

	Fiscal Year 2008		
	Perfor	mance	Estimated Cost
Measure	Target Result		(Obligations) (\$ in Millions)
Vocational Rehabilitation and Employment Rehabilitation Rate	75% 76%		\$106.9
Impact of Result on the Veteran	A "rehabilitated" veteran is one who successfully completes the rehabilitation program plan. Rehabilitated veterans are capable and equipped with the required skills and tools needed to hold suitable employment or have improved ability to live independently.		
How VA Uses Performance Data	The rehabilitation rate is a key indicator of the effectiveness of the VR&E program. The measure is used to assess the performance of vocational rehabilitation counselors, counseling psychologists, VR&E officers, and regional office directors as well as the effectiveness of the program and services provided.		
FY 2008 Program and Cost Efficiencies Implemented	The rehabilitation rate improved because of increased focus placed on making sure that veterans become employable by completing the program. Additional employment coordinators were hired, which allowed VR&E to refine the employment coordinator role and provide more direct job placement services. Further, the training of counselors, managers, and employment coordinators has enabled VA to provide higher quality service to veterans.		

Performance Summaries by Strategic Goal

STRATEGIC GOAL 1 *Restoration and Improved Quality of Life for Disabled Veterans*

Restore the capability of veterans with disabilities to the greatest extent possible, and improve the quality of their lives and that of their families.

Public Benefit

Providing for the **specialized health care** needs of veterans is an integral component of America's commitment to its veterans. Due to the prevalence of certain chronic and disabling conditions among veterans, VA has developed strong expertise in certain specialized services that are not uniformly available in the private sector.

For example, VA has developed a **polytrauma system of care (PSC)** that provides coordinated inpatient, transitional, and outpatient rehabilitation services to active duty servicemembers and veterans who have experienced severe injuries resulting in multiple traumas including spinal cord injuries, traumatic brain injuries, visual impairment, burns, amputations, combat stress, and post-traumatic stress disorder. The PSC provides intensive clinical and social work case management services essential to coordinating the complex components of care for polytrauma patients and their families.

VA's expertise in these specialized services has been shared with health care systems across the **country** and throughout the **world**.

In addition to VA's comprehensive system of health care, VA provides **compensation**, **vocational rehabilitation**, **life insurance**,





dependency and indemnity compensation, and dependents' and survivors' education services to veterans and their families.

Through the use of **Specially Adapted Housing (SAH) grants,** seriously disabled veterans'

homes are modified to help these veterans live more independent lives.

These services are concrete expressions of the pact between our Nation and those who bravely served it in uniform.

Making a Difference for the Veteran

Disabled Veteran Completes 3,200 Mile Cross Country Run



Vietnam veteran Eugene Roberts and his grandson run the final stretch of his more than 3,200-mile cross country journey to the Baltimore VA Medical Center where he was welcomed by hundreds of cheering supporters. Baltimore City Police and members of the Patriot Guard Riders escorted Roberts for the final five miles to the medical center. Hundreds of Department of Veterans Affairs (VA) employees, veterans, and onlookers cheered, waved U.S. flags, and shed tears of joy as Marine veteran Eugene Roberts, Sr., turned from West Baltimore Street into the Baltimore VA Medical Center to finish his more than **3,200-mile cross country run** in April.

While any cross country run is a feat worthy of celebration, what made this Vietnam veteran's trek so special was that he has **two prosthetic legs.** Roberts began his incredible journey in early July 2007 from Marine Corps base Camp Pendleton, California. He crossed nine southern States to Parris Island Marine Corps Depot, South Carolina, and then ran to the VA medical center in Baltimore.

Nothing deterred Roberts -- not the 120-degree temperatures on the desert highways of Southern California and Arizona, or the torrential southern rain storms. "Running on these prosthetic legs wasn't easy," Roberts said to the crowd of supporters after he crossed the finish line. "But my

faith in Jesus kept me going each day." He also attributed his success to the loving support of his wife of more than 40 years, and continual assistance from the VA Maryland Health Care System prosthetics team.

Prosthetics Specialist Charlene Grant supported Roberts from day one. Grant made sure that Roberts had the latest athletic prostheses that were up to the task. She also worked with Roberts to coordinate health care "pit stops" at VA medical centers along his journey across the country. These medical centers quickly accommodated the VA Maryland Health Care System patient during his cross country journey. Due to the unprecedented use of his prosthetics, VA medical staff needed to make regular adjustments to his legs and sockets, and the soles of his prosthetic feet had to be replaced after the constant pounding on the pavement. As with any distance runner, Roberts also had his share of blisters and minor injuries.

"This is a great example of how the VA Maryland Health Care System and the VA as a whole is going the 'extra mile' to provide world-class health care services to our Nation's veterans," said Dennis Smith, Director of the VA Maryland Health Care System. "Veterans like Roberts are an inspiration to other amputees, veterans, health care providers, and just about anybody who learns of his amazing story," Smith added. "**His 'never surrender' attitude is an example to people of all walks of life** that no matter how bad things might seem, having the right attitude can lead you down the road to personal accomplishment and fulfillment."



Five-Year Performance Trend – Percent of Targets Achieved

Based on the total number of reported results during a fiscal year, the chart below shows the *percent of performance targets that were achieved* for this strategic goal for the past five years.

Each year performance targets change and, to a lesser extent, so do the number and type of measures. Thus, as shown in the data table, the total number of targets may vary each year.



Positive 2008 Outcomes

<u>Claims Processing Timeliness</u>: The average length of time it takes to complete compensation and pension rating-related claims **improved by 4 days**, the average age of pending compensation rating-related claims **improved by 11 days**, and the average length of time that it takes to complete a Dependency and Indemnity Compensation (DIC) claim has **improved by 11 days**.

<u>Timely appointments for veterans and servicemembers returning from a combat zone</u>: In addition, 89 percent of severely injured or ill combat servicemembers/veterans are being contacted by VA case managers within seven days of notification of transfer to the VA system.

<u>Vocational Rehabilitation and Employment</u>: The proportion of service-connected disabled veterans participating in the vocational rehabilitation and employment program who successfully completed the program **improved to 76 percent**. This program provides disabled veterans with the skills and opportunities to obtain employment or gain greater independence in daily living.



FY 2008 Performance and Resource Summary Table – *by Goal and Objective*

The following table highlights important achievements related to strategic goal one and its supporting strategic objectives. Also shown are estimates of the resources devoted to each objective as well as a total for the strategic goal.

