

Date: **MAR 16 2020**

From: Executive in Charge, Veterans Health Administration (10)

Subj: Coronavirus (COVID-19) – Guidance for Telework, Scheduling, and Duty Location

To: VHA Senior Leaders

1. Many of you may have seen the memorandum that was published by the Office of Management and Budget (OMB) (M-20-13, “Updated Guidance on Telework Flexibilities in Response to Coronavirus”, dated March 12, 2020) that encourages Federal agencies to maximize telework and leave flexibilities whenever possible during this unprecedented COVID-19 response. Veterans Health Administration (VHA) leadership has reviewed the memorandum and the following information is provided to you to better understand how VHA is responding.

2. The safety of our employees and patients is our highest priority and one that we take very seriously. Our primary mission is to provide care to our nation’s Veterans. OMB communications are broad so that each organization can use the information in ways that makes sense for them. VHA is the backbone of the American healthcare system, and one of our core missions in times of national emergency is to provide healthcare resources if the community becomes overwhelmed. We need to keep our hospitals open, especially in a time of crisis.

3. It is critical that we prioritize access to the VA network for our healthcare providers so the VA can continue provide healthcare via telehealth or telework to our Veterans; therefore, telework decisions for administrative personnel and those not providing direct patient care will be critically assessed and, where appropriate, denied based on our highest priority of delivering health care to Veterans.

4. The OMB Memo M-20-13 expands the pool of those who can request to telework during COVID-19 but does not require management to approve telework if there is justification for denial. Many positions in VHA are not feasible for telework. Other factors that may be considered in evaluation of a request to telework include availability of IT equipment and scheduling concerns. Reasonable accommodation requests for telework must be evaluated on a case by case basis and undue hardship considered in whether to approve, disapprove, or propose an alternative accommodation.

5. New telework approvals should only be made for clinical staff who will be using the remote connection to provide healthcare. New telework approvals should not be approved for non-clinical staff without the approval of a second level supervisor. VHA must preserve network access for the mission critical provision of healthcare. A review of non-clinical staff currently on telework agreements may need to be conducted as information about the availability and speed of the network becomes available. All

Coronavirus (COVID-19) – Guidance for Telework, Scheduling, and Duty Location

supervisors are directed to conduct a review of telework agreements currently in place to determine if staff should temporarily shift their duty locations or modify their schedules during this emergency to ensure mission essential functions can continue uninterrupted.

6. This guidance should not be taken to diminish the role of non-clinical staff. For administrative staff who have a vital role in maintaining our operations we need them to be physically at work, to the extent feasible, to preserve our bandwidth for clinical needs. We are carefully screening our patients, visitors, and staff, prior to entering to provide the safest environment possible for staff to work. All employees, whether clinical or administrative, are critical to the work we do for Veterans.

7. We also know that widespread school closures are creating significant strain on our employees who have children in the home. In light of this, we are recommending approval of leave or telework for a limited period in order to make appropriate long-term childcare arrangements. Absent undue hardship, long term school closures may not be a reason to approve new telework agreements.

8. OMB Memo M-20-15 (“Updated Guidance for National Capitol Region on Telework Flexibilities in Response to Coronavirus”, dated March 15, 2020) recommends that “...agency heads should develop an operational plan that maximizes resources and functional areas to most safely and efficiently deliver these mission-critical functions and other Government services (including but not limited to staggered work schedules and other operational mitigation measures).” In support of these efforts, leaders are encouraged to work with their employees to explore alternative schedules, including shift work, weekend work, split shifts, expanded use of compressed work schedules, flexible start and stop times, and part-time work.

9. Please remember that alternative work schedules for Title 5 and Hybrid Title 38 employees may not be subject to the exclusions that apply to taking action in an emergency or other management rights identified in 5 U.S.C. § 7106(a)(2). Managers should consult with their local HR representatives to ensure that appropriate employee relations and labor laws and collective bargaining agreements are considered.

10. Employees who are working remotely are encouraged to take actions to reduce the strain on IT bandwidth:

- Take advantage of offline work
- Check email periodically throughout the day using mobile devices
- Log off when not actively working email, i.e., during meetings
- Eliminate unnecessary activity like using Skype for meetings (use VANTS), unnecessary email (thank you, you’re welcome, ok, etc.)
- Suspend non-mandatory TMS training

Coronavirus (COVID-19) – Guidance for Telework, Scheduling, and Duty Location

- Employees in local commuting areas of hub offices, increase office presence when able and when permissible, as determined by managers.

11. For further questions, contact the Office of Workforce Management and Consulting at wmc@va.gov.

A handwritten signature in blue ink, appearing to read 'R. Stone', with a long horizontal flourish extending to the right.

Richard A. Stone, M.D.

Attachment:

Workforce Management and Consulting Combined Frequently Asked Questions