

> Office of Health Equity FY2016 Accomplishments

The VHA Office of Health Equity (OHE) champions health equity issues for Veterans. The following list summarizes several accomplishments and activities for fiscal year 2016. The list is not exhaustive as it does not completely capture all OHE accomplishments and activities during this time period. This includes OHE contributions as subject matter expert and strategic partnerships at multiple levels that made these accomplishments possible (e.g., advocacy around timely priorities including Veteran access, hepatitis C virus care, and awareness and training initiatives).

American Journal of Public Health (AJPH) Supplemental Issue 2014 – The AJPH Supplement continues to attract readers. As of October 2015, the Supplement was the most read and downloaded issue produced in 2014 (20,206 accesses). Additionally, the Supplement became the second-most assessed issue downloaded since it's release in August 2014. The contents of the supplement highlight the importance of partnerships, advance best practices, and bolster efforts to increase Veteran access and restores public trust. See <u>http://www.va.gov/HEALTHEQUITY/Research.asp#supplement</u> to read the Supplement.

Best and Promising Practices to Support USH VA Priorities Practices Consortium – OHE encouraged and supported participants of the 2015 Health Equity Environmental Scan to submit their project to the USH VA Priorities Practices Consortium. The Health Equity Environmental Scan contained over 1100 projects across VHA facilities and program offices that addressed health equity issues and one of the five goals of the Health Equity Action Plan. Several projects from the Health Equity Environmental Scan were submitted to the USH VA Priorities Practices Consortium including programs focusing on maternity care, male Veterans who experienced military sexual trauma, and electronic care coordination in rural areas.

Commission on Care – On June 30, 2016, the Commission on Care released its final report. Included in the 18 recommendations is a call for the elimination of health disparities (Recommendation #5 – Eliminate health care disparities among veterans treated in the VHA Care System by committing adequate personnel and monetary resources to address the causes of the problem and ensuring the VHA Health Equity Action Plan is fully implemented). OHE was tasked with responding to the Commission on Care Recommendations related to health equity and cultural competency (5 and 14,



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respectively). These recommendations, and a majority of others, were supported by the SecVA and received concurrence from the President of the United States. The Commission on Care was established by the Veterans Access, Choice and Accountability Act of 2014 and charged "to examine the access of veterans to health care from the Department of Veterans Affairs and strategically examine how best to organize the Veterans Health Administration, locate health resources, and deliver health care to veterans during the 20 year period beginning on the date of the enactment." OHE involvement in furthering the Commission on Care recommendations serves efforts to increase access, rebuild trust, enhance engagement of employees and Veterans, and promote the VA as a high performing network.

- Full Report <u>https://commissiononcare.sites.usa.gov/files/2016/07/Commission-on-</u> <u>Care_Final-Report_063016_FOR-WEB.pdf</u>
- VA News Release/SecVA Statement <u>http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2800</u>
- Commission on Care Chairwoman Discusses Report and VA Health Equity Action Plan <u>http://federalnewsradio.com/federal-drive/2016/07/nancy-schlichting-how-the-vacan-improve-health-care-delivery/</u>

Communication Tools to Raise Awareness of Veteran Health Equity (External Website and Listserv) – As part of its outreach efforts, OHE launched an external Web site for Veterans and created a listserv as a communication tool to disseminate health equity related information to Veterans and stakeholders. The Web site launched November 2015 includes health equity research, data, tools, and news and events of interest to Veterans and stakeholders. The listserv was created in February 2016 to help drive Veterans and stakeholders to the new Web site and share the new resources. As of September 2016, there have been over 4,260 page views to the OHE external web page and 11,580 subscribers to listserv. Twelve communications were sent out via the listserv in the fiscal year containing 27 different messages. The goals of these tools are to increase access, forge new partnerships, rebuild trust, increase Veteran and /or employee engagement, promote high performing network. Visit the OHE website at http://www.va.gov/healthequity/ and sign up for listserv updates or review past announcements at http://www.va.gov/healthequity/Updates.asp.

Data Asset to meet Presidential Open Data Initiative – OHE worked with the National Data Systems and Departmental staff for the public release of the Hepatitis C – Advanced Liver Disease Disparities data. As of November 2015 these data were de-



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identified and released publicly on data.gov. Data.gov is a key repository that provides increased public access to Federal datasets. Making these data publicly accessible increases public trust and transparency, increases engagement of Veterans and employees, and promotes best practices. These data are available at http://catalog.data.gov/dataset/hepatitis-c-advanced-liver-disease-disparities-dashboard.

Engagement Meetings– Following is a list of meetings where OHE staff and OHEinvolved health equity efforts were presented and/or discussed.