Strategic Goal 1 Restoration and Improved Quality of Life for Disabled Veterans Resource Allocations by Objective

		Obligations (\$ in Millions)	Pct. of Total VA Resources
S	SO 1.1- Specialized Health Care Services	29,794	30.7
Objectives	SO 1.2- Decisions on Disability Compensation Claims	37,589	38.7
	SO 1.3- Suitable Employment and Special Support	775	0.8
Strategic	SO 1.4- Improved Standard of Living for Eligible Survivors	443	0.5
S	Total for Strategic Goal 1	\$68,600	70.7%

Performance Summary by Objective (Representative Measures)				
Targets	Results 4-Year History		istory	
Strategic (Strategic Objective 1.1 – Specialized Health Care Services			
MAXIMIZE THE PHYSICAL, MENTAL, AND SOCIAL FUNCTIONING OF VETERANS WITH DISABILITIES AND BE A LEADER IN PROVIDING SPECIALIZED HEALTH CARE SERVICES.				
Achieve 98.0	• TBD	4-	Year Performa	nce History
percent of Specially		Year	Targets	Results
•		FY 2007	98.0	Avail. Dec. 2008
Adapted Housing grant		FY 2006	Baselined	93.2%
recipients who indicate		FY 2005	N/A	N/A
that grant-funded		FY 2004	N/A	N/A
housing adaptations		<u></u>		***************************************
increased their				
independence		N/A = Measure did not exist prior to FY 2006. In 2006, measure wa		2006. In 2006, measure was
(Supporting Measure)	Final data are expected in 12/2009.	baselined.		



Performance Summary by Objective, cont'd (Representative Measures)			
Targets	Results		4-Year History
Strategic Ob	ective 1.1 – Specializ	ed Heal	th Care Services, cont'd.
MAXIMIZE THE PHYSICAL, MENTAL,	AND SOCIAL FUNCTIONING OF V SPECIALIZED HEALTH		WITH DISABILITIES AND BE A LEADER IN PROVIDING VICES.
• VA case managers contact 92 percent of severely injured OEF/OIF service- members/veterans within 7 calendar days of notification of transfer to the VA system as an inpatient or outpatient (Supporting Measure)	• 89 percent Actual data through 07/2008. data are expected in 12/2008		4-Year Performance History Year Targets Results FY 2007 90% 91% FY 2006 -Baselined- FY 2005 N/A N/A FY 2004 N/A N/A N/A = Measure did not exist prior to FY 2006. In 2006, measure w baselined.
		ENSATION	dility Compensation Claims CLAIMS TO IMPROVE THE ECONOMIC STATUS AND O VETERANS. 4-Year Performance History Year Targets Results FY 2007 160 183 FY 2006 185 177 FY 2005 145 167 FY 2004 145 166
(Key Measure) • Reduce to 120 days rating-related compensation actions pending, on average (Key Measure)	• 121 days	Y	4-Year Performance History Year Targets Results FY 2007 127 132** FY 2006 150 130 FY 2005 119 122 FY 2004 Baselined* 120 *Measure did not exist prior to FY 2004. In 2004, measure was
• Achieve a 90 percent national accuracy rate for compensation core rating work	• 86 percent	Y	4-Year Targets Results FY 2007 89% 88% FY 2005 88% 84% FY 2004 Baselined* 87%
(Key Measure)	Actual data through 07/2008 data are expected in 12/2008		*Measure did not exist prior to FY 2004. In 2004, measure was baselined.



Performance Summary by Objective, cont'd. (Representative Measures)			
Targets	Results 4-Year History		
PROVIDE ELIGIBLE SERVICE-CONNE		PORTUNITY TO BECOME EMPLOYABLE AND OBTAIN ERANS WITH SERIOUS EMPLOYMENT HANDICAPS.	
IMPROVE THE STANDARD OF LIVING		4-Year Performance History Year Targets Results FY 2007 73% 73% FY 2006 69% 73% FY 2005 66% 63% FY 2004 67% 62%	
Complete in 118 days dependency and indemnity compensation (DIC) actions, on average (Key Measure)	• 121 days 🛛 😗	4-Year Performance History Year Targets Results FY 2007 125 132 FY 2006 120 136 FY 2005 120 124 FY 2004 126 125	



STRATEGIC GOAL 2

Smooth Transition to Civilian Life

Ensure a smooth transition for veterans from active military service to civilian life.

Public Benefit

Beginning in May 2008, VHA's Outreach Office initiated a **national call center** to reach two distinct populations of OEF/OIF veterans. Veterans are being contacted by telephone to inform them about recent changes and enhanced benefits for VA services and to provide assistance in accessing these benefits, if requested.

VA's Center for Faith-Based and Community Initiatives expanded grassroots participation with VA programs and pilot programs in order to address a wide range of issues related to veterans in need, especially those who are **homeless**, returning from Afghanistan and Iraq, disabled, and hospitalized.

Recent results include the following:

 From 2002-2007, the number of Faith-Based Community Organizations (FBCOs) in funded partnership with the VA's Homeless Veteran's Grant and Per Diem Program rose from 176 to 506 – a 187 percent increase. Further, 15,000 beds were created and 50,000 homeless veterans were served by these partners.

- In FY 2007, FBCOs in partnership with VA's Vocational Rehabilitation and Employment Service hired 673 serviceconnected disabled veterans. In FY 2008 through the third quarter, FBCOs hired 480 service-connected disabled veterans. From FY 2005-FY 2007, FBCOs hired a total of 1,600 disabled veterans.
- As a result of the VA Loan Guaranty Program for Homeless Veterans Multifamily Transitional Housing, Catholic Charities' St. Leo Campus opened a newly built apartment building, which is occupied by 141 homeless veterans.
- With VA's assistance, more than 350 FBCOs have enlisted 65 major veterans, civic, and service organizations in providing services to hospitalized veterans in their local communities.



Making a Difference for the Veteran

Post 9/11 GI Bill Expands Veterans' Benefits



veterans with active duty service on or after September 11, 2001, goes into effect August 1, 2009. In June 2008, President Bush signed the "Post-9/11 GI Bill," which creates an entirely **new veterans' educational program**. The new law gives veterans with active duty service on or after September 11, 2001, enhanced educational benefits similar to those provided to veterans following World War II. It also provides the **opportunity** for veterans to transfer unused educational benefits to their spouses and children.

The Post-9/11 GI Bill offers **tuition payments** for approved training up to the cost of in-state tuition charged undergraduates at the most expensive public institution of higher learning in the veteran's state. A monthly housing stipend is paid if the veteran is attending school more than half-time in a classroom setting. The veteran also receives up to \$1,000 annually for books and supplies. The Post-9/11 GI Bill may be used for any education program that is approved under chapter 30 and offered by an institution of higher learning (IHL) beginning on or after August 1, 2009. The new program provides up to 36 months of benefits that can be used during the 15-year period following discharge. In August 2008 current Montgomery GI Bill education benefits increased to \$1,321 monthly

(3-year rate) and to \$1,073 (2-year rate). For training beginning on or after August 1, 2009, eligible veterans may elect to use the Post-9/11 GI Bill or continue under their existing benefit program.

For more details about the Post-9/11 GI Bill and other veterans' educational programs, on the *Web* go to <u>www.gibill.va.gov</u> or call 1-888-GI-BILL-1 (1-888-442-4551).



