Congress of the United States

Washington, DC 20515

September 30, 2022

The Honorable Denis McDonough, Secretary The Department of Veterans Affairs 810 Vermont Ave NW Washington, DC 20571

Dear Secretary McDonough,

We write to express our concerns surrounding Pressure Injuries & Ulcers (PI) and their prevalence among veterans receiving care at Department of Veterans Affairs (VA) medical facilities. This is a serious and potentially life-threatening ailment, as pressure injuries currently impact over 2.5 million Americans and are responsible for more than 60,000 patient deaths annually.

Historically, VA facilities have seen higher rates of complications attributed to pressure injuries and experienced the significant financial impact associated with administering proper treatment. The Patient Safety Indicators reported in the VA's FY 2023 medical budget request indicate that pressure injuries are occurring at a rate twice the CMS-reported Medicare discharge rates from non-VA hospitals (pg. VHA 105).

We have heard from nurses, physicians, and patients about the devastating impacts of pressure injuries, both in terms of human suffering and economic cost. However, pressure injuries are preventable in the majority of cases, highlighting the urgent need to address the higher incidence rate observed in VA care settings across the United States. Decreasing the prevalence of pressure injuries is an effort of critical importance in reducing veteran suffering and overall health care expenditures.

Currently, prevention and treatment of pressure injuries costs an estimated \$26.8 billion each year, putting significant strain on U.S. healthcare entities¹. Proper prevention and better management can greatly reduce this financial burden while enhancing the patient experience, as identified by the international 2019 "Prevention and Treatment of Pressure Injuries Clinical Practice Guidelines" and corresponding peer reviewed research.

To address the prevalence of pressure injuries in the VA system, the report accompanying the FY2022 Military Construction, Veterans Affairs, and Related Agencies Appropriations Act urged VA to update VHA Directive 1352 to ensure staff have timely access to relevant guidelines, research, and practice standards on topics related to pressure injury risk, prevention, and management in our effort to reduce human suffering of the veteran population.

¹ Padula, W. V., & Delarmente, B. A. (2019). The national cost of hospital-acquired pressure injuries in the United States. International wound journal, 16(3), 634–640. https://doi.org/10.1111/iwj.13071

Specifically, Congress asked that VA follow the recently published international 2019 "Prevention and Treatment of Pressure Injuries Clinical Practice Guidelines" as VA's standard of care, which includes the "Standardized Pressure Injury Prevention Protocol Checklist" (SPIPP) due to its clinically demonstrated best practices. The guideline was led and co-published by the U.S. National Pressure Injury Advisory Panel (NPIAP), which brings together clinical experts on this critical medical issue.

We understand that VA has transmitted the requested report to the House Appropriations Committee. However, we are disappointed that the report does not include the specific request for a timeline for updating VHA Directive 1352 and implementing the SPIPP Checklist. Additionally, VA's response makes no commitment that VHA will adopt the international guidelines as the VA standard of care. Rather, the report only indicates that VA is considering including "relevant content" from the NPIAP guidelines.

Again, the VA has yet to adopt these scientifically based guidelines despite their clinical efficacy and validated best practices.

Therefore, we urge the VA and Veterans Health Administration (VHA) leadership to address this concern. We ask that VA fulfill Congress's directive to provide a timeline for implementation of the SPIPP Checklist, as requested in the report accompanying the FY2022 Military Construction, Veterans Affairs, and Related Agencies Appropriations Act.

In addition, we ask for your response to the following questions addressing the issue of pressure injuries at VA facilities:

- 1) Have you engaged with the National Pressure Injury Advisory Panel to seek its partnership in reducing pressure injuries, ulcers, and other hospital acquired conditions at VA facilities?
- 2) Will VA provide the Congress with a report detailing the timeline for implementation of the SPIPP checklist?
- 3) VA's response to the Appropriations Committee reports that the VA Approved Enterprise Standard Skin Inspection/Assessment electronic health record template is consistent with the SPIPP checklist. Could VA provide a copy of the template to the signers of this letter?

We would appreciate a response to these questions within the next 30 days.

Thank you for your prompt attention to this matter.

Sincerely,

Brad R. Wenstrup, D.P.M.
Member of Congress

Michael C. Burgess, M.D. Member of Congress

Earl I Bully Carte

Earl L. "Buddy" Carter Member of Congress

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