

Synopsis

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House Veterans Affairs Committee Health Subcommittee

Hearing

The Subcommittee met this morning to review human resource challenges within the Veterans Health Administration (VHA).

Witnesses

Panel 1:

- David Cox, RN, National Secretary-Treasurer, American Federation of Government Employees, AFL-CIO
- Randy Phelps, PhD, Deputy Executive Director for Professional practice, American Psychological Association
- Angela Mund, CRNA, MS, Clinical Director, University of Minnesota Nurse Anesthesia Area of Study, Minneapolis VA Medical Center
- Jay W. Wommack, Founder, President, Chief Executive Officer, Vertical Alliance Group, Inc.

Panel 2:

- Fred Cowell, Senior Associate Director for Health Analysis, Paralyzed Veterans of America
- Adrian M. Atizado, Assistant National Legislative Director, Disabled American Veterans
- Cecilia McVey, BSN, MHA, RN, Associate Director for Patient Care/Nursing, VA Boston Healthcare System, Immediate past president, Nurses Organization of Veterans Affairs

Panel 3:

- Joleen Clark, Chief Officer, Workforce Management and Consulting, VHA, Department of Veterans Affairs (VA)

Opening Remarks

Subcommittee chairman Michaud noted that the VHA's workforce problems have been of concern to the Committee for several years. The current workforce is aging, and a significant percentage will be eligible to retire by 2012. A quality, fully-staffed workforce is important to both quality of care and patient satisfaction.

Subcommittee ranking member Miller echoed those concerns over the need to recruit and retain a quality healthcare workforce.

Witness Statements

Mr. Cox said that the greatest challenge for the VHA's workforce is the erosion of collective bargaining rights. It is also troubling that VHA employees lose their veterans preference when they become Title 38 employees. He called for changes to the system to get around this problem. He also urged greater oversight of the implementation of the physician pay law, and the secrecy surrounding it.

Nurse alternative work schedules provide full-time pay for working three 12 hour shifts. They are very popular in the private sector. The VA refuses to implement this type of scheduling, even though they have been given authority to do so by Congress.

As for collective bargaining rights, HR 4089 would provide an "essential" tool to aid in VA recruiting into the future. It would provide Title 38 employees with the right to challenge improper employment decisions.

Dr. Phelps stressed that psychologists are very actively involved in veterans care, particularly within the VA. They play a critical role in understanding TBI. Recruitment of psychologists "is actually in a good place at this point," for the last year and a half.

There are some major problems affecting retention: lack of access to key leadership positions; and hiring problems with Title 38 throughout the system. These problems have led to "chilling" situations which result in psychologists leaving the VA for the private sector when they can't get advancement within the VA. Without clear advancement capabilities in place, fewer psychologists will be willing to accept positions within the system.

Ms Mund emphasized that CRNAs provide safe, effective, high quality care in every health setting in the country. However, the VA has significant numbers of CRNA vacancies throughout the system. As a result, veterans are having to wait to receive care in many settings.

There is not a shortage of CRNAs in the marketplace. Instead, the VA's salary levels are far below those of the private sector, and there are poor working conditions in certain areas.

She recommended that the VA enhance its relationship with CRNA educational facilities, and to serve as clinical practice sites. The VA should also continue to foster its relationship with the military CRNA program at Fort Sam Houston. Third, VA CRNA pay levels should be made more comparable to that of the private sector. To do that, Congress will need to raise the pay cap for CRNAs.

Mr. Wommack noted that demographics mean that there are not enough people coming behind the baby boomer generation to fully take their place. More needs to be done to recruit people to enter the medical profession, both in the private and public sector. His company helps bring people into medical training and education programs. They developed processes to help those programs improve their recruiting through better customer service.

He has worked with several VA systems, and finds that those at the top do buy into the new way of recruiting. This system does show results.

Questions and Answers

Phelps told Michaud that it looks like the "way to go" is to move psychologists into Title 38. They are the only physician category not in Title 38.

Mund told Michaud that it would be great to simply add seats to the Army's training program. However, more funding is needed to do that. Many CRNA students prefer that option, since their tuition is paid for, in return for a three-year commitment to the VA.

Miller received a quick tutorial in the differences between Title 5 and Title 38 hiring. The second group requires more boarding processes, which slows the whole thing down. There is a hybrid Title 38 process, but it is still quite complicated.