Five-Year Performance Trend – *Percent of Targets Achieved*

Based on the total number of reported results during a fiscal year, the chart below shows the *percent of performance targets that were achieved* for this strategic goal for the past five years.

Each year performance targets change and, to a lesser extent, so do the number and type of measures. Thus, as shown in the data table, the total number of targets may vary each year.



<u>Note</u>: For 2006 and 2007, additional final results are now available. Thus, numbers and percentages have been adjusted from those appearing in the FY 2007 PAR.

Positive 2008 Outcomes

<u>Timely appointments for veterans and servicemembers returning from a combat zone</u>: **Ninety-seven percent of primary care appointments** for veterans and servicemembers returning from a combat zone are being scheduled within 30 days of their desired appointment dates.

<u>Timely Processing of Education Claims</u>: For those veterans filing for education benefits for the first time, processing time **improved to 19 days**, while processing time **improved to 9 days** for those filing a claim to continue their program of education or training. The education program is a vital component of VA's ongoing effort to ease veterans' transition from active military duty to civilian life. This program provides financial assistance to veterans to assist them in achieving their educational or vocational goals.



FY 2008 Performance and Resource Summary Table – by Goal and Objective

The following table highlights important achievements related to strategic goal two and its supporting strategic objectives. Also shown are estimates of the resources devoted to each objective as well as a total for the strategic goal.

Strategic Goal 2 Smooth Transition to Civilian Life					
Resource Allocations by Objective					
	Obligations (\$ in Millions) Pct. of Total VA Resources				
с es	SO 2.1- Reentry into Civilian Life	1,451	1.5		
SO 2.1- Reentry into Civilian Life SO 2.2- Decisions on Education Claims		2,788	2.9		
Total for Strategic Goal 2		\$4,239	4.4%		

Performance Summary by Objective (Representative Measures)				
Targets	Results	4.	-Year His	story
	ective 2.1 – Reentry into Ci		-	
EASE THE REENTRY OF NEW VETERANS INTO	CARE, BENEFITS, AND SERVICES.	SS OF, ACCES	5 TO, AND USI	E OF VA HEALTH
Achieve 96 percent of primary care appointments	• 97 percent G	4-Year Year FY 2007	Performance Targets 90%	History Results 95%
scheduled within 30 days of desired date for veterans and servicemembers returning from a combat zone		FY 2006 FY 2005 FY 2004		blined- N/A N/A
(Supporting Measure)		N/A = Measure o measure was ba		o FY 2006. In 2006,



Strategic Goal 2, cont'd. Smooth Transition to Civilian Life				
Strategic Objective 2.1 – Reentry into Civilian Life, cont'd. Ease the reentry of New Veterans into Civilian Life by increasing awareness of, access to, and use of VA health CARE, BENEFITS, AND SERVICES.				
Targets	Results	4-Year History		
• Ensure 50 percent of all original claims filed within the first year of release from active duty are filed at a BDD site prior to a service- member's discharge (Supporting Measure)	• 59 percent G	4-Year Performance History Year Targets Results FY 2007 48% 53% FY 2006 53% 46% FY 2005 Baselined 55% FY 2004 N/A N/A N/A = Measure did not exist prior to FY 2005. In 2005, measure was baselined. 51%		
Strategic Object	tive 2.2 – Decisions on Edu			
ENHANCE THE ABILITY OF VETERANS AND S TIMELY AND ACCURATE DECISIONS ON				
Complete in 24 days original education claims, on average (Key Measure)	• 19 days ⓒ	4-Year Performance History Year Targets Results FY 2007 35 32 FY 2006 27 40 FY 2005 25 33 FY 2004 24 26		
Complete in 11 days supplemental education claims, on average (Key Measure)	• 9 days G	4-Year Performance History Year Targets Results FY 2007 15 13 FY 2006 13 20 FY 2005 13 19 FY 2004 12 13		
Achieve a 96 percent payment accuracy rate (Education claims) (Supporting Measure)	• 96 percent G	4-Year Performance History Year Targets Results FY 2007 96% 95% FY 2006 95% 94% FY 2005 95% 96% FY 2004 94% 94%		



STRATEGIC GOAL 3

Honoring, Serving, and Memorializing Veterans

Honor and serve veterans in life and memorialize them in death for their sacrifices on behalf of the Nation.

Public Benefit

The Veterans Health Administration is the United States' largest integrated health system and continues to set the national standard of excellence in quality and patient safety for the **health care industry**. Interactive technology strategies are being implemented to provide care in the least restrictive environments to allow patients and families maximum participation in disease management and health maintenance.

Telehealth technologies continue to be implemented to facilitate access to care and to improve the health of veterans and provide the right care in the right place at the right time.

VA has developed and implemented **nationally recognized clinical guidelines** for treatment and care of patients with one or more high-volume diagnoses. VA's innovations in patient care and development of technology strategies serve as models for the health care industry. Veterans are assured of and merit dignity in their lives, especially in time of need. Such dignity is provided through VA **pension programs** and **life insurance**.

Through readjustment counseling,

employment services, vocational rehabilitation, education assistance, and home loan guarantees, VA helps veterans become fully reintegrated into their communities with minimal disruption to their lives.

VA honors veterans with final resting places in **national shrine cemeteries** and with lasting tributes that commemorate their service to our Nation.



Making a Difference for the Veteran

Michael E. DeBakey VAMC Performs First Liver Transplant



Liver transplant patient Michael Abshire, a 63 yearold, U.S. Navy veteran from Webster, Texas was released to go home in early December. Abshire poses with (from left) David H. Berger, M.D., MEDVAMC Operative Care Line Executive; John A. Goss, M.D., Chief, Division of Abdominal Transplantation at Baylor College of Medicine; Ralph G. Depalma, M.D., VA National Director of Surgery; and Donna Jackson, R.N.-C., Liver Transplant Clinical Coordinator. A 63 year-old U.S. Navy veteran from Webster, Texas, became the first patient to undergo orthotopic liver transplantation at the Michael E. DeBakey VA Medical Center (MEDVAMC). The surgery, which took place in November 2007, represents a milestone locally in the field of organ transplantation and provides end-stage liver disease veterans with state-of-the-art care.

"The Michael E. DeBakey VA Medical Center's program for the treatment of liver disease is among the most advanced in the country. Given that we provide excellent care for veterans with end-stage liver disease preoperatively and postoperatively, the ability to now meet their transplantation surgical needs is a tremendous advantage," said David H. Berger, M.D., MEDVAMC Operative Care Line executive.

Partnering with John A. Goss, M.D., Chief, Division of Abdominal Transplantation at Baylor College of Medicine, the goal of the MEDVAMC Liver Transplant

Center is to provide the highest level of care to the veteran population. The surgery on Michael Abshire, who suffers from end-stage liver disease, was performed by the MEDVAMC Liver Transplant Team.

