by the following fundamental principles:
(a)       The United States has a unique legal relationship with Indian tribal governments as set forth in the Constitution of the United States, treaties, statutes, Executive Orders, and court decisions. Since the formation of the Union, the United States has recognized Indian tribes as domestic dependent nations under its protection. The Federal Government has enacted numerous statutes and  promulgated numerous  regulations  that  establish  and  define a trust relationship with Indian tribes.
(b)       Our Nation, under the law of the United States, in accordance with treaties, statutes, Executive Orders, and judicial decisions, has recognized the right of Indian tribes to self-government. As domestic dependent nations, Indian tribes exercise inherent sovereign powers over their members and territory. The United States continues to work with Indian tribes on a government-to-government basis to address issues concerning Indian tribal self-government, tribal trust resources, and Indian tribal treaty and other rights.
(c)       The United States recognizes the right of Indian tribes to self-government and supports tribal sovereignty and self-determination.

**Sec. 3.** Policymaking Criteria. In addition to adhering to the fundamental principles set forth in section 2, agencies shall adhere, to the extent permitted by law, to the following criteria when formulating and implementing policies that have tribal implications:

 (a)	Agencies shall respect Indian tribal self-government and sovereignty, honor tribal treaty and other rights, and strive to meet the responsibilities that arise from the unique legal relationship between the Federal Government and Indian tribal governments.

(b)	With respect to Federal statutes and regulations administered by Indian tribal governments, the Federal Government shall grant Indian tribal govern- ments the maximum administrative discretion possible.

(c)	When undertaking to formulate and implement policies that have tribal implications, agencies shall:

(1)	encourage Indian tribes to develop their own policies to achieve pro- gram objectives;

(2)	where possible, defer to Indian tribes to establish standards; and

(3)	in determining whether to establish Federal  standards, consult with tribal officials as to the need for  Federal  standards  and  any  alternatives that would limit the scope of Federal standards or otherwise preserve the prerogatives and authority of Indian tribes.

**Sec. 4.** Special Requirements for Legislative Proposals. Agencies shall not submit to the Congress legislation that would be inconsistent with the policy- making criteria in Section 3.

**Sec. 5.** Consultation. (a) Each agency shall have an accountable process to ensure meaningful and timely input by tribal officials in the development of regulatory policies that have  tribal  implications. Within  30  days  after the effective date of this order, the head of each agency shall designate an official with  principal  responsibility  for  the  agency's  implementation of this order. Within 60 days of the effective date of this order, the designated official shall submit to the Office of Management and Budget (OMB) a description of the agency's consultation process.

(b)	To the extent practicable and permitted by law, no agency shall promul- gate any regulation that has tribal implications, that imposes substantial direct compliance costs on Indian tribal governments, and that is not required by statute, unless:

(1)	funds necessary to pay the direct costs incurred by the Indian tribal government or the tribe  in complying  with  the  regulation  are  provided by the Federal Government; or

(2)	the agency, prior to the formal promulgation of the regulation,

(A)	consulted with tribal officials early in the process of developing the proposed regulation;

(B)	in a separately  identified  portion  of  the  preamble  to the  regulation as it is to be issued in the Federal Register, provides to the Director of OMB a tribal summary impact statement, which consists of a description of the extent of the agency's prior consultation with tribal officials, a summary of the  nature of their concerns and  the agency's  position supporting  the need to issue the regulation, and a statement of the extent to which the concerns of tribal officials have been met; and

(C)	makes available to the Director of OMB any written communications submitted to the agency by tribal officials.

(c)	To the extent practicable and permitted by law, no agency shall promul- gate any regulation that has tribal  implications  and  that  preempts  tribal law unless the agency, prior to the formal promulgation of the regulation,

(1)	consulted with tribal officials early in the process of developing the proposed regulation;

(2)	in a  separately identified portion of  the preamble to the  regulation as it is to be issued in the Federal Register, provides to the Director of OMB a tribal summary impact statement, which consists of a

description of the extent of the agency's prior consultation with tribal officials, a summary of the nature of their concerns and the agency's position supporting the need to issue the regulation, and a statement of the extent to which the concerns of tribal officials have been met; and

(3)      makes available to the Director of OMB any written communications submitted to the agency by tribal officials.

(d)      On issues relating to tribal self-government, tribal trust resources, or Indian tribal treaty and other rights, each agency should explore and, where appropriate, use consensual mechanisms for developing regulations, including negotiated rulemaking.

**Sec. 6.** Increasing Flexibility for Indian Tribal Waivers.

(a)      Agencies shall review the processes under which Indian tribes apply for waivers of statutory and regulatory requirements and take appropriate steps to streamline those processes.

(b)      Each agency shall, to the extent practicable and permitted by law, consider any application by an Indian tribe for a waiver of statutory or regulatory requirements in connection with any program administered by the agency with a general view toward increasing opportunities for utilizing flexible policy approaches at the Indian tribal level in cases in which the proposed waiver is consistent with the applicable Federal policy objectives and is otherwise appropriate.

(c)      Each agency shall, to the extent practicable and permitted by law, render a decision upon a complete application for a waiver within 120 days of receipt of such application by the agency, or as otherwise provided by law or regulation. If the application for waiver is not granted, the agency shall provide the applicant with timely written notice of the decision and the reasons therefor.

(d)      This section applies only to statutory or regulatory requirements that are discretionary and subject to waiver by the agency.

**Sec. 7.** Accountability.

(a)      In transmitting any draft final regulation that has tribal implications to OMB pursuant to Executive Order 12866 of September 30, 1993, each agency shall include a certification from the official designated to ensure compliance with this order stating that the requirements of this order have been met in a meaningful and timely manner.

(b)      In transmitting proposed legislation that has tribal implications to OMB, each agency shall include a certification from the official designated to ensure compliance with this order that all relevant requirements of this order have been met.

(c)      Within 180 days after the effective date of this order the Director of OMB and the Assistant to the President for Intergovernmental Affairs shall confer with tribal officials to ensure that this order is being properly and effectively implemented.

**Sec. 8.** Independent Agencies. Independent regulatory agencies are encour- aged to comply with the provisions of this order.

**Sec. 9.** General Provisions. (a) This order shall supplement but not supersede the requirements contained in Executive Order 12866 (Regulatory Planning and Review), Executive Order 12988 (Civil Justice Reform), OMB Circular A–19, and the Executive Memorandum of April 29, 1994, on Government- to-Government Relations with Native American Tribal Governments.

(b)      This order shall complement the consultation and waiver provisions in sections 6 and 7 of Executive Order 13132 (Federalism).

(c)      Executive Order 13084 (Consultation and Coordination with Indian Tribal Governments) is revoked at the time this order takes effect.

(d)     This order shall be effective 60 days after the date of this order.

67252   Federal Register / Vol. 65, No. 218 / Thursday, November 9, 2000 / Presidential Documents
Sec. 10. Judicial Review. This order is intended only to improve the internal management of the executive branch, and is not intended to create any right, benefit, or trust responsibility, substantive or procedural, enforceable at law by a party against the United States, its agencies, or any person.

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THE WHITE HOUSE,
*November 6, 2000.*

[FR Doc. 00–29003
Filed 11–8–00; 8:45 am]
Billing code 3195–01–P

## Appendix B: Memorandum for the Heads of Executive Departments and Agencies—Tribal Consultation

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release  November 5, 2009

November 5, 2009

MEMORANDUM FOR THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES

SUBJECT:       Tribal Consultation

The United States has a unique legal and political relationship with Indian tribal governments, established through and confirmed by the Constitution of the United States, treaties, statutes, executive orders, and judicial decisions. In recognition of that special relationship, pursuant to Executive Order 13175 of November 6, 2000, executive departments and agencies (agencies) are charged with engaging in regular and meaningful consultation and collaboration with tribal officials in the development of Federal policies that have tribal implications, and are responsible for strengthening the government-to-government relationship between the United States and Indian tribes.

History has shown that failure to include the voices of tribal officials in formulating policy affecting their communities has all too often led to undesirable and, at times, devastating and tragic results. By contrast, meaningful dialogue between Federal officials and tribal officials has greatly improved Federal policy toward Indian tribes. Consultation is a critical ingredient of a sound and productive Federal-tribal relationship.

My Administration is committed to regular and meaningful consultation and collaboration with tribal officials in policy decisions that have tribal implications including, as an initial step, through complete and consistent implementation of Executive Order 13175. Accordingly, I hereby direct each agency head to submit to the Director of the Office of Management and Budget (OMB), within 90 days after the date of this memorandum, a detailed plan of actions the agency will take to implement the policies and directives of Executive Order 13175. This plan shall be developed after consultation by the agency with Indian tribes and tribal officials as defined in Executive Order 13175. I also direct each agency head to submit to the Director of the OMB, within 270 days after the date of this memorandum, and annually thereafter, a progress report on the status of each action included in its plan together with any proposed updates to its plan.

Each agency's plan and subsequent reports shall designate an appropriate official to coordinate implementation of the plan and preparation of progress reports required by this memorandum. The Assistant to the President for Domestic Policy and the Director of the OMB shall review agency plans and subsequent reports for consistency with the policies and directives of Executive Order 13175.

In addition, the Director of the OMB, in coordination with the Assistant to the President for Domestic Policy, shall submit to me, within 1 year from the date of this memorandum, a report on the implementation of Executive Order 13175 across the executive branch based on the review of agency plans and progress reports. Recommendations for improving the plans and making the tribal consultation process more effective, if any, should be included in this report.

The terms "Indian tribe," "tribal officials," and "policies that have tribal implications" as used in this memorandum are as defined in Executive Order 13175.

The Director of the OMB is hereby authorized and directed to publish this memorandum in the Federal Register.

This memorandum is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.
Executive departments and agencies shall carry out the provisions of this memorandum to the extent permitted by law and consistent with their statutory and regulatory authorities and their enforcement mechanisms.


BARACK OBAMA


# # #

## Appendix C: Department of Veterans Affairs Tribal Consultation Policy

Department of Veterans Affairs
Tribal Consultation Policy

1. Introduction:

   a. The U.S. Government has a unique relationship with American Indian and Alaska Native Tribal Governments as set forth in the Constitution of the United States, treaties, statutes, court decisions, executive orders, and memoranda. The United States recognizes the right of federally-recognized  Indian Tribes to self-government.   Indian Tribes exercise inherent sovereign powers over their members and territory.  The United States Department of Veterans Affairs (VA) establishes this policy in order to enhance the relationship of cooperation, coordination, open communication, good will; to work in good faith to amicably and fairly resolve issues/differences; and to continue to pursue mutually agreeable objectives successfully.

   b. Thus, in accordance with Executive Order 13175, "Consultation and Coordination with Indian Tribal Governments," and guidance promulgated during the White House Tribal Nations Conference, November 5, 2009, wherein the President reaffirmed the Federal Government's commitment to meaningful consultation with Indian Tribes, by directing that each Federal Agency adopt a "detailed plan of action" to implement Executive Order 13175 (November 9, 2000), 65 Fed. Reg. 67249-67252, VA establishes this Tribal Consultation Policy.

2. Purpose:  Through this Policy, VA will seek to enhance positive government-to- government relations between VA and all federally recognized Indian Tribes, and to establish meaningful consultation procedures to develop, improve, or maintain partnerships with American Indian and Alaska Native Tribes.  Thereby, VA will meet the intent of Executive Order 13175 and the President's directive to establish meaningful consultation procedures with American  Indian and Alaska Native Tribes.

3. Definitions:

   a. Indian Tribe means an American Indian or Alaskan Native tribe, band, nation, pueblo, village, or community that the Secretary of Interior acknowledges to exist as an Indian Tribe pursuant to the Federally-Recognized Indian Tribe List Act of 1994, 25 U.S.C. 479a.

   b. Indian Organizations means those organizations, predominantly operated by Indian Tribes that represent or provide services to all American Indians or Alaskan Natives living on and/or off tribal lands and/or in urban areas.

   c. Tribal Government means the governing structure of a sovereign, federally- recognized government of an Indian Tribe.

   d. Tribal Officials are the elected or duly appointed officials of Indian Tribes or authorized intertribal organizations.

   e. Government-to-Government describes the relationship between VA and the American Indian and Alaska Native Tribal Governments.

f.  Work Groups means task forces established through a joint effort by VA and individual Indian Tribes.  Work Groups can be established to address or develop more technical aspects of policies or programs separate or in conjunction with the formal consultation process.  Work Groups shall, to the extent possible, consist of members from VA and participating Indian Tribe(s).

g.  Participation describes an ongoing activity that allows interested parties to engage one another through negotiation, compromise and problem solving to reach a desired outcome.

h.  Communication means verbal, electronic or written exchange of information between duly appointed officials of VA and Indian Tribes.

4.  Principles:

a.  Confidentiality: VA will continue to protect and exhibit a high degree of respect and sensitivity regarding confidential information provided by Tribal Governments and staff, and ensure confidentiality to the extent provided by applicable Federal law.

b.  Recognize and Respect Sovereignty:  VA, as a representative of the United States Government, recognizes that the various American Indian and Alaska Native Tribes are sovereign governments.  The recognition and respect of sovereignty is the basis for government-to-government relations and this Policy.  Sovereignty must continue to be respected and recognized in government-to-government consultation and collaboration between VA and American Indian and Alaska Native Tribes.

c.  Government-to-Government Relations:  VA recognizes the importance of collaboration, communication and cooperation with American Indian and Alaska Native Tribes.  VA further recognizes that VA policies, programs and/or services may directly or indirectly affect these Tribes.  Accordingly, VA recognizes the value of dialogue with the American Indian and Alaska Native Tribes on specific policies, programs, and/or services.

d.  Efficiently addressing Tribal Issues and Concerns:  VA recognizes the value of the American Indian and Alaska Native Tribes' input regarding VA policies, programs and/or services.  Thus, it is important that the Tribes' interests are continuously reviewed and considered by VA in its policy, program and/or services development processes.

e.  Collaboration and Mutual Resolution:  VA recognizes that good faith, mutual respect, and trust are fundamental to meaningful collaboration and communication policies.  As concerns arise, VA shall continue to strive to address and mutually resolve them with impacted American Indian and Alaska Native Tribes.

f.  Communication and Positive Relations:  VA shall strive to enhance positive government-to-government  relations with the American Indian and Alaska Native Tribes by:  (1) continuing to interact with the Tribes in a spirit of mutual respect; (2) seeking to understand the varying Tribes' perspectives; (3) enhancing communication, understanding and appropriate dispute resolution

with the Tribes; and (4) continuing to work through the government-to- government process towards a shared vision in areas of mutual interest.

g.  Informal Communication:  VA recognizes that formal consultation may not be appropriate in all situations or interactions.  VA may seek to communicate with and/or respond to the Tribes outside the consultation process.  These informal communications do not negate the authority or the importance of VA and the Tribes pursuing formal consultation.

5.  Protocol:

a.  When working with Indian Tribes and/or tribal governments, it is important to understand the unique political relationship between American Indian and Alaska Native Tribal Governments and the United States Government.  Under both Federal and common law, Indian Tribes are sovereign governments with recognized powers of self-government.  The status of Indian Tribes as sovereigns means that Tribes possess the inherent right to develop their own forms of government, to determine their own citizenship and to make their own judicial systems.  Thus, it is important not to assume that one tribe or one leader speaks for all.

b.  VA recognizes the unique sovereign status of Indian Tribes.  To promote effective communication and collaboration between VA and the Tribes relating to this Policy, VA shall continue to endeavor to understand the protocols for interacting with each American Indian and Alaska Native Tribe.  Collaboration is a recursive process in which two parties work together to achieve a common set of goals. Collaboration may occasionally occur, between VA and the Tribes, their respective agencies or VA's, or their official designees. Collaboration is the timely communication and joint effort that lays the groundwork for mutually beneficial relations, including identifying issues and problems, generating improvements and solutions, and providing follow-up as needed.

c.  Consensus serves as a decision making method for reaching agreement through a participatory process that: (1) involves VA and Indian Tribes through their official representatives; (2) actively solicits input and participation by VA and the Tribes; and (3) encourages cooperation in reaching agreement on the best possible decision for those affected.  VA shall continue to endeavor to conduct deliberations with Indian Tribes in good faith and in accordance with the processes outlined in this Policy.  Within this process, it is understood that consensus, while a goal, may not always be achieved.

d.  Consultation shall operate as an enhanced form of communication that emphasizes trust and respect.  It is a shared responsibility that allows an open and free exchange of information and opinion among parties that, in turn, may lead to mutual understanding and comprehension.  Consultation with American Indian and Alaska Native Tribes is a unique government-to-government process with two main goals:  (1) to reach consensus in decision-making; and (2) whether or not consensus is reached, to afford any party the opportunity to issue a dissenting opinion for the record, and more importantly to have honored each other's sovereignty.

6.  General Provisions:

a. The Role of Work Groups:  VA, in consultation with recognized Tribal officials, may appoint a Tribal Work Group to develop recommendations and provide input on VA policies, programs and/or services as they might impact American Indian and Alaska Native Tribes.  VA or the Work Group may develop procedures for the organization and implementation of Work Group functions.

b. Communication:  VA recognizes that Tribal Officials may communicate with appropriate VA employees outside the consultation process to ensure that any policies will not adversely impact tribal interests.  While less formal mechanisms of communication may be more effective at times, this does not negate VA's or the Tribe's ability to pursue formal consultation on a particular issue or policy.

c. Informal Communication with Indian Organizations:  The Federal-Tribal relationship is based on a government-to-government relationship.  VA recognizes the existence of Indian organizations, such as those representing or providing services to urban and/or off-reservation American Indians and Alaskan Natives.  Through this Policy, VA recognizes that it may continue to solicit recommendations or otherwise collaborate and communicate with these organizations and may do so through offices that VA established to serve those populations.

7. Consultation:

a. Authority:  Consultation shall be between the Secretary of Veterans Affairs, or his/her designated representative and Tribal Officials or their delegated representatives, who possess authority to negotiate on their behalf.  The Deputy Assistant Secretary for Intergovernmental Affairs is designated as VA's primary point-of-contact for implementation of this policy, and for coordinating VA's relationships with Tribal Governments and other tribal entities.  The Deputy Assistant Secretary for Intergovernmental Affairs shall continue to represent the Secretary in interactions and will serve as the liaison on these matters between VA and the American Indian and Alaska Native Tribes.

b. Applicability:   Tribal consultation is most effective and meaningful when conducted before taking actions that impact American Indians and Alaskan Natives.  VA acknowledges that a best case scenario may not always exist, and that VA and the Tribes may not have sufficient time or resources to fully consult on a relevant issue; however, consultation should be initiated as soon as possible to discuss any relevant issues.

c. Focus:  The principal focus for government-to-government  consultation is with American Indian and Alaska Native Tribes through their duly appointed Tribal Officials.  Nothing shall restrict or prohibit the ability or willingness of Tribal Officials and the Secretary to meet directly on matters that require direct consultation.  VA recognizes that the principle of intergovernmental collaboration, communication, and cooperation is a first step in government-to- government consultation.  VA shall continue to determine when direct leader- leader meetings shall occur.

d. Areas of Consultation:  VA, through reviewing proposed plans, policies, rules, or other pending and proposed programmatic actions, recognizes the need to assess whether such actions may impact Indian Tribes and/or American  Indian and Alaska  Native Tribes. Consultation should take place prior to any actions that may have the potential to significantly affect tribal resources,

rights, or land.  VA strives to notify appropriate Tribal Officials about such actions in an effort to provide Tribal Officials the opportunity to pursue and/or engage in the consultation process.

    e.   Initiation: Written notification requesting consultation by VA or an Indian Tribe shall serve to initiate the consultation process. Written notification, at the very least, should:
        1.   Identify the proposed action to be consulted upon.
        2.   Identify personnel who are authorized to consult on behalf of VA or the Tribe.

    f.   Process:  VA, in order to engage in consultation, may utilize duly-appointed Work Groups, or the Deputy Assistant Secretary for Intergovernmental Affairs, or appointed representatives to meet directly with Tribal Officials, or set forth other means of consulting with affected Tribes as the situation warrants.

        1.   Consultation will be between the Secretary of Veterans Affairs and Tribal Officials or their delegated representatives with authority to negotiate on their behalf.
        2.   VA will make a good faith effort to invite for consultation all affected Tribes.

8.   Limits on Consultation:

    a.   This policy will not diminish any administrative or legal rights and remedies otherwise available by law to VA or American Indian or Alaska Native Tribes.

    b.   The Policy does not prevent VA or the Tribes from entering into Memoranda of Understanding, Intergovernmental Agreements,  Joint Powers Agreements, professional service contracts, or other established administrative  procedures and practices mandated by Federal law or Tribal laws or regulations.

    c.   VA retains final decision making authority with respect to actions undertaken by VA and within Federal jurisdiction.   In no way should this Policy impede VA's ability to manage its operations.

    d.   This Policy is not intended to create any right, benefit, or trust responsibility, substantive or procedural, enforceable law by a party against the United States, VA, or any person.

9.   Dissemination of Policy:  Upon adoption of this Policy, VA will ensure the Policy is disseminated to all employees and to the various Indian Tribes.

10.   Amendments and Review of Policy:  This Policy is a working document and may be revised as needed.

11.   Effective Date:  This Policy shall become effective upon the date signed by the Secretary, Department of Veterans Affairs.

12.   Sovereign Immunity: The Policy shall not be construed to waive the sovereign immunity of the United States or any of its Agencies, or any Tribe, or to create a right of action by or against the United States or a Tribe, or any official of either, for failing to comply with this Policy.

The United States Department of Veterans Affairs hereby adopts this Federal- Tribal Consultation Policy.

Date

## Appendix D: American Indian and Alaska Native Servicemembers and Veterans Report

American Indian and Alaska Native Servicemembers
and Veterans

September 2012

TABLE OF CONTENTS

EXECUTIVE SUMMARY

American Indian and Alaska Native (AIAN) Veterans have played a vital role in the United States military for over two hundred years. Recognizing their long history of distinguished service, the following report seeks to provide comprehensive statistics on this important cohort of Veterans through an examination of AIAN Active Duty, Reserve, and National Guard data together with demographic, socioeconomic, and health status statistics for AIAN Veterans.

AIAN Active Duty, Reserve, and National Guard Analysis

- Native Americans serve at a high rate and have a higher concentration of female Servicemembers than all other Servicemembers.
- AIAN Servicemembers are younger as a cohort than all other Servicemembers.
- More AIAN Servicemembers serve in the Navy than in any other branch of service.

AIAN Veteran Analysis
- Similar to AIAN Servicemembers, AIAN Veterans are younger as a cohort.
- AIAN Veterans have served in more recent conflicts.
- AIAN Veterans have lower incomes, lower educational attainment, and higher unemployment than Veterans of other races.
- AIAN Veterans are also more likely to lack health insurance and to have a disability, service-connected or otherwise, than Veterans of other races.

Section I: Introduction

Overview

In honoring November 2011 as National Native American Heritage Month, the President of the United States extolled American Indians and Alaska Natives, saying:

Native Americans stand among America's most distinguished authors, artists, scientists, and political leaders, and in their accomplishments, they have profoundly strengthened the legacy we will leave our children. So, too, have American Indians and Alaska Natives bravely fought to protect this legacy as members of our Armed Forces.[13]

Indeed, Native Americans have made lasting contributions to the United States, including significant military service to defend our country. Continuing in the November 2011 proclamation, the President praised American Indian and Alaska Native (AIAN) Veterans, stating:

As service members, [Native Americans] have shown exceptional valor and heroism on battlefields from the American Revolution to Iraq and Afghanistan.

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[13] The full text of the November 2011 Presidential proclamation is available from: http://www.whitehouse.gov/the- press-office/2011/11/01/presidential-proclamation-national-native-american-heritage-month-2011.

This report focuses on demographic, socioeconomic, and health characteristics of AIAN Servicemembers and Veterans, and presents similar summary information for all Servicemembers and Veterans.

Purpose

To provide comprehensive statistics on AIAN Servicemembers and Veterans.

Objective

To put forth accurate data concerning the demographics, socioeconomic status, and health characteristics of AIAN Servicemembers and Veterans.

Historical Background

A brief overview[14] of the contributions of AIAN Veterans in the military is provided in the following text:

Early Wars (before World War I)

- From the Revolutionary War through the Civil War, American Indians served as auxiliary troops and as scouts.
- The Indian Scouts were established in 1866. This service was active for the remainder of the nineteenth century and the early twentieth century.

World War I

- Roughly 12,000 Native Americans served in the military during World War I.
- Four American Indians serving in the 142nd Infantry of the 36th Texas-Oklahoma National Guard Division received the Croix de Guerre medal from France.

World War II

- Over 44,000 Native Americans served between 1941 and 1945. The entire population of Native Americans in the United States was less than 350,000 at the time.
- Native American military personnel worked as cryptologists, using their Native languages to encode messages so that enemy code-breakers could not decipher them.
- Alaska Natives were a significant presence on the Alaska Combat Intelligence Detachment. This outfit was the first ashore on each island occupied by Allied forces in the Aleutian Campaign.[15]

Korean Conflict

- Approximately 10,000 Native Americans served in the military during this period.
- Three were awarded the Medal of Honor. Vietnam Era

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[14] Unless otherwise noted, historical information is obtained from a U.S. Army article celebrating AIAN heritage (available from: http://www.army.mil/article/48472/honoring-native-american-alaska-native-heritage).

[15] Information obtained from a Department of Defense report titled Native Alaska - Military Relations: 1867 to Current.

- More than 42,000 Native Americans served in the military in the Vietnam Era, and over 90 percent of these Servicemembers were volunteers.

Post-Vietnam Era

- AIAN Servicemembers continued to serve in high numbers after the Vietnam Era.
- AIAN Servicemembers saw action in Grenada, Panama, Somalia, the Gulf War, and in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) and Operation New Dawn (OND).

