Chapter 4

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WORKLOAD MANAGEMENT

4.01 Introduction

This chapter focuses on an oversight activity conducted by the Vocational Rehabilitation and Employment (VR&E) Service and the Regional Offices (RO).

It outlines the criteria, principles and procedures for administering and managing a VR&E office's workload. It provides the standards for each office's performance and defines a workload management plan to ensure consistency and quality in service delivery for administering the Chapter 31 benefits.

Additionally, this chapter provides the format for developing the required Workload Management Plan (WMP) for each VR&E office.

4.02 References and Resources

Laws: Public Law 106-117, The Veterans Millennium Health Care and Benefits Act

Regulations: 38 CFR Part 21

Resources: Veterans Benefits Administration (VBA) Handbook 4080, December 3, 2010

VA Forms: VAF 28-1900, Disabled Veterans Application for Vocational Rehabilitation


4.03 VR&E Performance Standards

The performance standards for the VR&E Division are specifically set for the Regional Office (RO) Director, the VR&E Officer (VREO) and the Vocational Rehabilitation Counselors (VRC). The established standards provide the framework for the overall measurement of an office's performance.

The set measures for the performance are divided into three elements - Timeliness, Production and Quality. The calculations of the scores for these elements are discussed in detail in section 4.06 of this chapter.

Refer to Appendix J, National Performance Standards.
4.04 Data Sources for VR&E Performance Measures

The following reports provide the data needed in assessing an office’s workload management and quality control. These reports are available with approved permissions to VR&E staff.

a. Case Management Index (CMI)

This site provides the workload management tools for VR&E managers to assist in improving timeliness and efficiency of the delivery of rehabilitation services to Veterans.

The CMI provides the number of cases in each status from Applicant (APP) to Job Ready (JR). It also provides an office’s percent of cases as compared with the national workload and the number of rehabilitations for employment and independent living from fiscal year to date (FYTD). Additionally, it provides each office’s number of cases in Rehabilitated To the point of Employability (RTE) status with no subsistence allowance for over nine months and number of cases in Interrupted (INT) status maintained for over six months.

The website is located at the Veterans Benefits Administration (VBA) Intranet website within the jurisdiction of the Performance Analysis and Integrity (PA&I) and within the Data and Information Services (D&IS) site under VR&E Intranet Reports under CMI Report.

This website address is as follows:

b. VR&E Intranet Reports

This site provides a series of reports that are updated on a daily basis and displays data on new workload, active workload, workload summary by case manager and by case status, cases in Rehabilitated (REH) status, employment responsibility issues, pending workload report for cases with End Products (EPs) 095, 295 and 719, and Dictionary of Occupational Titles (DOT) categories for cases in RTE status.

This site also includes fiscal reports for contracting activities (timeliness and expenditures), Educational Vocational (Ed/Voc) Fund usage, Purchase Card usage, Miscellaneous Payments and Program Cost Report.

These reports access data from Corporate WINRS (CWINRS) and a set of data from the Benefits Delivery Network (BDN) system.
The website is located at the VBA Intranet website within the jurisdiction of PA&I and within the D&IS site under the VR&E Intranet Reports.

The website address is as follows:

c. Monthly Operations Reports (MOR)

This site provides a series of reports for performance standards for each RO and individual staff members. The reports include cases in INT status, RTE status, REH status, Discontinued (DIS) status, REH Rates, Serious Employment Handicap (SEH) Rates and Maximum Rehabilitation Gain (MRG) closures.

The website is located at the VBA Intranet website within the jurisdiction of PA&I and within the D&IS site under Monthly Operations Reports.

The website address is as follows:

d. Pending Issue File (PIF) Reports

This site provides a series of reports. It contains the data for pending and completed issues on the following EPs: 095, 295 and 719.

The website is located at the VBA Intranet website within the jurisdiction of PA&I and within the D&IS site under the Pending Issues File (PIF).

The website address is as follows:

e. VRE Quality Assurance (QA) Reports

This website provides the data and scores for the national and local QA reviews. VR&E uses these data to track trends, address deficiencies and develop agenda for future staff training.