A Vietnam veteran who served aboard the U.S.S. Bon Homme Richard, Abshire said he and his family are most grateful for the care he received at MEDVAMC and for the availability of the donor organ that saved his life. "I am alive today because of this hospital, because of these wonderful doctors and nurses and everyone else involved in the transplant program, and most importantly, because of the gift of life that was bestowed to me from an organ donor and their family. I feel incredibly blessed," said Abshire.

The VA National Transplant Program began providing solid organ transplants to veteran patients in 1961. Thomas E. Starzl, M.D. performed VA's first kidney transplant at the VA Medical Center in Denver. Since then, the VA National Transplant Program has expanded services to provide veteran patients with heart transplant services in 1980, bone marrow in 1982, liver in 1989, and lung in 1991. In 1995, a national VA transplant office was established in Washington, DC to ensure all veterans receive equal access to transplant services and to establish a central referral center.

Follow-up on the Liver Transplant Team

While surge waters crashed the beaches of the Texas Gulf Coast and neighborhoods boarded up windows, the Michael E. DeBakey VA Medical Center (MEDVAMC) performed orthotopic liver transplantation on a 59-year-old, Army veteran from Missouri. With Hurricane Ike building strength in the Gulf of Mexico, it only took 30 seconds to make the decision to perform the surgery. "We could not deny a veteran the chance for a potential life-saving procedure because of a little wind and rain," said David Berger, M.D., MEDVAMC Operative Care Line executive. The seven-hour surgery on Thomas Franklin, who suffered from end-stage liver disease caused by Hepatitis C, was performed by the MEDVAMC Liver Transplant Team on Friday, September 12, 2008. On Saturday, the storm forced the facility to go on generator power and the temperature in the building began creeping up. While coolers kept the air in the Intensive Care Units comfortable for patients, health care providers took extra precautions and transferred Franklin to an operating room with a constant 68 degree environment.



Five-Year Performance Trend – *Percent of Targets Achieved*

Based on the total number of reported results during a fiscal year, the chart below shows the *percent of performance targets that were achieved* for this strategic goal for the past five years.

Each year performance targets change and, to a lesser extent, so do the number and type of measures. Thus, as shown in the data table, the total number of targets may vary each year.



Note: For 2007, additional final results are now available. Thus, numbers and percentages have been adjusted from those appearing in the FY 2007 PAR.

Positive 2008 Outcomes

Access to Medical Care: VA continued to improve access to the Department's health care system. The share of **primary** care **appointments scheduled within 30 days of the veteran's desired date** increased to **98.7 percent**, while for **specialty** care appointments the figure increased to **97.5 percent**.

<u>Housing Assistance</u>: VA continued to assist veterans who became delinquent on their VA-guaranteed home loans. VA's direct involvement helped **52.4 percent of the veterans** who otherwise **could have lost their homes** through **foreclosure** by assisting them with steps to retain ownership of their homes or at least significantly reducing their financial hardship by helping them sell their homes.

<u>Access to a Burial Option</u>: VA increased to **84.2 percent** the proportion of veterans who have reasonable **access to a burial option** in either a national or State veterans' cemetery. Last year, four new State veterans cemeteries funded through VA's **State Cemetery Grants Program** began interment operations, providing service to approximately 200,000 previously unserved veterans in the areas of Glennville, Georgia; Anderson, South Carolina; Des Moines, Iowa; and Williamstown, Kentucky.



FY 2008 Performance and Resource Summary Table – *by Goal and Objective*

The following table highlights important achievements related to strategic goal three and its supporting strategic objectives. Also shown are estimates of the resources devoted to each objective as well as a total for the strategic goal.

Strategic Goal 3 Honoring, Serving, and Memorializing Veterans				
Resource Allocations by Objective Obligations Pct. of Total VA (\$ in Millions) Resources				
	SO 3.1- Delivering Health Care	9,569	9.9	
ives	SO 3.2- Decisions on Pension Claims	4,020	4.1	
Objectives	SO 3.3- Providing Insurance Service	1,708	1.8	
_	SO 3.4- Meeting Burial Needs	397	0.4	
Strategic	SO 3.5- Symbolic Expressions of Remembrance	77	0.1	
Str	SO 3.6- Home Purchase and Retention	978	1.0	
	Total for Strategic Goal 3	\$16,749	17.3%	

Performance Summary by Objective (Representative Measures)				
Targets	Results	4-Y	ear Hist	ory
Strate	gic Objective 3.1 – Delivering Hea	alth Care		
PROVIDE HIGH-QUALITY, RELIABLE, ACCESSIBLE, TIMELY, AND EFFICIENT HEALTH CARE THAT MAXIMIZES THE HEALTH AND FUNCTIONAL STATUS OF ENROLLED VETERANS, WITH SPECIAL FOCUS ON VETERANS WITH SERVICE-CONNECTED CONDITIONS, THOSE UNABLE TO DEFRAY THE COSTS, AND THOSE STATUTORILY ELIGIBLE FOR CARE.				
Achieve a score	• 84 percent Y	4-Year P	erformance	History
of 85 percent on		Year	Targets	Results
the Clinical Practice		FY 2007	84%	83%
Guidelines Index II	(1) Actual data through 07/2008. Final data	FY 2006	77%	83%
	are expected in 12/2008.	FY 2005	77%	87%
(Key Measure)	(2) The 2004 and 2005 results are for CPGI I. The 2006, 2007, and 2008 results are CPGI II. In FY 2009, VHA is transitioning to CPGI III.	FY 2004	70%	77%



Strategic Goal 3 , cont'd. Honoring, Serving, and Memorializing Veterans				
Targets Results 4-Year History				
Strategic Objective 3.1 – Delivering Health Care, cont'd. PROVIDE HIGH-QUALITY, RELIABLE, ACCESSIBLE, TIMELY, AND EFFICIENT HEALTH CARE THAT MAXIMIZES THE HEALTH AND FUNCTIONAL STATUS OF ENROLLED VETERANS, WITH SPECIAL FOCUS ON VETERANS WITH SERVICE-CONNECTED CONDITIONS, THOSE UNABLE TO DEFRAY THE COSTS, AND THOSE STATUTORILY ELIGIBLE FOR CARE.				
Achieve a score	• 88 percent G	4-Year Performance History		
of 88 percent on the Prevention Index III (Key Measure)	 Actual data through 07/2008. Final data are expected in 12/2008. The 2004 and 2005 results are for PI II. The 2006, 2007, and 2008 results are PI III. In FY 2009, VHA is transitioning to PI IV. 	Year Targets Results FY 2007 88% 88% FY 2006 88% 88% FY 2005 88% 90% FY 2004 82% 88%		
Achieve 97	• 98.7 percent (G)	4-Year Performance History		
percent of primary care appointments scheduled within 30 days of desired date (Key Measure)		Year Targets Results FY 2007 96% 97% FY 2006 96% 96% FY 2005 94% 96% FY 2004 93% 94%		
Achieve 95	• 97.5 percent (6)	4-Year Performance History		
percent of specialty care appointments scheduled within 30 days of desired date (Key Measure)		Year Targets Results FY 2007 95% 95% FY 2006 93% 94% FY 2005 93% 93% FY 2004 90% 93%		
 Establish a baseline for 	• N/A			
percent of new patient appointments completed within 30 days of desired date (Key Measure)		These are new key		
 Establish a 	• N/A	measures being baselined in 2008.		
baseline for				
percent of unique patients waiting more than 30 days beyond the desired appointment date (Key Measure)				