Section II: Active Duty, Reserve, and National Guard Servicemembers

Overview

The information below details basic demographic information on Active Duty, Reserve, and National Guard Servicemembers, as well as their branch of service, their length of service, and their rank (i.e., enlisted personnel or officers).[16]

All data in this section comes from the Active Duty Master Personnel File and the Reserve Components Common Personnel Data System (RCCPDS). This information was provided to the Department of Veterans Affairs by the Department of Defense's Defense Manpower Data Center through an interagency data sharing agreement.

Active Duty, Reserve, and National Guard Servicemembers by Age and Sex

*Table 1. Active Duty, Reserve, and National Guard Servicemembers by Age and Race[17]*

| Age Group | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| 17 to 24 years | 15,230 | 48.9 | 773,368 | 34.6 |
| 25 to 34 years | 10,997 | 35.3 | 826,361 | 37.1 |
| 35 to 44 years | 3,790 | 12.2 | 456,799 | 20.4 |
| 45 to 54 years | 1,006 | 3.2 | 156,974 | 7.0 |
| 55 to 64 years | 131 | 0.4 | 19,900 | 0.9 |
| 65 to 74 years | 1 | 0.0 | 113 | 0.0 |
| Unknown | 0 | 0.0 | 19 | 0.0 |
| Total | 31,155 | 100.0 | 2,235,534 | 100.0 |

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[16] "Servicemembers" refers to members of the Army, Air Force, Navy, and Marine Corps, as well as Reserve and National Guard components.

[17] Servicemembers in these analyses can be of any Hispanic origin.

Source: Department of Defense, Active Duty Master Personnel File; Reserve Components Common Personnel Data System (RCCPDS), 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- In 2010, approximately half of AIAN Servicemembers were age 24 or younger, while only 35 percent of all other Servicemembers were 24 or younger.
- The percentages of AIAN Servicemembers and all other Servicemembers between the ages of 25 and 34 were similar.
- Twelve percent of AIAN Servicemembers were in the 35-44 age group, while 20 percent of all other Servicemembers were in the same age group.

*Table 2. AIAN Active Duty, Reserve, and National Guard Servicemembers by Sex and Race*

| Sex | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| Male | 25,128 | 80.7 | 1,886,043 | 84.4 |
| Female | 6,027 | 19.3 | 349,487 | 15.6 |
| Unknown | 0 | 0.0 | 4 | 0.0 |
| Total | 31,155 | 100.0 | 2,235,534 | 100.0 |

Source: Department of Defense, Active Duty Master Personnel File; Reserve Components Common Personnel Data System (RCCPDS), 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- Nearly 20 percent of AIAN Servicemembers were female, while 15.6 percent of all other Servicemembers were female.

**Active Duty, Reserve, and National Guard Servicemembers by Branch of Service, Rank, and Length of Service**

*Table 3. Active Duty, Reserve, and National Guard Servicemembers by Branch of Service and Race*

| Branch of Service | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| Army | 4,683 | 15.0 | 557,296 | 24.9 |
| Army National Guard | 2,710 | 8.7 | 359,305 | 16.1 |
| Army Reserve | 1,385 | 4.4 | 203,896 | 9.1 |
| Air Force | 2,165 | 6.9 | 327,475 | 14.6 |
| Air Force Reserve | 364 | 1.2 | 69,755 | 3.1 |
| Air National Guard | 787 | 2.5 | 106,889 | 4.8 |
| Marine Corps | 2,216 | 7.1 | 200,396 | 9.0 |
| Marine Corps Reserve | 284 | 0.9 | 38,938 | 1.7 |
| Navy | 14,802 | 47.5 | 308,337 | 13.8 |

| | | | | |
|---|---|---|---|---|
| Navy Reserve | 1,759 | 5.6 | 63,247 | 2.8 |
| Total | 31,155 | 100.0 | 2,235,534 | 100.0 |

Source: Department of Defense, Active Duty Master Personnel File; Reserve Components Common Personnel Data System (RCCPDS), 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- Nearly 50 percent of AIAN Servicemembers served in the Navy. In comparison, 14 percent of all other Servicemembers served in the Navy.
- A lower percentage of AIAN Servicemembers served in the Army, Army National Guard, Army Reserve, and the Air Force compared with all other Servicemembers.

*Table 4. Active Duty, Reserve, and National Guard Servicemembers by Rank and Race*

| Rank | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| Enlisted | 29,214 | 93.8 | 1,876,993 | 84.0 |
| Officer | 1,941 | 6.2 | 358,541 | 16.0 |
| Total | 31,155 | 100.0 | 2,235,534 | 100.0 |

Source: Department of Defense, Active Duty Master Personnel File; Reserve Components Common Personnel Data System (RCCPDS), 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- Only 6 percent of AIAN Servicemembers were officers, while all other Servicemembers were officers at roughly 2.5 times that rate.

*Table 5. Active Duty, Reserve, and National Guard Servicemembers by Length of Service*

| Length of Service | AIAN Servicemembers | Percent | All Other Servicemembers | Percent |
|---|---|---|---|---|
| 0 to 2 years | 13,097 | 42.0 | 856,944 | 38.3 |
| 3 to 5 years | 8,459 | 27.2 | 445,662 | 19.9 |
| 6 to 10 years | 4,805 | 15.4 | 382,488 | 17.1 |
| 11 to 20 years | 3,450 | 11.1 | 360,584 | 16.1 |
| 20 or more years | 454 | 1.5 | 76,015 | 3.4 |
| Unknown | 890 | 2.9 | 113,841 | 5.1 |
| Total | 31,155 | 100.0 | 2,235,534 | 100.0 |

Source: Department of Defense, Active Duty Master Personnel File; Reserve Components Common Personnel Data System (RCCPDS), 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- Approximately 70 percent of AIAN Servicemembers served for five years or fewer, and roughly 27 percent served between six and 20 years.
- Among all other Servicemembers, 58 percent served five years or fewer, while 33 percent served between six and 20 years.
- The percentage of AIAN Servicemembers who served for 20 or more years is less than half that of all other Servicemembers.

Section III: Veteran Demographics

Overview

The following summary tables provide demographic information for AIAN Veterans and for Veterans of all other races combined. Specific demographic characteristics include age, sex, Period of Service (POS), and current state of residence.

All data in this section come from the 2010 American Community Survey (ACS). All Veterans 17 years and older living in the United States are included in this analysis.

For the purposes of this analysis, only Veterans who reported a single race of AIAN are included in this group. Veterans who reported AIAN in combination with any other race are classified along with all other Veterans in the category "All Other Races." Additionally, Veterans in this analysis can be of any Hispanic origin.

Veterans by Age and Sex

*Table 6. Veterans by Age and Race[18]*

| Age Group | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| 17 to 24 years | 3,305 | 2.1 | 343,416 | 1.6 |
| 25 to 34 years | 10,386 | 6.7 | 1,383,808 | 6.4 |
| 35 to 44 years | 20,946 | 13.6* | 2,188,407 | 10.1 |
| 45 to 54 years | 35,234 | 22.8* | 3,315,765 | 15.3 |
| 55 to 64 years | 42,542 | 27.6* | 5,297,053 | 24.5 |
| 65 to 74 years | 24,838 | 16.1* | 4,281,345 | 19.8 |
| 75 years and older | 17,054 | 11.1* | 4,811,086 | 22.3 |
| Total | 154,305 | 100.0 | 21,620,880 | 100 |

Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

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[18] The draft-era military was substantially larger than today's All-Volunteer Force, which began in 1973. The military was also racially segregated prior to the Korean War. These factors contribute to the large cohort of older White male Veterans who are in the "All Other Races" group.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- It is estimated that more than 154,000 Veterans identify themselves as solely AIAN, comprising 0.7 percent of almost 22 million Veterans.
- In 2010, AIAN Veterans were younger than Veterans of all other races combined.
- The median age of AIAN Veterans was 57, compared with 63 for all other Veterans.

*Table 7. Veterans by Sex and Race*

| Sex | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| Male | 137,335 | 89.0* | 20,061,353 | 92.8 |
| Female | 16,970 | 11.0* | 1,559,527 | 7.2 |
| Total | 154,305 | 100.0 | 21,620,880 | 100 |

Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- Almost 17,000 AIAN Veterans, roughly 11 percent, are female. The percentage of female Veterans for all races is about seven percent. This difference may be partly due to the military becoming more diverse in recent years, particularly among female Servicemembers. It is mainly explained, however, by the fact that the large category of "All Other Races" includes a large cohort of older Veterans who are predominately male and White.
- Female AIAN Veterans constitute 1.1 percent of all female Veterans, while all AIAN Veterans comprise 0.7 percent of the entire Veteran population.

Veterans by Period of Service

The ACS questionnaire allows Veterans to mark all periods that apply to their active- duty military service based on the established dates of wartime periods and peacetime periods. The ACS cannot capture information on whether a Veteran was deployed, or "in country," for a particular war. For the purposes of this analysis, Veterans who served in multiple wartime periods were categorized in their most recent period of service.

*Table 8. Veterans by Period of Service and Race*

| Period of Service | AIAN | Percent | All Other Races | Percent |
|---|---|---|---|---|
| Gulf War II (Sept. 2001 to present) | 17,570 | 11.4 | 2,261,573 | 10.5 |
| Gulf War I (Aug. 1990 to Aug. 2001) | 21,380 | 13.9* | 2,522,033 | 11.7 |

| Vietnam Era | 56,543 | 36.6* | 7,205,748 | 33.3 |
|---|---|---|---|---|
| Korean Conflict | 9,801 | 6.4* | 2,295,464 | 10.6 |
| World War II | 5,007 | 3.2* | 1,865,559 | 8.6 |
| Peacetime Only | 44,004 | 28.5* | 5,470,503 | 25.3 |
| Total | 154,305 | 100.0 | 21,620,880 | 100.0 |

Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- In 2010, the largest living cohort of Veterans, regardless of race, was the Vietnam Era. Over one-third of Veterans served during this period.
- Higher percentages of AIAN Veterans served in the more recent peacetime periods (29 percent) and the Pre-9/11 Gulf War period (14 percent), compared with Veterans of all other races (25 percent and 12 percent, respectively).  This is also true for the Vietnam Era.

Estimated Veteran Population by State

*Table 9. Estimated AIAN Veteran Population by State*

| State | Total | Percent | Male | Female |
|---|---|---|---|---|
| Alabama | 2,319 | 1.5 | 2,228 | 91 |
| Alaska | 5,469 | 3.6 | 4,647 | 822 |
| Arizona | 10,943 | 7.1 | 9,540 | 1,403 |
| Arkansas | 1,764 | 1.1 | 1,639 | 125 |
| California | 18,398 | 11.9 | 16,783 | 1,615 |
| Colorado | 2,800 | 1.8 | 2,515 | 285 |
| Connecticut | 608 | 0.4 | 608 | 0 |
| Delaware | 204 | 0.1 | 204 | 0 |
| District of Columbia | 119 | 0.1 | 119 | 0 |
| Florida | 6,337 | 4.1 | 5,080 | 1,257 |
| Georgia | 2,082 | 1.4 | 1,982 | 100 |
| Hawaii | 661 | 0.4 | 592 | 69 |
| Idaho | 1,213 | 0.8 | 1,118 | 95 |
| Illinois | 1,577 | 1.0 | 1,577 | 0 |
| Indiana | 2,112 | 1.4 | 1,995 | 117 |
| Iowa | 246 | 0.2 | 246 | 0 |

| | | | | |
|---|---|---|---|---|
| Kansas | 1,185 | 0.8 | 991 | 194 |
| Kentucky | 309 | 0.2 | 123 | 186 |
| Louisiana | 1,549 | 1.0 | 1,478 | 71 |
| Maine | 251 | 0.2 | 251 | 0 |
| Maryland | 1,168 | 0.8 | 928 | 240 |
| Massachusetts | 1,872 | 1.2 | 1,688 | 184 |
| Michigan | 6,029 | 3.9 | 4,984 | 1,045 |
| Minnesota | 3,707 | 2.4 | 3,245 | 462 |
| Mississippi | 1,297 | 0.8 | 1,250 | 47 |
| Missouri | 2,673 | 1.7 | 2,418 | 255 |
| Montana | 2,539 | 1.7 | 1,891 | 648 |
| Nebraska | 672 | 0.4 | 672 | 0 |
| Nevada | 1,722 | 1.1 | 1,541 | 181 |
| New Hampshire | 542 | 0.4 | 542 | 0 |
| New Jersey | 1,076 | 0.7 | 1,076 | 0 |

| | | | | |
|---|---|---|---|---|
| New Mexico | 10,219 | 6.6 | 9,127 | 1,092 |
| New York | 3,554 | 2.3 | 3,001 | 553 |
| North Carolina | 5,273 | 3.4 | 4,658 | 615 |
| North Dakota | 1,280 | 0.8 | 1,280 | 0 |
| Ohio | 2,446 | 1.6 | 2,156 | 290 |
| Oklahoma | 14,348 | 9.3 | 13,294 | 1,054 |
| Oregon | 3,403 | 2.2 | 3,272 | 131 |
| Pennsylvania | 1,775 | 1.2 | 1,720 | 55 |
| Rhode Island | 180 | 0.1 | 180 | 0 |
| South Carolina | 1,320 | 0.9 | 1,173 | 147 |
| South Dakota | 2,132 | 1.4 | 1,924 | 208 |
| Tennessee | 837 | 0.5 | 837 | 0 |
| Texas | 9,556 | 6.2 | 8,580 | 976 |
| Utah | 1,407 | 0.9 | 1,355 | 52 |
| Vermont | 174 | 0.1 | 174 | 0 |
| Virginia | 2,486 | 1.6 | 1,759 | 0 |
| Washington | 6,326 | 4.1 | 5,241 | 727 |
| West Virginia | 376 | 0.2 | 376 | 0 |
| Wisconsin | 3,305 | 2.1 | 2,907 | 398 |
| Wyoming | 465 | 0.3 | 370 | 95 |

| Total | 154,305 | 100.0 | 137,335 | 16,970 |

Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

- The states with the greatest number of AIAN Veterans are Arizona, California, New Mexico, and Oklahoma, with more than 10,000 AIAN Veterans estimated to reside in each of these states.
- In 2010, approximately half of all AIAN Veterans lived in just eight states: California (12 percent), Oklahoma (9 percent), Arizona and New Mexico (7 percent, respectively), Texas (6 percent), and Florida, Washington, and Michigan (4 percent, respectively).
- The three states with the highest proportion of all Veterans who were AIAN in 2010 were Alaska (8 percent), New Mexico (6 percent), and Oklahoma (5 percent). (Table not shown.)

Section IV: Veteran Socioeconomic Status

Overview

Income, educational attainment, and employment figures can be useful indicators of socioeconomic welfare. While they are clearly not the only indicators of wellbeing, they are valuable measures of socioeconomic status. These data enable the Department of Veterans Affairs to plan needed services and benefits for the Veteran population.

All data in this section come from the 2010 American Community Survey (ACS).  All Veterans 17 years and older living in the United States are included in this analysis.

Income for Veterans

In the ACS data, "total personal income" is defined as the sum of wage or salary income; net self-employment income; interest, dividends, or net rental or royalty income or income from estates and trusts; Social Security or Railroad Retirement income; Supplemental Security Income; public assistance or welfare payments; retirement, survivor, or disability pensions; and any other sources of income received regularly such as VA compensation payments, unemployment compensation, child support or alimony.

Data for personal income are shown for all individual race groups by Hispanic origin, rather than for AIAN alone and all other races combined, as in other sections of this report. This allows for a more complete picture of how AIAN Veterans compare to other minority race groups. In Chart 1, the category "Other NH" includes Veterans who reported themselves as "Some Other Race" or who chose more than one race category and who are non-Hispanic.

*Chart 1: Median Income by Race and Hispanic Origin*
(in 2010 inflation-adjusted dollars)
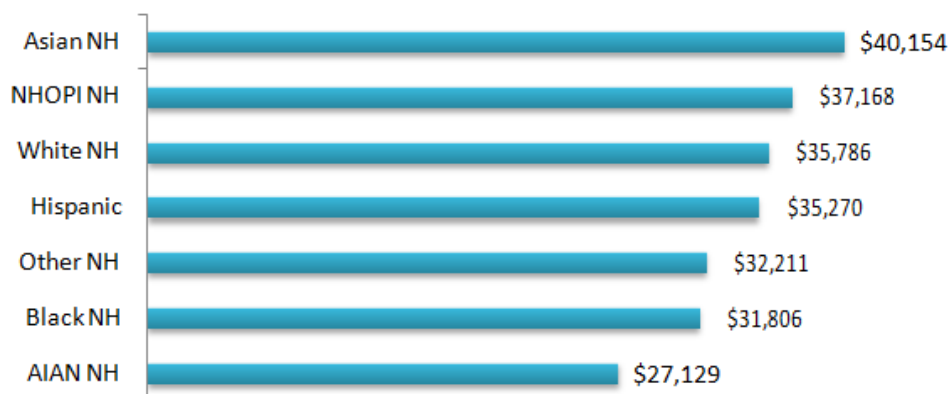
Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

NH = Non-Hispanic, NHOPI = Native Hawaiian and Other Pacific Islander

- In 2010, AIAN non-Hispanic ($27,129) and Black non-Hispanic ($31,806) Veterans had the lowest median personal incomes.[19] Asian non-Hispanic and Native Hawaiian and Other Pacific Islander non-Hispanic Veterans had the highest median personal incomes.[20]

Educational Attainment of Veterans

Educational attainment refers to the highest level of education an individual has completed.  In this analysis, individuals who have completed some college credit, but no degree, or have completed an Associate's degree are classified as "Some College."  The category "Advanced Degree" refers to Master's, PhD, JD, MD, or other professional degree.

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[19] The median personal incomes of AIAN non-Hispanic and Black non-Hispanic Veterans were not statistically different.

[20] The median personal incomes of Asian non-Hispanic and NHOPI non-Hispanic Veterans were not statistically different.

*Chart 2: Educational Attainment of Veterans by Race*
(in percent)
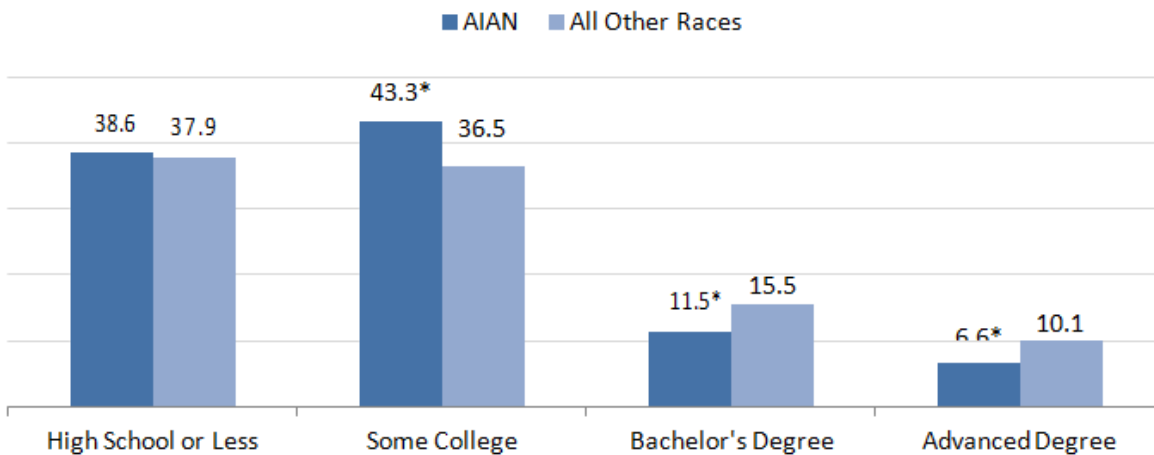


Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- While a higher percentage of AIAN Veterans had completed some college credit (43 percent compared with 36 percent), a lower percentage had finished a Bachelor's degree or higher (18 percent compared with 26 percent).

Employment Status of Veterans

The ACS asks respondents a series of six questions to determine their current employment status. Individuals are classified as "employed" if they responded that they worked for pay at a job or business in the last week or if they were temporarily absent from their regular job in the last week. Individuals are classified as "unemployed" if they meet all of the following criteria: (1) They were neither "at work" nor "with a job but not at work" during the reference week. (2) They were looking for work during the last four weeks. (3) They were available to start a job. All other individuals who were not at work and not looking for work are classified as "not in the labor force." Note that the percentage of Veterans who were unemployed is not the same thing as the unemployment rate of Veterans.

*Chart 3: Employment Status of AIAN Veterans*
(in percent)
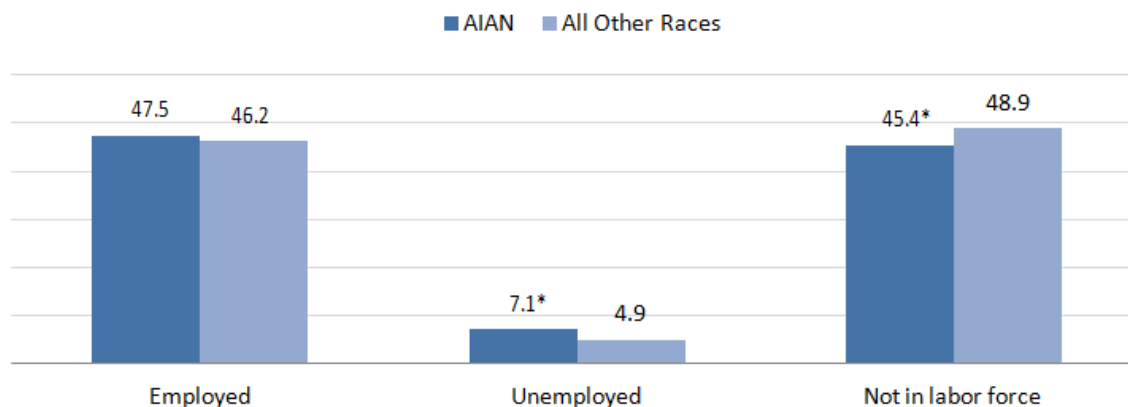


Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.
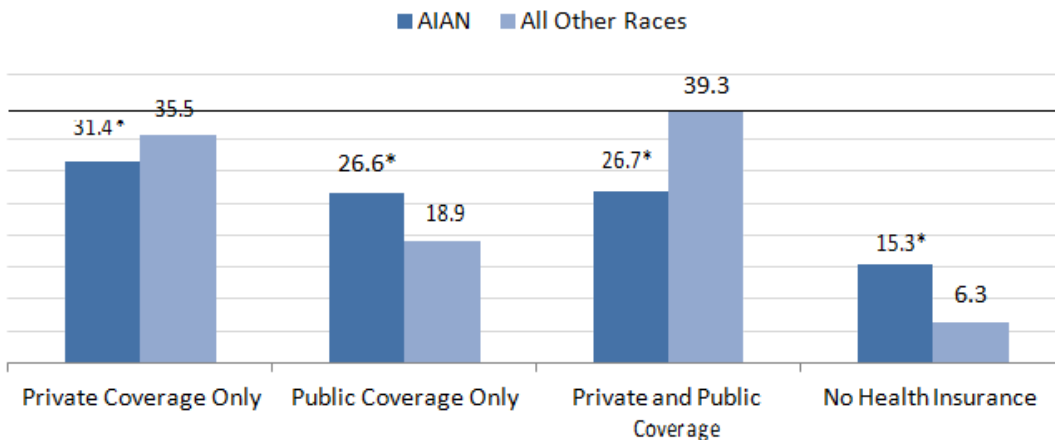
An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- In 2010, there was no statistically significant difference in the proportion of AIAN Veterans and all other race Veterans who were employed. A higher percentage of AIAN Veterans 17 years and older were unemployed compared with all other Veterans (7 percent compared with 5 percent).
- In 2010, a lower percentage of AIAN Veterans (45 percent) were not in the labor force, compared with all other Veterans (49 percent).
- A higher percentage unemployed suggests AIAN Veterans were more likely to be actively looking for a job compared with all other Veterans. Given that AIAN Veterans are younger than all other races of Veterans combined, this could explain why they were still in the labor force.

**Section V: Veteran Health Status**

Overview

The following tables examine the percentage of AIAN Veterans who use VA health care; what type(s) of insurance they have, if any; the percentage with a disability; and the percentage with a service-connected disability rating. These figures provide insight into the post-military health status of AIAN Veterans and their use of health care provided by VA.

VA Health Care Usage

The ACS questionnaire asks respondents about the type(s) of health care coverage they had in the past year. The question reads "Is this person CURRENTLY covered by any of the following types of health insurance or health coverage plans?" One of the possible responses is "VA (including those who have

ever used or enrolled for VA health care)." For the purposes of this analysis, Veterans who answered "yes" to this category are considered to be users of VA health care.

It should be noted that the estimates from ACS differ from usage statistics reported by VA because of the differences in definitions and the limitations of the survey data.

*Chart 4: Use of VA Health Care by Race*
(in percent)
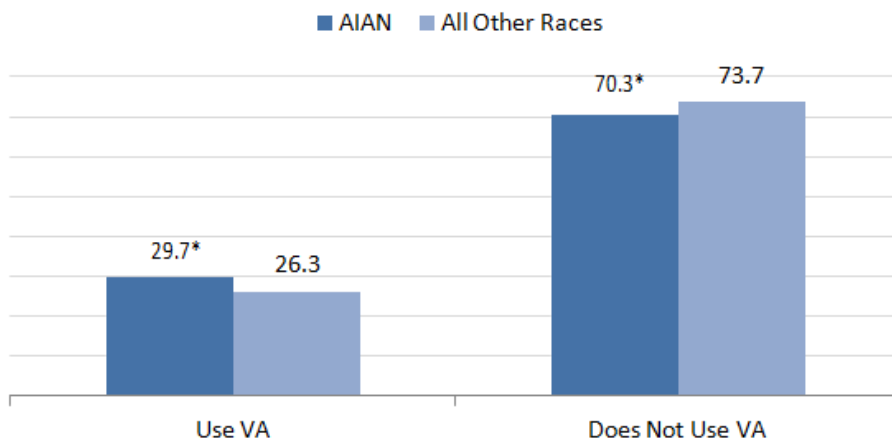


Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- A higher percentage of AIAN Veterans (30 percent) used VA health care in 2010, compared with Veterans of all other races (26 percent). The percentage who did not use VA health care included the uninsured population.

