Department of Veterans Affairs   **VHA DIRECTIVE 1931**
Veterans Health Administration   **Transmittal Sheet**
Washington, DC 20420   **September 13, 2022**

VHA FIELD HEALTH INFORMATICS PROGRAM AND GOVERNANCE

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive establishes the VHA Field Health Informatics (HI) Program with HI Integrated Governance. This directive will ensure appropriate organization, resourcing and governance of Department of Veterans Affairs (VA) medical facility and Veterans Integrated Services Network (VISN) HI activity and coordination with VHA Central Office (VHACO).

2. SUMMARY OF CONTENT: This new VHA directive:

    a. Defines the goals of the VHA Field HI Program and HI Integrated Governance.

    b. Defines roles, functions and responsibilities of leadership at VHA, VISN and VA medical facility levels for consistent implementation of the VHA Field HI Program.

3. RELATED ISSUES: VHA Directive 1026.01, Systems Redesign and Improvement, dated December 12, 2019.

4. RESPONSIBLE OFFICE: The VHA Chief Informatics Officer, Office of Health Informatics (105) is responsible for the contents of this directive. Questions may be addressed to VHA105HIVIEWS@va.gov.

5. RESCISSIONS: None.

6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of September 2027. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

                         BY DIRECTION OF THE OFFICE OF
                         THE UNDER SECRETARY FOR HEALTH:

                         /s/ Steven L. Lieberman, M.D.
                         Deputy Under Secretary for Health

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

DISTRIBUTION: Emailed to the VHA Publications Distribution List on September 14, 2022.

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VHA FIELD HEALTH INFORMATICS PROGRAM AND GOVERNANCE

VHA FIELD HEALTH INFORMATICS PROGRAM AND GOVERNANCE

1. PURPOSE

This Veterans Health Administration (VHA) directive establishes policy for the VHA Field Health Informatics (HI) Program and its governance. The directive ensures appropriate organization, resourcing, coordination and governance of HI activity at Department of Veterans Affairs (VA) medical facilities and Veterans Integrated Services Networks (VISNs) with coordination from VHA Central Office (VHACO). **AUTHORITY:** 38 U.S.C. §§ 7301(b), 7311(a).

2. BACKGROUND

a. VHA has been a pioneer and international leader in health information technology (health IT) and informatics since the 1970s. The medical literature has frequently cited VHA's informatics and health IT excellence as a primary enabling capability that allows VHA to deliver, measure and manage high-quality care. VHA's informatics excellence arises from its top-quality workforce of technologists, health informaticians, HI policy makers, nursing informaticists, medical record specialists, librarians and engineers in human factors, processes, biomedical devices, computer science and business architecture. ***NOTE:*** *For more information, see VistA-U.S. Department of Veterans Affairs National Scale HIS at* https://pubmed.ncbi.nlm.nih.gov/12810119/ *and the VA Advantage: The Gold Standard in Clinical Informatics a* https://pubmed.ncbi.nlm.nih.gov/16088306/.

b. A high-performing informatics organization is needed to address priorities stated in the fiscal year (FY) 2020-2025 Long-Range VHA Plan Framework: maintain trust optimize access and improve outcomes, learn and teach, and modernize systems and enhance readiness. ***NOTE:*** *For more information, see FY 2020-2025 VHA Long-Range Plan Framework and VA's FY 2022-2028 Strategic Plan at* https://vaww.va.gov/VHACSO/docs/FY2022-2025VeteransHealthAdministrationLong-RangePlanFramework508.pdf *and* https://www.va.gov/oei/docs/va-strategic-plan-2022-2028.pdf. *These are internal VA websites that are not available to the public.*

c. The VHA Office of Health Informatics (OHI) supports VA's health care system, clinicians, and program office staff by providing innovative health information management, enhanced by technology, to support the unique needs of Veterans, providers and sharing partners. OHI ensures applications and data systems, including the Electronic Health Record Modernization (EHRM) initiative, are deployed in a manner that meets the requirements of VHA users; enhances health data exchanges with Federal and private partners; and provides policy and guidance to Informatics, Freedom of Information Act (FOIA), Library, Privacy, Health Information Management, and Records Management personnel nationwide. ***NOTE:*** *For more information see* http://vaww.ehealth.va.gov/EHEALTH/. *This is an internal VA website that is not available to the public.*