Strategic Goal 3 , cont'd. Honoring, Serving, and Memorializing Veterans					
Targets	Results	4-Year History			
Strategic Objective 3.1 – Delivering Health Care, cont'd. Provide high-quality, reliable, accessible, timely, and efficient health care that maximizes the health and functional status of enrolled veterans, with special focus on veterans with service-connected conditions, those unable to defray the costs, and those statutorily eligible for care.					
Achieve a score of 79 percent of patients rating VA health care service as "very good" or "excellent" for inpatients (Key Measure)	• 79 percent G Actual data through 07/2008. Final data are expected in 12/2008.	4-Year Performance History Year Targets Results FY 2007 78% 78% FY 2006 74% 78% FY 2005 74% 77% FY 2004 70% 74%			
Achieve a score of 79 percent of patients rating VA health care service as "very good" or "excellent" for outpatients (Key Measure)	• 78 percent Y Actual data through 07/2008. Final data are expected in 12/2008.	4-Year Performance History Year Targets Results FY 2007 78% 78% FY 2006 73% 78% FY 2005 73% 77% FY 2004 72% 72%			
• Achieve a 7.7 percent annual increase of non- institutional, long-term care average daily census using 2006 as the baseline (Baseline = 43,325) (Key Measure)	• 31.7 percent G	4-Year Performance History Year Targets ResultsFy 200726.3%-5.3%FY 2006-Baselined-FY 2005N/AN/AFY 2004N/AN/AN/A = Measure did not exist prior to FY 2006. In 2006, measure was baselined.FY 2006. In 2006, measure was baselined.			
Strategic Objective 3.2 – Decisions on Pension Claims Provide Eligible Veterans and their survivors a level of income that raises their standard of living and sense of DIGNITY BY PROCESSING PENSION CLAIMS IN A TIMELY AND ACCURATE MANNER.					
Complete in 169 days compensation and pension rating-related actions, on average (Key Measure)	• 179 days R	4-Year Performance History Year Targets Results FY 2007 160 183 FY 2006 185 177 FY 2005 145 167 FY 2004 145 166			



Strategic Goal 3 , cont'd. Honoring, Serving, and Memorializing Veterans			
Targets	Results	4-Year History	
PROVIDE ELIGIBLE VETERANS AND THEIR	ECTIVE 3.2 – DECISIONS ON PENSION R SURVIVORS A LEVEL OF INCOME THAT RAISES DCESSING PENSION CLAIMS IN A TIMELY AND AN	S THEIR STANDARD OF LIVING AND SENSE OF	
Complete in 84 days non-rating pension actions, on average (Key Measure)	• 119 days R	4-Year Performance History Year Targets Results FY 2007 96 104 FY 2006 66 92 FY 2005 73 68 FY 2004 Baselined* 58 *Measure did not exist prior to FY 2004. In 2004, measure was baselined. 10 2004, measure was baselined.	
Achieve a 92 percent national accuracy rate for pension authorization work (Key Measure)	• 92 percent G Actual data through 07/2008. Final data are expected in 12/2008.	4-Year Performance History Year Targets Results FY 2007 89% 91% FY 2006 88% 88% FY 2005 84% 86% FY 2004 Baselined* 84% *Measure did not exist prior to FY 2004. In 2004, measure was baselined. 1n 2004, measure	
MAINTAIN A HIGH LEVE	C Objective 3.3 – Meeting Insura L OF SERVICE TO INSURANCE POLICYHOLDERS NANCE THE FINANCIAL SECURITY OF VETERANS	AND THEIR BENEFICIARIES	
• Complete in 5 days TSGLI disbursements, on average (Key Measure)	• 2.5 days G	4-Year Performance HistoryYearTargetsResultsFY 200753.0FY 2006Baselined3.8FY 2005N/AN/AFY 2004N/AN/AN/A = Measure did not exist prior to FY 2006. In 2006, measure was baselined.	
Achieve a 95 percent rate of high satisfaction from veterans for insurance services delivered (Supporting Measure)		4-Year Performance History Year Targets Results FY 2007 95% 96% FY 2006 95% 96% FY 2005 95% 96% FY 2004 95% 96%	



Strategic Goal 3 , cont'd. Honoring, Serving, and Memorializing Veterans			
Targets	Results	4-Year History	
	gic Objective 3.4 – Meeting Buria BURIAL NEEDS OF VETERANS AND ELIGIBLE FAMIL		
• Serve 83.7 percent of veterans with a burial option within a reasonable distance (75 miles) of their residence (Key Measure)	n e	4-Year Performance History Year Targets Results FY 2007 83.8% 83.4% FY 2006 81.6% 80.2% FY 2005 78.3% 77.1% FY 2004 75.3% 75.3%	
Achieve 97 percent survey respondents rating t quality of service provided I the national cemeteries as excellent (Key Measure)	he i i	4-Year Performance History Year Targets Results FY 2007 97% 94% FY 2006 96% 94% FY 2005 95% 94% FY 2004 95% 94%	
	tive 3.5 – Symbolic Expressions		
• Mark 95 percent of graves in national cemeteries within 60 days of interment (Key Measure)	• 93 percent (Y)	4-Year Performance History Year Targets Results FY 2007 90% 94% FY 2006 90% 95% FY 2005 88% 94% FY 2004 78% 87%	
Strategic Objective 3.6 – Home Purchase and Retention IMPROVE THE ABILITY OF VETERANS TO PURCHASE AND RETAIN A HOME BY MEETING OR EXCEEDING LENDING INDUSTRY STANDARDS FOR QUALITY, TIMELINESS, AND FORECLOSURE AVOIDANCE.			
Achieve a 56.0 percent foreclosure avoidance through servicing ratio (Key Measure)	• 52.4 percent (Y)	4-Year HistoryYearTargetsResultsFY 200751.0%57.0%FY 200647.0%54.0%FY 200547.0%48.0%FY 200447.0%44.0%	



STRATEGIC GOAL 4 *Contributing to the Nation's Well-Being*

Contribute to the public health, emergency management, socioeconomic well-being, and history of the Nation.

Public Benefit

VA advances **medical research** and development programs to support veterans' needs and contribute to the Nation's medical and scientific knowledge base as a public good.

