HEALTH ON THE HOMEFRONT

VHA Women’s Health Services (WHS)
June 17, 2014

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Office of Patient Care Services

History of Women in the U.S. Military

1945
WWII aided
Women=2.3% of Active Duty

1967
Women’s Armed Forces Integration Act modified
Women now allowed to serve in Military

1973
Volunteer Force begun
Women served in Military

1980
Women=0.9% of Active Duty

1991
Gulf War I
Women=11% of Active Duty

September 11, 2001

TODAY
Women=24%
15% of Active Duty
16% of Guard/Reserves


VETERANS HEALTH ADMINISTRATION
Women VA Users Doubled Since 2000

Sources: Women’s Health Evaluation Initiative (WHEI) and the Women Veterans Health Strategic Health Care Group. Sourcebook: Women Veterans in the Veterans Health Administration V1: Sociodemographic Characteristics and Use of VHA Care, 2011. VHA Office of Finance Allocation Resource Center (ARC).

Growth Expected to Double Again Soon

12% of Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) Veterans
18% of National Guard/Reserves
6% of VA health care users

Women Veteran enrollment outpacing that of men—29% increase since 2009

58% of OEF/OIF/OND women Veterans have used VA care
Retention of Enrolled OEF/OIF/OND Veterans

• 1 year after separating from service, 62% of female OEF/OIF/OND Veterans and 56% of male Veterans remain in VA care
• 5 years after separating from service, 52% of female OEF/OIF/OND Veterans and 47% of male Veterans remain in VA care
• Research-funded Collaborative Research to Enhance and Advance Transformation and Excellence (CREATE) New Attrition Study—examines factors related to staying in or leaving VA care


Younger Women’s Needs

- Maternity Care
- Mental Health
- Service-Connected Disabilities
- Privacy, safety, convenience
Aging Population

58% of women VA users are 45+

√ Menopausal Needs
√ Geriatric Care
√ Inpatient/Extended Stays

Next 20 years ... more intensive health care services and support as caregivers

Age distribution of women Veteran patients, FY01 and FY10


Are We Ready?
Ideal: Women Veterans Experience of VA

- High-quality, equitable care on par with that of men
- Care delivered in a safe and healing environment
- Seamless coordination of services
- Recognition as Veterans

Barriers to Care
Women Don’t Identify Themselves as Veterans

“We don’t know if it’s because they had different roles, because they felt like they didn’t do the same thing as some of our male Veterans ... whatever it is, they are still not self-identifying.”

General Allison Hickey
VA Under Secretary for Benefits
9/27/12

Lack of Knowledge of VA Services

• 39% have zero or almost no knowledge of needed information about VA
• Misperceptions in all cohorts about who is eligible for VA care
• OEF/OIF/OND more knowledgeable than other cohorts about available women’s health and readjustment services

Source: 2010 National Survey of Women Veterans, (D. Washington)
Public Law 111-163, Sec 201: Study of Barriers for Women Veterans to Health Care Survey

- Nine barriers to care identified in Act to be assessed in telephone survey
  - Stigma associated with mental health, driving distance, child care, integrated primary care availability, understanding of eligibility requirements, personal safety, gender sensitivity, outreach effectiveness, and location and operating hours
- Survey developed, approved by Office of Management and Budget in November 2013
- Goal is 8,400 completed surveys covering all Veterans Integrated Service Networks (VISN), users and non-users
- Survey began in December 2013
- 2700 surveys completed to date

Answering The Need: Women Veterans Call Center

- Call Center created to increase women’s knowledge of VA benefits and services, increase enrollment, and increase utilization of health care services
- Outbound outreach Call Center moved to Canandaigua VAMC in 2012 and inbound Call Center launched April 2013
- As of March 2014, receiving approximately 50 inbound calls/day
- Staffed by trained operators to provide information on VA’s benefits and services
- Hours of operation M-F 8:00AM-10:00PM, Saturday 8:00AM-6:30PM
- Staff makes referrals to Women Veteran Program Managers (WVPM), Health Eligibility Center, Veterans Benefits Administration and suicide and homeless crisis lines as needed
- Referrals to WVPMs followed up within 5 days, 30-day follow-ups to Veterans
- Between February 2013 and January 2014, 64,000 calls have been made, with 41,000 successful contacts and 7,000 incoming calls have been received
WHS Mission

• **Within VA**: Serve as a trusted resource for the field and work to ensure that women Veterans experience timely, high quality comprehensive care in a sensitive and safe environment at all points of care

• **Beyond VA**: In line with VA’s overarching mission, seek to continually improve personalized, proactive, patient-driven health care for women Veterans and to lead the nation in women’s health care
Role of the Women Veterans Program Manager

- Required full-time in every health care system; must report to Facility Director or Chief of Staff
- Veterans Integrated Service Network (VISN) Lead WVPM minimum 0.5 full time employee
- Linchpin for improved women's health services
- Leader of facility women's program
- Resource for women Veterans in the community