Health Insurance Coverage of Veterans

The ACS questionnaire asks respondents to choose from a list of different health care insurance plans. These plans can be categorized as "private" or "public." Private health insurance includes plans provided through an employer or a union or purchased by an individual from a private company. Public health insurance includes such federal programs as Medicare, Medicaid, and military health care; and individual state health plans. Veterans were considered uninsured (i.e., "No Health Insurance") if they indicated they were not covered by any type of health insurance during the year. Individuals whose only source of health coverage is Indian Health Service are considered uninsured in ACS.

*Chart 5: Health Insurance Coverage of Veterans by Race*
(in percent)



Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010.
Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- A higher percentage of AIAN Veterans (27 percent) were covered only by public plans in 2010, compared with all other Veterans (19 percent).
- The percentage of AIAN Veterans with no health insurance (15 percent) was over twice that of all other race Veterans (6 percent).
- The majority of uninsured AIAN Veterans (53 percent) reported using Indian Health Services (IHS) as their only source of health care. As previously stated, IHS alone is considered a health system, but not health coverage in ACS.

Disability Status of Veterans

The ACS identifies disability as serious difficulty with any of six basic areas of functioning and limitations in activities – hearing, vision, cognition, and ambulation, difficulty bathing and dressing, and difficulty performing errands such as shopping.  Any Veteran who answered yes to having serious difficulties with one or more of the disabilities listed above is considered to have a disability.

*Chart 6: Disability Status of Veterans by Race*
(in percent)
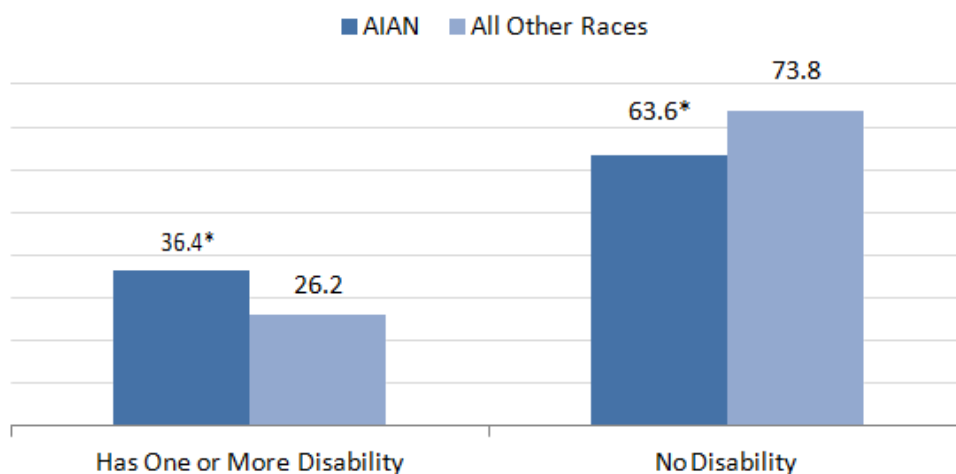


Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- A higher percentage of AIAN Veterans have a disability, compared with all other Veterans (36.4 percent versus 26.2 percent).

Service-Connected Disability Status of Veterans

Service-connected disabilities are evaluated according to the Department of Veterans Affairs (VA) Schedule for Rating Disabilities in Title 38, U.S. Code of Federal Regulations, Part 4. "Service-connected" means the disability was a result of disease or injury incurred or aggravated in line of duty during active military service. Ratings are graduated according to the degree of the Veteran's disability on a scale from 0 to 100 percent, in increments of 10 percent. Zero percent is a valid rating and is different than having no rating at all. A zero-percent rating means a disability exists and is related to the Veteran's service; however, it is not so disabling that it entitles the Veteran to compensation payments.

Beginning in 2008, the ACS questionnaire added the question "Does this person have a VA service-connected disability rating?" The question does not ask whether or not the Veteran is being compensated for this rating. Estimates of service-connected disability from ACS differ from compensation statistics reported by VA because of the differences in definitions and the limitations of the survey data.

It should also be noted that service-connected disability ratings are not necessarily correlated with having a disability, as defined in the previous section. Veterans can receive a service-connected disability rating for a wide variety of conditions.  Caution should be used when trying to compare disability status (Chart 6) and service- connected disability status (Chart 7).

*Chart 7: Service-Connected Disability Status of Veterans by Race*
(in percent)
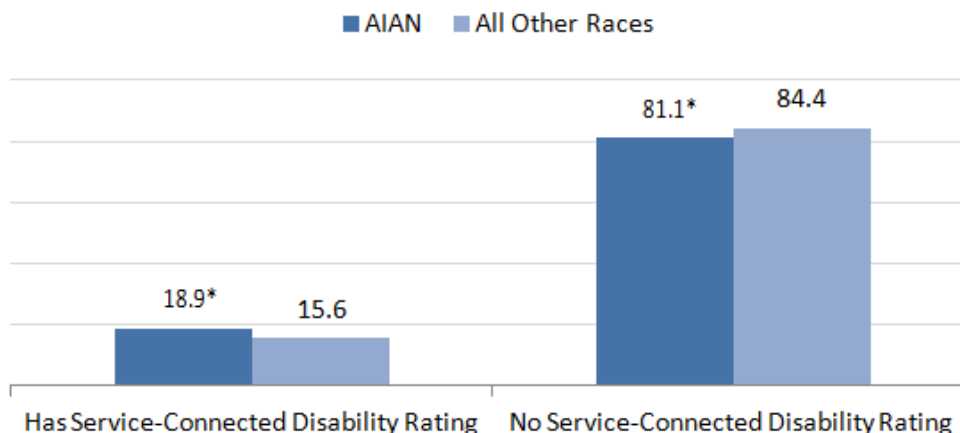


Source: U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veterans Analysis and Statistics.

An asterisk (*) denotes a statistically significant difference between the percentages for AIAN Veterans and Veterans of all other races. Statistical testing assessed significance at the 90 percent confidence level.

- About 19 percent of AIAN Veterans had a service-connected disability rating in 2010, compared with 16 percent of Veterans of all other races.

Appendix A. Data Sources

Census Bureau

- American Community Survey 2010 Public Use Microdata Sample

The American Community Survey (ACS) is an annual household survey that provides data on the demographic, social, and economic characteristics of the U.S. population. It collects data annually on topics such as race, age, income, health insurance, education, Veteran status, and disability. Demographic and socio-economic tables in this report were produced from the ACS 2010 Public Use Microdata Sample (PUMS). ACS respondents had the choice of selecting one or more races for the survey.  AIAN estimates reflect data from those respondents who only selected AIAN and did not select more than one race. Statistics from the ACS 2010 PUMS are estimates and should not be construed to be exact figures.

Department of Defense

Defense Manpower Data Center (DMDC) provided data from the following sources:

- Active Duty Master Personnel File
- Reserve Components Common Personnel Data System (RCCPDS)

Appendix B. Acronyms

| | |
|---|---|
| ACS | American Community Survey |
| AIAN | American Indian and Alaska Native |
| DMDC | Defense Manpower Data Center |
| DoD | Department of Defense |
| NHOPI | Native Hawaiian and Other Pacific Islander |
| OEF | Operation Enduring Freedom |
| OIF | Operation Iraqi Freedom |
| OND | Operation New Dawn |
| POS | Period of Service |
| PUMS | Public Use Microdata Sample |
| RCCPDS | Reserve Components Common Personnel Data System |
| VA | Department of Veterans Affairs |

Appendix C. References

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# Appendix E: Memorandum of Understanding Between the Department of Veterans Affairs (VA) and Indian Health Service (IHS)

Memorandum of Understanding Between the Department of Veterans Affairs (VA) and Indian Health Service (IHS)

I.      Purpose: The purpose of this Memorandum of Understanding (MOU) is to establish coordination , collaboration, and resource-sharing between the Department of Veterans Affairs (VA) and Indian Health Service (IHS} to improve the health status of American Indian and Alaska Native Veterans. The goal of the MOU is to foster an environment that brings together the strengths and expertise of each organization to actively improve the care and services provided by both. The MOU establishes mutual goals and objectives for ongoing collaboration between VA and IHS in support of their respective missions and to establish a common mission of serving our nation's American Indian (AI} and Alaska Native (AN) Veteran.The MOU is intended to provide authority for a broad range of collaboration between the agencies that facilitate development of additional agreements around specific activities. It is the intent of this MOU to facilitate collaboration between IHS and VA, and not limit initiatives, projects, or interactions between the agencies in any way. The MOU recognizes the importance of a coordinated and cohesive effort on a national scope, while also acknowledging that the implementation of such efforts requires local adaptation to meet the needs of individual tribes, villages, islands, and communities, as well as local VA. IHS, Tribal, and Urban Indian health programs.

II.     Authority: The Indian Health Care Improvement Act, 25 U.S.C. Sections 1645, 1647; 38 U.S.C. Sections 523(a}, 6301-6307, 8153

III.    Background: The mission of the Indian Health Service, in partnership with American  Indian and Alaska Native people, is to raise their physical, mental, social and spiritual health to the highest level. The goal of IHS is to ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to all American Indian and Alaska Native people. The foundation of IHS is to uphold the Federal Government's obligation to promote healthy American  Indian and Alaska Native people, communities, and cultures and to honor and protect the inherent sovereign rights of Tribes.

The mission of the Department of Veterans Affairs is to "care for him who shall have borne the battle and his widow and orphan." Those words were spoken by Abraham  Lincoln during his second inaugural address and reflect the philosophy and principles that guide VA in everything it does.

IHS and VA enter into this MOU to further their respective missions. This MOU builds upon decades of successful collaboration, as well as the 2003 MOU signed between IHS and VA. This MOU also conforms to the most current legislation.   It is the intent of this MOU that, through appropriate coordination, collaboration, and resource sharing, both organizations will achieve greater success in reaching their organizational goals and in more effectively serving as stewards of public resources.

IV.     Actions:

A. This MOU sets forth 5 mutual goals:
1. Increase access to and improve quality of health care and services to the mutual benefit of both agencies. Effectively leverage the strengths of the VA and IHS at the national and local levels to afford the delivery of optimal clinical care.
2. Promote patient-centered collaboration and facilitate communication among VA, IHS, American Indian and Alaska Native Veterans, Tribal facilities, and Urban Indian Clinics.
3. In consultation with tribes at the regional and local levels, establish effective partnerships and sharing agreements among VA headquarters and facilities, IHS headquarters and IHS, Tribal, and Urban Indian health programs in support of American Indian and Alaska Native Veterans.
4. Ensure that appropriate resources are identified and available to support programs for American Indian and Alaska Native Veterans.
5. Improve health-promotion and disease-prevention services to American Indians and Alaska Natives to address community-based wellness.

B. To further the goals of this MOU, VA and IHS agree to actively collaborate and coordinate:

1. To increase access to services and benefits of IHS and VA (including the Veterans Benefits Administration (VBA)) for AI/AN Veterans, by:
    a. Expanding the highly successful Tribal Veterans Representative (TVR) program into the Indian health system, through integration into existing infrastructure.
    b. Providing systematic training for Benefits Coordinators at IHS, Tribal, and Urban programs in eligibility requirements for VBA benefits and priority designations for VA services and tools to assist them with appropriate referrals for benefits and services.
    c. Providing systematic training for appropriate VA staff on IHS services and IHS Contract Health Services (CHS} eligibility and tools to assist them with appropriate referrals for services.

2. To improve coordination of care, including co-management, for AllAN Veterans served by both IHS, Tribal, or Urban Indian health programs and VA by:
    a. Developing and testing of innovative approaches to improve coordination of care and dissemination of best practices.
    b. b. Establishing standardized mechanisms for access by providers in one system to the electronic health records in the other system for patients receiving care in both systems.

3. To improve care through the development of health information technology, including the following:
    a. Sharing of technology
        i. Joint development of applications and technologies.
        ii. Adaptation of applications and technologies developed by one agency to permit use by the other.
        iii. Mechanisms for the exchange of funds to support this adaptation and sharing.
    b. Interoperability of systems to facilitate sharing of information on common patients and populations
    c. The VA and IHS will develop processes to share information regarding planned development of applications and technologies to facilitate this collaboration.

    d.   The VA and IHS will develop standard, pre-approved language for inclusion in sharing agreements to support this collaboration.

4.   To enhance access through the development and implementation of new models of care using new technologies, including:
    a.   Tele-health services such as tale-psychiatry and tele-pharmacy.
    b.   Services using mobile communication technologies.
    c.   Enhanced telecommunications  infrastructure to support collaboration in remote areas.
    d.   Sharing of training programs and materials supporting these models of care.
    e.   Sharing of knowledge gained from testing of new models of care.

5.   To improve efficiency and effectiveness of both the VA and IHS at a system level through:
    a.   Sharing of contracts and purchasing agreements that may be advantageous to both IHS and VA, supported by the development of:
        i.    Standard, pre-approved language for inclusion of one party into contracts and sharing agreements developed by the other.
        ii.   Processes to share information at an early stage of strategic planning to facilitate inclusion of one party into contracts and sharing agreements developed by the other.
    b.   Development of pre-approved templates for agreements to facilitate local, regional, and national collaborations.
    c.   Development of standard policies for use when IHS and VA facilities are co- located.

6.   To increase availability of services, in accordance with law, by the development of payment and reimbursement policies and mechanisms to:
    a.   Support care delivered to eligible AIIAN Veterans served at VA and IHS.
    b.   Facilitate the sharing and coordination of services, training, contracts, and sharing agreements, sharing of staff, and development of health information technology and improved coordination of care as specified elsewhere in this agreement.

7.   To improve the delivery of care through active sharing of care process, programs, and services with benefit to those served by both IHS and VA.
    a.   Examples of important collaborations currently underway include:•the Consolidated Mail Outpatient Pharmacy, Post-Traumatic Stress Disorder, Home-Based Primary Care, and dementia care. but many additional opportunities exist and should be jointly  pursued under this agreement. Especially valuable may be services where one party has unique expertise to share with the other, e.g. VA expertise in PTSD treatment and IHS expertise in diabetes management.
    b.   To facilitate this sharing, IHS and VA will, in consultation with the Tribes, develop a strategic investment plan to identify high priority services and programs for collaboration and for possible joint investment of resources.

8.   To increase cultural awareness and culturally competent care for VA and IHS beneficiaries. Recognizing that many cultures are represented in the populations served by IHS, Tribal and Urban Indian health programs and by VA, this will require:
    a.   Attention to cultural issues of importance in caring for American Indians and Alaska Native Veterans in the unique systems of care represented by VA and by IHS, Tribal, and Urban Indian health programs.

        b.   Attention to cultural issues of importance for the local Tribes and communities served.

  9.  To increase capability and improve quality though training and workforce development, including:
        a.   Sharing of educational and training opportunities and the development of joint training initiatives.
        b.   Provision of continuing education units (CEUs) and continuing medical education (CMEs) activities at VA training to Indian health staff and at Indian health training to VA staff.
        c.   Education of residents, students, preceptors, and staff in IHS, Tribal, Urban and VA settings.
        d.   Sharing and exchange of staff for training opportunities.
        e.   Sharing of existing on-line and satellite training resources.
        f.   Collaboration on development of training opportunities.
        g.   Development of processes to share information regarding planned or projected training opportunities to facilitate this collaboration.

  10.  To increase access to care through sharing of staff and enhanced recruitment and retention of professional staff, including:
        a.   Sharing of specialty services.
        b.   Joint credentialing and privileging of staff.
        c.   Joint training initiatives.
        d.   Sharing materials and training in the use of Title 38 wage and benefits system.    •
        e.   Joint facility/service planning.
        f.   Facilitation of the temporary assignment of Commissioned Officers to the VA
          i.   For short-term training and projects.
         ii.   For long-term training and service delivery
        iii.   For deployment through existing rapid deployment force (RDF) programs and other Pu lic Health Service emergency staffing systems to meet the needs of the VA in responding to public health crises of a regional and national nature.

  11.  To address emergency, disaster, and pandemic preparedness and response, including:
        a.   Sharing of contingency planning and preparedness efforts, especially with regard to rural and vulnerable populations.
        b.   Joint development of materials targeting AIIAN Veterans and their families and communities.
        c.   Joint exercises and coordination of emergency response.

  12.  To accomplish the broad and ambitious goals of this agreement through the development of a joint Implementation Task Force to identify the strategies and plans for accomplishing the tasks and aims of this agreement, including:
        a.   Development of joint workgroups for both short-term and ongoing work necessary to accomplish the aims of this agreement.
        b.   Regular meeting of IHS and VA leadership at multiple levels in the organizations to review progress and set priorities.
        c.   An annual report of activities accomplished under the auspices of this agreement.

  V.      Other Considerations:

        A.   VA and IHS will comply with all applicable Federal laws and regulations, including those regarding the confidentiality of health information and the release of information to the public.

For example, Medical records of IHS and VA patients are Federal records and are subject to some or all of the following laws: the Privacy Act, 5 U.S.C. 552a; the Freedom of Information Act, 5 U.S.C. 552; the Drug Abuse Prevention, Treatment, and Rehabilitation Act, 21 U.S.C. 1101, the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act, 42 U.S.C. 4541, the Health Insurance Portability and Accountability Act of 1996,42 U.S.C.1301, VA's Confidentiality of Certain Medical Records, 38 U.S.C. 7332; Confidential Nature of Claims, 38 U.S.C. 5701; Medical Quality Assurance Records Confidentiality, 38 U.S.C. 5705, and Federal regulations promulgated to implement those acts.

B.  Care rendered under this MOU will not be part of a study, research grant, or other test without the written approval of both IHS and VA, subject to all appropriate IHS and VA research protocols.

C.  VA and IHS agree to cooperate fully with each other in any investigations, negotiations, settlements or defense in the event of a notice of claim, complaint, or suit relating to care rendered under this MOU.

D.  No services under this MOU will result in any reduction in the range of services, quality of care or established priorities for care provided to the Veteran population or IHS service population. Rather the intent of this MOU is to increase the efficiency of services rendered by VA and IHS.

E.  VA will provide IHS employees with access to VA automated patient records maintained on VA computer systems to the extent permitted by applicable Federal confidentiality and security laws and policies. Additionally, IHS will likewise provide VA employees access to Veteran IHS records to the same extent permitted by applicable Federal confidentiality and security laws and policies.

F.  Both parties to this MOU are Federal agencies and their employees are covered by the Federal Tort Claims Act, 28 U.S.C §§1346{b), 2671-2680, in the event of an allegation of negligence. It is agreed that any and all claims of negligence attributable to actions taken pursuant to this MOU will be submitted to legal counsel for both parties for investigation and resolution.

G.  This MOU replaces and supersedes the MOU signed by the Department of Veterans Affairs and the Department of Health and Human Services on February 25, 2003.

VI. Termination: This MOU can be terminated by either party upon issuance of written notice to the other party not less than 30 days before the proposed termination date. The 30 days notice may be waived by mutual written consent of both parties involved in the MOU.

VII. Effective Period: VA and IHS will review the MOU annually to determine whether terms and provisions are appropriate and current.

VIII. Severability:  If any term or condition of this MOU becomes invalid or unenforceable, such term or provision shall in no way affect the validity or enforceability of any other term or provision contained herein.

For the Department of Veterans Affairs: Robert A. Petzel, Undersecretary of Health
For the Department of Health and Human Services: Yvette Roubideaux

# Appendix F: Office of Tribal Government Relations, FY 13 Training Meetings

Office of Tribal Government Relations
FY 13 Training Meetings

**April 2013**

- April 9-10, 2013 Western Region Training Meeting Pala, CA

- April 30- May 1, 2013 Central Region Training Meeting, Rapid City, SD

**May 2013**

- May 8-9, 2013 Eastern Region Training Meeting, Cherokee, NC

**June 2013**

- June 18, 2013 Southwest Region Training Meeting, Tuba City, AZ

**September 2013**

- September 19-20, 2013 Southwest Region Training Meeting, Salt River, AZ

## Appendix G: Western Region Veterans Benefit Summit, Pala, CA, April 9-10, 2013

**VA Office of Tribal Government Relations**

Western Region Veterans Benefit Summit
Pala Casino Spa & Resort – Pala, CA

**April 9-10, 2013**



**U.S. Department of Veterans Affairs
Office of Tribal Government Relations
810 Vermont Avenue, NW
Washington, DC  20420**

*HOTEL ACCOMODATIONS:*

*Pala Casino, Phone: 877-725-2766, - $99.00 for deluxe room, no taxes.  Rooms are reserved under:  Veterans Benefits Regional Summit (code VETD13A)*

*Website:  http://palacasino.com/*

*Limited shuttle service is available from the VA San Diego International Airport upon request.  Please contact Terry.Bentley@va.gov*

*Conference Objectives:*
The goal of these meetings is to invite tribal leadership from within the Western Region (OR,WA,ID,NV,CA,AK), as well as, other federal and state partners who work with American Indians and Alaska Native Veterans for services and benefits to collaborate, educate, and network to better serve this population.

Specifically, OTGR's goals are to:
7)  Increase Veteran access to healthcare and benefits;
8)  Economic Sustainability:
    a.  Increase utilization of Native American Direct Home Loan Program
    b.  Increase utilization of Post 9/11 GI Bill
    c.  Increase utilization of Vocational Rehabilitation Program
    d.  Increase access to Compensation and Pension
    e.  Increase access to federal employment opportunities
    f.  Facilitate greater involvement by tribes and Native American Veterans in small business development and federal contracting opportunities
9)  Tribal Consultation

*Target Audience*:  Tribal Veterans, Tribal Leaders, Tribal Health Directors and those who serve or care for Veterans in Indian Country.

*Registration Required*:  No cost for registration. However, please email your name, title, organization or tribe to:  Terry.Bentley@va.gov

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## Office of Tribal Government Relations

**Conference Agenda**
**VA OTGR Western Region (OR,WA,ID,NV,CA,AK)**
**Pala Casino Spa & Resort, 11154 Highway 76, Pala, CA**

| Healthcare | Break out session specific to healthcare |
|---|---|
| Housing/Homelessness | Break out session specific to housing and homeless |
| Tribal Veteran Representatives (TVR) | Break out session specific to TVR |

## TUESDAY, April 9, 2013

| Time | | |
|---|---|---|
| 7:30am - 5:00 pm | **Registration throughout the day – At Entrance to Ballroom1B**<br>**Please take individual breaks throughout the day as needed.** | |
| 8:15 am - 8:45 am | **Opening Ceremonies:**<br>**Welcome Address/Moderator: Terry Bentley and Cindy Sullivan**<br>**Post Colors & Flag Song: Pala Color Guard**<br>**Invocation: Angelo Lavato**<br>**Welcoming Remarks: Chairman Robert Smith, Pala Band of Mission Indians** | |
| 8:45 am - 9:15 am | **Overview of OTGR & Welcome / Goals for Meeting:**<br>**Stephanie Birdwell, Director, Office of Tribal Government Relations**<br>**Margo Kerrigan, California Area Director of IHS**<br>**Terry Bentley, OTGR Western Region Specialist** | |
| 9:15 am - 10:00 am | **Coordination of Benefits**<br>**Dave Sprenger, M.D.**<br>**California Area – IHS Office** | |
| 10:00 am - 11:15 am | **History & Benefit of the Tribal Veteran Representative (TVR) Program:**<br>**Susan Yeager, VA Alaska Healthcare System** | |
| 11:15 am - 11:30 am | **Don Loudner, Crow Creek Sioux Tribe of South Dakota** | |
| 11:30 am - 1:00 pm | **Lunch Break (on your own)**<br>**Afternoon Workshops (see specific agenda's on pages 3-5)** | |
| 1:00 pm - 5:00 pm | **Healthcare**<br>**Ballroom 2A** | **Tribal Veteran Representatives**<br>**Ballroom 2B** |
| 5:00 pm - 6:00 pm | **Gourd Dance Session** | |

*Exhibits/Vendors - Ballroom 1B*

Co-sponsored by the following:



## WEDNESDAY, April 10, 2013

| | |
|---|---|
| 8:00 am – 12:00 pm | Registration – At Entrance to Ballroom1A |
| 8:30 am – 12:00 pm | Continue Workshops (see specific agenda's on pages 3-5) |
| 8:30 am – 12:00 pm | Healthcare **Ballroom 1A** / Housing / Homelessness **Ballroom 2B** |
| 12:00 pm – 1:00 pm | Lunch Break (on your own) |
| 1:00 pm - 2:00 pm | Contract Health Services and Catastrophic Health Emergency Fund Margo Kerrigan, California Area Director of IHS |
| 2:00 pm – 2:30 pm | Facilitators of Breakout Sessions Provide an Update/Overview to General Assembly |
| 2:30 pm – 4:00 pm | Listening Session with Tribes and other Attendees Question & Answer with Panel Members: John Garcia, Deputy Assistant Secretary, Office of Intergovernmental Affairs Stephanie Birdwell, Director, Office of Tribal Government Relations Margo Kerrigan, California Area IHS Director Jeff Gering, Director, VA San Diego Healthcare System Joann Chambers, Director, VBA San Diego Regional Ofc Patrick Zondervan, Service Center Manager, VBA San Diego Regional Ofc Chairman Robert Smith, Pala Band of Mission Indians |
| 4:00 pm – 4:15 pm | Closing Prayer – Angelo Lavato Retiring of the Colors – Pala Color Guard / Honor Song |
| 4:15 pm – 5:00 pm | VHA, VBA, NCA staff available for one-on-one questions and Veteran assistance |
| 5:30 pm – 8:00 pm | Dinner Buffet in the Infinity room $40.00 per person – contact Terry.Bentley@va.gov to confirm Master of Ceremony – Richard Garcia, American Indian Veteran Association Entertainment Provided by Wayne Nelson & Guy Trujillo – Bird Singers Guest Speaker – Joey Strickland, Arizona State Department of Veteran Affairs |