VA continues to expand research efforts to evaluate the impact of **post-traumatic stress disorder (PTSD)** in both the clinical and nonclinical settings. VA assessed 800 U.S. Army soldiers before and after 1-year military deployments to Iraq. As part of the **Neurocognition Deployment Health Study** procedures, each soldier completed selfassessment reports on indices of PTSD symptom severity, health behaviors (smoking, alcohol use), and somatic health-related functioning.

Participants also completed a health-symptom checklist at the **postdeployment** assessment. Structural equation modeling revealed that postdeployment PTSD severity was associated with change in somatic health-related functioning, with postdeployment health symptoms as an intermediary variable. These relationships were independent of health risk behaviors, which had little association with somatic symptoms or PTSD. VA's findings highlight the functional impact of PTSD, which extends beyond psychological symptoms to health-related daily functioning.

Over **100,000 clinical trainees** rotate through VA facilities each year from accredited training programs. Trainees comprise an excellent pool from which to draw to maintain a high-quality health care workforce. In most disciplines, an experience in VA translates into a <u>doubling</u> of interest in a VA career. In 2008, the Office of Academic Affiliation proposed a new performance metric that will give firm numbers regarding the success of our trainee program in contributing to our VA employee workforce. This metric will be implemented in the spring of 2009.

VA researchers are working to improve the construction of prostheses, using leading-edge technologies such as **robotics**, tissue engineering, and **nanotechnology** to create lighter limbs that closely mimic their real counterparts. The integration of body, mind, and machine is a major guiding principle as VA specialists design and build artificial limbs that look, feel, and respond like natural arms and legs. To meet the diverse needs of disabled veterans, VA researchers are working on numerous technologies such as **progressive wheelchairs**, artificial retinas, and hands-free computers with voice recognition.

Additionally, VA investigators are working to identify the best match for an individual veteran's prosthetic needs by collecting information such as how various **prosthetic** devices are used and the degree of satisfaction they provide to users. Important areas of advancement include the development of the first powered ankle-foot **prosthesis**, which thrusts users forward with tendon-like springs and an electric motor; the use of electrical stimulation delivered by devices implanted into the body, such as cardiac pacemakers, to enable veterans with varying degrees of spinal cord injury to improve their ability to walk and control the movement of paralyzed limbs; and the use of microelectronic implants in the eve to restore vision to veterans with such conditions as macular degeneration-the leading cause of blindness in the industrialized world.



VA's maintenance of **national cemeteries** as national shrines preserves our Nation's history, nurtures patriotism, and honors the service and sacrifice of our Nation's veterans. Each national cemetery exists as a national shrine providing an enduring memorial to this service, as well as a dignified and **respectful setting** for their final rest.

VA's Office of Operations, Security, and Preparedness (OSP) coordinates the

Department's emergency management,

preparedness, security, and law enforcement activities to ensure the Department can continue to perform its essential functions under all circumstances across the spectrum of threats. Both VA's Central Office and Martinsburg Readiness Operation Centers are well equipped and are designed to help VA prepare for, respond to, and recover from natural or other disasters.



Making a Difference for the Veteran

VA In Space...Working to Prevent Salmonella Infection

A Department of Veterans Affairs (VA) researcher participated in a project that may lead to development of a vaccine to prevent *Salmonella* poisoning. NASA's space shuttle Endeavour, launched in March, transported research material to the International Space Station.

"This space flight is an exciting step in the development of a *Salmonella* vaccine that will benefit not only our Nation's veterans, but all mankind," said Secretary of Veterans Affairs Dr. James B. Peake. "This is a great example of VA working with the private and public sectors on vital research to create a life-saving advancement." The research will be used by VA investigators and other researchers to develop a *Salmonella* vaccine with the potential to save lives and billions of dollars.

The project came about through the teaming of VA researchers with investigators from the National Space Biomedical Research Institute, Duke University Medical Center, the University of Colorado at Boulder, and Germany's Max Planck Institute, as well as a commercial industry sponsor, SPACEHAB Inc.

Previous research has identified several genes that weaken Salmonella when they are removed. One of these weakened strains



A VA research project bound for the International Space Station was onboard the shuttle Endeavour when it launched in March.

may be suitable to use in a vaccine, but the *Salmonella* organism quickly loses its infectious characteristics under normal test circumstances, making it difficult to study. Researchers believe the environment of space can bring about key genetic changes in cells that affect the ability of the organism to invade human tissue and cause disease. To induce these changes, worms will be grown from eggs on-board the space shuttle. While in space, the worms will be fed *Salmonella*. The extent of damage will be measured when the worms are returned to earth, helping to identify which of the weakened strains is the most effective to use in a vaccine.

"This represents a new approach to vaccine development, as it will be the first time a living organism is infected in space to study its immune response," said Timothy Hammond, lead VA investigator on the project at the Durham VA Medical Center in North Carolina.

Salmonella infection is the most common form of food poisoning in the United States, and leads to a loss of productivity estimated at close to \$100 billion annually. Worldwide, *Salmonella* diarrhea is one of the top three causes of infant mortality.



Five-Year Performance Trend – *Percent of Targets Achieved*

Based on the total number of reported results during a fiscal year, the chart below shows the *percent of performance targets that were achieved* for this strategic goal for the past five years.

Each year performance targets change and, to a lesser extent, so do the number and type of measures. Thus, as shown in the data table, the total number of targets may vary each year.



<u>Note</u>: For 2007, additional final results are now available. Thus, numbers and percentages have been adjusted from those appearing in the FY 2007 PAR.

Positive 2008 Outcomes

<u>Medical Research</u>: VA scientists **have made** notable progress in developing a new treatment for PTSD, specifically directed toward alleviating sleep disturbances and nightmares. This treatment utilizes a drug that has long been used for hypertension. Initial research studies provide evidence for effective relief in cases of veterans who have been struggling for years with chronic sleep problems.

<u>Honoring our Fallen Heroes</u>: Based on a survey of visitors to national cemeteries, **98 percent** of those surveyed rated the appearance of national cemeteries as **excellent**, and 98 percent indicated that they would recommend the national cemetery system to other veterans' families during their time of need.

<u>Supporting service-disabled veteran-owned small businesses</u>: More than **12 percent or approximately \$1.3 billion** of VA's total procurement obligations were directed to **service-disabled veteran-owned small businesses**. This accomplishment **ranked VA first** among all Federal agencies in this area.



FY 2008 Performance and Resource Summary Table – *by Goal and Objective*

The following table highlights important achievements related to strategic goal four and its supporting strategic objectives. Also shown are estimates of the resources devoted to each objective as well as a total for the strategic goal.