d. The need for a high-performing, innovative informatics workforce is just as great today as at any time over the past few decades. Increasingly sophisticated technology requires an increasingly sophisticated workforce to derive benefit from health IT. Studies conducted by KLAS Research have shown that health IT implementation and configuration–the work of informaticists–is much more important for the success of the technology than the technology itself. Increasingly sophisticated health IT also creates opportunity for increasingly cost-effective innovation in the use of lightweight, supplemental technologies that complement both commercial and government health IT. ***NOTE:*** *More information regarding KLAS research can be found at* https://klasresearch.com.

e. A 2008 Under Secretary for Health memorandum advised for the establishment of formal informatics leadership presence at the VISN and VA medical facility levels. Based on the 2008 memorandum, the Deputy Under Secretary for Health for Operations and Management (now referred to as the Assistant Under Secretary for Health for Operations) provided implementation guidance and reporting requirements in 2009 to establish formal field-based health informatics infrastructure.

f. The formal field-based health informatics infrastructure is used to create the VHA Field HI Program. VHACO, VA medical facility and VISN programs that unite the efforts of VHA's informatics staff are critical for VHA to realize value from health IT. This directive addresses the following needs for an organized, collaborative VHA Field HI Program:

(1) VHACO, VISNs and VA medical facilities need more informaticians than they can supply themselves to address the volume of need. Cooperative work is foundational to HROs.

(2) VA medical facilities need informatics resources from VHACO and support from other VA medical facilities to cover the range of expertise necessary to implement increasingly sophisticated business and clinical solutions within an agile methodology.

(3) VA medical facility and VISN HI staff need training in a variety of technology-agnostic informatics methods to allow VHA to inform, benefit from and evaluate an increasing variety and sophistication in health IT.

(4) VHACO values the perspective of VA medical facility-based personnel grounded in front-line health care delivery to participate on national teams that transform and adopt an enterprise standard of quality and practice of care.

(5) VISNs and VA medical facilities should influence and inform the national agenda to promote excellence in health care transformation.

(6) VHACO, VISNs, VA medical facilities and informatics staff are essential stakeholder communities within VHA governance bodies and informatics communication and coordination structures.

(7) VHACO, VISN and VA medical facility Integrated Clinical Communities (ICCs) form the foundation for a robust informatics workforce to provide clinical-domain-specific informatics support for more safe, efficient and effective workflows. ***NOTE:*** *For more information, see ICCs and HRO Models at* https://dvagov.sharepoint.com/sites/VACOVACOMPM/CSL/. *This is an internal VA website that is not available to the public.*

g. The VHA Field HI Program uses the Enterprise Health and Informatics Operations Guide as a framework to optimize and standardize HI structure and processes across VHA. It establishes a methodology to identify and categorize clear, distinct informatics functions across the organization. It formalizes a structure to create clear communication channels and synchronize HI activities agnostic of health IT systems and applications, with the intent to acknowledge and support the individual needs of VA medical facilities and facilitate the operational and professional growth of informaticists. ***NOTE:*** *The Enterprise Health Informatics Operations Guide can be found at* https://dvagov.sharepoint.com/sites/VHAIPX/. *This is an internal VA website that is not available to the public.*

3. DEFINITIONS

a. **Electronic Health Record.** Electronic health record (EHR) is the digital collection of patient health information resulting from clinical patient care, medical testing and other care-related activities. Authorized VA health care providers may access EHR to facilitate and document medical care. EHR comprises existing and forthcoming VA software including Computerized Patient Record System (CPRS), Veterans Information Systems and Technology Architecture (VistA) and Cerner platforms. ***NOTE:*** *The purpose of this definition is to adopt a short, general term (EHR) to use in VHA national policy in place of software-specific terms while VA transitions platforms.*

b. **Health Informatics.** HI is a multidisciplinary and integrative field that focuses on health information management and IT in support of health and health care. The field of HI draws from computer, cognitive and social sciences for the development, change management, implementation, configuration, deployment and evaluation of systems that manage health information.