The website is located at the VBA Intranet website within the jurisdiction of the PA&I and within the D&IS site under the VR&E Quality Assurance Reports.

The website address is as follows:

f. VETSNET Operations Reports (VOR)
This site provides data for pending and completed EP reports, 810 Series and other summary/detailed reports.

The website is located at the VBA Intranet website within the jurisdiction of the PA&I and within the D&IS site under VOR 2.0.

The website address is as follows:

g. Tracking End Products (EPs)

1. Using the VETSNET Operations Reports (VOR)

VOR may be accessed through the PA&I main page (http://vbaw.vba.va.gov/bl/20/opai/pai/wkld/2010/files/pai.htm), or accessing the website directly using the link specified above.

The reports generated from this website provide the number of pending and closed EPs for 795, 095, 295 and 719. These reports also allow sorting options, which identify the Veterans and the RO numbers and other sortable data.

The available reports are explained below:

(a) Pending Full Detail

This report provides the Days to Process (EPs 095/295); number of Entitlement Determinations (EP 719); and Days to Process (EPs 718/768/769).

(b) Pending Canceled (PCAN) Ending Products

This report provides the number of canceled EPs and the number of days prior to canceling the EPs.

(c) Completed Detail

This report provides the number of cleared (PCLR) EPs.

2. Procedures for Accessing the VOR Reports

Below are the screen shots which illustrate the step-by-step method to access each report:
Step 1: On the PA&I Home page, select the type of report to run.

Step 2: Complete the following recommended filters and select the “End Product” drop down menu.

Step 2a: Complete the following recommended filters: File Date, Country, Area, Station,

Step 2b: Select End Product and then select more choices.....

Step 3: Select the desired “End Product(s)” and move them to the
“Selected” frame on the right side.

Step 3a: Highlight the EP you want in the Available frame on the left.
Step 3b: Use the ">" / "Move" arrow to move the selected EP to the Selected frame on the right.
Step 3c: Click "OK"

Step 4: Select the Flash.

Step 4a: Report Type: Flash
Step 4b: Click "Apply"
Step 5: View the VOR Report with the requested “End Product Code” and “Special Issue/Flash” identifier.

4.05 Data Management and Analyses

This section provides recommended and required assessment tools, which assist an office in identifying data and defining areas for examination. This ensures successful implementation of program operations and workload management.

a. Workload Management Plan

This plan provides the tool to assess an office’s workload management and the next steps for corrective actions, when identified.

The development of this report is required by the Office of Field Operations (OFO) and VR&E Service. The plan must be completed in the first month of each year. For more information, refer to section 4.06 of this chapter.

b. Fiscal Management Reports

These include routinely reviewing reports for the following fiscal issues:

- Use of Purchase Cards
• Use of Readjustment Benefits and Government Operating Expenses (RB/GOE) funds

• Program Cost Approvals

• Revolving Fund Loans (RFL)

• Specially Adaptive Housing (SAH) approvals

c. Performance Management Reports

These include reviewing routinely the Dashboard for the following issues:

• Accuracy Scores

• Rehabilitation Rates

• SEH Rehabilitation Rates

• Number of Rehabilitations

• Number of Cases closed with MRG codes

• Number of Rehabilitations (employment only)

d. Caseload Management Reports

These include reviewing data routinely for out-of-line issues. These include, but are not limited to, the following:

• Days in APP status

• Cases in Independent Living (IL) status over 24 months

• Cases in Evaluation and Planning (EP) status over 105 days

• Cases in JR status over 18 months

• Cases in Extended Evaluation (EE) status over 12 months

e. Transfer Management Reports

These include reports for ensuring that cases that are transferred to and received from ROs are tracked properly and timely. These also include
ensuring that CER folder locations are accurately and timely updated in CWINRS and BDN.

f. Leadership Management Reports

These include developing and submitting reports that are specifically required by the RO Director. This may include, but is not limited to, the following:

- Management Briefings
- Local Training Plans
- Adherence to Talent Management System (TMS) requirements

g. Data Integrity Management

This activity ensures that data integrity is maintained in CWINRS and BDN. This verifies that the following data are entered accurately in both systems:

- SEH Indicator
- Case Status assignment
- Case Manager assignment
- Effective Date for case status movement
- Facility Code assignment
- Active cases are not maintained in archive
- Inactive cases are not maintained in active cases
- Track Selection

4.06 Guidelines on Developing a Workload Management Plan (WMP)

a. Definition

A WMP is a structured and systematic approach in managing the amount and types of work performed in a given period to meet organizational goals.