	Strategic Goal 4 Contributing to the Nation's Well-Being				
Obligations			% of Total VA Resources		
	SO 4.1- Emergency Preparedness	(* III MIIIIOUS) 28	<0.1		
Objectives	SO 4.2- Medical Research and Development	406	0.4		
Objec	SO 4.3- Academic Partnerships	1,110	1.1		
	SO 4.4-Socioeconomic Well-Being of Veterans	2	<0.1		
Strategic	SO 4.5- Maintaining National Cemeteries as Shrines	123	0.1		
	Total for Strategic Goal 4	\$1,670	1.7%		

Performance Summary by Objective (Representative Measures)				
Targets	Results	4-1	/ear Hist	ory
Strategic Objective 4.1 – Emergency Preparedness Improve the Nation's preparedness for response to war, terrorism, national emergencies, and natural disasters by developing plans and taking actions to ensure continued service to veterans, as well as to support national, state, and local emergency management and homeland security efforts.				
• Achieve 100 percent of Under Secretaries, Assistant Secretaries, and other key officials who self-certify that their teams are "ready to deploy" to their continuity of operations plan (COOP) site	• 100 Percent G	Year FY 2007 FY 2006 FY 2005 FY 2004	100% 100% Baselined N/A not exist prior to FY	Results 90% 85% 85% N/A



Strategic Goal 4, cont'd. Contributing to the Nation's Well-Being					
	Strategic Objective 4.2 – Medical Research and Development				
ADVANCE VA MEDICAL RESEARCH A	ND DEVELOP PROGRAMS THAT ADDRESS VET NESSES – AND CONTRIBUTE TO THE NATION'S	ERANS' NEEDS - WITH AN EMPHASIS ON			
Targets	Results	4-Year History			
ENHANCE THE QUALITY OF CARE T	• 80 percent CODjective 4.3 – Academic Pal O VETERANS AND PROVIDE HIGH-QUALITY EDI ED INTERNALLY IN VA AND VIA PARTNERSHIPS	JCATIONAL EXPERIENCES FOR HEALTH			
Achieve XX percent of VHA clinical healthcare professionals who had VA training prior to employment (Supporting Measure)	• N/A	VA undertook a reassessment of its partnerships to increase emphasis on recruiting trainees as part of its succession and workforce planning initiatives. Trainees form an important recruitment pool from which to draw new VA employees. This new measure will identify the percent of VHA healthcare professionals who have had VA training prior to employment. The previous measure, "Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experience," was dropped at the end of FY 2007. The new measure is being baselined in 2008; results reporting will begin in 2009 .			
Strategic Objec	tive 4.4 – Socioeconomic Well-	Being of Veterans			
ENHANCE THE SOCIOECONOMIC WELL	ENHANCE THE SOCIOECONOMIC WELL-BEING OF VETERANS, AND THEREBY THE NATION AND LOCAL COMMUNITIES, THROUGH VETERANS BENEFITS; ASSISTANCE PROGRAMS FOR SMALL, DISADVANTAGED, AND VETERAN-OWNED BUSINESSES; AND OTHER COMMUNITY INITIATIVES.				
Attain the statutory minimum goal of 3.00 percent for awarding contracts to service-disabled veteran- owned small businesses expressed as a percent of total VA procurement (Supporting Measure)	• 12.35 percent (G) Actual data through September 2008. Data will not be final until September 2009.	4-Year Performance History Year Targets Results FY 2007 3.00% 6.94% FY 2006 3.00% 3.58% FY 2005 3.00% 2.15% FY 2004 3.00% 1.25%			



Strategic Goal 4, *cont'd*. Contributing to the Nation's Well-Being

Objective 4.5 – Maintaining National Cemeteries as Shrines

ENSURE THAT NATIONAL CEMETERIES ARE MAINTAINED AS SHRINES DEDICATED TO PRESERVING OUR NATION'S HISTORY, NURTURING PATRIOTISM, AND HONORING THE SERVICE AND SACRIFICE VETERANS HAVE MADE.

Targets	Results	4-Year History
Achieve 99 percent	• 98 percent Y	4-Year History
of survey respondents rating the appearance of the national cemeteries as excellent (Key Measure)		Year Targets Results FY 2007 99% 97% FY 2006 99% 97% FY 2005 98% 98% FY 2004 98% 98%



ENABLING GOAL

Applying Sound Business Principles

Deliver world-class service to veterans and their families through effective communication and management of people, technology, business processes, and financial resources.

Public Benefit

VA's enabling goal is different from the four strategic goals. The enabling goal and its corresponding objectives encompass crosscutting activities such as information technology management, supply management, human capital planning, and budgeting that enable all organizational units of VA to carry out the Department's mission efficiently. The following examples demonstrate how VA is applying sound business principles to save time and money:

- Advanced Clinic Access (ACA) is a set of principles and tools for identifying and managing supply and demand to reduce waits and delays. The aim of ACA is to improve access and timeliness of services by redesigning systems to eliminate delays and enhance process flow, while maintaining and/or improving quality, outcomes, and satisfaction.
- Conducting efficiency reviews of VA supply chain processes to maximize standardization of supplies, equipment, and services, and to standardize policy and guidance for pharmacy, prosthetics, and fee basis management.
- Advancing VA/DoD collaboration through various processes and systems such as the Joint Executive Council and its subcouncils, the Health Executive Council and the Benefits Executive Council, the Senior Oversight Committee (SOC), the VA/DoD Joint Incentive Fund, and the Interagency Program Office.
- Providing state of the art **protections** to make VA data and systems **secure** so that they preserve the confidentiality, integrity, and availability of veterans' private

information and to protect these systems from fraud, waste, and abuse.

- Implementing VA's E-Gov (Electronic Government) initiatives focused on using information technology to improve service to veterans. A major objective is to have Web-based information readily and easily available for veterans to reduce the time required to identify services and benefits for which they may qualify.
- Transferring **all of VA's employee personnel records** contained in the Official Personnel Folder to an **electronic format**. This will eliminate the need for paper records and enable the electronic transfer of employee information among Federal agencies. It will also improve access and **increase the security** of VA's personnel records.
- Creating a secure **Intranet Web** portal to house employee-specific information regarding background investigations inprocess or completed. This effort, the Electronic Questionnaire for Investigations Processing (e-QIP), will speed up processing and enable VA managers to make hiring decisions for critical and sensitive jobs more quickly.
- Through an aggressive **real property management program**, VA seeks to reduce underutilized and vacant space, improve facility condition, decrease operating costs, and reduce non-mission dependent assets. A key element of VA's real property program is its 5-year Capital Plan, which is updated each year. The next plan is due to be published as part of the FY 2010 Congressional Budget Submission.