4. POLICY

It is VHA policy that each VISN HI Program and VA medical facility HI Service be established under the direction of a VISN Chief Health Informatics Officer (CHIO) and VA medical facility CHIO, respectively, to provide integrated management of HI services that ensure the quality and reliability of health care for Veterans.

5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Deputy Under Secretary for Health.** The Deputy Under Secretary for Health is responsible for:

(1) Supporting OHI with implementation and oversight of this directive.

(2) Collaborating with the Assistant Under Secretary for Health for Operations in reviewing annual reports submitted by the VHA Chief Informatics Officer on the implementation status of and value achieved by the VHA Field HI Program through key programmatic milestones and key metrics for structure, process, and outcomes. *NOTE: Specific key milestones and metrics are available in the Enterprise Health Informatics Operations Guide. For more information, see paragraph 2.g.*

(3) Ensuring that each VISN Director has sufficient resources to implement and maintain the VHA Field HI Program structure in all VA medical facilities within the VISN. Please see Appendix A for VISN and VA medical facility implementation information.

(4) Establishing the expectation through an Executive Decision Memo that the OHI is a conduit for communications to VA medical facilities and VISNs about changes to HI-managed VHA systems and processes.

c. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

(1) Communicating the contents of this directive to each of the VISNs.

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

d. **VHA Chief Informatics Officer.** The VHA Chief Informatics Officer is responsible for:

(1) Aligning resources to implement and maintain the VHA Field HI Program.

(2) Establishing VHA Field HI Program performance standards, reporting requirements and performance monitoring systems, such as the implementation status of and value achieved by the VHA Field HI Program through key programmatic milestones and key metrics for structure, process and outcomes.

(3) Completing annual program auditing and reporting to the Deputy Under Secretary for Health and Assistant Under Secretary for Health for Operations. The

reports must reflect program performance against established performance standards. **NOTE:** *Specific key milestones and metrics are available in the Enterprise Health Informatics Operations Guide. For more information, see paragraph 2.g.*

(4) Collaborating with Deputy Under Secretary for Health and Assistant Under Secretary for Health for Operations in reviewing annual reports submitted by the VHA Chief Informatics Officer on the implementation status of and value achieved by the VHA Field HI Program through key programmatic milestones and key metrics for structure, process and outcomes.

(5) Ensuring that VISN Directors and VA medical facility Directors select representatives from VHACO, VHA Field HI Programs and HI Integrated Governance to serve in ad hoc and standing committees that address clinical workflows and use of health IT.

(6) Providing oversight for VISN and VA medical facility compliance with HI-related elements of this directive and ensuring corrective action is taken if non-compliance is identified.

(7) Determining when VISN and VA medical facility HI representation is necessary on ad hoc or standing VHA committees.

(8) Collaborating with the Assistant Under Secretary for Health for Operations and making recommendations for how VISN Directors can share of informatics staff and other resources during the deployment of EHR systems and other major health IT systems.

e. **VHA Office of Health Informatics Chief Health Informatics Officer.** The VHA OHI CHIO is responsible for:

(1) Overseeing the operationalization, implementation, and sustainment of the VHA Field HI Program in collaboration with the VISN CHIOs and VA medical facility CHIOs. **NOTE:** *For further information regarding VHA Field HI Program goals and structure see paragraphs 6 and 7.*

(2) Establishing and managing key programmatic milestones and metrics for structure, process and outcomes of the VHA Field HI Program. **NOTE:** *Specific key milestones and metrics are available in the Enterprise Health Informatics Operations Guide. For more information, see paragraph 2.g.*

(3) Communicating and coordinating with other VHA program office leadership to support their staff in engaging with the VHA Field HI Program and HI Integrated Governance.