The plan provides the structure, workflow and processes that impact the performance measures. The plan does not only identify the office’s
operational strengths and deficiencies, but also provides corresponding strategy or action plans to address deficiencies as identified by the analysis of workload and current processes.

b. Components of a WMP

This section outlines the format that must be utilized in developing an office’s WMP. However, the focus of analysis should not be limited to the format as presented. An office may include additional analyses of areas that may warrant special attention.

Note: Refer to Appendix AU, Workload Management Plan Template. The template outlines the topic and format to be used in developing a WMP and includes the calculations for each measure. The instructions (highlighted in blue) may be deleted.

1. Overview

This section provides a brief description of the conditions that may impact the office’s ability to manage its workload.

(a) Staffing

This section describes the office’s staffing breakdown based on the Resource Model Allocation (RAM). This also includes, but not limited to the following issues:

- Staffing increase and/or loss
- Proportion of the number of staff to workload size
- Technical or program support, etc.

(b) Roles and Responsibilities

This section identifies the assigned staff position (Program Support, VRC, EC, etc.), that executes the required processes and procedures. This section also describes the specific staff roles and responsibilities for meeting the performance standards.

Since VR&E processes and casework activities begin from receipt of VAF 28-1900 (See Appendix O, VA Forms) the specific roles and responsibilities must be clearly delineated to ensure timely processing and efficient workflow.
(c) Other Relevant Issues

This section identifies the office’s major achievements, concerns and/or additional responsibilities, which include, but are not limited to the following:

- Significant accomplishments
- Unique or special missions
- Special needs of the Veteran population
- Special needs of the office (space, equipment, etc.)

2. Processing of Applications (Chapter 31 and Chapter 36)

This section briefly describes the method for receiving and processing applications. It describes the method of receipt of applications, such as division and interoffice mail, Veterans Online Application (VONAPP); walk-ins, Transition Assistance Program (TAP) sessions, etc. This also includes the designated staff position that is responsible for receiving and processing applications and the required steps.

3. Performance Measures and Targets

This section provides the targets and the office’s overall scores for the performance measures. Each element is defined with the scope of assessment and specific calculations in obtaining the scores.

The scores are illustrated separately for each element using the tables outlined in this section. The data sources are also identified for each element.

The tables below must be used to illustrate the office’s performance. This section may also contain charts to provide graphic illustrations of the scores and may include a comparative chart from year-to-year to show progression or recession. In addition, the office may choose to add another column to illustrate the office’s scores against the national scores.

(a) Production

(1) Rehabilitation Rates

This measure is calculated using the following:
• The total number of cases closed as rehabilitated (Veterans who successfully completed their rehabilitation program, obtained and maintained suitable employment for 60 days, and for Veterans for which employment is infeasible but achieved independence in their daily living)

• Divided by the total number of cases closed as rehabilitated and discontinued from IL status and JR status

• Minus the total number of cases closed as discontinued using one of the two MRG categories or closed as discontinued because the Veterans elected to use Chapter 33 benefits or are deceased

Data Sources: The MOR (Active Case Workload Report) or Locally developed Tracking Sheets.

(2) SEH Rehabilitation Rate

This measure is calculated using the following:

• The total number of cases closed as Rehabilitated for Veterans with SEH and either he/she has obtained suitable employment or he/she has achieved independence in their daily living

• Divided by the total number of SEH cases closed as rehabilitated

• Plus cases closed in DIS status for Veterans with SEH from IL, RTE and JR statuses

• Minus the total number of SEH cases closed as discontinued using one of the two MRG categories or closed as discontinued because the Veterans elected to use Chapter 33 benefits, or are deceased

Data Sources: The MOR (Active Case Workload Report) or Locally developed Tracking Sheets.