Role of the Women’s Health Medical Director

- Serves as clinical leader for facility women’s health program
- Works with WVPM to form the foundation of the WH team
- Establishes priority and direction for clinical quality improvement
- Oversees WH educational initiatives for providers and trainees
Delivery of Comprehensive Primary Care

- Complete primary care from one designated women’s health provider (DWHP) at one site including Community Based Outpatient Clinics (CBOCs)
  - Care for acute and chronic illness
  - Gender-specific primary care
  - Preventive services
  - Mental Health services
  - Coordination of care
  - Measured with women’s health primary care evaluation tools (WATCH Tool) evaluated by site visits

Women’s Health Comprehensive Primary Care Clinic Models

- Model 1 - General Primary Care Clinics. Comprehensive primary care for the women Veteran is delivered by a DWHP. Women Veterans are seen within a general gender-neutral Primary Care clinic. Mental health services for women should be co-located in the Clinic. Referral to specialty gynecology service must be available either on-site or through fee-basis, contractual or sharing agreements, or referral to other VA facilities within a reasonable traveling distance.

- Model 2 - Separate but Shared Space. Comprehensive primary care services for women Veterans are offered by DWHP in a separate but shared space that may be located within or adjacent to Primary Care clinic areas. Gynecological care and mental health services should be co-located in this space and readily available.

- Model 3 - Women’s Health Center (WHC). VHA facilities with larger women Veterans populations are encouraged to create Women’s Health Centers (WHC) that provide the highest level of coordinated, high quality comprehensive care to women Veterans.
Women’s Health Models of Care as of FY 13

Understanding the State of Women Veterans Health Care

- WH Services created a tool to assess the development of Women’s Health Program
- Women’s Assessment Tool for Comprehensive Health (WATCH) Initiative Self-Assessment
  - Self-Assessment conducted by all WH Programs
  - Provides all facilities the opportunity to focus on the requirements for achieving comprehensive health care for women Veterans outlined in the revision of VHA Handbook 1330.01, Health Care Services for Women Veterans (released May 2010).
- Measures strategic planning at facility
Designated WH Primary Care Provider

Comprehensive Primary Care Site Visits

- 70 Women’s Health site visit evaluations (50% of VA Health Care Systems) have been conducted to date to gauge progress toward full implementation of Comprehensive Primary Care
- In an extensive 2.5 day assessment that included interviews with key staff and facility tours Women’s Health Programs were evaluated on 4 Domains:
  - Women’s Health Overall Program Features
  - Women’s Health Care Services
  - Outreach, Communication & Collaboration
  - Patient Centered Care/Patient Aligned Care Teams (PACT)
- Domains of Health Care Services and Outreach, Communication and Collaboration were rated as high performance components across most healthcare systems
- Within those Domains, Information Technology, Organizational Learning, Breast Care, Coordinated Care, Veteran Outreach, and Patient Centered Care emerged as High Performance Capabilities
- At the end of FY13, 94 % of sites had a strategic plan in place
Women’s Health Patient Aligned Care Team (PACT)

- Women’s Health PACTs are teams where all staff are aligned to meet the special needs of women Veterans.
- Designated Women’s Health Provider
- RN
- Health Tech
- Chaperone
- Mental Health, Gynecologist, Social Worker, Pharmacist, Nutritionist, RN Care Coordinator

Privacy, Environment of Care (EOC):

- An EOC Assessment and Compliance tool has recently been developed within VHA
- This innovative web based tool is being deployed at VAMCs throughout VHA
- Tool incorporates many current standardized VHA checklists (i.e. Infection Control; Patient Safety; and Patient Privacy, Dignity, and Security) with the potential to expand
- Instrumental in ensuring that the unique needs of women Veterans are being addressed in current facility environment of care rounds as well as planning for future construction projects
- Women’s Health Clinic Design Guide complete
- Collaborating with Office of Construction and Facilities Management on Ambulatory Care Clinic Design Guide
Breast Care Mammography and Breast Cancer Treatment

- Mammography can be provided in house or through Non-VA Purchased Care.
- **48 VHA Health Care sites are now offering on site digital mammography**
- VA exceeds the private sector in mammography screening.
- 85% of Women Veterans age eligible women Veterans received mammography screening in 2013.
- Women’s Health Services collaborated with Diagnostic Services and Non-VA Purchased Care to streamline and standardize processes for ordering and tracking and outside mammograms.

Quality

Gender-specific care to women Veterans in VHA facilities substantially exceeds that in other systems

**Cervical Cancer screening**

93.5%  
VA average (2010-11)  
Vs. 77% private sector (2010)  
67% Medicaid (2010)

**Breast Cancer screening**

86%  
VA average (2010-11)  
Vs. 71% private sector (2010)  
69% Medicare  
51% Medicaid (2010)

Source: VA Office of Analytics and Business Intelligence 12-19-2011
Innovations in Breast Cancer Screening and Care

- Women’s Health Services has two information technology projects to improve breast cancer care.
- **System for Mammography Results Tracking** is a modification to the Computerized Patient Record System that enables tracking of all mammograms.
- **The Breast Care Registry** is a web based registry on the VA converged registry platform, that lets providers and teams run reports of mammograms done and follow-up breast cancer care.