(4) Developing communication channels with the VHA Field HI Program about changes to health IT and HI-managed systems. For example, the established VA Health Informatics Community of Practice (HI CoP) is the de facto means of communicating national changes to health IT systems that require HI personnel involvement. **NOTE:**

For more information, see paragraphs 6 and 7 and the HI CoP at https://dvagov.sharepoint.com/sites/VHAHICOP/. This is an internal VA website that is not available to the public.

(5) Establishing a standardized, national program for development and delivery of recommended training content, to support VISN and VA medical facility informatics personnel achieve proficiency in technology-agnostic informatics methods to manage health IT and informatics system development, implementation, configuration, deployment, sustainment and evaluation.

(6) Maintaining the Enterprise Health Informatics Operations Guide with updates at least yearly. ***NOTE:*** *See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.*

(7) Coordinating with other VHA and VA organizations to support the VHA Field HI Program and HI Integrated Governance for the implementation of EHR systems.

f. **Veterans Integrated Services Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and inform leadership when barriers to compliance are identified.

(2) Establishing and sustaining the VISN HI Program as a functional organizational unit and its operational connection to national and VA medical facility HI Programs.

(3) Establishing and sustaining the VISN HI Integrated Governance and its effective interaction with national and VA medical facility HI Integrated Governance.

(4) Designating and supervising a VISN CHIO. ***NOTE:*** *The VISN Director may designate another member of the VISN Executive Leadership Team to supervise the VISN CHIO.*

(5) Selecting representatives from the VISN HI Program and VISN HI Integrated Governance for ad hoc or standing VHA committees.

(6) Collaborating with VA medical facility Directors to identify whether each VA medical facility in the VISN should have a dedicated VA medical facility CHIO or should share a VA medical facility CHIO with other VA medical facilities*.*

(7) Ensuring the implementation of the VISN-level HI Program and VISN and VA medical facility-level HI Integrated Governance.

(8) In collaboration with VA medical facility Directors, approving general guidelines for VA medical facility staff to participate in VHA informatics projects and approving major health informatics projects according to standard VISN resource governance (e.g., through VISN HI Integrated Governance).

(9) Reviewing at least quarterly the progress of the VISN and each VA medical facility within the VISN towards programmatic milestones and key metrics for success that have been approved by VISN HI Integrated Governance.

(10) Ensuring the VISN CHIO and VA medical facility Directors establish the following to manage the surge of change requests during the implementation of a health IT system (e.g., EHR system) in the VISN:

(a) A temporary subprogram of the VISN HI Program supplemented by HI personnel from around the VISN.

(b) A temporary subcommittee of the HI Integrated Governance to govern that program.

g. **Veterans Integrated Services Network Chief Health Informatics Officer.** The VISN CHIO is responsible for:

(1) Leading the implementation, sustainment, and daily operations of the VISN HI Program and facilitating the VA medical facility HI Services within the VISN. The program operation will be consistent with the Enterprise Health Informatics Operations Guide. *NOTE: See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.*

(2) Coordinating HI operations with the VHA OHI CHIO and VA medical facility CHIOs.

(3) Co-chairing VISN HI Integrated Governance and coordinating VISN HI Integrated Governance with VA medical facility HI Integrated Governance.

(4) Reporting quarterly the progress of the VISN and of each VA medical facility within the VISN towards key milestones, metrics, results of VISN informatics-related needs assessments and monitoring of fulfillment of informatics-related needs as specified by the VISN HI Integrated Governance. *NOTE: VA medical facility-level results must be first reviewed and approved by the corresponding VA medical facility Director.*

(5) Serving as the primary health informatics advisor to the VISN Director, key leaders, managers, and officers.

(6) Monitoring and responding to OHI-established communications channels for information and actions for VISN and VA medical facility personnel to take local action or to participate in VHA projects and data calls. *NOTE: OHI currently uses HI CoP messaging to send 1) information, 2) actions for VA medical facility HI personnel to take, and 3) requests to participate in VHA HI projects and data calls.*

(7) Ensuring VA medical facility HI personnel are sufficiently competent to fulfill informatics functions, as outlined in the Enterprise Health Informatics Operations Guide, through recommended continuing education and maintenance-of-certification activities.