(3) Employment Rehabilitation Rate

This measure is calculated using the following:

• The total number of cases closed as Rehabilitated for Veterans who received employment services
• Divided by the total number of cases closed as rehabilitated for Veterans who successfully completed their rehabilitation program and maintained suitable employment for 60 days

• Minus the total number of cases closed as discontinued using one of the two MRG categories or closed as discontinued because the Veterans elected to use Chapter 33 benefits or are deceased

Data Sources: The MOR (Active Case Workload Report) or Locally developed Tracking Sheets.

(4) Actual RO Employment Rehabilitation Rate

The national strategic target for annual employment rehabilitations is determined based on trends, caseload and estimates of future workload. Each regional office’s numeric target for employment rehabilitations is calculated based on a review of their history of past performance, caseload and future workload. Each RO is responsible for closing a specific number of cases as rehabilitated for Veterans in suitable employment each fiscal year. An employment-based rehabilitation is defined as a Veteran that has obtained and maintained suitable employment for at least 60 days.

The target for employment rehabilitations also includes those Veterans who received all rehabilitation services and are determined rehabilitated to the point of employability, as well as Veterans who are determined job ready, but elected not to receive employment services to pursue additional education on their own.

Note: The target for annual employment rehabilitations does not include Veterans for whom employment is not feasible, but achieved independence in their daily living.

Data Sources: Locally developed Tracking Sheets.

(5) Percent of Cases in Interrupted Status

This measures the percent of cases maintained in INT status from EP status, EE status, RTE status, JR status and IL status, in proportion with the office’s total workload.

Data Sources: Snapshot of open cases at the end of each month from the CWINRS Active Caseload Report; the MOR (Active Case
Workload Report) or Locally developed Tracking Sheets.

The table below illustrates the office’s performance for Production.

<table>
<thead>
<tr>
<th>Elements</th>
<th>National Standards</th>
<th>Level II Standards</th>
<th>Local Goals</th>
<th>Local Scores</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rehab Rate</td>
<td>≥77%</td>
<td>≥80%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>SEH Rehab Rate</td>
<td>≥77%</td>
<td>≥80%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Employment Rehab Rate</td>
<td>≥77%</td>
<td>N/A</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>% Cases in Interrupted Status</td>
<td>≤11%</td>
<td>≤10%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Actual Station Employment Rehabs</td>
<td></td>
<td>RO Standards</td>
<td>Month</td>
<td>Rehabs</td>
<td></td>
</tr>
</tbody>
</table>

(6) Influencing Factors

The following factors impact this performance measure and therefore, warrant that certain cases be monitored and reviewed closely on a regular basis.

- Interruptions

These include cases maintained in INT status. These cases should be reviewed and monitored regularly to ensure that they do not remain in this status for extended periods without valid reasons.

- Discontinued Cases Closed with MRG Codes
These include cases placed in DIS status using one of the three MRG codes.

Prior to discontinuance, these cases must be submitted to the VREO for concurrence. The VREO’s review ensures appropriate case closure when a Veteran cannot be declared rehabilitated but has received maximum gains from his/her rehabilitation program. These cases are excluded from the calculation of the Rehab Rate and SEH Rehab Rate.

- Discontinued Cases

These include cases placed in DIS status using all Reason Codes (RC) for discontinuance, except RC 99 for Veteran’s death, and the MRG codes.

Prior to the discontinuance, these cases must be submitted to the VREO for concurrence. The VREO’s review ensures cases are closed appropriately. These cases are included in the calculation of the Rehab Rate, SEH Rehab Rate and the Employment Rehab Rate.

- Rehabilitated Cases

These include cases placed in REH status from JR status or IL status.

Prior to case closure, these cases must be submitted to the VREO for concurrence. The VREO’s review ensures cases are closed appropriately. These cases are included in the calculation of the Rehab Rate and SEH Rehab Rate. Additionally, only cases closed from JR status are included in the Employment Rehab Rate and Actual Station Employment Rehab.

- Rehabilitated Cases with SEH

These include cases placed in REH status from JR status or IL status with SEH determinations.

