VA Innovative Technology Advancement Lab (VITAL) FAQ
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What is EHRM?

The Department of Veterans Affairs (VA) Electronic Health Record Modernization (EHRM) program is a historic information technology (IT) modernization effort. It will replace VA’s legacy Veterans Information Systems and Technology Architecture (VistA) with an industry-leading electronic health record (EHR) solution. This new EHR system is based on the Millennium platform developed by Cerner Corp., which also powers the MHS GENESIS system at the Department of Defense (DoD). The new VA system will replace the approximately 130 operational instances of VistA, currently in use across VA, with a standardized, interoperable health record system that will support a lifetime of seamless care to service members and Veterans across both DoD and VA health services.

What is VITAL and how does it fit into EHRM?

The VA Innovative Technology Advancement Lab (VITAL) teaches users how to optimize EHRM by collaboratively solving real-world problems identified by VA participants. VITAL was designed to increase EHRM adoption and speed-to-value, promote standardization and optimize the use of advanced analytics. The VITAL program consists of four, three-day, in-person sessions across 12-18 months, monthly virtual checkpoints and a core capstone project chosen by participants.

Capstone projects are designed to tackle real-world problems encountered at the participants’ facilities. These capstones allow them to gain confidence and competence in optimizing EHRM solutions and tools while solving actual problems today and proactively attacking future ones.

VITAL introduces its participants to a professional network that crosses VA facilities and professional disciplines and encourages solution-sharing across VA. Opportunities for continued interaction and repositories for training materials and capstone documentation are provided through the VITAL Online Classroom, which is available to all VITAL participants and graduates. Throughout the VITAL program, VA participants work in cooperation with each other and with senior Cerner experts to learn how to leverage EHRM’s existing capabilities and continuously improve an evolving system of tools and processes.

Is VITAL VA’s primary EHR training program?

No. VITAL is one piece of a comprehensive training program that will also include:

- **End-User Training** (at VA sites) – End users receive EHR training via instructor-led classes, eLearning modules, and self-paced learning opportunities (“over-the-shoulder” training). End-User Training is for any VA staff member who requires access to an EHR application.
- **Super-User Training** – Super users receive enhanced training and practice around EHRM workflows to support their peers during training, Go-Live (i.e. the day the new EHRM becomes active for the site and all users begin documenting in the new EHRM system) and sustainment activities. Super users will be identified by department leads and supervisors.
- **Specialty Training** – Specialty instructor-led and computer-based training will be used for VA staff who need specialized training prior to Go-Live.

**How does VITAL incorporate lessons from the DoD MHS GENESIS program?**

VITAL is unique to VA and was developed as a result of lessons learned from Department of Defense’s (DoD’s) experience with MHS GENESIS. Observation of DoD’s GENESIS program has prompted VA to identify key clinical and frontline staff who require advanced training to ensure smooth EHRM implementation, enhance functionality and support continuous performance improvement. Examples of other lessons learned from GENESIS include the importance of excusing training participants from clinical responsibilities during training sessions and related responsibilities.

**How will VITAL improve the patient experience?**

VITAL graduates directly influence a successful EHRM introduction at their facilities by performing as “change agents” who can capitalize on and advance the capabilities and value of EHRM’s transformational innovation. This will naturally help to promote the smoothest possible transition for all users and, in turn, patients.

**How will VITAL enhance the concepts of interoperability and standardization?**

VITAL teaches the EHRM approach to interoperability and its impact on a true longitudinal EHR. Participants also learn the practical application of interoperability to EHRM tools and solutions and how this data impacts the ability to move from descriptive to predictive — and ultimately prescriptive — analytics to improve Veterans’ lives and VA staff effectiveness.

Standardization is a key component of EHRM because it allows VA to harness the power of innovation across the entire enterprise. The highly customizable VistA legacy system, although allowing local flexibility, meant that solving a problem at one facility often meant solving the problem at that facility only. With a standardized EHR, solving a problem at one facility could potentially solve that problem for every facility. Successful standardization relies on an agile governance structure that allows necessary system modifications to be vetted and communicated from the field to national leadership in a timely manner, and for decisions on EHRM evolution to be weighted and phased with regard to enterprise utility. VITAL addresses both Cerner iterative software development and current VA EHRM governance processes.

**Who participates in VITAL?**

Initial participants are selected from among over 40 point-of-care clinical and support roles/functions from the Initial Operating Capabilities sites (Mann-Grandstaff VA Medical Center in Spokane, Washington; VA Puget Sound Health Care System in Seattle and Tacoma Washington; and VISN 20,
which includes the states of Alaska, Washington, Oregon, Idaho, and one county each in California and Montana) for the first cohorts of VITAL. As the deployment continues, participants will be added.

Facility leadership recommend potential participants, who may then choose whether to participate. Participants must sign a continuing service agreement (CSA) to participate. The CSA requires a 12-month service agreement. Participants are selected based upon:

- Position/tasks performed in their facility.
- Demonstrated ability to provide leadership.
- Availability to participate in all face-to-face and virtual training required in VITAL.

Chosen participants benefit from advanced education and training in the processes, capabilities and tools inherent in EHRM. After completing the coursework, VITAL graduates remain connected through a virtual VITAL community, so they can continue to collectively drive adoption and speed-to-value, standardization and optimization across VA. If a participant of VITAL leaves VA during or after graduation, their position within their location will not be replaced. Each location only has one opportunity for the VITAL training.

**Who is creating the VITAL curriculum? Are VA practitioners involved in its creation?**

VA and Cerner have worked in collaboration to develop a VITAL curriculum that meets VA’s specific training needs. VA clinical staff, VA support staff and senior Cerner experts all contributed to the initial design of the VITAL curriculum and remain involved in its ongoing refinement.

**Will VITAL evolve over time based on new lessons learned during the EHRM rollout?**

Yes, VITAL provides participants with the opportunity to provide feedback that will be used to inform continuous program improvement. After each VITAL classroom session, participants provide free-text comments and complete evaluations rating specific aspects of the program. Each new wave cohort will benefit from the feedback received from previous cohorts. Additionally, VITAL staff meet with VA leaders, field staff and other EHRM stakeholders on a weekly basis to assess developments in the EHRM program and the needs of VA facilities where EHRM rollout is occurring.