NOTE: The VA medical facility CHIO is not responsible for assuring the competency of facility HI personnel who are organized outside of the VA medical facility HI Service. See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.

(8) Obtaining and maintaining informatics credentials from nationally recognized, independent certification programs for informatics appropriate to the professional background of the VISN CHIO (e.g., American Board of Preventive Medicine for most VA physicians, Commission on Accreditation for Health Informatics and Information Management for masters-level health care professionals and American Nurses Credentialing Center for nurses).

h. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with this directive and appropriate corrective action is taken if non-compliance is identified.

(2) Establishing and sustaining the VA medical facility HI Service as a functional organizational unit and its operational connection to the corresponding VISN HI Program.

(3) Establishing and sustaining the VA medical facility HI Integrated Governance and its effective interaction with other VA medical facility-level ICCs.

(4) Designating and supervising a VA medical facility CHIO as agreed upon with the VISN Director. *NOTE: The VA medical facility Director may designate another member of the VA medical facility Executive Leadership Team to supervise the VA medical facility CHIO. The VA medical facility CHIO must have dedicated time and resources to perform responsibilities defined in this directive.*

(5) Selecting representatives of the VA medical facility HI Service and VA medical facility HI Integrated Governance to ad hoc or standing VHA committees.

(6) Ensuring resources such as staffing and training are allocated to support a comprehensive VA medical facility HI Service and HI Integrated Governance.

(7) In collaboration with the VISN Director, approving general guidelines for VA medical facility staff to participate in VHA and VISN informatics projects, and approving major HI projects according to standard local resource governance (e.g., through VA medical facility HI Integrated Governance).

(8) Reviewing on at least a quarterly basis the progress towards programmatic milestones and key metrics for success approved by the VISN and VA medical facility HI Integrated Governance.

(9) Ensuring the VA medical facility CHIO establishes the following to manage the surge of change requests during the implementation of a health IT system (e.g., EHR systems):

(a) A temporary section of the VA medical facility HI Service.

(b) A temporary subcommittee of VA medical facility HI Integrated Governance to govern the temporary supporting section of the VA medical facility HI Service.

i. **VA Medical Facility Chief of Staff/Associate Director for Patient Care Services.** The VA medical facility Chief of Staff or Associate Director for Patient Care Services, as assigned by the VA medical facility Director, is responsible for:

(1) Ensuring collaboration between the staff of the VA medical facility HI Service and other VA medical facility staff.

(2) Ensuring participation of representatives from clinical and patient care services in VA medical facility HI Integrated Governance.

(3) Ensuring the participation of staff from the VA medical facility HI Service in VA medical facility HI Integrated Governance over health service delivery. *NOTE: HI personnel provide each VA medical facility HI Integrated Governance with expert knowledge about the EHR system and other health IT systems.*

j. **VA Medical Facility Chief Health Informatics Officer.** The VA medical facility CHIO is responsible for:

(1) Leading the implementation, sustainment and daily operations of the VA medical facility HI Service in the context of VHA and VISN HI Programs. The program operation must be consistent with the Enterprise Health Informatics Operations Guide. *NOTE: See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.*

(2) Coordinating HI operations with the VISN CHIO and the VHA OHI CHIO, as appropriate.

(3) Co-chairing the VA medical facility HI Integrated Governance and coordinating with VISN and VHA ICCs.

(4) Reporting key milestones, metrics, results of VA medical facility informatics-related needs assessments and monitoring of fulfillment of informatics-related needs to VISN HI Integrated Governance and VA medical facility HI Integrated Governance as specified by VISN HI Integrated Governance. *NOTE: VA medical facility-level results must be first reviewed and approved by the corresponding VA medical facility Director.*

(5) Serving as the primary advisor on HI to the VA medical facility Director, executive leadership and service chiefs.