Prior to case closure, these cases must be submitted to the VREO for concurrence. The VREO’s review ensures cases are closed appropriately. These cases are included in the calculation of the Rehab Rate and SEH Rehab Rate. Only cases
closed from JR status are included in the Employment Rehab Rate and Actual Station Employment Rehab.

(b) Timeliness

(1) **Average Days to Entitlement**

This sub element measures the average number of days from receipt of the Veteran’s application as indicated on the original date stamp by VA, to the date the Veteran is informed of the decision for entitlement or non-entitlement to Chapter 31 benefits. This calculation includes clearing or disallowing pending issues for the following EPs: 095, 295 and 719.

Data Sources: The MOR from FYTD.

(2) **Average Days Pending in EP 295**

This sub element measures the average number of days cases with EP 295 are pending.

(3) **Average Days to Complete EP 295**

This sub element measures the average number of days from receipt of the Veteran’s application, as indicated on the original date stamp by VA, to the date the rating decision is completed, EP 295 is cleared and EP 719 is established.

(4) **Average Days Pending in EP 095**

This sub element measures the average number of days cases with EP 095 are pending.

(5) **Average Days to Complete EP 095**

This sub element measures the average number of days from receipt of the Veteran’s application, as indicated on the original date stamp by VA, to the date the memorandum rating decision is completed, EP 095 is cleared and EP 295 is established.

(6) **Average Days Pending in EP 719**

This sub element measures the average number of days cases with EP 719 are pending.
(7) Average Days to Complete EP 719

This sub element measures the average number of days from receipt of the Veteran's application, as indicated on the original date stamp by VA, to the date the applicant is notified of the entitlement decision and EP 719 is cleared.

(8) Average Days Pending in EP Status

This sub element measures the average number of days the cases are maintained in EP status.

(9) Average Days Pending in JR Status

This sub element measures the average number of days the cases are maintained in JR status.

(10) Influencing Factors

- EP 095

This end product is established upon receipt of the application and controls the number of days to complete the Generated Eligibility Determinations (GED) processing using a memorandum rating decision.

- EP 295

This end product is established upon receipt of application and controls the number of days to complete the GED processing to complete the Service-Connected Disability (SCD) rating decision.

- EP 719

This end product is established when eligibility determination is completed and controls the number of days to complete and inform the applicant of the entitlement decision.

The table below illustrates the office's performance for Timeliness.
### Timeliness

<table>
<thead>
<tr>
<th>Elements</th>
<th>National Standards</th>
<th>Level II Standards</th>
<th>Local Goals</th>
<th>Local Scores</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ave Days to Entitlement</td>
<td>≤45 days</td>
<td>≤42 days</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days Pending in EP 295</td>
<td>≤7 days</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days to Complete EP 295</td>
<td>≤7 days</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days Pending in EP 095</td>
<td>N/A</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days to Complete EP 095</td>
<td>N/A</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days Pending in EP 719</td>
<td>≤40 days</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days to Complete EP 719</td>
<td>≤40 days</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days Pending in EP Status</td>
<td>≤105 days</td>
<td>≤95 days</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
<tr>
<td>Ave Days Pending in JR Status</td>
<td>≤180 days</td>
<td>N/A</td>
<td>≤ days</td>
<td>days</td>
<td></td>
</tr>
</tbody>
</table>

(c) Quality

The scores for this element are based on the results of the Systematic Technical Accuracy Review (STAR).
The scores are reported in the MOR on a 12-month rolling average.

(1) Entitlement Determination Accuracy (EDA)

This measures the correctness of the decisions on entitlement determinations.

The score for this element is obtained from cases reviewed under Evaluation Determination and Rehabilitation Planning (EDRP) case type.

(2) Evaluation, Planning and Rehabilitation Services Accuracy (EPRSA)

This measures the correctness of the decisions to provide rehabilitation services from evaluation and planning services through case closures for rehabilitation and discontinuance.

The score for this element is obtained from cases reviewed under EDRP, Rehabilitation Services Delivery (RSD), Outcome-Rehabilitated (OR) and Outcome-Discontinued (OD) case types.