*Exhibits Open* (displayed vertically in the left middle column)

Co-sponsored by the following:

**TUESDAY, April 9, 2013 – Healthcare Workshop**
**Ballroom 1A**

| | |
|---|---|
| 1:00 pm – 5:00 pm | **Healthcare WORKSHOP** |
| 1:00 pm – 1:15 pm | Terry Bentley, OTGR Western Region – Co-Facilitator<br>Margo Kerrigan, California Area IHS Director – Co-Facilitator<br>Round Table Introductions |
| 1:15pm – 2:45pm | Recognizing Post Traumatic Stress Disorder (PTSD), Understanding PTSD, Trans-Generational PTSD, Military Sexual Trauma, OEF/OIF/OND:<br>Dr. Sonya Norman, VA San Diego & Dr. Sprenger California IHS |
| 2:45 pm - 3:15 pm | Insight into VA/IHS MOU & VA-THP Reimbursement Agreements:<br>Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Margo Kerrigan, California Area IHS Director<br>Romelle Majel-McCauley, Indian Health Council |
| 3:15 pm – 3:45pm | OEF/OIF/OND Reintegration<br>Kym Grey, VA San Diego |
| 3:45 pm – 4:15 pm | Diabetes Management:<br>Kathleen O'Hanlon, MSN, VA San Diego & Dan Calac, M.D. California Area IHS |
| 4:15 pm – 5:00 pm | Overcoming Barriers in Serving AI/AN Veterans<br>Sky Road Webb, Tribal Veterans Advocate-Tribal Council of California, Inc.<br>Louis Bickford, National Director, 1st Nations VSO<br>Cedric Decory, Native American Special Emphasis Program Manager, Boise, VAMC |

**TUESDAY, April 9, 2013 – Tribal Veterans Representatives**
**Ballroom 2B**

| | |
|---|---|
| 1:00 pm – 5:00 pm | **Tribal Veteran Representatives (TVR) WORKSHOP** |
| 1:00 pm – 1:15 pm | Louie Bickford, 1st Nations Veterans Service Organization, Co-Facilitator<br>Susan Yeager, VA Alaska Healthcare System – Co-Facilitator<br>Round Table Introductions |
| 1:15 pm – 2:00 pm | Social Security Administration (SSA) 101:<br>Yolanda York, SSA Public Affairs Director, San Diego, CA |
| 2:00 pm – 2:15 pm | How to Request a Headstone, Marker, Medallion:<br>Tom Mullen, Acting Director, Rosecrans/Miramar National Cemetery |
| 2:15 pm – 2:45 pm | Vet Center Programs & Services:<br>Travis Riley, B.A., Global War on Terrorism Outreach Specialist<br>San Marcos Vet Center |
| 2:45 pm – 3:15 pm | VA 101 Healthcare – Eligibility/Enrollment/Billing Overview:<br>Clarence Sellers, Tap Coordinator, VA San Diego, CA |
| 3:15pm - 3:45pm | Department of Labor: Veterans Employment & Training Service<br>Maarla Sullivan, Assistant Director, DOL, San Diego, CA |

| 3:45 pm – 5:00 pm | **Veterans Benefits Q&A:** <br> **Post 9/11 GI Benefits, Vocational Rehabilitation & Employment Program** <br> **Disability Benefits Questionnaires (DBQ)'s** <br> **E-Benefits/Submitting Veterans Benefit Claim & Appeals** <br> Joanne Postle, VA Regional Office, San Diego, CA <br> Kadell Felton, VA Regional Office, San Diego, CA <br> John Quichocho, VA Regional Office, San Diego, CA |
|---|---|

### WEDNESDAY, April 10, 2013 – Healthcare Workshop
### Ballroom 1A

| 8:30 am – 12:00 pm | **HEALTHCARE WORKSHOP** |
|---|---|
| 8:30 am – 8:45 pm | Terry Bentley, OTGR Western Region – Co-Facilitator <br> Margo Kerrigan, California Area IHS Director – Co-Facilitator <br> Round Table Introductions |
| 8:45 am – 9:15 am | Suicide Prevention: <br> Dawn Miller & Lindsay Gold – VA San Diego & Dr. Sprenger, California IHS |
| 9:15 am – 9:45 am | Women Veterans: <br> Jennifer Roberts, VA San Diego |
| 9:45 am – 10:15 am | Telehealth <br> Judith Jensen, Home Care Director, VA Loma Linda, CA |
| 10:15 am – 10:45 am | Substance Use Disorders/Residential Rehabilitation Treatment Programs <br> (Domiciliary Programs): <br> Shannon Robinson & Martha Carlson, VA San Diego |
| 10:45am – 11:15am | Veterans Justice Outreach: <br> Kristi Woodward, LICSW, Veterans Justice Outreach Specialist, VA Palo Alto, CA <br> Joy Villavicencio & Angela Simoneau, Veterans Justice Outreach, VA San Diego |
| 11:15 am – 11:45 pm | Blind Rehabilitation Program / Visual Impairment Services Team <br> Anthony Candela & Robert Kozel, VA Long Beach, CA |

### WEDNESDAY, April 10, 2013 – Housing / Homelessness Workshop
### Ballroom 2B

| 8:30 am – 12:00 pm | **Housing / Homelessness WORKSHOP** |
|---|---|
| 8:30 am – 8:45 pm | HoMana Pawiki, VA OTGR (AZ,CO,NM,UT) Facilitator <br> Round Table Introductions |
| 8:45 am – 9:30 am | VHA Services for Housing/Homelessness/HUD-VASH/ <br> Treatment/Preventions: <br> Yolanda Sidoti, VA San Diego |
| 9:30 am – 10:00 am | Native American Veteran Direct Loan Program: <br> Jeff Wilson, VA Phoenix Regional  Loan Center |

| 10:00 am – 10:30 am | VHA Caregiver Support<br>Karin Kupka, Caregiver Support Coordinator, VA San Diego |
|---|---|
| 10:30 am – 11:00 am | VA for VETS – Veteran Employment<br>Michael Lew, Regional Veterans Employment Coordinator, Region 1 |
| 11:00 pm – 11:30 pm | Employment/Job Training:<br>Compensated Work Therapy Program/Vocational Rehabilitation Program<br>Jeff Scanlon, MS, CRC, VA San Diego |

## Appendix H: Central Region Training Meeting, Rapid City, SD, April 30-May 1, 2013

**Department Of Veterans Affairs Rushmore Plaza Holiday Inn Rapid City, South Dakota**

*TUESDAY, APRIL 30*
- 0800-0830    Color Guard ~ Blessing ~ Opening Comments

- 0830-0930    VA "Healthcare 101": Eligibility, Enrollment, Billing

- 0930-1030    VA/Tribal Health/IHS: Reimbursements Agreements

- 1030-1100    Home Health Initiative/Type 2 Diabetes Prevention

- 1100-1130    Suicide Prevention

- 1130-1200    Women Veterans

- 1200-1300    Lunch

- 1300-1400    PTSD

- 1400-1445    Nagi Kikcho Pi: "Calling One's Spirit"

- 1445-1530    Role of the Veteran in the Tribal Community

- 1530-1630    Listening Session: Stephanie Birdwell; Charles Claussen; John Garcia; Larry Zimmerman

*WEDNESDAY, MAY 1*
- 0800    Prayer ~ Opening Comments

- 0800-1000    Housing in Indian Country: Native American Direct Loan (NADL); Specially-Adapted Housing (SAH); HUD ONAP; IHS: Housing/Water/Sewer

- 1000-1100    VA Homeless Programs: Grant & Per Diem/SSVF

- 1100-1130    Department of Labor – Veterans Employment & Training Services

- 1130-1200     Veterans Justice Outreach

- 1200-1300    Lunch

- 1300-1400 "VBA 101": Benefits/Education 1400-1430 VA For Vets (Working for VA) 1430-1530 Native American Development Corporation: Government Contracting for Veteran-Owned Businesses

- 1530-1600    U.S. Small Business Administration: Office of Native American Affairs (ONAA)

## Appendix I: Office of Tribal Government Relations, FY 12 Training Meetings

**Office of Tribal Government Relations
FY 12 Training Meetings**

**April 2012**

- April 3-4, 2012 Eastern Region Training Meeting, Washington, DC

- April 10-11, 2012 Western Region Training Meeting, Spokane, WA

- April 17-18, 2012 Central Region Training Meeting, Minneapolis, MN

- April 24-26, 2012 Southwest Region Training Meeting, Albuquerque, NM

**July 2012**

- July 10-11, 2012 Western Region Training Meeting, Grande Ronde, OR

- July 24-26, 2012 Southwest Region Training Meeting, Norman, OK

**September 2012**

- September 6-7, 2012 Central Region Training Meeting, Milwaukee, WI

**Appendix J: Eastern Region Summit, Washington, DC, April 3-4, 2012**
VA OFFICE OF TRIBAL GOVERNMENT RELATIONS

# Eastern Region Summit

L'Enfant Plaza Hotel
Washington, DC

April 3-4, 2012



**U.S Department of Veterans Affairs**
**Office of Public and Intergovernmental Affairs**

**Office of Tribal Government Relations**
**810 Vermont Ave NW, Suite 915**
**Washington, DC 20420**

**Conference Objectives:**

The goal of this meeting to invite Tribal leadership and Tribal Veterans from within the Eastern Region (Maine, Massachusetts, Connecticut, Rhode Island, New York, North Carolina, South Carolina, Florida, Alabama, Mississippi, Louisiana, and Texas), as well as, the VA administrations to collaborate, educate, network, and build relationships to better serve Veterans and their families.  This meeting will also serve as an education session on VA benefits and services.

**Mission of the Office of Tribal Government Relations:**
The VA consults with American Indian and Alaska Native tribal governments to develop partnerships that enhance access to services and benefits by Veterans and their families.

**Vision of the Office of Tribal Government Relations:**
The VA has positive relationships with American Indian and Alaska Native tribal governments and is part of the landscape of Indian Country.  Every Veteran receives excellent services that are holistic in nature and that lead to optimal health.  American Indian and Alaska Native tribal governments view the VA as an organization of integrity that advocates for their needs.  The VA demonstrates its commitment to Veterans by being culturally competent, respecting the unique sovereign status of Tribes, and reaching Veterans in Indian Country.  Veterans know how to access all VA services and benefits and are woven into the fabric of the VA.

**Objectives of the Office of Tribal Government Relations:**

1. Increase Veterans access to healthcare and benefits;

2. Economic Sustainability:
   a. Increase utilization of Native American Direct Home Loan Program
   b. Increase utilization of Post 9/11 GI Bill
   c. Increase utilization of Vocational Rehabilitation Program
   d. Increase access to Compensation and Pension
   e. Increase access to federal employment opportunities
   f. Facilitate greater involvement by tribes and Native American Veterans in small business development and federal contracting opportunities

3. Tribal Consultation



**TUESDAY, April 3, 2012**

| 8:30 am – 9:00 am | Opening Remarks<br>Mr. John Garcia, Deputy Assistant Secretary Intergovernmental Affairs |
| --- | --- |

| | |
|---|---|
| 9:00 am – 9:30 am | Overview of OTGR / Goals for Meeting: <br> Stephanie Birdwell, Director, Office of Tribal Government Relations <br> Erika Moott, Tribal Government Relations Specialist- Eastern Region |
| 9:30 am – 10:00 am | Center for Minority Veterans/ Minority Veterans Program Coordinators <br> Renaee Allen, Minority Veterans Program Coordinator Manager, Center for Minority Veterans <br> Juanita J. Mullen, Native American Veterans Liaison, Center for Minority Veterans |
| 10:00 am – 10:15 am | **BREAK** |
| 10:15am – 11:15 am | Tribal Veterans Representative Training <br> W.J. "Buck" Richardson <br> Minority Veterans Program Coordinator, Veterans Integrated Service Network (VISN) 19 |
| 11:15am – 12:0 0 noon | Indian Health Service <br> Dr. Harry Brown, Chief Medical Officer, Nashville Area Office |
| 12:00noon- 1:00pm | **LUNCH** |
| 1:00pm –2:00pm | VA Cemetery Grants <br> Requesting Headstone/ Presidential Memorial Certificate <br> Howard Orr, Program Manager, National Cemetery Administration |
| 2:00pm-3:00pm | Education Services: Post 9/11 GI Bill <br> Ann Richardson, Program Analyst |
| 3:00pm-3:15pm | **BREAK** |
| 3:15pm-4:00pm | Native American Direct Loan Program, Special Adaptive Housing, VA Home Loan Program <br> Erica Lewis, Veterans Benefits Administration, Loan Guaranty Service |
| 4:00pm-4:30pm | Vocational Rehabilitation and Employment Services <br> Sabrina McNeil, Program Analyst |



**WEDNESDAY, April 4, 2012**

| | |
|---|---|
| 8:30 am – 8:45 a m | Overview of workshops and speakers |

| | |
|---|---|
| 8:45 am – 9:45 am | VHA 101: Overview of VHA Health care System<br>Eligibility and Enrollment<br>Kristin Cunningham, Business Policy Office |
| 9:45 am - 10:00 am | **BREAK** |
| 10:00 am –11:00 am | The Cherokee Project: Developing a Partnership for Life Asheville VAMC<br>Dr. Barbara St. Hilaire, Asheville VAMC<br>Penny James, Asheville VAMC<br>William "Skip" Myers, Asheville VAMC |
| 11:00 am –1 2:00 noon | Collaborations with the Mississippi Band of Choctaw Indians<br>Lynn Langley, Jackson VAMC<br>Kelly Duke, Veterans Integrated Service Network (VISN) 16 |
| 12:00 noon – 1:00 pm | **LUNCH** |
| 1:00pm- 2:00pm | Veterans Panel:<br>T. Jay Hunting Horse, Lieutenant Colonel, US Marine Corps<br>Carlos Rascone, Major, US Marine Corps<br>Christina Hunts Horse-May, First Sergeant, US Marine Corps<br>Justin Fisher, Lance Corporal, US Marine Corps<br><br>Returning Service Members (OEF/OIF)<br>Substance Abuse Programs/ Suicide Prevention<br>Dr. Brad Karlin, National Mental Health Program Director, Psychotherapy and Psychogeriatrics |
| 2:00pm-2:15pm | **BREAK** |
| 2:15 pm -3:00 pm | VA Office of Rural Health<br>Dr. Mary Beth Skupien, Director, VA Office of Rural Health |
| 3:00pm-4:00pm | Veterans Service Organizations (VSO)<br>Kevin Secor, VSO Liaison |
| 4:00pm-4:30pm | Closing Remarks<br>Presentations – Quilts of Valor |

## Appendix K: Western Region Training, Grand Ronde, OR, July 10-11, 2012

**VA Office of Tribal Government Relations**

Western Region Training
Spirit Mountain Casino – Grand Ronde, OR

**July 10-11, 2012**



**U.S. Department of Veterans Affairs**
**Office of Tribal Government Relations**
**810 Vermont Avenue, NW**
**Washington, DC 20420**

*Conference Objectives:*
The goal of these meetings is to invite tribal leadership from within the Western Region (OR,WA,ID,NV,CA,AK), as well as, other federal and state partners who work with American Indians and Alaska Native Veterans for services and benefits to collaborate, educate, and network to better serve this population.

Specifically, OTGR's goals are to:
4) Increase Veteran access to healthcare and benefits;
5) Economic Sustainability:
   a. Increase utilization of Native American Direct Home Loan Program
   b. Increase utilization of Post 9/11 GI Bill
   c. Increase utilization of Vocational Rehabilitation Program
   d. Increase access to Compensation and Pension
   e. Increase access to federal employment opportunities
   f. Facilitate greater involvement by tribes and Native American Veterans in small business development and federal contracting opportunities
6) Tribal Consultation

*Target Audience*: Tribal Veterans and those who serve or care for Veterans in Indian Country.

*Registration Required*: No cost for registration. However, please email your name, title, organization or tribe to: Terry.Bentley@va.gov

**Office of Tribal Government Relations (OTGR) Western Region (OR,WA,ID,NV,CA,AK)**
**2nd Western Region Training Event – Spirit Mountain Casino, Grand Ronde, OR**

# Conference Agenda

July 10-11, 2012

| Healthcare | Break out session specific to healthcare |
|---|---|
| Housing/Homelessness | Break out session specific to housing and homeless |
| Tribal Veteran Representatives (TVR) | Break out session specific to TVR |

## *TUESDAY, July 10, 2012*

| Time | | Session |
|---|---|---|
| 7:30am - 5:00 pm | | **Registration throughout the day - Kalapuya Rooms A&B**<br>**Please take individual breaks throughout the day as needed.** |
| 8:15 am - 8:45 am | Exhibits/Vendors - Event Center Hallway | **Opening Ceremonies:**<br>Welcome Address/Moderator: Jim Willis, Director, OR State Dept of Veterans Affairs<br>Post Colors: Grand Ronde Color Guard<br>Invocation: Steve Bobb, Sr., Confederated Tribes of Grand Ronde Council Member<br>Welcoming Remarks: Reyn Leno, Vice Chair, The Confederated Tribes of Grand Ronde |
| 8:45 am - 9:15 am | | **Overview of OTGR & Welcome / Goals for Meeting:**<br>Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Terry Bentley, OTGR Western Region Specialist |
| 9:15 am - 10:00 am | | **Understanding American Indian Worldviews:**<br>A Beginning in Welcoming Home Our People<br>Annette Squetimkin-Anquoe, MA – Seattle Indian Health Board |
| 10:00 am - 11:00 am | | **Panel Session: History & Benefit of the Tribal Veteran Representative (TVR) Program:**<br>Luckie Joe Boyd, TVR Suquamish Tribe<br>Frank Cordero, Suquamish Tribe<br>Jim Vance, Director, VBA, Boise Regional Office<br>Cathy Davidson, VHA, Puget Sound |
| 11:00 am - 11:30 am | | **Veterans Benefits Administration (VBA) Portland Regional Office Overview**<br>Debora Bublitz, Asst. Veterans Service Center Manager, Portland Regional Office |
| 11:30 am - 12:00 pm | | **State DVA Director Panel**<br>Jim Willis, Director, OR State Dept of Veterans Affairs<br>Verdie Bowen, Director, AK State of Dept of Veterans Affairs<br>Steve Gill, Administrator, WA State Dept of Veterans Affairs<br>David Brausell, Administrator, ID State Dept of Veterans Affairs |
| 12:00 pm - 1:00 pm | | **Lunch Break (on your own)**<br>**Afternoon Workshops (see specific agenda's on pages 3-5)** |
| 1:00 pm - 5:00 pm | | **Healthcare**<br>**Kalapuya Room A**     **Tribal Veteran Representatives**<br>**Kalapuya Room B** |
| 5:00 pm - 6:30 pm | | **Evening Reception / Entertainment by Grand Ronde Youth Dancers – Molalla Rooms** |

Co-sponsored by the following:



The Suquamish Tribe, Suquamish, WA



WA State Department of Veterans Affairs



OR Department of Veterans Affairs



Confederated Tribes of Grand Ronde

## WEDNESDAY, July 11, 2012

| | | |
|---|---|---|
| 8:00 am - 12:00 pm | **Registration – Kalapuya Rooms A&B** | |
| 8:30 am - 12:00 pm | **Continue Workshops (see specific agenda's on pages 3-5)** | |
| 8:30 am - 12:00 pm | **Healthcare**<br>**Kalapuya Room A** | **Housing / Homelessness**<br>**Kalapuya Room B** |
| 12:00 pm – 1:00 pm | **Lunch Break** | |
| 1:00 pm-2:00 pm | **Field Trip to West Valley Veterans Memorial located on tribal grounds of the Confederated Tribes of Grand Ronde** | |
| 2:00 pm – 2:30 pm | **Facilitators of Breakout Sessions Provide an Update/Overview to General Assembly** | |
| 2:30 pm – 4:00 pm | **Listening Session with Tribes and other Attendees**<br>**Question & Answer with Panel Members:**<br>**Terry Bentley, Tribal Government Relations Specialist**<br>**Michael Fisher, VISN20 Deputy Network Director**<br>**Dean Seyler, Director, Portland Area Indian Health Service**<br>**Debora Bublitz, Assistant Veterans Service Center Manager, VBA Portland Regional Ofc**<br>**Jim Vance, Director, Veterans Benefits Administration, Boise Regional Office**<br>**Jim Willis, Director, Oregon Department of Veterans Affairs**<br>**Verdie Bowen, Director, Alaska Department of Veterans Affairs**<br>**Steve Gill, Administrator, Washington Department of Veterans Affairs**<br>**David Brasuell, Administrator, Idaho Department of Veterans Affairs**<br>**Frank Cordero, Suquamish Tribe** | |
| 4:00 pm | **Wink Soderberg, Veterans SEB - Closing Prayer**<br>**Retire Flags** | |
| 4:15 pm - 5:00 pm | **VHA, VBA, NCA staff available for one-on-one questions and Veteran assistance** | |

*(leftmost vertical cell spanning the rows from 8:30am to 4:15pm: "Exhibits Open")*

Co-sponsored by the following:

The Suquamish Tribe, Suquamish, WA

WA State Department of Veterans Affairs

OR Department of Veterans Affairs

Confederated Tribes of Grand Ronde

HOTEL ACCOMODATIONS:
Spirit Mountain Casino, Phone: 800-760-7977, - $69.00 for deluxe room.  Rooms are reserved under:
Veterans Regional Conference, Website:  http://spiritmountain.com/.
No shuttle transportation is available from the airport (Portland International Airport) to hotel is
approximately a 1 hour 45 minute drive from airport.

## TUESDAY, July 10, 2012 – Healthcare Workshop
## Conference Room – Kalapuya Room A

| | |
|---|---|
| 1:00 pm – 5:00 pm | **Healthcare WORKSHOP** |
| 1:00 pm – 1:15 pm | Terry Bentley, OTGR Western Region – Co-Facilitator<br>Jodie Waters, VISN 20 Planner/Rural Consultant – Co-Facilitator<br>Round Table Introductions |
| 1:15pm – 2:45pm | Recognizing Post Traumatic Stress Disorder (PTSD), Understanding PTSD,<br>Trans-Generational PTSD, Effective Tools for Managing PTSD:<br>Bonny McCormick, Licensed Professional Counselor, PTSD Team, Portland VA |
| 2:45 pm - 3:15 pm | Insight into VA & VA/IHS MOU:<br>Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Libby Watanabe, South East Alaska Regional Health Consortium |
| 3:15 pm – 3:45pm | OEF/OIF/OND Reintegration – Unique Differences – TBI, PTSD<br>Cindy Houston, OEF/OIF/OND Transition Patient Advocate, Roseburg VA |
| 3:45 pm – 4:15 pm | Diabetes Management:<br>Dr. Jennifer Hightower, Health Behavior Coordinator, Portland VA |
| 4:15 pm – 5:00 pm | Overcoming Barriers in Serving AI/AN Veterans<br>Shilo R. Tippett, Ph.D., Wasco/Tlingit, Clinical Psychologist, Warm Springs<br>Community Counseling Center<br>& Shelia M. Danzuka, M.A., Marriage & Family Therapist, Warm Springs<br>Community Counseling Center, Warm Springs Tribal Veteran Representative |

**TUESDAY, July 10, 2012 – Tribal Veterans Representatives**
**Conference Room – Kalapuya Room B**

| | |
|---|---|
| 1:00 pm - 5:00 pm | **Tribal Veteran Representatives (TVR) WORKSHOP** |
| 1:00 pm - 1:15 pm | Luckie Joe Boyd, TVR, Suquamish Tribe, Co-Facilitator<br>Frank Cordero, Suquamish Tribe – Co-Facilitator<br>Jim Vance, Boise VBA Regional Director – Co-Facilitator<br>Round Table Introductions |
| 1:15 pm - 2:00 pm | Social Security Administration (SSA) 101:<br>Brandi Keeth, Asst. District Manager, SSA, Salem, OR |
| 2:00 pm - 2:15 pm | How to Request a Headstone, Marker, Medallion:<br>Tom Mullen, Willamette National Cemetery, Portland, OR |
| 2:15 pm - 2:45 pm | Vet Center Programs & Services:<br>Jason Thilges, M.Ed., LMFT, Salem Vet Center |
| 2:45 pm - 3:15 pm | VA 101 Healthcare – Eligibility/Enrollment/Billing Overview:<br>Craig Carter, Asst Chief, Accounting & Finance, Portland VA |
| 3:15 pm -5:00 pm | Veterans Benefits Q&A:<br>Vocational Rehabilitation & Employment Program<br>Richard Breunissen, Voc Rehab Counselor, Portland Regional Office<br>Disability Benefits Questionnaires (DBQ)'s<br>E-Benefits/Submitting Veterans Benefit Claim & Appeals<br>Luckie Joe Boyd, Jim Vance, Debora Bublitz |

**WEDNESDAY, July 11, 2012 – Healthcare Workshop**
**Conference Room – Kalapuya Room A**

| | |
|---|---|
| 8:30 am - 12:00 pm | **HEALTHCARE WORKSHOP** |
| 8:30 am - 8:45 pm | Terry Bentley, OTGR Western Region – Co-Facilitator<br>Jodie Waters, VISN 20 Planner/Rural Consultant – Co-Facilitator<br>Round Table Introductions |
| 8:45 am - 9:15 am | Suicide Prevention:<br>David Dickinson, MA, Regional Administrator, Region X, SAMHSA<br>Joe Bertagnolli & Monireh Moghadam, Portland VA |
| 9:15 am - 9:45 am | Women Veterans:<br>Nancy Sloan, Women Veterans Program Manager, Portland VA |
| 9:45 am - 10:15 am | Substance Abuse & Mental Health Services Administration (SAMHSA):<br>David Dickinson, MA, Regional Administrator, Region X, SAMHSA |
| 10:15 am - 10:45 am | Telehealth<br>Paulette Channon, Telehealth Coordinator, Portland VA |

| 10:45 am – 11:30 am | Substance Use Disorders/Residential Rehabilitation Treatment Programs: <br> Kathleen Frederick, Portland, VA <br> David Dickinson, MA, Regional Administrator, Region X, SAMHSA |
|---|---|
| 11:30 am – 12:00 pm | Blind Rehabilitation Program / Visual Impairment Services Team <br> Don Felthouse, VHA American Lake, WA & <br> Paul Thomas & Jodi Roth, VIST Portland/Vancouver |

**WEDNESDAY, July 11, 2012 – Housing / Homelessness Workshop**
**Conference Room – Kalapuya Room B**

| 8:30 am – 12:00 pm | **Housing / Homelessness WORKSHOP** |
|---|---|
| 8:30 am – 8:45 pm | Frank Cordero, Suquamish Tribe – Co-Facilitator <br> Eileen Devine, VISN20 Network Homeless Coordinator – Co-Facilitator <br> Round Table Introductions |
| 8:45 am – 9:15 am | HUD: HUD/VASH & Section 184 Financing <br> Iris Friday, Section 184 Coordinator, NW Office of Native Programs <br> Michele Hensel, BIA Northwest Regional Office <br> Gina Eastman, BIA Northwest Regional Office |
| 9:15 am – 9:45 am | Native American Veteran Direct Loan Program: <br> Jim Vance, Director, VBA Boise Regional Office |
| 9:45 am – 10:15 am | VHA Caregiver Support <br> Jennifer Barrett, Caregiver Support Program, Portland VA |
| 10:45 pm – 11:30 pm | Employment/Job Training: <br> Compensated Work Therapy Program/Vocational Rehabilitation Program <br> Bud Dickey, Vocational Rehab Specialist, VHA Roseburg, OR |
| 11:30 am – 12:00 pm | VHA Services for Housing / Homelessness / Treatment / Preventions: <br> Eileen Devine, VISN20 Network Homeless Coordinator |

## Appendix L: Western Region Conference – Northern Quest, Spokane, WA, April 10-11, 2012

**VA Office of Tribal Government Relations**

Western Region Conference – Northern Quest Resort & Casino, Spokane, WA

**April 10-11, 2012**

**U.S. Department of Veterans Affairs
Office of Tribal Government Relations
810 Vermont Avenue, NW
Washington, DC 20420**

*Conference Objectives:*
The goal of these meetings is to invite tribal leadership from within the Western Region (OR,WA,ID,NV,CA,AK), as well as, other federal and state partners who work with American Indians and Alaska Native Veterans for services and benefits to collaborate, educate, and network to better serve this population.

