

PROGRAM RESTRUCTURING AND INPATIENT BED CHANGE POLICY

- 1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Directive establishes policy for the implementation of the Department of Veterans Affairs (VA) VHA's program restructuring and any change impacting the inpatient beds program.
- 2. SUMMARY OF CHANGES.** This Directive establishes updated policies for the development and approval of bed and program change proposals within the Veterans Integrated Service Network (VISN) including utilization of the web-based National Bed Control Database. It reflects the change in title from the Assistant Deputy Under Secretary for Health to the Deputy Under Secretary for Health for Operations and Management (10N) effective May 24, 2002. It updates approval levels for bed requests.
- 3. RELATED ISSUES.** None.
- 4. FOLLOW-UP RESPONSIBILITY.** The Deputy Under Secretary for Health for Operations and Management (10N) is responsible for the contents of this Directive. Questions may be referred the Office of the Deputy Under Secretary for Health for Operations and Management.
- 5. RESCISSIONS.** VHA Directive 1000.1, Program Restructuring and Inpatient Bed Change Policy, dated January 31, 2001, is rescinded.
- 6. RECERTIFICATION.** This VHA Directive is scheduled for re-certification on or before the last working day of April 2010.

S/ Jonathan B. Perlin, MD, PhD, MSHA, FACP
Acting Under Secretary for Health

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PROGRAM RESTRUCTURING AND INPATIENT BED CHANGE POLICY

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes policy and procedures to guide networks in the development and approval of bed and program change proposals, including utilization of the web-based National Bed Control Database. ***NOTE:** It also reflects the change in title from the Assistant Deputy Under Secretary for Health to the Deputy Under Secretary for Health for Operations and Management (10N) effective May 24, 2002.*

2. BACKGROUND

a. Since 1995, VHA facilities have undergone extensive restructuring and realignment in order to improve health care service delivery and administrative operations. In response, the Department of Veterans Affairs (VA) Central Office has issued numerous directives and memoranda in an effort to coordinate and provide appropriate oversight to program restructuring, to ensure that a full continuum of care and the uniform benefits package is available to enrollees in each Veterans Integrated Service Network (VISN), and to maintain capacity in special programs. In addition, the Veterans Millennium Health Care and Benefits Act, Public Law (Pub. L.) 106-117, Section 301 amended Title 38, United States Code (U.S.C.) Section 8110, creating new requirements for reporting and documenting bed changes to Congress for specific categories of beds. Pub. L. 106-117, Section 101(c)(1) requires that staffing and levels of extended care services remain, at a minimum, at levels provided during fiscal year (FY) 1998. ***NOTE:** This Directive incorporates requirements of recent policy documents and legislation, to ensure that services offered in field facilities support VHA's strategic goals.*

b. The term "program restructuring" refers to reorganizations and consolidations of clinical or administrative services or major programs offered at VHA facilities.

3. POLICY: It is VHA policy that all proposals to restructure programs or make changes to authorized or operating beds or program capacity must be entered into the web-based VA National Bed Control Database, and receive approval from the Under Secretary for Health and the VISN Director.

4. RESPONSIBILITIES

a. **The Under Secretary for Health.** The Under Secretary for Health is the approving official for the following program restructuring or bed change proposals.

b. **VISN Director.** Each VISN Director is responsible for:

(1) Ensuring that facilities prepare program restructuring and bed change proposals requiring Under Secretary for Health approval in the format shown in Appendix C and Appendix D, and

(2) Submitting program restructuring and bed change proposals electronically into the web-based VA National Bed Control Database, <http://vaww.bedcontrol.med.va.gov>.

c. **Deputy Under Secretary for Health for Operations and Management (10N).** The Deputy Under Secretary for Health for Operations and Management (10N) is responsible for:

(1) Reviewing all bed change and program restructuring requests, and

(2) Entering Deputy Under Secretary for Health for Operations and Management and Under Secretary for Health approvals into web-based National Bed Control System.

d. **Patient Care Services.** Patient Care Services is responsible for providing comments and recommendations to the Deputy Under Secretary for Health for Operations and Management (10N) on proposals and bed change requests within a 10 workday period.

e. **VISN Support Service Center (VSSC).** The VSSC is responsible for maintaining the web-based VA National Bed Control Database and monitoring the processing of bed changes to the electronic system.

5. REFERENCES

a. VHA Directive 1176, Spinal Cord Injury and Disorders System of Care.

b. Deputy Under Secretary for Health for Operations and Management Letter on Program and Bed Change Policy dated February 20, 2002.

c. Under Secretary for Health Approval of Bed Closures Letter dated December 17, 2001.

d. Assistant Deputy Under Secretary for Health Letter on Program and Bed Change Policy dated January 29, 2002.