(3) Fiscal Accuracy (FA)

This measures the correctness of the decisions to authorize payments for rehabilitation services, supplies, tools and equipment from the evaluation and planning phase through case closures for rehabilitation and discontinuance.

The score for this element is obtained from cases reviewed under EDRP, RSD and OD case types.

(4) Outcome Accuracy (OA)

This measures the correctness of the decisions to close cases for rehabilitation or discontinuance. The cases reviewed for this measure are OR and OD cases.

The score for this element is obtained from cases reviewed under OR and OD case types.

(5) Maximum Rehabilitation Gains (MRG) Accuracy

This measures the correctness of the decisions to discontinue cases using one of the MRG reason codes.
The score for this element is obtained from cases reviewed under
OD case type using MRG reason codes only.

The table below illustrates the office’s performance for Quality.

<table>
<thead>
<tr>
<th>Elements</th>
<th>National Standards</th>
<th>Level II Standards</th>
<th>Local Goals</th>
<th>Local Scores</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPRSA</td>
<td>85%</td>
<td>N/A</td>
<td>≥ %</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>EDA</td>
<td>96%</td>
<td>N/A</td>
<td>≥ %</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>FA</td>
<td>92%</td>
<td>≥93%</td>
<td>≥ %</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>POA</td>
<td>97%</td>
<td>≥98%</td>
<td>≥ %</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>MRG</td>
<td>90%</td>
<td>N/A</td>
<td>≥ %</td>
<td>%</td>
<td></td>
</tr>
</tbody>
</table>

4. Findings and Analyses

This section presents the strengths and deficiencies identified in the
workload analysis. It provides a detailed description of the analysis for
the office’s scores including the factors that may be affecting the office’s
performance for each element and sub element.

This section must include a thorough explanation for the finding and the
 corresponding cause(s) or reason(s) that led to the identified deficiencies
 and/or strong points or achievements. It must also include the factors
 that directly impact the scores for each element or sub element.

5. Action Plans

This section provides the plan and specific steps to be taken in addressing
the deficiencies found during the workload analysis. It also provides the
timeline for each action to be taken and the responsible individual
assigned to implement the action plan.

This section must include the specific approach for improving each
identified deficiency. It also must include a definite timeframe for
implementing the action plan and the anticipated improvement.
This section may also include addressing any identified needs of the office, e.g., staffing, space, equipment, etc. An identified need must be thoroughly explained and must include data or information that supports the need.

4.07 Assessment of Internal Controls and Management’s Statement of Assurance

a. Purpose

Each office is required to submit a Statement of Assurance that management and internal controls are in place. This requirement ensures the following:

- Programs achieve their intended results
- Resources are used consistent with agency mission
- Programs and resources are protected from waste, fraud and mismanagement
- Laws and regulations are followed
- Reliable and timely information is obtained, maintained, reported and used for decision-making

b. Mandatory Management Controls

The management controls set for VR&E are listed below:

- An adequate system of controls is in place for the use of purchase cards as required by VBA Handbook 4080
- Entitlement and outcome decision deficiencies, as well as fiscal activity deficiencies, identified in the quality assurance process are addressed, corrected and reported as required in the corrective actions section of the quality assurance reports
- Procedures are in place to ensure that no individual employee has the authority to both establish and authorize basic eligibility on the same case
- Employees have received annual ethics training, communicating expectations of employee conduct and avoidance of any conflict of interest
- Procedures are in place to ensure compliance with the systematic analyses
of operations

- Procedures are in place to ensure that no individual employee has the authority to both obligate and process payments in CWINRS

- Procedures are in place to ensure that contracts are administered in accordance with all appropriate codes, statues and regulations (including the FAR and VAAR)

- Adequate procedures are in place to ensure that date of claim information entered into VBA systems accurately reflects the date stamp on the VAF 28-1900

- All employees involved in claims processing are cognizant of and adhere to the rules pertaining to the protection of the personal data of all individuals, including Veterans, dependents and employees; employees receive annual cyber security and privacy awareness training to reinforce VA’s commitment to enhanced data security

c. Submission

The Management’s Statement of Assurance must be submitted annually to the RO Director in the required memorandum format.