

United States Senate

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COMMITTEES:
APPROPRIATIONS
BUDGET
HEALTH, EDUCATION, LABOR,
AND PENSIONS
VETERANS' AFFAIRS

April 9, 2024

The Honorable Denis McDonough
Secretary
U.S. Department of Veterans Affairs
810 Vermont Ave, NW
Washington, DC 20421

Dear Secretary McDonough:

A modern, user-friendly, and effective electronic health record (EHR) system is critical for any major medical system. The new EHR system for the Department of Veterans Affairs (VA) was designed to provide exactly that. However, the EHR rollout has been littered with serious patient safety and technical issues. Getting this system right for VA providers and veterans who are counting on this program to work must continue to be a top priority.

It was good to see VA's decision to pause the system last year to address its most pressing issues. I have been clear from the start: VA cannot continue deploying the new EHR system until it works for providers and keeps patients safe in VA Medical Facilities where the system is already live.

As you evaluate the future of the EHR program, I would like you to consider some feedback we received from both providers and veterans in Spokane and Walla Walla. While some users reported improvements, we continue to receive troubling reports about the usability of the underlying system, including unexpected down time.

The EHR program at Mann Grandstaff VA went live almost four years ago, and it is unacceptable that providers are still experiencing such significant challenges using the system. Furthermore, we continue to see unplanned outages or glitches in the system causing interrupted medical exams, referrals or notes not being recorded, inability to access patient files, and canceled procedures. In January, EHR experienced a technical issue, causing delays and errors for all federal EHR users nationwide when processing certain system transactions, including clinician orders. During this glitch, triage nurses could not input their notes, users saw freezing and errors on their screens, and providers were unable to discharge their patients in FirstNet. In short, both clinicians and veterans suffer significantly when the system doesn't work as it should. While these challenges are the responsibility of Oracle-Cerner, VA should consider these

154 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510-4704
(202) 224-2621

2930 WETMORE AVENUE
SUITE 903
EVERETT, WA 98201-4107
(425) 259-6515

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(509) 624-9515

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TACOMA, WA 98402-4450
(253) 572-3636

THE MARSHALL HOUSE
1323 OFFICER'S ROW
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(360) 696-7797

website: <http://murray.senate.gov>
e-mail: <http://murray.senate.gov/email>

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(509) 453-7462

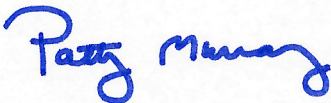
ongoing issues as decisions are made about the future of the system at Department medical centers.

Additionally, we continue to hear concerns about functional workflow issues. Specifically, we are still hearing that providers must create workarounds to make the system work for them. It is imperative for VA to incorporate provider and veteran feedback as it continues to assess the system. We will not get a properly functioning system unless we listen to those who use it every day.

Before VA decides to move forward with the rollout of the EHR system to additional sites, there must be an enhanced focus on the super user program and improving training for providers on how to use the EHR system. Our providers need to feel supported and learn to operate confidently within the system before the system is deployed at a facility. We have seen at Spokane and Walla Walla that without proper training and support, this system will only be a burden to providers and veterans, decreasing productivity and increasing patient wait times.

My number one priority is patient safety. VA and Oracle Cerner need to ensure there are no more complications with medication management or patient record flags—no exceptions. The safety and health of Washington state veterans includes ensuring our veterans have an electronic health system that works for them. After already sacrificing so much for our nation, they deserve to have the best health care experience possible. The bottom line is we must get this system right before it deploys to another facility. I appreciate your attention to this incredibly important issue and look forward to continuing to work together to ensure we fulfill the promise to care for our veterans.

Sincerely,



Patty Murray
United States Senator