Gender Disparities Progress!

- VA has significantly reduced gender gaps and exceeds private sector on most performance measures for both men and women
- Gender Differences in Performance Measures, VHA 2008-2011, identifies best practices for eliminating gender gaps based on success in VA networks
  - Electronic 2013 update under development

Satisfaction

Survey results for FY13 show overall satisfaction rating of VA inpatient/outpatient care similar for women and men

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Source: VHA Office of Analytics and Business Intelligence, Internal Analysis, February 21, 2014
Telehealth

- In collaboration with the office of Rural Health, Women’s Health Services has funded 26 Women’s Health telehealth projects to improve access for women Veterans.
- Innovative projects have included Tele-gynecology, Tele-pharmacy, Tele-mental health and tele-maternity care coordination among others.
- All VISNs have implemented at least 1 WH telehealth program.

Mobile Applications:

- Women’s Health Services is currently developing 6 mobile applications to improve care of women Veterans.
- Patient facing apps will provide information VA eligibility and services and health information for women Veterans.
- Provider facing apps will provide information to enhance knowledge of VA and non-VA providers about special health issues of women Veterans.
Childcare Pilots

- Free, drop-in childcare pilots at four VA medical centers in 4 VISNs
  - Northport, NY (Opened 4/2012)
  - Buffalo, NY (Opened 10/2011)
  - Tacoma, WA (Opened 12/2012)
  - Dallas, TX (Opened 3/2013)
- Open to eligible Veterans during appointments
- Pilots will run until September 30, 2014

Women’s Health Education: Progress

- Trained 1,850 VA primary care providers in mini-residency program
- Delivered >30 live training sessions in MyVeHU Campus (including Core Nursing Topics, Core Emergency Care Topics and Special Focus Topics) (http://myvehu.com/)
- Delivers monthly webinars (inter-professional)
- Sponsors grants to train primary care providers/nurses and emergency care providers/nurses
- >50 accredited on-demand training sessions currently available (target audiences: providers, nurses, pharmacists, psychologists, social workers)
- Breast and pelvic exam simulation equipment delivered to all health care systems
Reproductive Health: Progress

- Maternity Care and Coordination policy and toolkit
  - Decreasing fragmentation of maternity care through policy efforts (Handbook 1330.03), innovation, and standardized processes
  - Tools disseminated for maternity care coordination
  - VA-DoD pregnancy guidelines and tools developed, disseminated to help ensure evidenced-based, standard maternity care
  - VA Maternity Care Database (launch mid FY 14) – tracking outcomes

- Reproductive Mental Health Steering Committee established
- Reproductive/Healthy Aging Workgroup established
  - Needs assessment complete and curriculum developed

Safe Prescribing and Preconception Care

- Notification of Teratogenic Drugs Project completed development and will launch with CPRS version 31 in 2015
  - Pregnancy and lactation status, last menstrual period, contraceptive method, and pregnancy plans will be entered, stored, and displayed
  - Order checks and alerts to inform providers about medications with reproductive risk prescribed for women of reproductive potential
- Collaboration with Pharmacy Benefits Management to ensure inclusion of gender specific medications on the formulary.
- VA Preconception Care Workgroup re-launched
- Mobile applications for preconception care, Safe prescribing, and maternity care coordination all in stages of development
Emergency Services for Women: Progress

- ESW workgroup and multidisciplinary stakeholder panel convened
- Training opportunities for Emergency Department (ED) clinicians: http://myvehu.com/
- FY13 and FY14 Innovation Grants for enhancing care delivery (clinical pathways, toolkits, ordersets, equipment etc.)
- ESW National Toolkit in development to share best practices
- ESW national guidance being developed

Research: Driving the Agenda

- Worked with VA Office of Research to define needs in women’s health research in VA, enhance research on women Veterans
- Established Practice Based Research Network (PBRN)
- Women’s Health Evaluation Initiative (WHEI)
- Sourcebook Vol. 1 and Vol. 2 provide data on sociodemographics and health care utilization trends among women Veteran VHA users
- Sourcebook Vol. 3 in development highlight specific conditions
Overarching Goal: Changing the Culture

- VA-wide campaign to enhance the language, practice and culture of VA to be more inclusive of women Veterans
- Women Veterans Program: VA Center for Women Veterans
  - Tasked with developing strategies to reach women Veterans (inside and outside VA) and VA employees

Outcome: Needs of women Veterans are always considered across program offices and in policy and key decisions
VA Knows Women Veterans

Women’s History Month

- National events honor women Veterans’ contributions to history, leadership, positive effects of military service
- Field toolkit: posters, digital art, news release, messaging, speeches, etc.
- Local events recognize women leaders, women Veteran facility leadership
Questions?

www.womenshealth.va.gov