Mund told **Rep. Hare (D)** that students applying to the VA do not get immediate clarity on what they will be earning initially. In the private sector, they can get that information even before applying for a job. In addition, the VA only has a six-month window for debt forgiveness. Between paperwork getting lost and other bureaucratic problems and delays in the VA, students often lose out on that opportunity.

Witness Statements. Panel 2

Mr. Cowell called on Congress to take the lead in revamping outdated personnel policies and practices, including salary levels, that prevent the VA from being the

employer of choice for a wide array of health care professionals. The VA must take steps now, as the country as a whole enters a period of threatened physician shortages. Among other actions, the VA must move to hire more fully trained and experienced psychologists, including those to oversee the less experienced ones who have already been hired.

He called for a Title 38 specialty pay provision for categories such as nurses with a specialty in spinal care and other critical needs. The VA also needs to improve and increase its education debt reduction program. Expanding benefit levels will make the Department more competitive with the private sector. Child care and less mandatory overtime will also make the VA a more attractive employer.

Ms McVey charged that the VA's pay system for nurses is outmoded. Certain bonuses and special pays do not count towards retirement pay, among other inequities. Application processes are confusing and time-consuming, which puts off many applicants. She recommended that professional classifications be revised, in order to better reflect actual duties and responsibilities.

Mr. Atizado warned that the VHA must change the ways it recruits and pays health care professionals, especially in light of the looming shortage of such professionals. New applicants perennially complain that the application process is cumbersome. Many claim that they never receive a response from the VHA to their applications at all. The VHA has a shortage of experienced, fully trained human resources personnel. Those involved in the actual hiring process need to be held more accountable for ensuring that qualified professionals are not turned off by the application process itself.

Questions and Answers. Panel 2

The witnesses emphasized to Michaud the important role that education debt reduction plays in recruiting new professionals and turning them into loyal employees. Flexible work schedules are also important. They also reminded the Congressmen that bonuses work not only as recruitment tools but also as retention tools. Congress needs to give the VHA more money for those bonuses.

Cowell said that providing specialty incentives could go a long way towards encouraging nurses to stay in those specialties. Some areas, such as spinal cord injuries, require a lot of heavy lifting, which is hard on the nurses. Incentive pay could encourage them to stay.

The witnesses told Hare that there has not been a lot of collaboration between the VHA and veterans service organizations. That said, they would all welcome more opportunities to work with the Department to increase employment for their members and to expand the amount of care available to veterans.

McVey told **Rep. Snyder (D)** that her system has done some things to ask nurse why they are or are not leaving the VA system. The long time line between application and actual hiring is a big concern among nurses.

Witness Statement, Panel 3

Ms Clark noted that the VHA's workforce challenges mirror those of the nation as a whole. VHA's strategic plan addresses recruitment and retention and mental healthcare, among other issues including workforce management. They recognize the importance of continuing to grow the health care workforce to meet a growing, and increasingly diverse, patient population.

The VA Travel Nurse Corps provides a number of nurses available to travel to various VA facilities to fill vacancies on a short-term basis. This is available in two areas of the country.

The VA is also engaging in various student-related programs to increase the number of professionals in that manner.

She described various programs in which VHA is working to improve its recruitment, retention and succession programs. They are all aimed at making the VHA the workplace of choice for many types of health care professionals.

Questions and Answers, Panel 3

Clark told Miller that the education debt reduction program is one of the VHA's best recruiting tools, particularly in critical areas. The cap is around \$50,000, and proven to be "highly effective." Other employees are drawn in through the scholarship program. That program is aimed at management employees, as well, and covers up to three years of education and about \$35,000.

Clark admitted that raising the debt reduction cap could be very useful in recruiting physicians, who sometimes graduate with over \$100,000 of education debt.

Clark told Hare that a new type of veterans coordinators should be working with the veterans service organizations on a variety of employment issues.

Clark assured Michaud that the VHA is aware of the problems with the hiring process, including under the hybrid Title 38 process. They are looking at redesigning the process, including doing things at the same time and eliminating unnecessary steps. Looking internally, they can probably improve the process tremendously without additional regulations. The pilot program proved that a person can be hired within 30 days with full credentialing.

The VHA is also working to expand education programs, particularly in the rural areas. A great deal has been done already in the pharmacy arena.

Clark told Michaud that, right now, the VHA is working to improve its internal processes. She promised to let him know if Congress can be of assistance in any area.

Adjournment

The hearing ended after just under two hours. Clearly, some of the Members had additional questions, but votes were pending on the House floor.