(6) Monitoring and responding as indicated to OHI-established communication channels. *NOTE: OHI currently uses HI CoP messaging to send 1) information, 2) actions for VA medical facility HI personnel to take and 3) requests to participate in VHA HI projects and data calls.*

(7) Ensuring the VA medical facility HI personnel in the VA medical facility HI Service are sufficiently competent to fulfill their informatics functions, as outlined in the Enterprise Health Informatics Operations Guide, through recommended continuing education and maintenance-of-certification activities. *NOTE: The VA medical facility CHIO is not responsible for assuring the competency of VA medical facility HI personnel who are organized outside of the VA medical facility HI Service. See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.*

(8) Obtaining and maintaining informatics credentials from a nationally recognized, independent, certification program for informatics appropriate to the professional background of the VA medical facility CHIO (e.g., American Board of Preventive Medicine for most VA physicians, Commission on Accreditation for Health Informatics and Information Management for Masters-level health care professionals and American Nurses Credentialing Center for nurses).

(9) Ensuring the VA medical facility Director establishes the following to manage the surge of change requests during the implementation of a health IT system (e.g., EHR systems):

(a) A temporary supporting subprogram of the VA medical facility HI Service.

(b) A temporary subcommittee of the VA medical facility HI Integrated Governance to govern that temporary supporting section of the VA medical facility HI Service.

k. **Veterans Integrated Services Networks and VA Medical Facility Health Informatics Personnel.** VISN and VA medical facility HI Personnel perform a variety of informatics functions and work with various stakeholders to develop data-driven solutions to improve decisions, workflows and outcomes for health care. VISN and VA medical facility HI personnel are responsible for:

(1) Applying HI methods to advance VISN and VA medical facility goals pertaining to the quality, safety, efficiency of health care and population health while improving end-user satisfaction with informatics-managed health IT systems. *NOTE: HI personnel play a key role in the design, implementation, configuration and evaluation of the EHR system and other health IT systems used in VHA for clinical care delivery. Please refer to paragraph 7 and the Enterprise Health Informatics Operations Guide (paragraph 2.g.) for additional information.*

(2) Participating in teaming efforts within the VISN and in collaboration with national health informatics programs to advance consistent health care standards in multiple clinical domains.

(3) Improving their informatics competencies through recommended training as detailed in the Enterprise Health Informatics Operations Guide. *NOTE: See paragraph 2.g. for more information about the Enterprise Health Informatics Operations Guide.*

(4) Collaborating across departments in the VA medical facility and VISN to continuously improve the delivery of health care through knowledge of how health IT

supports local clinical processes, strategic data analysis, and implementation of informatics products.

6. VHA FIELD HEALTH INFORMATICS PROGRAM GOALS

a. The goals of the VHA Field HI Program are:

(1) A well-developed, highly skilled, and value-oriented HI workforce. ***NOTE:*** *More information about the HI workforce can be found in the Enterprise Informatics Operations Guide at* https://dvagov.sharepoint.com/sites/VHAIPX/*. This is an internal VA website that is not available to the public.*

(2) Common, improvement-oriented HI services that embody high reliability and learning organization practices.

(3) Improved HI resource sharing among and across all levels of VHA.

(4) Coordinated and streamlined communications with VISNs and VA medical facilities about HI-related actions and guidance from VHA program offices.

(5) Improved VHA leadership awareness of HI-related operations and their impact on VHA clinical service delivery, including VHA clinician and staff experience with HI and implemented solutions.

(6) Governance of HI that reflects the priorities and concerns of VHA clinical services throughout VHA. ***NOTE:*** *See paragraph 5 for information about the oversight of this program.*

7. VHA FIELD HEALTH INFORMATICS PROGRAM STRUCTURE

a. The VHA Field HI Program consists of multidisciplinary functional units that deliver informatics services under the leadership of VISN and VA medical facility CHIOs. At minimum, the VHA Field HI Program includes HI functions that support direct patient care. ***NOTE:*** *See paragraph 5 for information about the oversight of this program. The Enterprise Health Informatics Operations Guide contains a comprehensive list of HI functions.*

b. The VHA Field HI Program is composed of "VISN Health Informatics Programs" and VA medical facility "Health Informatics Services." ***NOTE:*** *Some VISNs and VA medical facilities have organized other programs and services under HI: telehealth/connected care and clinical data analytics. This directive establishes a common program model on which VISNs and VA medical facilities continue to build to meet local needs.*

c. The VISN HI Program executes HI functions that support direct patient care at VISN and VA medical facility levels. The VISN HI Program is led by the VISN CHIO who provides leadership for VISN and VA medical facilities to make the best use of

information and technologies in the delivery of patient care, medical education and research–especially for advancing clinical quality and safety initiatives.