Making a Difference for the Veteran

VA Improves Transition for the Combat Wounded

The Department of Veterans Affairs (VA) is pleased to announce the implementation of the **Veterans Tracking Application (VTA)**, a modified version of the Department of Defense (DoD) Joint Patient Tracking

United States Department of Veterans Affairs Veterans Tracking Application

The Veterans Tracking Application provides near real-time tracking and in some cases medical information on active duty servicemembers as they move through the medical evacuation and care system and transition to veteran status. Application. VTA is a Web-based patient tracking tool that assists in managing and tracking seriously injured servicemembers from the battlefield through Landstuhl, Germany to military treatment facilities in the United States, and on to VA medical facilities and regional offices.

VTA provides near **real-time** tracking and in some cases medical information along with the ability of Veterans Health Administration (VHA) and Veterans Benefits Administration (VBA) staff to

input data on active duty servicemembers as they move through the medical evacuation and care system and transition to veteran status. This additional information, direct from the battlefield, assists VA staff in coordinating the transition of healthcare to VA facilities and in processing claims for benefits.

VA's goal continues to be to provide the best care for our wounded heroes. VTA helps us ensure that combat veterans receive coordinated transition services and benefits and enables us to bring data from three sources -- DoD, VHA, and VBA -- together for display on one platform creating the beginning of a truly veteran-centric record.

FY 2008 Performance and Resource Summary Table – by Goal and Objective

The following table highlights important achievements related to the enabling goal and its supporting objectives. Also shown are estimates of the resources devoted to each objective as well as a total for the strategic goal.

	Enabling Goal Applying Sound Business Principles				
	Resource Allocations by	y Objective			
Obligations (\$ in Millions) Pct of Total VA Resources					
ves	E-1- Development and Retention of a Competent Workforce	179	0.2		
Objectives	E-2 – Outreach and Communications	89	0.1		
	E-3 – Reliable and Secure Information Technology	1,052	1.1		
Enabling	E-4 – Sound Business Principles	4,449	4.6		
Ē	Total for Enabling Goal	\$5,769	6.0%		



Enabling Goal, cont'd. Applying Sound Business Principles					
	Performance Summary by Objective (Representative Measures)				
Targets	Results			4-Year His	tory
Enabling Objective I	E-1 – Development ar	nd Retent	ion of a C	Competent V	/orkforce
RECRUIT, DEVELOP, AND RETA	IN A COMPETENT, COMMITTED SERVICE TO VETERANS			E THAT PROVIDES	HIGH-QUALITY
Attain 33 percent of VA employees who are veterans (Supporting Measure)	• 30 percent	Y	4- Ye FY 2 FY 2 FY 2 FY 2	007 32% 006 30% 005 28%	e History Results 31% 31% 28% 26%
Enabling Objective E-2 – Outreach and Communications IMPROVE COMMUNICATION WITH VETERANS, EMPLOYEES, AND STAKEHOLDERS ABOUT VA'S MISSION, GOALS, AND CURRENT PERFORMANCE, AS WELL AS BENEFITS AND SERVICES THAT THE DEPARTMENT PROVIDES.				S, AND CURRENT	
• Submit 45 percent of responses to pre- and post-hearing questions within the required timeframe (Supporting Measure)	• 57 percent	G	Yea FY 20 FY 20 FY 20 FY 20	007 35% 006 35% 005 Baselined	Results 27% 15% 21% N/A
• Submit 50 percent of title 38 reports to Congress by the due date (Supporting Measure)	• 59 percent	G	4- Year FY 2007 FY 2006 FY 2005 FY 2004	Year Performanc Targets 45% 35% 100% 80% wii 15 days of due date	e History Results 40% 13% 21% 54% w/i 15 days of due date



Enabling Goal, cont'd. Applying Sound Business Principles			
Targets	Results	4-Year History	
IMPLEMENT A ONE-VA INFORMATION T CREATION OF CROSS-CUTTING COMMON		ES THE CONSOLIDATION OF IT SOLUTIONS AND THE TION OF INFORMATION ACROSS BUSINESS LINES AND	
Receive a grade of XX on the Federal Information Security Management Act report (Supporting Measure)	• N/A	VA's IT function and underlying activities underwent significant reorganization in FY 2007 and 2008. This resulted in revisions of IT-related measures.	
Achieve an XX overall EVM portfolio performance as measured by Cost and Schedule Performance Variances (Supporting Measure)	• N/A	FY 2008 was a "transition year" where VA's new measures were developed and baselined. VA's FY 2009 budget submission included the new measures together with FY 2009 targets. Results achieved against these targets will be reported in the Department's FY 2009 PAR.	
IMPROVE THE OVERALL GOVERNAN ACCOUNTABILITY; EMPLOYING RESC	URCES EFFECTIVELY THROUGH ENHANG	SINESS PRINCIPLES YING SOUND BUSINESS PRINCIPLES; ENSURING CED CAPITAL ASSET MANAGEMENT, ACQUISITION ANNING TO BUDGETING AND PERFORMANCE.	
• Achieve \$190 million of joint VA/DoD procurement contracts for high-cost medical equipment and supplies (Supporting Measure)	 \$188 million (1) 2006 and 2007 results are corrected. (2) Beginning in 2007, medical supplies were added to this measure. (3) Actual data through 07/2008. Final data are expected in 12/2008. 	4-Year Performance History Year Targets Results FY 2007 \$170 million \$328 million FY 2006 \$150 million \$236 million FY 2005 -Baselined- FY 2004 N/A N/A N/A = Measure did not exist prior to FY 2005. In 2005, measure was baselined.	



Enabling Goal, cont'd. Applying Sound Business Principles				
Targets	Results	4-Year History		
Enabling Objective E-4 – Sound Business Principles, cont'd. Improve the overall governance and performance of VA by applying sound business principles; ensuring accountability; employing resources effectively through enhanced capital asset management, acquisition practices, and competitive sourcing; and linking strategic planning to budgeting and performance.				
• Fully utilize 95 percent of space as compared to overall space (owned and direct-leased) (Supporting Measure)	• 113 percent G	4-Year Performance History Year Targets Results FY 2007 95% 112% FY 2006 95% 104% FY 2005 95% 98% FY 2004 Baselined* 80%		
	FY 2008 Estimate	*Measure did not exist prior to FY 2004. In 2004, measure was baselined.		
Achieve a 9 percent cumulative decrease in "facility traditional" energy consumption per gross square foot from the 2003 baseline (Supporting Measure)	• 4 percent Y Actual data through 08/2008. Final data are expected in 01/2009.	4-Year Performance History Year Targets Results FY 2007 6% 6% FY 2006 2% 4% FY 2005 N/A N/A FY 2004 N/A N/A N/A = Measure did not exist prior to FY 2006. FY 2006		
• Achieve 3.0 percent of total facility electricity consumption that is renewable (Supporting Measure)	• 3.0 percent G	4-Year Performance HistoryYearTargetsResultsFY 2007Baseline*3%FY 2006N/A3%FY 2005N/AN/AFY 2004N/AN/A		
	Actual data through 08/2008. Final data are expected in 01/2009.	*Measure did not exist prior to FY 2006. In 2007, measure was baselined.		