Specifically, OTGR's goals are to:
1) Increase Veteran access to healthcare and benefits;
2) Economic Sustainability:
   a. Increase utilization of Native American Direct Home Loan Program
   b. Increase utilization of Post 9/11 GI Bill
   c. Increase utilization of Vocational Rehabilitation Program
   d. Increase access to Compensation and Pension
   e. Increase access to federal employment opportunities
   f. Facilitate greater involvement by tribes and Native American Veterans in small business development and federal contracting opportunities
3) Tribal Consultation

*Target Audience*: Tribal Veterans and those who serve or care for Veterans in Indian Country.

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**Office of Tribal Government Relations (OTGR) Western Region (OR,WA,ID,NV,CA,AK)**
**1st Quarterly Conference – Northern Quest Resort & Casino, Spokane, WA**

## Conference Agenda

April 10-11, 2012

| Healthcare | Break out session specific to healthcare topics |
|---|---|
| Housing/Homelessness | Break out session specific to housing and homeless topics |
| Tribal Veteran Representatives (TVR) | Break out session specific to TVR topics |

### TUESDAY, April 10, 2012

| | | |
|---|---|---|
| 7:30 am - 4:00 pm | | **Registration throughout the day – Kalispel Ballroom**<br>**Please take individual breaks throughout the day as needed.** |
| 8:15 am – 8:45 am | Exhibits Open | **Opening Ceremonies:**<br>Welcome Address: Steve Gill, Administrator, WA State Dept of Veterans Affairs<br>Post Colors: Kalispel Color Guard<br>Invocation & Welcoming Remarks:  Shirley Sandoval, Elder, Kalispel Tribe |
| 8:45 am – 9:15 am | | **Overview of OTGR / Goals for Meeting:**<br>Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Terry Bentley, OTGR Western Region Specialist |
| 9:15 am – 9:45 am | | **Success Story –Yurok Tribe-$3.3M Grant for Veterans Cemetery on Indian Trust Land:**<br>Buffy McQuillen, Yurok Tribe<br>Howard Orr, Project Manager, National Cemetery Administration, Washington, DC |
| 9:45 am – 10:30 am | | **VA 101 Healthcare – Eligibility, Enrollment & Billing Overview:**<br>Travis Tougaw, CBO Purchased Care Program Specialist, Denver, CO<br>Stephanie Birdwell, Director Office of Tribal Government Relations |
| 10:30 am – 11:00 am | | **E-Benefits Program & VBA Vocational Rehabilitation Program:**<br>Jim Vance, Director, Veterans Benefits Administration, Boise Regional Office<br>Nancy Fischer, Vocational Rehabilitation Counselor, VBA Regional Office, Seattle, WA |
| 11:00 am- 11:40 am | | **Understanding American Indian Worldviews:**<br>A Beginning in Welcoming Home Our People<br>Annette Squetimkin-Anquoe, MA – Seattle Indian Health Board |
| 11:40 am – 12:00 pm | | **Congressional Updates:**<br>Kristina Reeves, Statewide Veterans Constituency Coordinator<br>with U.S. Senator Patty Murray's Office |
| 12:00 pm – 1:00 pm | | **Lunch Break**<br>**Afternoon Workshops (see specific agenda's on pages 3-5)** |
| 1:00 pm –4:00 pm | | **Healthcare (Kalispel Ballroom)** · **Housing / Homelessness (Kalispel North)** · **Tribal Veteran Representatives (Kalispel South)** |
| 5:00 pm – 6:00 pm | | **Evening Reception / Entertainment by Frog Island Singers - Kalispel Ballroom** |

Co-sponsored by the following:



The Suquamish Tribe, Suquamish, WA



WA State Department of Veterans Affairs



OR Department of Veterans Affairs



Kalispel Tribe of Indians

## WEDNESDAY, April 11, 2012

| | | | | |
|---|---|---|---|---|
| 8:00 am - 12:00 pm | | Registration - Kalispel Ballroom | | |
| 8:30 am - 12:00 pm | | Continue Workshops (see specific agenda's on pages 3-5) | | |
| 8:30 am - 12:00 pm | Exhibits Open | Healthcare (Kalispel Ballroom) | Housing / Homelessness (Kalispel North) | Tribal Veteran Representatives (Kalispel South) |
| 12:00 pm - 1:00 pm | | Lunch Break | | |
| 1:00 pm - 2:00 pm | | Facilitators of Breakout Sessions Provide an Update/Overview to General Assembly | | |
| 2:00 pm - 3:30 pm | | Listening Session with Tribes and other Attendees<br>Question & Answer with Panel Members:<br>Stephanie Birdwell, Director, VA Office of Tribal Government Relations<br>Michael Fisher, VISN20 Deputy Network Director<br>Dean Seyler, Director, Portland Area Indian Health Service<br>Jim Vance, Director, Veterans Benefits Administration, Boise Regional Office<br>Howard Orr, National Cemetery Administration, Washington, DC<br>Jim Willis, Director, Oregon Department of Veterans Affairs<br>John Lee, Director, Washington Department of Veterans Affairs<br>David Brasuell, Administrator, Idaho Department of Veterans Affairs<br>Frank Cordero, Former TVR for Lummi Nation | | |
| 3:30 pm - 4:00 pm | | Advantages of Veteran Owned and Native Owned Small Business:<br>Daucey Brewington, Procurement Technical Assistance Center, Seattle, WA<br>Nancy Fischer, Vocational Rehabilitation Counselor, VBA Regional Office, Seattle, WA | | |
| 4:00 pm | | Closing Ceremony/Retire Flags/Closing Prayer | | |
| 4:15 pm - 5:00 pm | | VHA, VBA, NCA experts available for individual one-on-one questions and answers | | |

Co-sponsored by the following:



The Suquamish Tribe, Suquamish, WA



WA State Department of Veterans Affairs



OR Department of Veterans Affairs



Kalispel Tribe of Indians

HOTEL ACCOMODATIONS:
Northern Quest Resort & Casino, Phone: 877-871-6772, press #4 for reservations - $87 for single occupancy/$97 double occupancy – 0% state sales tax, $2 per room night tourism promotion assessment and a 1.9% city of Airway Heights lodging fee.  Rooms are reserved under:  "US Department of Veterans Affairs/Office of Tribal Government Relations" Website:  www.NorthernQuest.com (see property map and conference room layout below). Shuttle transportation is available from the nearest airport (Spokane International Airport) to hotel – approximately 5 minutes from airport.  For shuttle services, please call 877-871-6772**.**

ConfSpecsBack.pdf

Property Map Mar 2011.pdf

**TUESDAY, April 10, 2012 – Healthcare Workshop**
**Conference Room – Kalispel Ballroom**

| | |
|---|---|
| 1:00 pm – 4:00 pm | **Healthcare WORKSHOP** |
| 1:00 pm – 1:15 pm | Terry Bentley, OTGR Western Region – Co-Facilitator<br>Jodie Waters, VISN 20 Planner/Rural Consultant – Co-Facilitator<br>Round Table Introductions |
| 1:15 pm - 2:15 pm | Insight into VA & VA/IHS MOU:<br>Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Dean Seyler, Portland Area IHS Director<br>Travis Tougaw, CBO Purchased Care Program Specialist, Denver, CO |
| 2:15 pm – 3:15pm | Recognizing Post Traumatic Stress Disorder (PTSD), Trans-Generational PTSD<br>Effective Tools for Managing PTSD:<br>Quinn S. Bastian, PhD, Chief Mental Health |
| 3:15 pm – 3:45 pm | OEF/OIF/OND Reintegration: |

| | |
|---|---|
| | Jennifer Allison-Oord, OEF/OIF/OND Transition Patient Advocate for Spokane/Walla Walla VHA & Annie DeAndrea, Transition Assistance Advisor, Joint Services Support, WA National Guard |
| 3:45 pm – 4:15 pm | Telemedicine within VHA:<br>Joseph Ronzio, DHSc, CPHIMS, SMHIMSS, VISN20 Telehealth Coordinator |

**TUESDAY, April 10, 2012 – Housing / Homelessness Workshop**
**Conference Room – Kalispel North**

| | |
|---|---|
| 1:00 pm – 4:00 pm | **Housing / Homelessness WORKSHOP** |
| 1:00 pm – 1:15 pm | Frank Cordero, Suquamish Tribe – Co-Facilitator<br>John Davis, VHA Spokane, WA – Co-Facilitator<br>Round Table Introductions |
| 1:15 pm – 1:45 pm | VHA Caregiver Support:<br>Drea Gonzales, LICSW, Caregiver Services Coordinator, VHA Spokane, WA |
| 1:45 pm – 2:15 pm | HUD: HUD/VASH & Section 184 Financing<br>Iris Friday, Section 184 Coordinator, NW Office of Native Programs |
| 2:15 pm – 3:15 pm | Native American Veteran Direct Loan Program:<br>Pat Arnold, Assistant Loan Guaranty Officer, Denver Loan Center &<br>Bill Haines, Senior Loan Specialist, Denver Regional Loan Center |
| 3:15 pm – 3:45 pm | Employment/Job Training:<br>Compensated Work Therapy Program/Vocational Rehabilitation Program<br>Bud Dickey, Vocational Rehab Specialist, VHA Roseburg, OR |
| 3:45 pm – 4:15 pm | Prevention Services:<br>National Call Center for Homeless Veterans, Healthcare for Re-Entry, Veteran Justice Outreach Program, Supportive Services for Veterans Families Program, Veterans Homelessness Prevention Demonstration Program<br>John Davis, VHA Spokane, WA |
| 4:15 pm – 4:30 pm | VHA Housing Support Programs:<br>Resources for Perm/Temp Housing, On-going Case Mgmt & Treatment Services for Homeless Veterans: HUD/VASH, Grant Per Diem Program, and Supported Housing<br>John Davis, VHA Spokane, WA |
| 4:30 pm – 5:00 pm | Treatment Services:<br>Healthcare for Homeless Veterans, Veteran Stand Downs, Homeless Veterans Dental Program, Domiciliary Care/Homeless Veterans, Drop in Centers<br>John Davis, VHA Spokane, WA |

**TUESDAY, April 10, 2012 – Tribal Veterans Representatives**
**Conference Room – Kalispel South**

| | |
|---|---|
| 1:00 pm – 4:00 pm | **Tribal Veteran Representatives (TVR) WORKSHOP** |
| 1:00 pm – 1:15 pm | Luckie Joe Boyd, TVR, Suquamish Tribe, Co-Facilitator<br>Jim Vance, Boise VBA Regional Director – Co-Facilitator |

| | Round Table Introductions |
|---|---|
| 1:15 pm – 2:15 pm | Social Security Administration (SSA) 101:<br>Andrea Herbolt, Public Affairs Specialist, SSA, Seattle Regional Ofc |
| 2:15 pm – 2:45 pm | VA 101 Healthcare – Eligibility/Enrollment/Billing Overview:<br>Travis Tougaw, CBO Purchased Care Program Specialist, Denver, CO |
| 2:45 pm – 3:15 pm | Blind Rehabilitation Program/Visual Impairment Services:<br>Don Felthouse, VHA American Lake, WA<br>Suzanne Bennatt, VHA Spokane, WA |
| 3:15 pm – 3:30 pm | How to Request a Headstone, Marker, Medallion:<br>George Allen, Director, Willamette National Cemetery, Portland, OR &<br>Howard Orr, NCA, Washington, DC |
| 3:30 pm – 4:00 pm | Vet Center Programs & Services:<br>Mary DeLateur, LICSW, Spokane Vet Center &<br>Curley Lawson, MSW Intern, Spokane Vet Center |
| 4:00 pm – 4:30 pm | Overview of Submitting a Veterans Benefit Claim & Appeal Claims:<br>Luckie Joe Boyd, TVR, Suquamish Tribe &<br>Jim Vance, Boise VBA Regional Director |
| 4:30 pm – 5:00 pm | Establishing a Network of TVR's/How to Establish a TVR Program:<br>Luckie Joe Boyd, TVR, Suquamish Tribe |

**WEDNESDAY, April 11, 2012 – Healthcare Workshop**
**Conference Room – Kalispel Ballroom**

| | HEALTHCARE WORKSHOP |
|---|---|
| 8:30 am – 12:00 pm | |
| 8:30 am – 8:45 pm | Terry Bentley, OTGR Western Region – Co-Facilitator<br>Jodie Waters, VISN 20 Planner/Rural Consultant – Co-Facilitator<br>Round Table Introductions |
| 8:45 am – 9:15 am | Suicide Prevention:<br>David Dickinson, MA, Regional Manager, SAMHSA &<br>Quinn S. Bastian, PhD, Chief Mental Health, VHA Spokane, WA |
| 9:15 am – 9:45 am | Women Veterans:<br>Julie Liss, RN, VHA Spokane, WA |
| 9:45 am – 10:15 am | Substance Abuse & Mental Health Services Administration (SAMHSA):<br>David Dickson, MA, Regional Administrator, Region X, SAMHSA |
| 10:15 am – 10:30 am | My Healthe Vet:<br>Alan McCarther, My Healthe Vet Coordinator, VHA Spokane, WA |
| 10:30 am – 11:30 am | Substance Use Disorders/Residential Rehabilitation Treatment Programs: |

| | |
|---|---|
| | David Dickinson, MA, Regional Administrator, Region X, SAMHSA<br>&<br>Paul Nicolai, MHEd/P, CPP, Coordinator Substance Abuse Program,<br>VHA Spokane, WA |

**WEDNESDAY, April 11, 2012 – Housing / Homelessness Workshop**
**Conference Room – Kalispel North**

| | |
|---|---|
| 8:30 am – 12:00 pm | **Housing / Homelessness WORKSHOP** |
| 8:30 am – 8:45 pm | Frank Cordero, Suquamish Tribe – Co-Facilitator<br>John Davis, VHA Spokane, WA – Co-Facilitator<br>Round Table Introductions |
| 8:45 am – 9:15 am | HUD: HUD/VASH & Section 184 Financing<br>Iris Friday, Section 184 Coordinator, NW Office of Native Programs |
| 9:15 am – 9:45 am | VHA Caregiver Support:<br>Drea Gonzales, LICSW,Caregiver Services Coordinator, VHA Spokane, WA |
| 9:45 am – 10:45 am | Native American Veteran Direct Loan Program:<br>Pat Arnold, Assistant Loan Guaranty Officer, Denver Loan Center &<br>Bill Haines, Senior Loan Specialist, Denver Regional Loan Center |
| 10:45 pm – 11:15 pm | Employment/Job Training:<br>Compensated Work Therapy Program/Vocational Rehabilitation Program<br>Bud Dickey, Vocational Rehab Specialist, VHA Roseburg, OR |
| 11:15 am – 11:30 am | Prevention Services:<br>National Call Center for Homeless Veterans, Healthcare for Re-Entry, Veteran Justice Outreach Program, Supportive Services for Veterans Families Program, Veterans Homelessness Prevention Demonstration Program<br>John Davis, VHA Spokane, WA |
| 11:30 am – 11:45 am | VHA Housing Support Programs:<br>Resources for Permanent or Temporary Housing, On-going Case Management and Treatment Services for Homeless Veterans: HUD/VASH, Grant Per Diem Program, and Supported Housing<br>John Davis, VHA Spokane, WA |
| 11:45 am – 12:15 am | Treatment Services:<br>Healthcare for Homeless Veterans (HCHV), Veteran Stand Downs, Homeless Veterans Dental Program, Domiciliary Care for Homeless Veterans, Drop in Centers<br>John Davis, VHA Spokane, WA |

**WEDNESDAY, April 11, 2012 – Tribal Veterans Representatives**
**Conference Room – Kalispel South**

| | |
|---|---|
| 8:30 am – 12:00 pm | **Tribal Veteran Representatives (TVR) WORKSHOP** |
| 8:30 am – 8:45 pm | Luckie Joe Boyd, TVR, Suquamish Tribe, Co-Facilitator<br>Jim Vance, Boise VBA Regional Director – Co-Facilitator |

|  | Round Table Introductions |
|---|---|
| 8:45 am – 9:15 am | VA 101 – Enrollment/Eligibility/Billing Overview:<br>Travis Tougaw, CBO Purchased Care Program Specialist, Denver, CO |
| 9:15 am – 10:15 am | Social Security Administration (SSA) 101:<br>Andrea Herbolt, Public Affairs Specialist, SSA, Seattle Regional Ofc |
| 10:15 am - -10:45 am | Blind Rehabilitation Program/Visual Impairment Services:<br>Don Felthouse, VHA American Lake, WA<br>Suzanne Bennatt, VHA Spokane, WA |
| 10:15 am – 10:45 am | How to Request a Headstone, Marker, Medallion:<br>George Allen, Director, Willamette National Cemetery, Portland, OR<br>Howard Orr, NCA, Washington, DC |
| 10:45 am – 11:15 am | Vet Center Programs & Services:<br>Mary DeLateur, LICSW, Spokane Vet Center<br>Curley Lawson, MSW Intern, Spokane Vet Center |
| 11:15 am – 11:45 am | Overview of Submitting a Veterans Benefit Claim & Appeal Claims:<br>Luckie Joe Boyd, TVR, Suquamish Tribe, WA<br>Jim Vance, Boise VBA Regional Director |
| 11:45 pm – 12:00 pm | Establishing a Network of TVR's/How to Establish a TVR Program:<br>Luckie Joe Boyd, TVR, Suquamish Tribe |

## Appendix M: Central Region Summit, Milwaukee, WI, September 6-7, 2012

**Department of Veterans Affairs, Hilton Milwaukee City Center, September 6-7, 2012**

*Thursday, September 6*

- 0800-0830     Oneida Color Guard ~ Blessing ~ Opening Comments

- 0830-0930     VHA Healthcare e 101: Billing, Eligibility and Enrollment

- 0930-1015     P TSD Treatment for Native Americans Veterans

- 1015-1100     Suicide Prevention for Native American Veterans

- 1100-1200     Female Veterans: History and Health

- 1200 -1300     Lunch

- 1300-1400     Improper State Taxation of Reservation-Domiciled Servicemembers

- 1400-1600     VBA Education 101: G.I. Bill; VEAP; REAP; Dependent's Educational Assistance; Veterans Retraining Assistance; Vocational Rehabilitation

*Friday, September 7*

- 0800     Prayer ~ Opening Comments

- 0800-0930     Housing in Indian Country: VA's Native American Direct Home Loan (NADL); Specially- Adapted Housing; HUD's Office of Native American  Programs

- 0930-1030     VA Homeless Programs: SSVF; HUD-VASH; Gr ant & P er Diem

- 1030-1100     Veterans Courts

- 1100-1200     VA/Tribal Health/IHS Updates: Reimbursement, Co-Pays and Sharing Agreements

- 1200 -1300     Lunch

- 1300-1400     Alternative Therapy: Native American Art

- 1400-1530     Career s/Job Training: Tribal Water Operator s; Helmets 2 Hardhats & Veterans in Piping

1530-1600     Organizing Tribal Veteran Service Offices

## Appendix N: Central Region Summit, Minnesota, April 17-18, 2012

**DEPARTMENT OF VETERANS AFFAIRS: WORKING WITH TRIBAL GOVERNMENTS TO SERVE INDIAN COUNTRY'S VETERANS**

*Tuesday, April 17, 2012*
WABASHA ROOM

- 0700~0800       Breakfast

- 0800-0830        Drum/Blessing ~ OTGR Intro

- 0830-0930       VHA Healthcare: Billing, Eligibility and Enrollment

- 0930~1100       VBA Education: GI Bill; VEAP; REAP; Dependants Educational Assistance; Veterans Retraining

- 1100~1200       NCA - Veteran Cemeteries on Tribal Lands

- 1200-1300       Lunch

- 1300-1400       Vocational Rehabilitation

- 1400-1500       PTSD and "coming home" issues

- 1500-1515       Break

- 1515-1615       Reintegrating the Warrior

*Wednesday, April 18, 2012*
WABASHA ROOM

- 0800~ 0830      Blessing ~ Opening Comments

- 0830-1000       Housing: NADL; Specially- Adapted Housing; HUD (Office of Native American Programs)

- 1000-1100       VHA Homeless Programs: SSVF; HUD-VASH; Grant and Per Diem

- 1100-1130       Veterans in Piping

- 1130-1200       Veterans Upward Bound

- 1200-1300       Lunch

- 1300-1400       Doing Business With VA

- 1400~1500    Tribal Vet Rep (TVR) Training

- 1500~1515    Break

- 1515-1615    Building Stronger Tribal Veteran Organizations

Wrap-Up/Closing Comments

## Appendix O: First Quarterly Conference – Southwestern Region, Albuquerque, NM, April 24-26, 2013

Office of Tribal Government Relations

Southwest Region (Albuquerque, NM)

1st Quarterly Conference

**Tuesday April 24th, 2012**

| | |
|---|---|
| **8:30 am – 9:00 am** | **Opening Ceremonies**<br>(Baldwin Room)<br>**Keynote Address:** *Mr. John Garcia, Deputy Assistant Secretary Office of Intergovernmental Affairs*<br>**Invocation:** *Joe Garcia, Former, National Congress of American Indians President & Current National Congress of American Indians SW Area Vice President, Ohkay Owingeh*<br>**Post Colors:** *Pueblo of Laguna Honor Guard*<br>**Welcome/Blessing/Tribal Leader Opening Remarks:** *Chandler Sanchez, Chairman, All-Indian Pueblo Council* |
| **9:00 am – 9:30 am** | **Overview of OTGR and VA**<br>(Baldwin Room)<br>*Stephanie Birdwell, Director, Office of Tribal Government Relations*<br>*Erika Moott, Specialist, OTGR Eastern Region*<br>*Mary Culley, Oklahoma City VA Medical Center* |
| **9:30 am – 10:20 am** | **Veterans Health Administration Chief Business Office**<br>**"VA 101" – Eligibility**<br>(Baldwin Room)<br>*Bill Etchison, Executive Assistant, Chief Business Office, Office of the Deputy Director for Purchased Care (invited)* |
| **10:20 am – 10:30 am** | Break |
| **10:30 am – 11:15 am** | **Veterans Health Administration (VHA)**<br>(Baldwin Room)<br>*George Marnell, Director, New Mexico VA Health Care System*<br><br>*Barbara Jaramillo, VISN 18 Geriatrics & Extended Care Program Manager* |
| | Healthcare Services Overview |
| | Program Highlight: Geriatrics & Extended Care - Home Based Primary Care |
| **11:15 am – Noon** | Tribal Veterans Office – Panel Discussion<br>(Baldwin Room)<br>*Moderator: Stephanie Birdwell*<br><br>*Eugene "Geno" Talas, Director, Hopi Veterans Services, Hopi Tribe*<br><br>*Robert Lucero, Veterans Director, Ute Tribe Veterans Office*<br>*Thedo "Ted" Underwood, Veterans Affairs Coordinator, Chickasaw Nation* |

| | |
|---|---|
| | *Rod Grove, Tribal Service Officer, Southern Ute Indian Tribe*<br><br>*David Nez, Department Manager, Department of Navajo Veterans Affairs, Navajo Nation* |
| **Noon – 1:15 pm** | Lunch |
| **1:15 pm – 2:00 pm** | **National Cemetery Administration (NCA)**<br>**(Baldwin Room)**<br>*Speaker: Timothy L. Spain, Director, FNOD, U.S. Department of Veterans Affairs* |
| | Introduction |
| | Cemetery Grants: *Pascua Yaqui Success Story (Mr. David Rameriz, Pascua Yaqui Council Member and Retired Air Force Veteran)* |
| **2:00 pm – 2:15 pm** | 15 Minute Break |
| **2:15 pm – 3:00 pm** | **Veterans Benefits Administration (VBA)**<br>**(Baldwin Room)** |
| | Introduction/Moderator – Grant Singleton, Director, VA Albuquerque Regional Office |
| | Native American Direct Loan Program. Jeff Wilson, VA Loan Production Officer, Phoenix Regional Loan Center, Phoenix, AZ.  Donna Peigler, Manager, Land, Title, and Records Office, Southwest Region, Bureau of Indian Affairs.  *(Invited)* |
| **3:00 pm – 3:15 pm** | Post 9/11 GI Bill and Education Benefits – *Scott Lajiness, Management and Program Analyst, VA Albuquerque Regional Office* |
| **3:15 pm – 3:30 pm** | Vocational Rehabilitation and Education – *Kathy Nelsen, Vocational Rehabilitation & Employment Officer, VA Albuquerque Regional Office* |
| **3:30 pm – 4:00 pm** | Q & A with *Director Stephanie Birdwell* |
| **4:00 pm – 4:15 pm** | 15 Minute Break |
| **4:15 pm – 4:30 pm** | **New Mexico Veteran Business Outreach Center**<br>**(Baldwin Room)**<br>*Col Tim Hale, USAF (Ret), Cabinet Secretary, NM Department of Veteran Services*<br>*Joseph Long, Director, Veteran Business Outreach Center* |
| **4:30 pm** | Break for the Day |