d. The VA medical facility HI Service executes HI functions that support direct patient care at the VA medical facility. The VA medical facility HI Service is led by the VA medical facility CHIO.

e. HI personnel at VISNs and VA medical facilities perform a variety of informatics functions and work with various stakeholders to develop data-driven solutions to improve decisions, workflows and outcomes for health care. VA medical facilities may consider creation of a director or supervisory manager of the VA medical facility HI Service to work in conjunction with the VA medical facility CHIO to achieve program objectives.

f. VA medical facility HI personnel conduct HI functions. Roles in VHA that perform HI functions include but are not limited to automated data processing application coordinators, clinical application coordinators, clinical data analysts, HI program managers, HI specialists and nursing informaticists. *NOTE: Informaticists who are embedded in other VA medical facility service lines may report to that specific service and not the VA medical facility CHIO.*

g. The VISN and VA medical facility HI Integrated Governance develop measurements of key benefits and costs associated with the work of both the VISN HI Program and the VA medical facility HI Service.

8. HEALTH INFORMATICS INTEGRATED GOVERNANCE

a. HI governance must exist in each VISN and VA medical facility to oversee and coordinate informatics operations throughout each VISN. *NOTE: The charter templates for VISN and VA medical facility HI Integrated Governance are available at* https://dvagov.sharepoint.com/sites/VHAIPX/Resources/. *This is an internal VA website that is not available to the public.*

b. HI governance must ensure a common, service-aligned model for governing VISN HI Programs and VA medical facility HI Services. *NOTE: These functions include setting local strategy (what structure, process or outcomes need to be achieved and why), prioritizing activities for the HI Programs and overseeing the realization of programmatic and success metrics.*

c. VISN and VA medical facility HI governance must establish a temporary subcommittee and subprogram at VISN and VA medical facility levels to govern the implementation and stabilization of EHR systems and other major health IT systems. During its existence, the sub-committee and subprogram have special accountability to the VHA designated entity responsible for coordination of EHRM. The sub-committee and subprogram can be dissolved once stabilization of the newly implemented system is achieved.

9. TRAINING

There are no formal training requirements associated with this directive. ***NOTE: Ongoing training is necessary to ensure informatics functions are available to all VA medical facilities and to promote the competency of VHA HI personnel. Recommended training courses are listed in Enterprise Health Informatics Operations Guide, which can be accessed at https://dvagov.sharepoint.com/sites/VHAIPX/. This is an internal VA website that is not available to the public.***

10. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

11. REFERENCES

a. 38 U.S.C. §§ 7301(b), 7311(a).

b. FY 2020-2025 Long-Range VHA Plan Framework: https://vaww.va.gov/VHACSO/docs/FY2022-2025VeteransHealthAdministrationLong-RangePlanFramework508.pdf. ***NOTE:** This is an internal VA website that is not available to the public.*

c. High Reliability Organization: https://dvagov.sharepoint.com/sites/OHT-PMO/highreliability/Documents/Forms/AllItems.aspx. ***NOTE:** This is an internal VA website that is not available to the public.*

d. Deputy Under Secretary for Operations and Management Memorandum, Establishment of Field-Based Health Informatics Leadership Positions, dated March 17, 2009 (WebCIMS 424419): https://dvagov.sharepoint.com/sites/VHAIPX/RArchive/. ***NOTE:** This is an internal VA website that is not available to the public.*

e. Under Secretary for Health (USH), Executive Decision Memorandum for Establishment of Field-Based Health Informatics Infrastructure, dated September 16, 2008. https://dvagov.sharepoint.com/sites/VHAIPX/RArchive/. ***NOTE:** This is an internal VA website that is not available to the public.*

f. Department of Veterans Affairs, Veterans Health Administration. Enterprise Informatics Operations Guide: https://dvagov.sharepoint.com/sites/VHAIPX/. ***NOTE:** This is an internal VA website that is not available to the public.*

g. VA's FY 2022-2028 Strategic Plan: https://www.va.gov/oei/docs/va-strategic-plan-2022-2028.pdf. ***NOTE:** This is an internal VA website that is not available to the public.*

h. VA Health Informatics Community of Practice (HI CoP): https://vaww.infoshare.va.gov/sites/chio/COP/HICoP/SitePages/Welcome%20to%20the %20VA%20HI%20CoP%20Site!.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

i. VHA Office of Health Informatics: http://vaww.ehealth.va.gov/EHEALTH/. ***NOTE:*** *This is an internal VA website that is not available to the public.*

j. KLAS Research: https://klasresearch.com.

k. National Library of Medicine. The VA advantage: the gold standard in clinical informatics: https://pubmed.ncbi.nlm.nih.gov/16088306/.

l. National Library of Medicine. VistA-U.S. Department of Veterans Affairs national-scale HIS: https://pubmed.ncbi.nlm.nih.gov/12810119/.

VHA FIELD HEALTH INFORMATICS PROGRAM IMPLEMENTATION

1. IMPLEMENTATION SUMMARY

a. Veterans Integrated Services Networks (VISNs) and Department of Veterans Affairs (VA) medical facilities have conducted activities described in this directive and will continue to conduct these activities, through their normal operating budgets.

b. Historically, VISNs and VA medical facilities have determined individually how to distribute, conduct and ensure the performance of these activities across local organizational units (e.g., departments and service lines).

c. This directive decreases the variability observed in health informatics activities across VISNs and VA medical facilities, which will increase consistency of response to VA program office changes and increase the reliability of health informatics-managed services and systems.

d. This directive brings together existing requirements and practices already in place and establishes new nomenclature. The table in paragraph 2 below summarizes these changes.

e. This directive provides standard definitions of terms and clarification of well-recognized functions to more consistently describe these functions common to health informatics work.

f. This directive includes specific flexibilities to VISNs and VA medical facilities to facilitate implementation based on their local context.

2. IMPLEMENTATION ACTIONS

Focus Area	Historic	Directive 1931	Change
Health Informatics Titles	Clinical Application Coordinators; Health Informatics Specialists	Health Informatics Personnel	From specific to a general category term
Position vs. Role	VISNs and VA medical facilities determine whether to organize Chief Health Information Officer (CHIO) functions into a dedicated position or role	VISNs and VA medical facilities determine whether to organize CHIO functions into a dedicated position or role	No change
Executive Leadership of Health Informatics	Majority of VISN and VA medical facility CHIOs report to the Chief Medical Officer and Chief of Staff, respectively	VISNs and VA medical facilities determine to which member of the executive leadership team the CHIO reports	No change
VISN CHIO	All VISNs have a VISN CHIO (as of May 10, 2022)	All VISNs have a VISN CHIO (as of May 10, 2022)	No change
VA Medical Facility CHIO	66% of administrative parent VA medical facilities have a facility CHIO (as of September 2021)	Per the VISN and VA medical facility Director, each VA medical facility is supported by a facility CHIO or equivalent position/role	Additional flexibility
VISN Health Informatics Program	VISNs assess, coordinate, oversee and ensure HI-related needs are met across their facilities	The VISN-level organizational unit composed of health informatics personnel is called the VISN Health Informatics Program	Establishes standard term
VA Medical Facility Health Informatics Service	Most VA medical facilities have at least one team/unit responsible for implementing changes into the electronic health record (EHR) system	The VA Medical Facility-level organizational unit composed of health informatics personnel is called the Facility Health Informatics Service	Establishes standard term
Governance over VA Medical Facility EHRs	VISNs and VA medical facilities distribute EHR system governance functions across various internal committees	VISNs and VA medical facilities integrate EHR system governance functions at the VISN level and at the VA medical facility level	From distributed to integrated
Funding	Activities funded through normal operating budgets	Activities funded through normal operating budgets	No change