**Wednesday April 25th, 2012**

| | |
|---|---|
| **8:30 am – 9:30 am** | **Office of Rural Health**<br>**(Baldwin Room)**<br>*Dr. Byron Bair, Director, Veteran Rural Resource Center Director-Western Region* |
| **9:30 am – 11:00 am** | **Tribal Veterans Representatives**<br>**(Baldwin Room)**<br>*Buck Richardson, Minority Veteran Program Coordinator Rocky Mountain Region* |
| | **Telehealth**<br>**(Baldwin Room)**<br>*Jay H. Shore, MD, MPH,  Native Domain Lead, Veterans Rural Health Resource Center - Western Region, Department of Veterans Affairs, Office of Rural Health (invited)*<br><br>*HoMana Pawiki, American Indian Services Coordinator/Health Systems Specialist, Northern Arizona VA Health Care System* |
| **11:00 am – 12:15 pm** | **Memorandum of Understanding (MOU) between Veterans Affairs (VA) and Indian Health Service (IHS)**<br>**(Baldwin Room)** |

| | |
|---|---|
| | Stephanie Birdwell, Director, Office of Tribal Government Relations<br>Donna Jacobs, Director, Northern Arizona VA Health Care System<br>Admiral Richie Grinnell, Indian Health Service Albuquerque Area Director<br>Ron Tso, MPH, CEO, Chinle Service Unit, IHS<br>HoMana Pawiki, American Indian Services Coordinator/Health Systems Specialist,<br>Northern Arizona VA Health Care System |
| **12:15 pm – 1:30 pm** | Lunch |
| **1:30 pm – 2:00 pm** | <div align="center">BREAKOUT SESSIONS</div> |
| | Chaplain's Service: Traditional Healing – *Jeni Cook, Associate Director, National VA Chaplain Center* **(Ivory Room)** <td>Homelessness Initiative – *Steven Cohen, VISN 18 Homeless Program Coordinator* **(Serenade Room)**</td> |
| **2:00 pm – 2:30 pm** | <div align="center">BREAKOUT SESSIONS</div> |
| | Suicide Prevention/Crisis Line: *Dr. Brenda Mayne, Suicide Prevention Coordinator, New Mexico VA Health Care System* **(Ivory Room)** <td>PTSD Services – *Dr. Diane Castillo, Women's Stress Disorder Treatment Team Coordinator, New Mexico VA Health Care System* **(Serenade Room)**</td> |
| **2:30 pm – 3:00 pm** | <div align="center">BREAKOUT SESSIONS</div> |
| | Transition Assistance Program – *Tom Bonnel, Community Readiness Consultant, Airman and Family Readiness Center, Kirtland AFB, NM* <td>Vet Centers – *Sharon Batala, Counselor, Hopi Outreach Center, U.S. Department of Veterans Affairs*</td> |
| **3:00 pm – 3:15 pm** | 15 Minute Break |
| **3:15 pm – 4:00 pm** | <div align="center">PANEL DISCUSSION</div> |
| | Tribal Veterans Panel – Moderator: Mary Culley<br>*Speaker: Avelino Calabaza, Pueblo of Santo Domingo and Commander – Southwest Region National American Indian Veterans Inc.*<br>*Speaker: Tonya Goggans, Pueblo of Zuni*<br>*Speaker: Jeanette Jagels, Pueblo of Tesuque*<br>*Speaker: Charlotte Atso, Navajo Nation* |
| **4:00 pm – 4:45 pm** | <div align="center">PANEL DISCUSSION</div> |
| | State Dept. of Veterans Affairs Directors - Moderator: John Garcia<br>*States Directors of Utah, Arizona, New Mexico, Colorado, Oklahoma - invited* |
| **4:45 pm – 5:00 pm** | *Closing Remarks* |

### Thursday April 26th, 2012

| | |
|---|---|
| **8:30 am – 9:30 am** | **Welcome**<br>**Opening Remarks: *Ms. Stephanie Birdwell, Director, Office of Tribal Government Relations***<br>**Listening Session Panel:**<br><br>*Moderators: Ms. Stephanie Birdwell, Director, Office of Tribal Government Relations, and Mary Culley, Acting Program Specialist, Office of Tribal Government Relations*<br><br>*State Directors* |
| **9:30 am – 11:00 am** | Listening Session |
| **11:00 am – 11:15 am** | 15 Minute Break |
| **11:15 am – 12:45 pm** | Listening Session |
| **12:45 pm – 1:00 pm** | Closing Ceremony – Pueblo of Laguna Honor Guard |

## Appendix P: Second Quarterly Conference – Southwestern Region, Norman, OK, July 24-26, 2012

Office of Tribal Government Relations

Southwest Region (Norman, OK)

2nd Quarterly Meeting

**Tuesday July 24th, 2012**

| | |
|---|---|
| **8:30 am – 9:15 am** | **Opening Ceremonies**<br>**Post Colors:** *Chickasaw Nation Color Guard*<br>**Invocation:** *President Marshall R. Gover, Pawnee Business Council*<br>**Welcome/Opening Remarks:** *Ms. Stephanie Birdwell, Director, Office of Tribal Government Relations*<br>**Keynote Address:** *Mr. Jefferson Keel, President, National Congress of American Indians* |
| **9:15 am – 9:45 am** | **Overview of OTGR and VA**<br>*Stephanie Birdwell, Director, Office of Tribal Government Relations* |
| **9:45 am – 10:50 am** | **Veterans Health Administration Chief Business Office**<br>**"VA 101" – Eligibility, Medical Benefits & Purchased Care**<br>*Mr. Greg Eslinger, Program Management Officer, Chief Business Office, FO Denver* |
| **10:50 am – 11:00 am** | Break |
| **11:00 am – Noon am** | **Veterans Health Administration (VHA)**<br><br>*Adam Walmus, Interim Director, Oklahoma City VA Medical Center*<br><br>*James Floyd, Director, Jack C. Montgomery VA Medical Center, Muskogee, Oklahoma*<br>Healthcare Services Overview |
| **Noon – 1:15 pm** | Lunch  (ON  YOUR  OWN) |
| **1:15 pm – 2:30 pm** | **Memorandum of Understanding (MOU) between Veterans Affairs (VA) and Indian Health Service (IHS)**<br>Stephanie Birdwell, Director, Office of Tribal Government Relations (Moderator)<br>Mary Beth Skupien, Director, VHA, Department of Veterans Affair<br>Admiral Kevin Meeks, Indian Health Service Oklahoma City Area Director |
| **2:30 pm – 2:40 pm** | 10 Minute Break |
| **2:40 pm – 3:40 pm** | **VA Caregiver Program**<br>VA Central Office Social Worker, Ms. Margaret Kabat, Caregiver Program Coordinator |
| **3:40 pm – 4:30 pm** | VBA – Submitting Veterans Benefits Claims and Appeal Claims Process-Larry McClure, Veterans Service Center, Muskogee Regional Office |
| **4:30 pm** | Break for the Day |

**Wednesday July 25<sup>th</sup>, 2012**

| | BREAKOUT SESSIONS | |
|---|---|---|
| **8:30 am – 9:30 am** | *Office of Rural Health, Kelly Duke, VISN 16, Veteran Rural Resource Center* | *Homeless Initiative – Melanie Goldman, Social Worker, Jack C. Montgomery VAMC & Learnard Vile, Social Worker, Oklahoma City VAMC* |
| **9:30 am – 10:30 am** | *Telehealth, Lisa Eisele, BSN, RN, Network Lead, Virtual Medicine/ Telehealth, Distance Health Program, South Central VA Health Care Network* | *Native American Direct Loan Program, Laura Rodriguez, NADL Coordinator, Houston VA Regional Office, VBA* |
| **10:30-10:40** | **10 Minute Break** | |
| **10:40 am – 11:25 am** | *Tribal Veterans Representatives, Buck Richardson, Minority Veteran Program Coordinator, Rocky Mountain Region* | *DOI/ASIA/IEED/Division of Capital Investment, Loan Specialist, Frieda Satepeahtaw-Bailey, Anadarko Regional Office* |
| **11:25 am – 12:15pm** | *National Cemetery Administration, Sara Elton, COO, U.S. Department of Veterans Affairs* | *HUD – Office of Native American Programs, Michelle Tinnin* |
| **12:15 pm– 1:30 pm** | *LUNCH (ON YOUR OWN)* | |
| | BREAKOUT SESSIONS | |
| **1:30 pm – 2:15 pm** | *Vocational Rehab & Education: Kathryn Wentzel, Voc Rehab Employment officer, VA Muskogee Regional Office* | *Post 9/11 GI Bill and Education Benefits – Robert Sanders, Muskogee VA Regional Office* |
| **2:15 pm – 3:00 pm** | *National Cemetery Administration Panel Discussion – Jeffrey Potts, Program and Management Analyst, NCA* | *National Cemetery Administration Panel Discussion – Paige Lowther, Director, Policy and Planning, NCA* |
| **3:00 pm – 3:15 pm** | BREAK | |
| | PANEL DISCUSSIONS | |
| **3:15 pm – 4:30 pm** | State Dept. of Veterans Affairs Directors – Moderator: Stephanie Birdwell<br>*State Directors of New Mexico and Oklahoma*<br>New Mexico – Cabinet Secretary Colonel (Ret) Timothy Hale<br>Oklahoma – Cabinet Secretary Maj General (Ret) Rita Aragon | |
| **4:30 – 4:45 pm** | *Closing Remarks* | |
| | | |

**Thursday July 26<sup>th</sup>, 2012**

| | |
|---|---|
| **8:30 am – 8:45 am** | **Welcome & Opening Remarks:  Stephanie Birdwell, Director, Office of Tribal Government Relations** |
| **8:45 am – 9:30 am** | Oklahoma County Diversion Program, Joseph Dudley, OKC VA Medical Center Social Work Division, HCVC |
| **9:30 am – 10:30 am** | Respite Care, Craig Harrison, Office of Social Work, OKC VAMC |

| | |
|---|---|
| **10:30 am – 11:30 am** | Blind/Visual Impairment Services, John Laakman, VIST Coordinator, OKC VA Medical Center |
| **11:30 am – 11:45 am** | Closing Ceremony – Chickasaw Nation Color Guard |

## Appendix Q: VA/Indian Health Service MOU Workgroups

VA/Indian Health Service MOU Workgroups:
1. To increase access to services and benefits of IHS and VA (including the Veterans Benefits Administration (VBA)) for AI/AN Veterans, by:
   a. Expanding the highly successful Tribal Veterans Representative (TVR) program into the Indian health system, through integration into existing infrastructure.
   b. Providing systematic training for Benefits Coordinators at IHS, Tribal, and Urban programs in eligibility requirements for VBA benefits and priority designations for VA services and tools to assist them with appropriate referrals for benefits and services.
   c. Providing systematic training for appropriate VA staff on IHS services and IHS Contract Health Services (CHS) eligibility and tools to assist them with appropriate referrals for services.

2. To improve coordination of care, including co-management, for AI/AN Veterans served by both IHS, Tribal, or Urban Indian health programs and VA by:
   a. Developing and testing of innovative approaches to improve coordination of care and dissemination of best practices.
   b. Establishing standardized mechanisms for access by providers in one system to the electronic health records in the other system for patients receiving care in both systems.

3. To improve care through the development of health information technology, including the following:
   a. Sharing of technology
      i. Joint development of applications and technologies.
      ii. Adaptation of applications and technologies developed by one agency to permit use by the other.
      iii. Mechanisms for the exchange of funds to support this adaptation and sharing.
   b. Interoperability of systems to facilitate sharing of information on common patients and populations
   c. The VA and IHS will develop processes to share information regarding planned development of applications and technologies to facilitate this collaboration.
   d. The VA and IHS will develop standard, pre-approved language for inclusion in sharing agreements to support this collaboration.

4. To enhance access through the development and implementation of new models of care using new technologies, including:
   a. Tele-health services such as tele-psychiatry and tele-pharmacy.
   b. Services using mobile communication technologies.
   c. Enhanced telecommunications infrastructure to support collaboration in remote areas.
   d. Sharing of training programs and materials supporting these models of care.
   e. Sharing of knowledge gained from testing of new models of care.

5. To improve efficiency and effectiveness of both the VA and IHS at a system level through:
   a. Sharing of contracts and purchasing agreements that may be advantageous to both IHS and VA, supported by the development of:
      i. Standard, pre-approved language for inclusion of one party into contracts and sharing agreements developed by the other.
      ii. Processes to share information at an early stage of strategic planning to facilitate inclusion of one party into contracts and sharing agreements developed by the other.
   b. Development of pre-approved templates for agreements to facilitate local, regional, and national collaborations.
   c. Development of standard policies for use when IHS and VA facilities are co-located.

6. To increase availability of services, in accordance with law, by the development of payment and reimbursement policies and mechanisms to:
   a. Support care delivered to eligible AI/AN Veterans served at VA and IHS.

    b.   Facilitate the sharing and coordination of services, training, contracts, and sharing agreements, sharing of staff, and development of health information technology and improved coordination of care as specified elsewhere in this agreement.

7.  To improve the delivery of care through active sharing of care process, programs, and services with benefit to those served by both IHS and VA.
    a.   Examples of important collaborations currently underway include: the Consolidated Mail Outpatient Pharmacy, Post-Traumatic Stress Disorder, Home-Based Primary Care, and dementia care, but many additional opportunities exist and should be jointly pursued under this agreement. Especially valuable may be services where one party has unique expertise to share with the other, e.g. VA expertise in PTSD treatment and IHS expertise in diabetes management.
    b.   To facilitate this sharing, IHS and VA will, in consultation with the Tribes, develop a strategic investment plan to identify high priority services and programs for collaboration and for possible joint investment of resources. [Subgroups in the areas of: PTSD, Suicide Prevention, Long-Term Care (HBPC), Pharmacy, and Alaska]

8.  To increase cultural awareness and culturally competent care for VA and IHS beneficiaries. Recognizing that many cultures are represented in the populations served by IHS, Tribal and Urban Indian health programs and by VA, this will require:
    a.   Attention to cultural issues of importance in caring for American Indians and Alaska Native Veterans in the unique systems of care represented by VA and by IHS, Tribal, and Urban Indian health programs.
    b.   Attention to cultural issues of importance for the local Tribes and communities served.

9.  To increase capability and improve quality though training and workforce development, including:
    a.   Sharing of educational and training opportunities and the development of joint training initiatives.
    b.   Provision of continuing education units (CEUs) and continuing medical education (CMEs) activities at VA training to Indian health staff and at Indian health training to VA staff.
    c.   Education of residents, students, preceptors, and staff in IHS, Tribal, Urban and VA settings.
    d.   Sharing and exchange of staff for training opportunities.
    e.   Sharing of existing on-line and satellite training resources.
    f.   Collaboration on development of training opportunities.
    g.   Development of processes to share information regarding planned or projected training opportunities to facilitate this collaboration.

10. To increase access to care through sharing of staff and enhanced recruitment and retention of professional staff, including:
    a.   Sharing of specialty services.
    b.   Joint credentialing and privileging of staff.
    c.   Joint training initiatives.
    d.   Sharing materials and training in the use of Title 38 wage and benefits system.
    e.   Joint facility/service planning.
    f.   Facilitation of the temporary assignment of Commissioned Officers to the VA
       i.   For short-term training and projects.
      ii.   For long-term training and service delivery
     iii.   For deployment through existing rapid deployment force (RDF) programs and other Public Health Service emergency staffing systems to meet the needs of the VA in responding to public health crises of a regional and national nature. [Please note that Groups 9 & 10 have been collapsed into one group]

11. To address emergency, disaster, and pandemic preparedness and response, including:
    a.   Sharing of contingency planning and preparedness efforts, especially with regard to rural and vulnerable populations.
    b.   Joint development of materials targeting AI/AN Veterans and their families and communities.

    c.   Joint exercises and coordination of emergency response.

12. To accomplish the broad and ambitious goals of this agreement through the development of a joint Implementation Task Force to identify the strategies and plans for accomplishing the tasks and aims of this agreement, including:
    a.   Development of joint workgroups for both short-term and ongoing work necessary to accomplish the aims of this agreement.
    b.   Regular meeting of IHS and VA leadership at multiple levels in the organizations to review progress and set priorities.
    c.   An annual report of activities accomplished under the auspices of this agreement.

**Appendix R: OTGR Information Page/Contacts**



*Office of*
**Tribal Government**
**Relations**

# VA Central Office, Washington, DC

| Name | Telephone | Email |
|------|-----------|-------|
| Stephanie Birdwell, Director | 202-461-7400 | Stephanie.Birdwell@va.gov |
| Erika Moott, Executive Director | 202-461-7868 | Erika.Moott@va.gov |

# Regional Field Specialists

| Region | States | Name | Telephone | Email |
|--------|--------|------|-----------|-------|
| Western | OR, WA, ID, NV, CA, AK | Terry Bentley | 541-440-1271 | Terry.Bentley@va.gov |
| Southwest | UT, CO, AZ, NM | LoRae "Homana" Pawiki | 928-776-5306 | Lorae.Pawiki@va.gov |
| Southern Plains | TX, OK, KS | Mary Culley | 405-456-3876 | Mary.Culley@va.gov |
| Central | MT, WY, ND, SD, NE, MN, IA, WI, MI | Peter Vicaire | 651-405-5676 | Peter.Vicaire@va.gov |
| Eastern (Northeast) | NY, ME, MA, RI, CT | Peter Vicaire | 612-629-7587 | Peter.Vicaire@va.gov |
| Eastern (Southeast) | NC, SC, AL, FL, LA, MS | Mary Culley | 405-456-3876 | Mary.Culley@va.gov |

# For more information, please visit our website:

www.va.gov/tribalgovernment

*Office of*
**Tribal Government**
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# Top Veteran Resources within VA

## Benefit                    ## Contact

| Benefit | Contact |
|---------|---------|
| **Medical Treatment**<br><br>• Hospital, outpatient medical, dental, pharmacy, prosthetic<br>• Domiciliary, nursing home, community based residential care<br>• Sexual trauma counseling<br>• Specialized healthcare for women Veterans<br>• Homeless Veterans<br>• Readjustment Counseling<br>• Alcohol & Drug Treatment<br>• Caregivers<br>• Suicide Prevention | **www.va.gov "Locations" to find the nearest *Hospital or Clinic***<br><br>**or call 1-877-222-8387** |
| **Disability Benefits**<br><br>• Compensation or Pension | **www.va.gov "Locations" to find the nearest *Regional Benefits Office***<br><br>**or call 1-800-827-1000** |
| **Education & Training**<br><br>• Montgomery GI Bill<br>• Reserve Educational Assistance Program<br>• Post 9/11 GI Bill<br>• Survivors & Dependents Educational Assistance | **www.gibill.va.gov**<br><br>or call 1-888-442-4551 |

| | |
|---|---|
| Home Loan Guaranty<br><br>  • VA Loans<br>     ➢ Purchase<br>     ➢ Cash Out<br>     ➢ Refinance<br>     ➢ Interest Rate Reduction<br>  • Native American Direct Home Loan<br>  • Special Adapted Housing Grant | **www.va.gov** "Locations" to find the *Regional Loan* Center that covers your state<br><br>or call 1-800-827-1000 |
| Burial  Benefits<br><br>  • Headstone or Marker<br>  • Presidential Memorial Certificate<br>  • Burial  Flag<br>  • Reimbursement for Burial Expenses<br>  • Burial in a National Cemetery | **www.va.gov** "Locations" to find the *Cemetery Locations* that cover your state<br><br>or call 1-800-827-1000 |
| Dependents & Survivor's Benefits | **www.va.gov** "Locations" to find the nearest *Regional Benefits Office*<br><br>or call 1-800-827-1000 |
| Vocational Rehabilitation & Employment<br><br>  • Counseling, training, employment and other rehabilitation services to service-connected disabled veterans | **www.va.gov** "Locations" to find the nearest *Regional Benefits Office*<br><br>or call 1-800-827-1000 |
| Life Insurance | **www.va.gov** "Services" to find information about *Life Insurance* or also contact the Philadelphia VA *Regional Office & Insurance Center* **http://www.vba.va.gov/ro/philly/**<br><br>or call 1-800-827-1000 |

| Office of Rural Health<br><br>• Mission is to improve access and quality of care healthcare to rural and highly rural Veterans | **www.ruralhealth.va.gov/index.asp** |
|---|---|
| Most Commonly Used VA Forms | VA Form 10-10EZ, Application for Health Care Benefits - https://www.1010ez.med.va.gov/sec/vha/1010ez/<br><br>DD 214 & SF 180, Military Service Record Request - http://www.archives.gov/veterans/military-service-records/<br><br>VA Form 21-526EZ, Application for Disability Compensation & Related Compensation Benefits – http://www.vba.va.gov/pubs/forms/VBA-21-526EZ-ARE.pdf<br><br>VA Form 40-1330 Claim for Standard Government Headstone or Marker – http://www.va.gov/vaforms/va/pdf/VA40-1330.pdf |

# www.ehealth.va.gov
# Analytics Report

February 2012

# TRENDS – Weekdays vs. Weekend



**Visits**

Visits to the site were steady during the week, and activity dipped on the weekends.

# TRENDS – Weekdays vs. Weekend
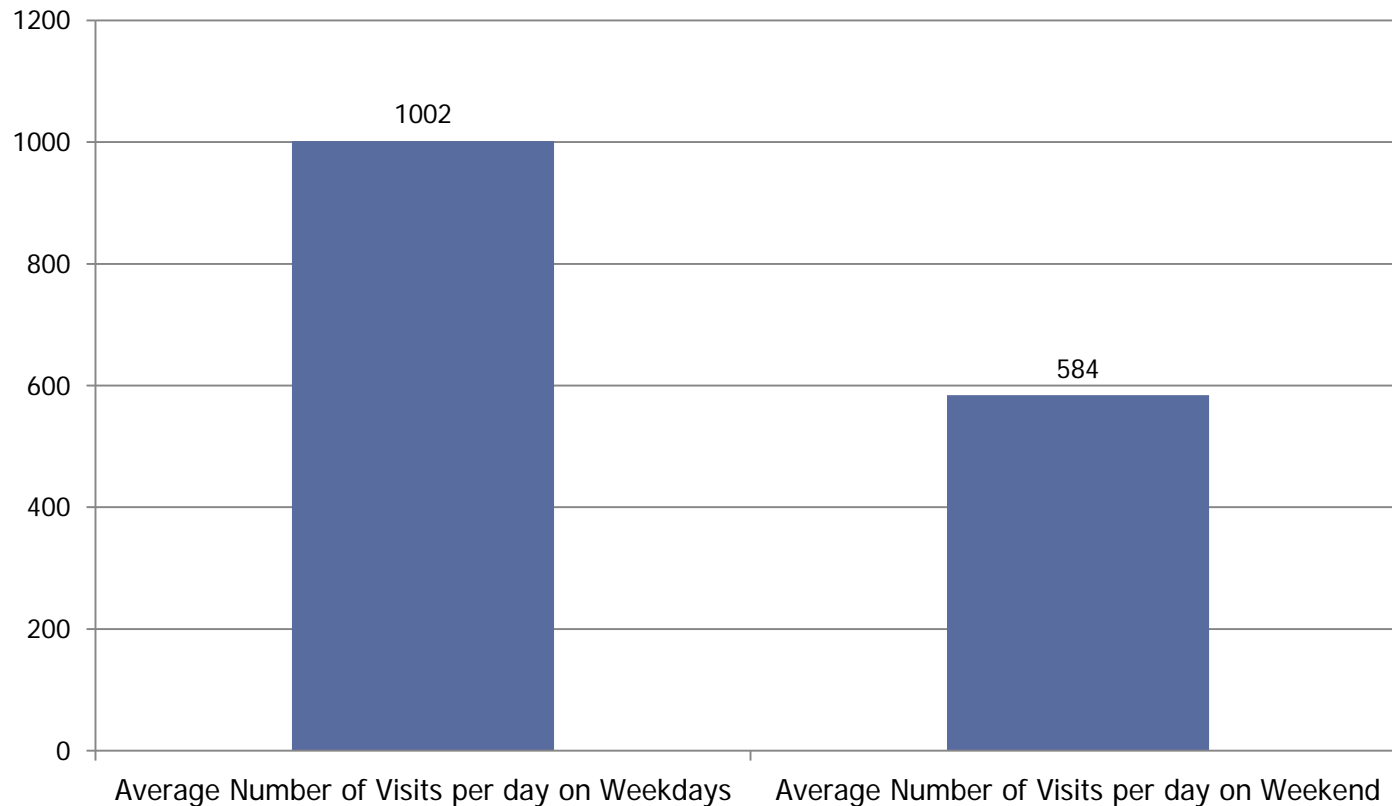


In fact, the average number of visits per day on the weekday were about double the number of visits per day on a weekend.

# TRAFFIC SOURCE: Most Popular Source



**% of Total Visits**

- Direct Traffic
- Google
- va.gov
- Others

8.10%
3.50%
5.60%
82%
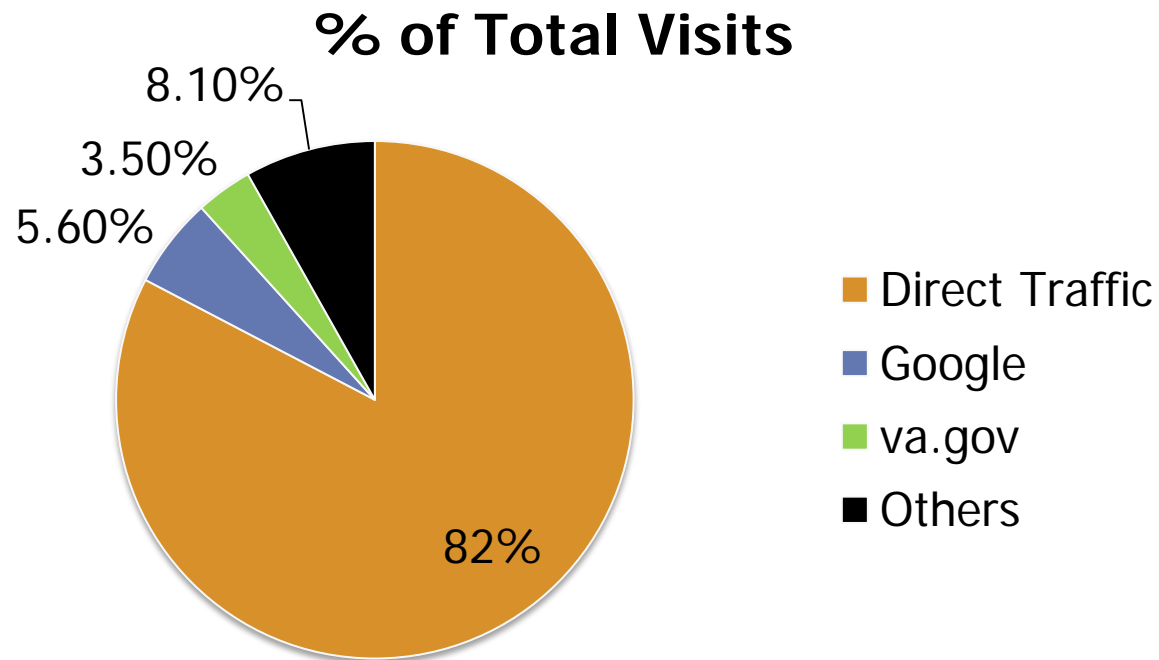
More than 82% of visits came to the site directly (through bookmarks or by directing typing in the URL, via a campaign link in an email or document) rather than through search or referring sites.

# VISITOR BEHAVIOR – Top Entry Pages

### Visits

| Page | Visits |
|------|--------|
| VHA's Innovation Initative | 115 |
| VistA | 185 |
| MS Outlook Demonstration | 226 |
| CPRS Demo | 232 |
| Creating Accessible Flash Course | 278 |
| Section 508 Office | 452 |
| Creating Accessible PDFs Tutorial | 493 |
| Homepage | 972 |
| CPRS Demo | 1913 |
| eHealth Media Gallery | 10755 |

### % of Total Visits

| Page | % of Total Visits |
|------|-------------------|
| VHA's Innovation Initative | 0.60% |
| VistA | 0.96% |
| MS Outlook Demonstration | 1.17% |
| CPRS Demo | 1.20% |
| Creating Accessible Flash Course | 1.44% |
| Section 508 Office | 2.34% |
| Creating Accessible PDFs Tutorial | 2.55% |
| Homepage | 5.04% |
| CPRS Demo | 9.91% |
| eHealth Media Gallery | 55.72% |

Over half of all visits to the site went to the eHealth Media Gallery page first, indicating that this URL is directly accessed. The CPRS Demo page was also a popular site entry point.

# VISITOR BEHAVIOR – Bounce Rate for Top Entry Pages
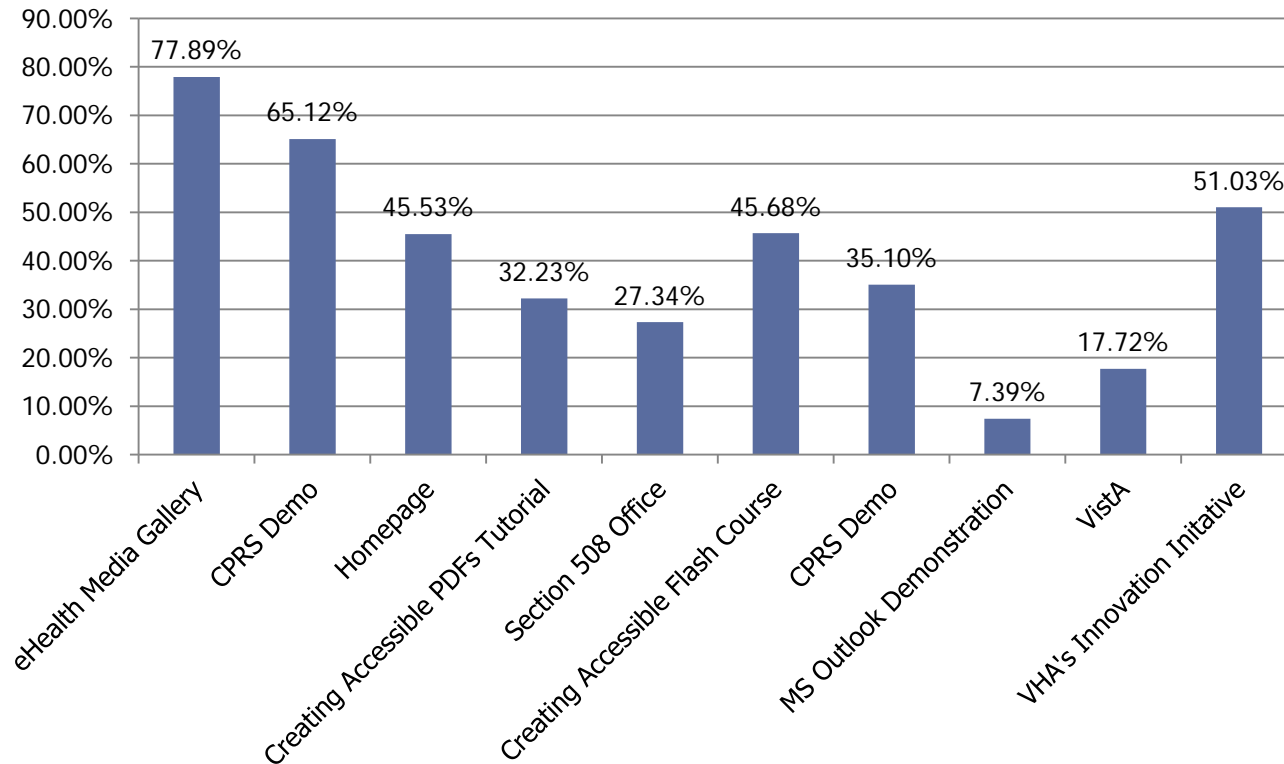


The high bounce rate for the eHealth Media Gallery page indicates that those who visited that page first, most often viewed the video(s), then left the site.

# VISITOR BEHAVIOR – Loyalty



21%

79%

- Visitors Who Visited Once
- Visitors Who Visited More Than Once
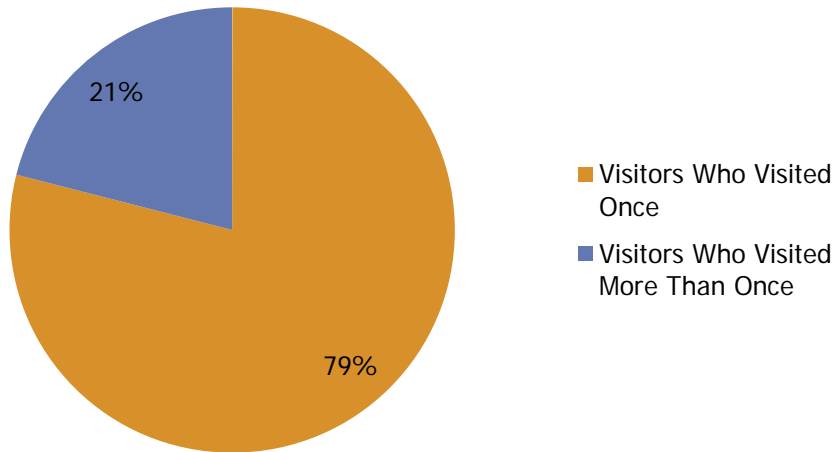
## Visitors by Number of Visits

| | |
|---|---|
| 7492 | 1 visit |
| 925 | 2 visits |
| 302 | 3 visits |
| 164 | 4 visits |
| 92 | 5 visits |
| 69 | 6 visits |
| 55 | 7 visits |
| 40 | 8 visits |
| 31 | 9 visits |
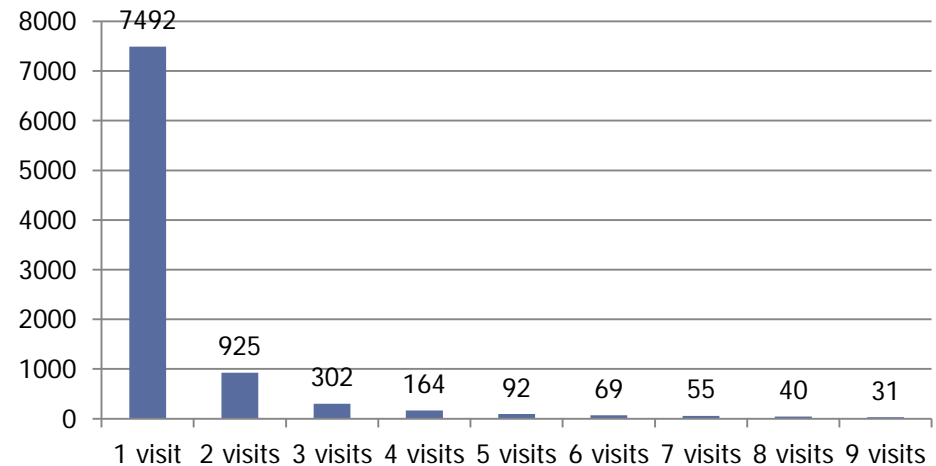
Over 79% of visitors came to the site one time during the month of February; 21% visited the site two or more times during this period.

# VISITOR TECHNOLOGY: Most Popular Browsers

## % of Total Visits



Legend:
- Microsoft Internet Explorer
- Firefox
- Google Chrome
- Safari
- Netscape
- Google Android Browser
- Opera

Values: 56.0%, 13.0%, 7.4%, 5.3%, 5.3%, 0.9%, 0.3%, 0.0%, 11.8%

## Microsoft Internet Explorer



Legend:
- 8
- 7
- 9
- 6
- 4
- 5.5
- 8.0.6001.18702
- 8
- 5
- 9

Values: 22.64%, 15.41%, 13.63%, 3.29%, 0.44%, 0.35%, 0.05%, 0.02%, 0.04%, 0.02%, 0.01%, 0.08%
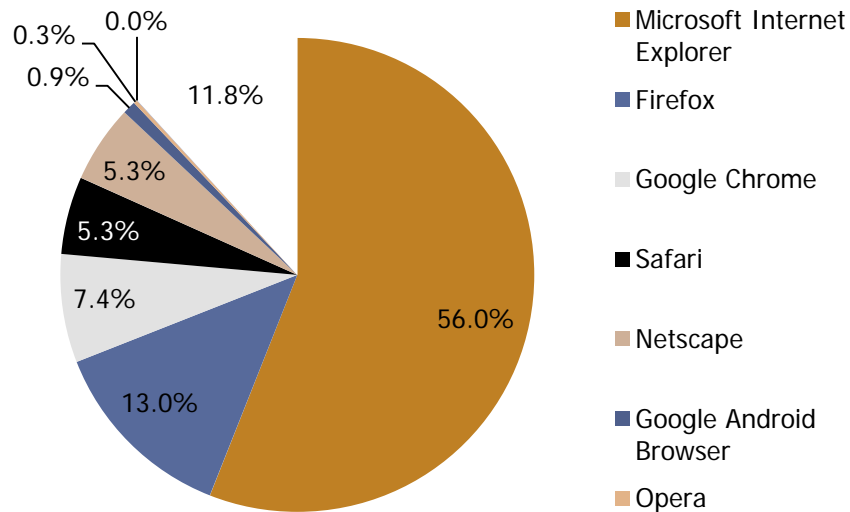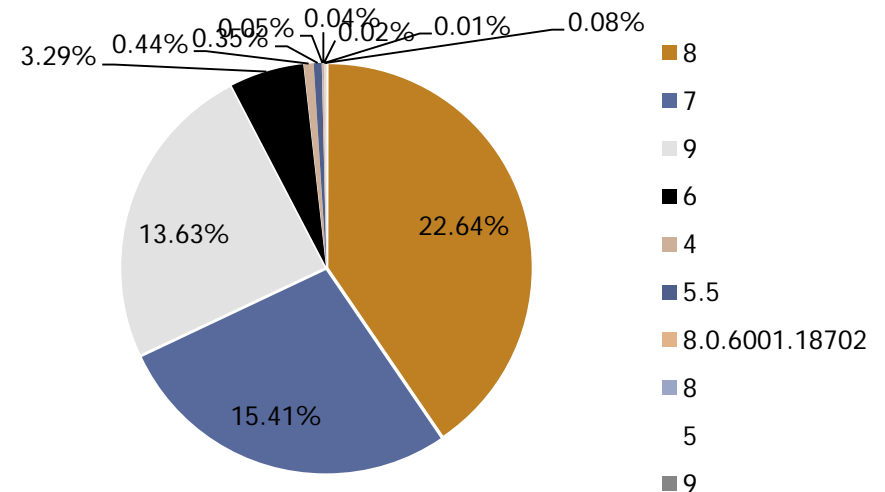
Microsoft Internet Explorer was used by more than half of all visitors to access the website; Internet Explorer versions 7,8 and 9 were the most popular.

# TOP CONTENT: Most Popular Downloads

## Documents

| Item | Value |
|------|------|
| Section 508 Checklist for Multimedia | 68 |
| Section 508 Checklist for Software | 83 |
| Section 508 Checklist for Web | 84 |
| My HealtheVet Video Transcript | 1032 |
| My HealtheVet Podcast Transcript | 1036 |

## PDFs

| Item | Value |
|------|-------|
| 508 XPRESS Newsletter | 47 |
| Creating Accessible PDFs Tutorial | 87 |
| Capri for VSOs | 89 |
| News You Can Use (June/July 2011) | 145 |
| Online Rx Factsheet | 316 |

## Videos

| Item | Value |
|------|-------|
| Section 508: Demonstration of Assistive Technology | 239 |
| Heroes | 266 |
| VA & DoD Sharing of Electronic Health Information | 652 |
| Innovation in VA: The Story of VistA | 1445 |
| Introduction to My HealtheVet | 2441 |

The Introduction to My Health*e*Vet video was the most popular content receiving 2,441 views and its corresponding transcript receiving 1,032 views, respectively.

# TOP CONTENT: Most Popular Pages

## Visits

| | |
|---|---|
| VA & DoD Health | 290 |
| CAPRI for VSOs | 340 |
| CPRS Demo | 433 |
| Creating Accessible Flash Course | 440 |
| VistA | 604 |
| Creating Accessible PDFs Tutorial | 636 |
| Section 508 Office | 823 |
| Homepage | 1386 |
| CPRS Demo | 2150 |
| eHealth Media Gallery | 11010 |

(0, 2000, 4000, 6000, 8000, 10000, 12000)

## % of Total Visits

| | |
|---|---|
| VA & DoD Health | 1.13% |
| CAPRI for VSOs | 1.32% |
| CPRS Demo | 1.68% |
| Creating Accessible Flash Course | 1.71% |
| VistA | 2.35% |
| Creating Accessible PDFs Tutorial | 2.47% |
| Section 508 Office | 3.20% |
| Homepage | 5.39% |
| CPRS Demo | 8.36% |
| eHealth Media Gallery | 42.81% |

(0.00% 10.00% 20.00% 30.00% 40.00% 50.00%)

Over 42% of all visits were to the eHealth Media Gallery, making it by far the most popular page. It is interesting to note that this page is not linked from the left navigation of the site.

# SUMMARY

In February, there were 9,452 visitors to the site, contributing to over 52,000 page views. The site was most active during the week, averaging 1,002 visits per day compared to 584 visits per day on the weekend. Wednesday was the most active day of the week, with activity peaking in the 11AM – 12PM timeframe. In contrast, Saturday was the least active day of the week.

Over 82% of all visits came directly to the site (via bookmarks, directly typed URLs, a redirect, through a linked campaign, etc.) rather than through a search engine or via a referring website.

For 95% of visits, the homepage was not the first page viewed indicating that users have direct links deep into the site. For over 55% of visits, the eHealth Media Gallery (http://www.ehealth.va.gov/EHEALTH/media.asp) was the first page visited. This page may have a redirect set to it, or is perhaps prominently featured in campaigns. It is also not linked from the left navigation of the site. The CPRS Demo page, as well as many of the 508 Accessibility pages were also entry points.

The majority of visitors visited the site just once during the month of February, but engagement during the visit was high, as significant time was spent in the eHealth Media Gallery which was the most visited page in all, representing over 42% of all visits. The "Introduction to My Health*e*Vet" video was the most popular content viewed, receiving 2,441 views and its corresponding transcript receiving 1,032 views, respectively.

# Department of Veterans Affairs' Virtual Lifetime Electronic Record and the Nationwide Health Information Network – Our Journey Continues

**Jennifer Teal, MS, RHIA, CPC**

**Peggy Pugh, RN, CIPP/G, CPC, CPC-H, CCP**

**Department of Veterans Affairs (VA)**

**Office of Informatics and Analytics (OIA)**

# Welcome and Introductions

# Background Information

# What is VLER?



On April 9, 2009, President Obama directed the Department of Defense (DoD) and the Department of Veterans Affairs (VA) to create the Virtual Lifetime Electronic Record (VLER), which:

*"… will ultimately contain administrative and medical information from the day an individual enters military service throughout their military career and after they leave the military."*

*-President Barack Obama*

# Benefits of VLER Health

- Allows sharing of certain parts of the electronic health record between VA, DoD and selected private health care providers over a secure network known as the Nationwide Health Information Network (NwHIN).

- Benefits Veterans and Servicemembers who receive a portion of their care from non-VA health care providers by:
  - Eliminating need to hand-carry health records.
  - Allowing VA and private health care providers to share access to up-to-the-minute health information.
  - Allowing Veterans to opt in or opt out at any time.

# Implementation

Health Bank or PHR Support Organization

State and Local Gov

Community Health Centers

SSA

VA

DoD

IHS

CDC

Community #1

Labs

**Common "Dial Tone" and Chain of trust**

Integrated Delivery System

Pharmacies

Community #2

**The Internet**

**Standards, Specifications and Agreements for Secure Connections**

**Legend:**
**CDC**: Centers for Disease Control & Prevention
**IHS**: Indian Health Service
**VA**: Department of Veterans Affairs
**SSA**: Social Security Administration
**CMS**: Centers for Medicare & Medicaid Services
**NCI:** National Cancer Institute
**DoD:** Department of Defense

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# Nationwide Health Information Network (NwHIN)

- NwHIN Direct
  - Trusted network
  - Point-to-point "push" of clinical information using secure email
  - Standard or non-structured notes and reports
- NwHIN Exchange
  - Trusted network
  - Query and retrieve methodology
  - Standards-based exchange of relevant clinical information



VA Electronic Health Record

Nationwide Health Information Network

Private Health Care Provider

DoD

Private Health Care Provider
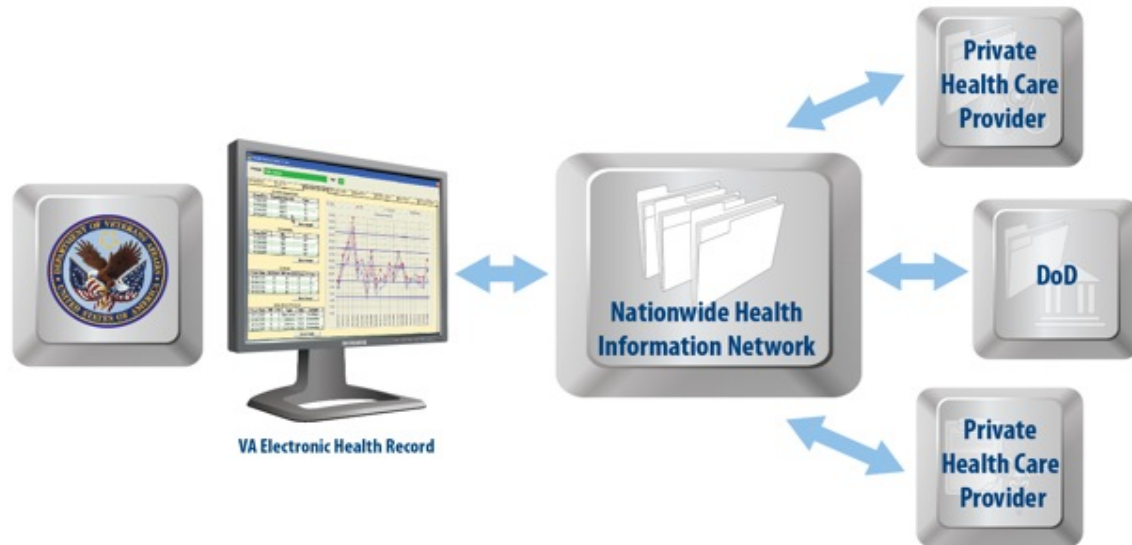
# VLER NwHIN Exchange

- Exchange of foundational clinical health data set
  - VA Two-Way Pilot Sites:
    - Asheville, N.C.
    - Richmond, Va.
    - Indianapolis, Ind.
    - Grand Junction, Colo.
    - Salt Lake City, Utah
    - Buffalo, N.Y.
    - Minneapolis, Minn.
    - Charleston, S.C.
    - Altoona, Penn.
  - VA, DoD Three-Way Pilot Sites:
    - Hampton, Va.
    - San Diego, Calif.
    - Spokane, Wash.
    - Puget Sound, Wash.

# NwHIN Exchange and Direct Projects



VA, DoD, Private Sector Exchange

VA, Private Sector Exchange

VA Direct

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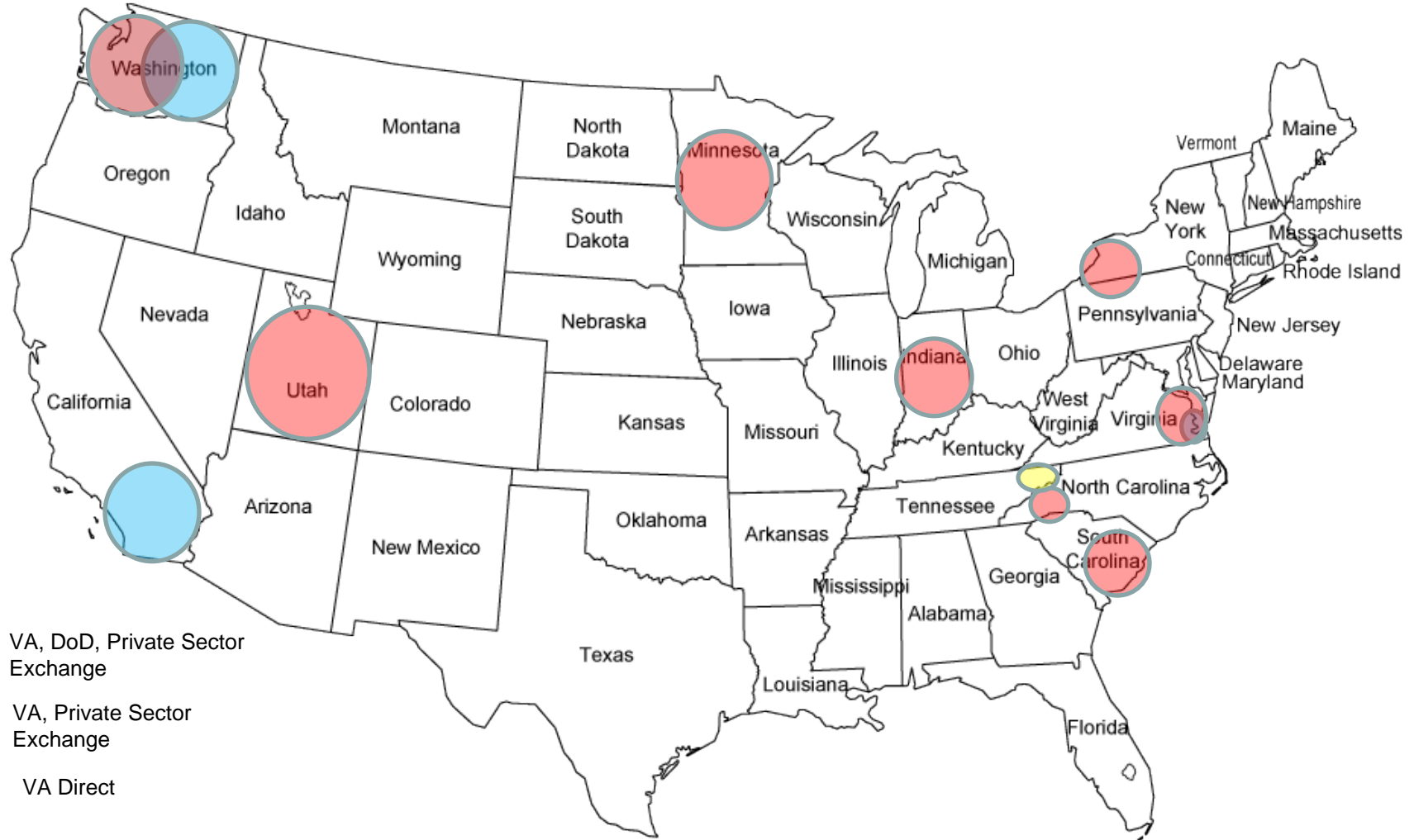
# DURSA

- **D**ata **U**se and **R**eciprocal **S**upport **A**greement
    - Legal agreement to promote and establish trust among multiple participants;
    - Codifies common set of expectations into enforceable legal framework; and
    - Eliminates need for point-to-point agreements.
        - Developed in coordination with Office of the National Coordinator (ONC) in the U.S. Department of Health and Human Services.
        - Part of NwHIN trial implementations.
        - "Network": all of standards, services and policies identified by ONC that enable secure health info exchange over Internet.

# Highlights of DURSA

- Applicable law

- Permitted Purposes

- Breach Notification

# Role of Health Information Management (HIM)

- Administrative management of health records is the responsibility of HIM.
- HIM professional is responsible for:
  - Both safeguarding and disclosing, as appropriate, health information according to applicable laws, organizational policies and standards;
  - Honoring the patient's right to consent to authorize disclosure or restrict disclosure, as permitted;
  - Ensuring each request for patient data and health care information has a valid authorization prior to disclosure as required;
  - Coordinating disclosures of protected health information (PHI); and
  - Applying routine administrative processes to all requests, recording all disclosures and accounting for any exceptions to routine processing.

# Patient Authorization Needs

- VA regulations require a Veteran's authorization to disclose health information pertaining to Title 38 U.S.C. 7332-protected conditions.

- Disclosing health information to DoD does not require an authorization.

- Private health partners may or may not require a Veteran's authorization, depending on their organizational policies and state regulations.

# Patient Authorization Examples

| Organization | Consent model | Comments |
|---|---|---|
| VA | **Opt in** | Global to all NwHIN participants, duration = 5 years |
| DoD | **Opt out** | |
| Kaiser Permanente | **Opt in** | Opt in approach taken for initial San Diego pilot |
| Utah Health Information Network | **Opt in** | Emergency case and one time authorization considered |
| MedVirginia | **Opt out** | |
| Inland Northwest Health Services | **Opt out** | |
| Multicare | **Opt in** | |
| Indiana Health Information Network | **Opt out** | |
| North Carolina Health Information Collaborative | **Opt out** | |

**NO** information is shared until the patient **opts in** to participate.
Information **is** shared unless the patient **opts out.**

# Our Success
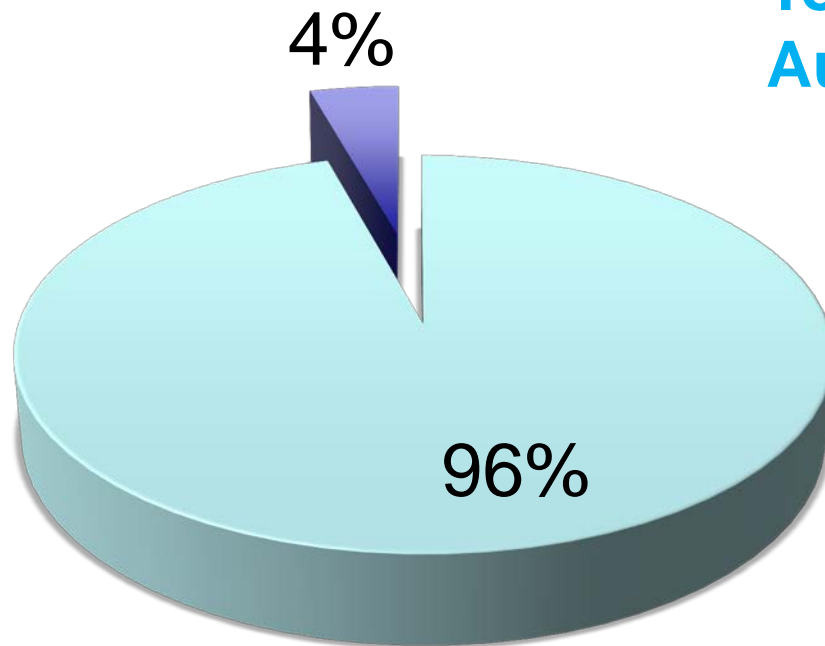
# Our Success - Enrollment
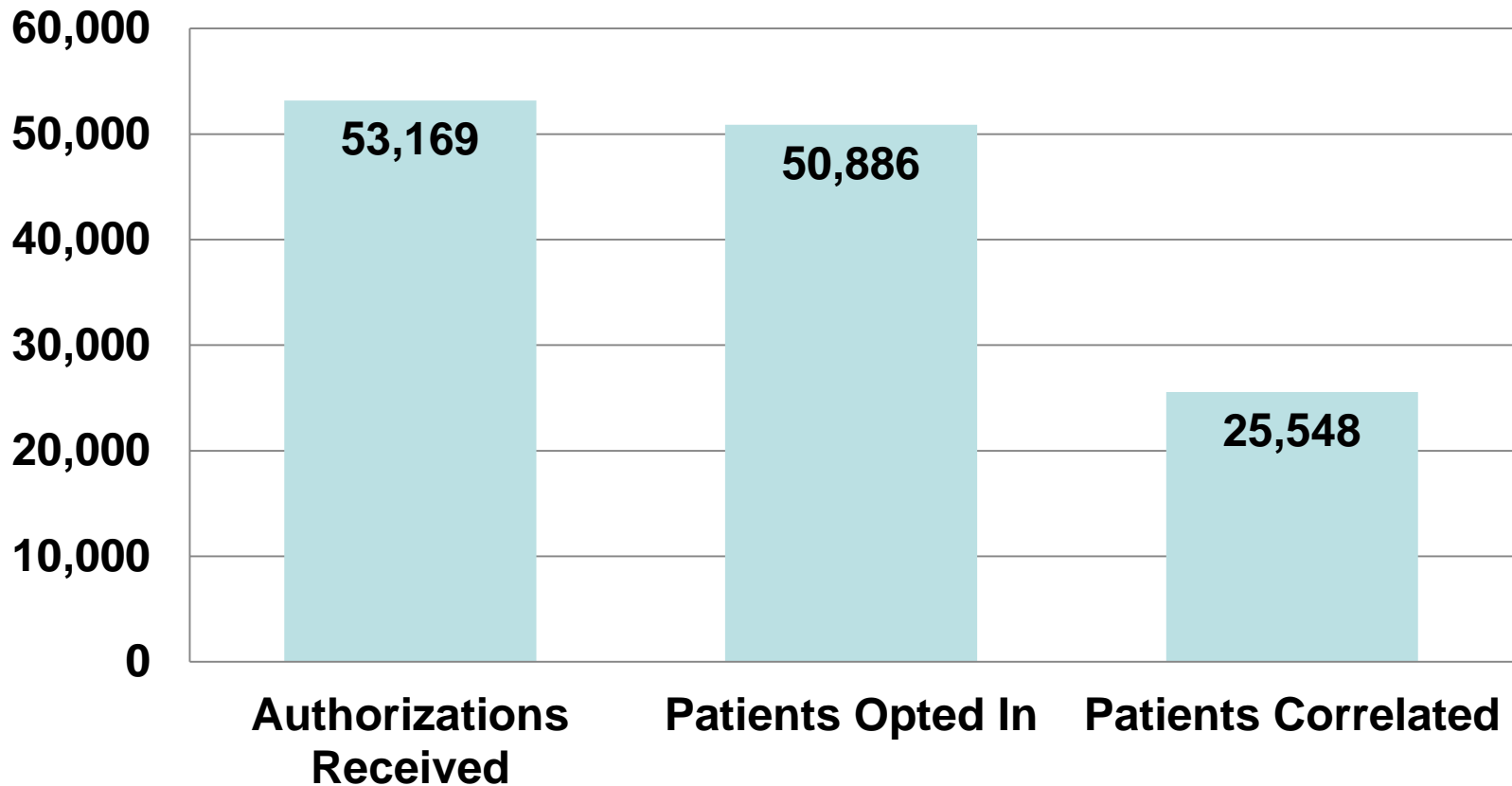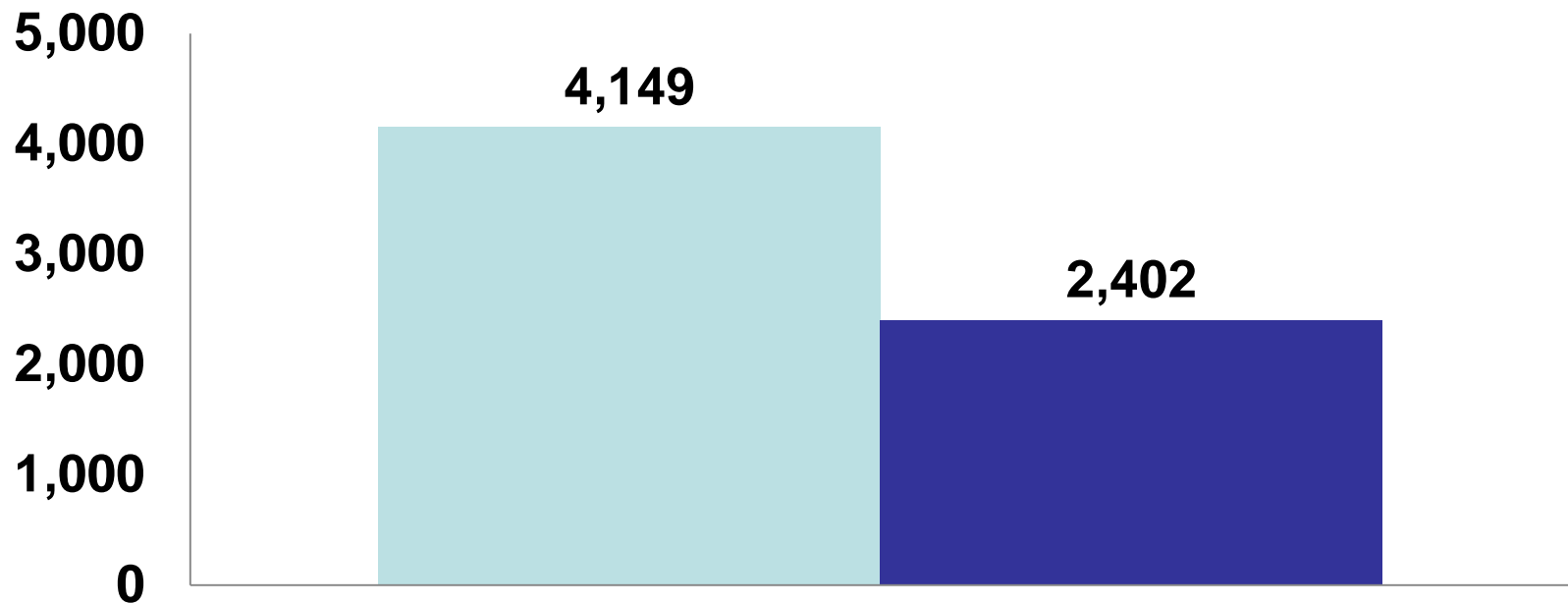


As of July 25, 2012

| C32 | C62 |
|---|---|
| Person Information | Consults/Referrals |
| Support | Discharge Summaries |
| Healthcare Provider | Results of Diagnostic Studies |
| Information Source | Cardiology Studies |
| Language Spoken | Obstetrical Studies |
| Allergies | Gastroenterology Endoscopy Studies |
| Problems/Condition | Pulmonary Studies |
| Medications | Ophthalmology/Optometry Studies |
| Lab Results: chemistry and hematology | Neuromuscular  Electrophysiology Studies |
| Immunizations | Miscellaneous Studies |
| Vital Signs | Procedure notes |
| List of encounters | History & Physical notes |
| List of procedures | Radiology reports |
|  | Surgery reports |
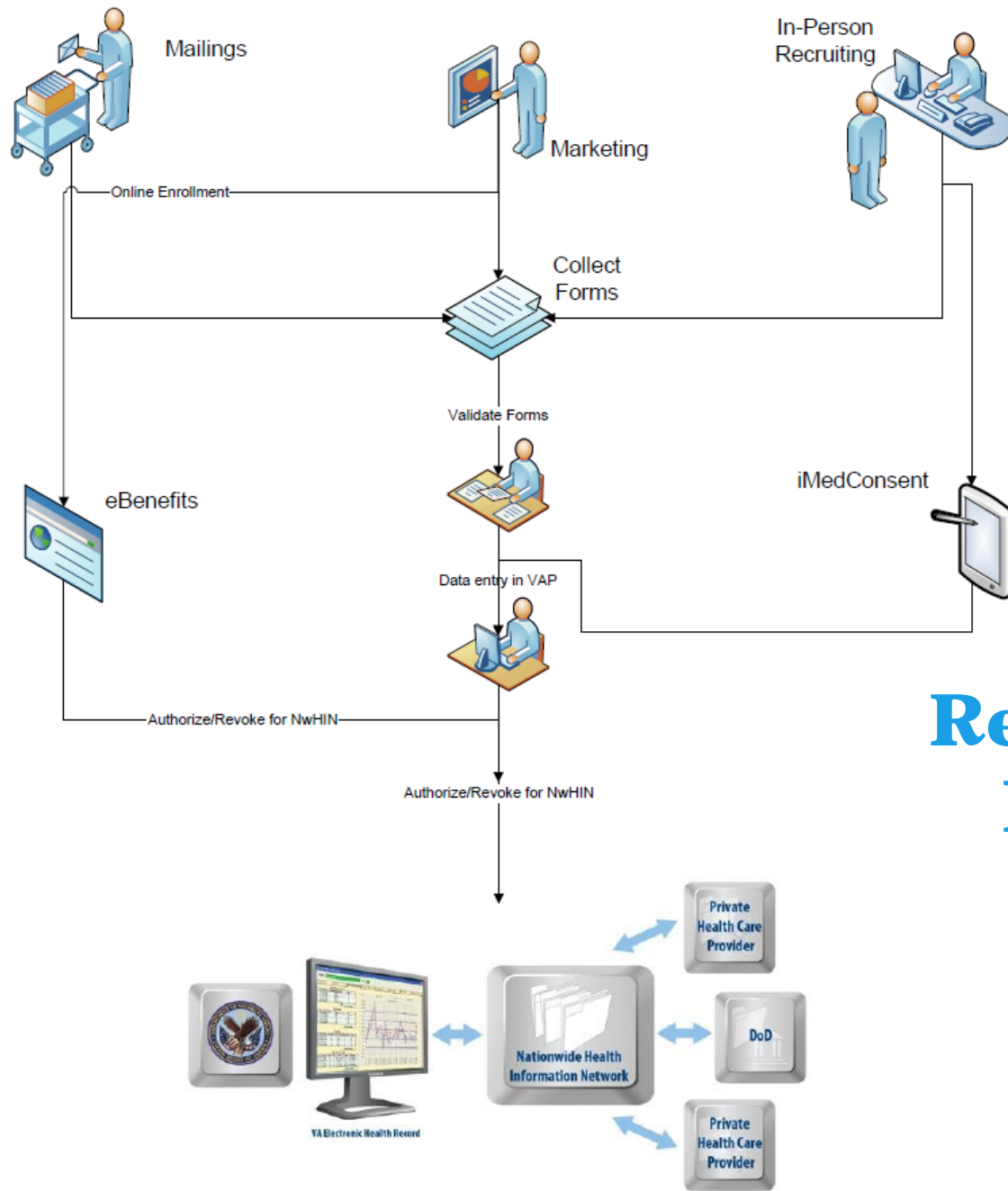
**Recruitment Methods**

# Online Enrollment



www.ebenefits.va.gov

# Veterans Authorizations and Preferences

# Recruitment Method Success

## Enrollment by Recruitment Method



4%

40%

56%

- Mail-in Enrollment
- Walk-in Enrollment
- Online Enrollment
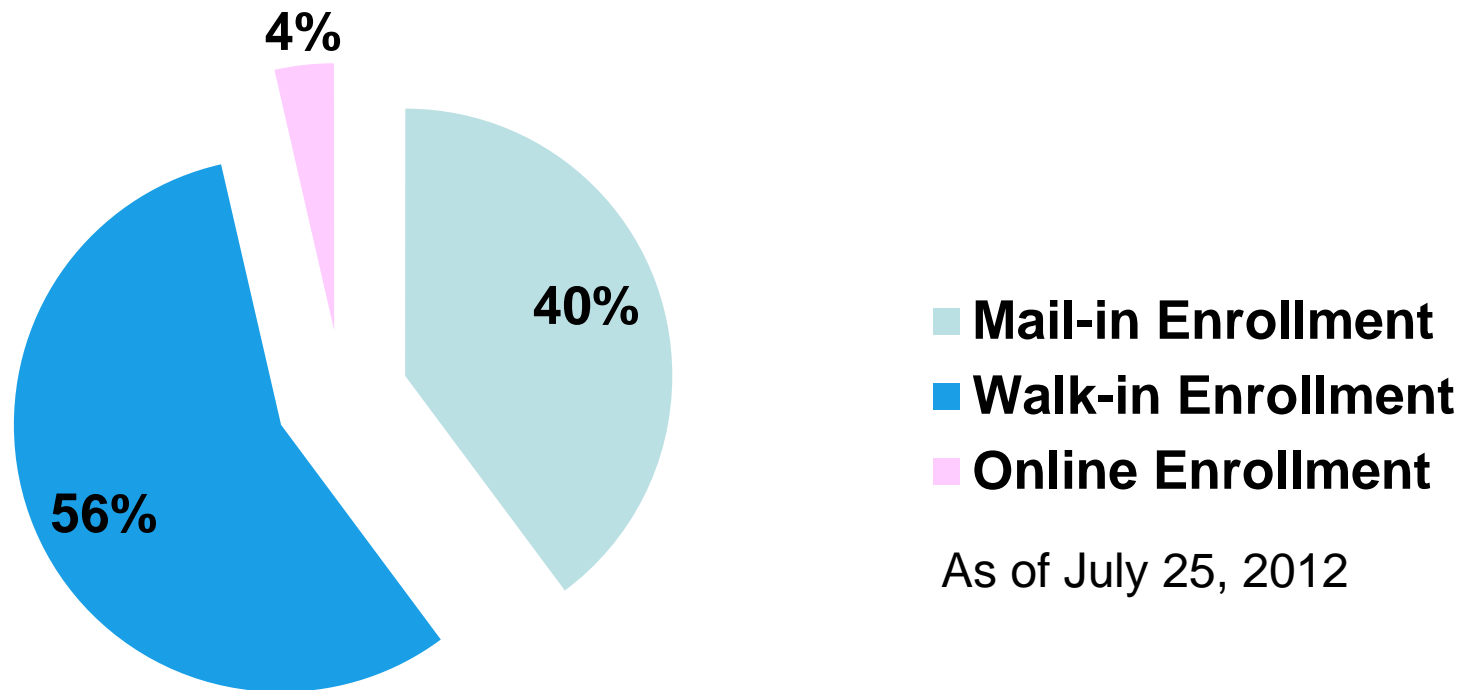
As of July 25, 2012

# Recruitment Method - Mail

**Mail-outs Returned, 21,169**

**Initial Mail-outs, 112,906**
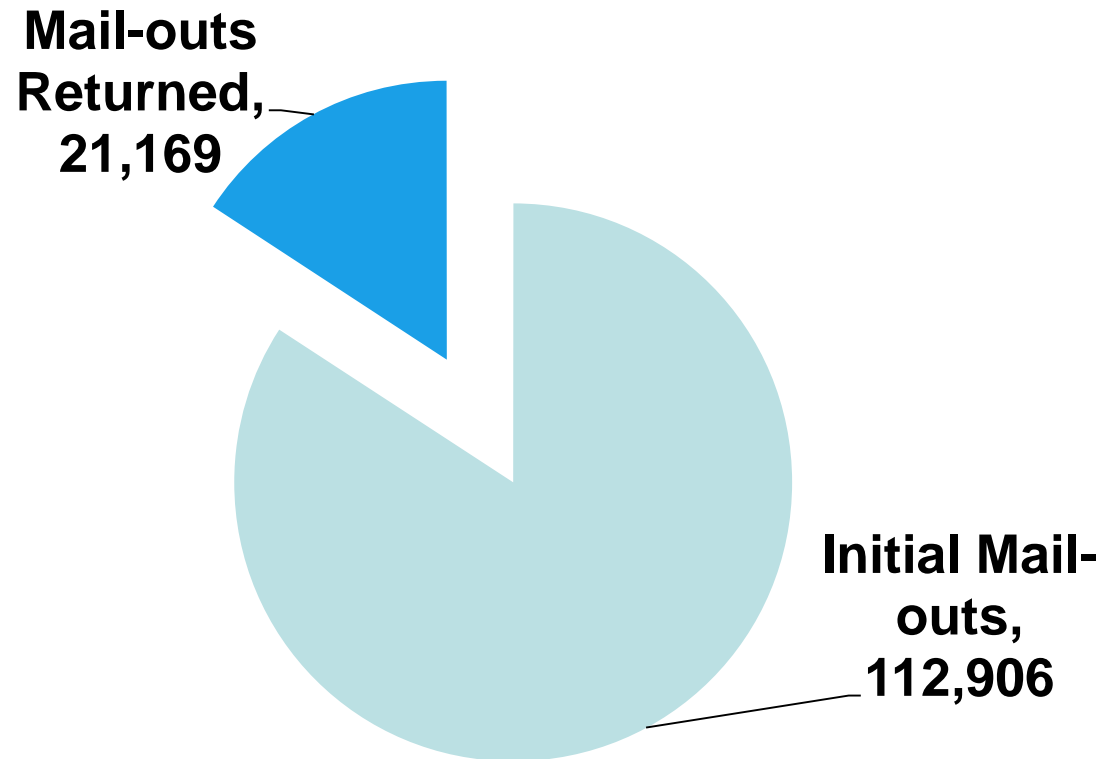
As of July 25, 2012

# Our Challenges

# Challenges for VLER Health

- The pilot phase involves an initial flood of enrollment activities, with "trickle-down" expected.

- Short term ramp-up vs. long-term sustainability.

- Managing the patient authorization process.

- System of Records and Retention Requirements.

- Incorporating non-VA health information without unnecessary use of copy/paste.

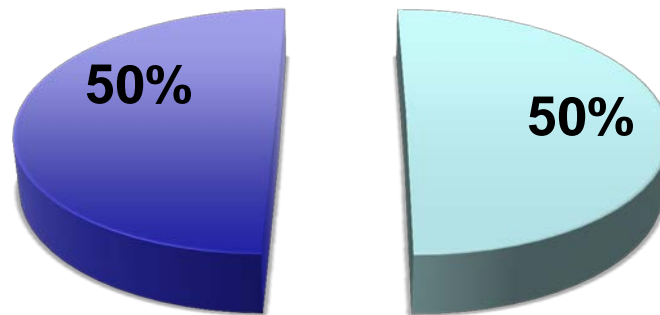- Moving towards fine-grained restriction capabilities.

# Challenges to Identity Management

- Patient identity format volatile
- Successful matching based on
  - Full name
  - Date of birth
  - Gender
  - Full SSN
- Multiple assigning authorities
- Matching algorithm – deterministic vs. probabilistic
- Announcement strategy
  - Real-time with query for document
  - Ahead of time when patient authorization is received

Name = Ted Brown
Zip = 23669

Name = Ted Brown
Zip = 23669-3351

Name = Theodore Brown
Zip = 23669
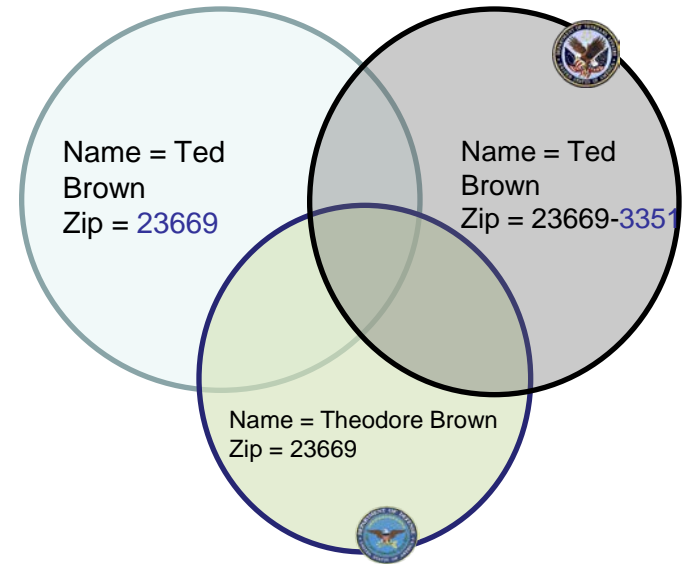
# Challenges to Identity Management

**% Correlated vs. Uncorrelated**



50%

50%

- Correlated
- Uncorrelated

As of July 25, 2012

# Lessons Learned

- Recruitment
- Patient Authorizations
- Patient Matching
- Data Exchange

# Next Steps

# Contact Information/Questions?

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    jennifer.teal@va.gov


Peggy Pugh, RN, CIPP/G, CPC, CPC-H, CCP
    margaret.pugh@va.gov

# References and Resources

- VLER: http://www.va.gov/vler/
- NwHIN Exchange: http://healthit.hhs.gov/portal/server.pt/community/healthit_hhs_gov__nhin_exchange/1407
- NwHIN Inventory of Tools: http://healthit.hhs.gov/portal/server.pt/community/healthit_hhs_gov__nhin_inventory/1486
- NwHIN Resources (such as DURSA, breach notification, etc.): http://healthit.hhs.gov/portal/server.pt/community/healthit_hhs_gov__nhin_resources/1194
- Affordable Care Act's Impact of Health Care for Veterans, February 22, 2012: http://health.universityofcalifornia.edu/2012/02/22/affordable-care-acts-impact-on-health-care-for-veterans/