- 21st Biennial Symposium, World Professional Association for Transgender Health (WPATH), Amsterdam, The Netherlands
- Advisory committee meetings for multiple research and operation projects with the following partners:
 - Bridging the Care Continuum Quality Enhancement Research Initiative (BRIDGE QUERI)
 - Center for Health Equity Research and Promotion (CHERP)
 - Health Equity and Rural Outreach Innovation Center (HEROIC)
 - Mental Illness Research, Education, and Clinical Center (MIRECC)
 - UPenn Center for Community Health Workers
 - QUERI review meeting
- Advisory Committee on Minority Veterans <u>http://www.va.gov/centerforminorityveterans/acmv/index.asp</u>
- Aligning Stakeholders' Views to Advance Integration of Precision Medicine into Clinical Care
- Assembly for Health Equity and Prosperity in Support of 100 Million Healthier Lives <u>http://www.100mlives.org/wp-content/uploads/2016/08/Thank-You-Assembly-</u>

nttp://www.100mlives.org/wp-content/uploads/2016/08/Thank-You-Assembly-Participants-2.pdf

- Federal Interagency Health Equity Team
 <u>http://www.npa-rhec.org</u>
- Framing the Dialogue on Race and Ethnicity to Advance Health Equity workshop <u>http://iom.nationalacademies.org/Activities/PublicHealth/PopulationHealthImprov</u> <u>ementRT/2016-FEB-04.aspx</u>
- National Academies of Sciences, Engineering, Medicine (NASEM) Roundtable on the Promotion of Health Equity and the Elimination of Health Disparities <u>http://www.nationalacademies.org/hmd/Activities/SelectPops/HealthDisparities.as</u> <u>px</u>
- National Minority Quality Forum
 <u>http://www.nmqf.org/presentations/16SummitUchenduUS_CME6.pdf</u>
- National Strategic Planning Training



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- NIH-American College of Surgeons Disparities Summit <u>https://www.facs.org/health-care-disparities/symposium</u>
- OHE-QUERI Partnered Evaluation Center Working Meeting at VACO
- Society of Behavioral Medicine Symposium
- US Department of Health and Human Services Health Resources and Services Administration
- Metropolitan Washington Public Health Association Annual Conference
- VACO Monthly Mental Health Call
- VA Commission on Care <u>https://commissiononcare.sites.usa.gov/events-2/december-14-16-2015/</u>
- VA State of the Art Conference in Rural Health
 <u>http://www.charleston.va.gov/heroic/HEROIC_Conference_Abstracts.asp</u>
- Veterans Health Equity HSR&D Field-Based Meeting
- Veterans Hub 100Million Healthier Lives
- VISN 2 & 3 Hepatitis Multidisciplinary Champions
- VISN 8 Diversity and Inclusion Council Annual Meeting
- Other VA and VHA offices including Center for Minority Veterans, MyVA, Office of Policy and Planning, Officer of Public and Intergovernmental Affairs, Office of Tribal Government Relations, VA Center for Innovation, Office of Medical Inspector, etc.

Federal Interagency Health Equity Team (FIHET) – OHE continues to represent the VHA and Veteran health equity issues on the FIHET. The mission of FIHET is to bring together leaders across federal departments to address and end health disparities through capacity building, strategic partnerships, and dissemination of best practices. During the fiscal year, OHE staff participated on several working groups focusing on equity in all policies, partnerships, and data; hosted FIHET with the Center for Minority Veteran at VACO; and presented VA health equity efforts multiple times, which led to a presentation to the Health Resources and Services Administration (US Department of Health in Human Services) as a result of their interest to implement the Health Equity Environmental Scan after an OHE presentation to the FIHET. Additionally, OHE staff coordinated the participation and presentation of VA departmental-level staff to the data working group to discuss VA databases. This working group, with the involvement of OHE staff, produced the first ever data the Compendium of Publicly Available Datasets. The Compendium can be used to identify publicly available datasets that can be used to increase understanding of health equity issues. OHE's involvement on the FIHET and in developing the Compendium serves to increase public engagement of Veterans, promote new and strengthen existing partnerships, and highlight best practices characteristic of a high performing network.



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Compendium of Publicly Available Datasets
 <u>http://www.npa-rhec.org/fihet_compendium</u>

Focus on Health Equity and Action (FHEA) Cyberseminar – OHE continued to leverage online outreach by working with VA HSR&D CIDER to launch a series of cyber seminars for Veterans, VHA leadership, clinicians and non-clinicians, stakeholders and researchers focused on health equity and action. The monthly seminars were launched in November 2015 and highlighted activities that promote the implementation of the VHA Health Equity Action Plan and health concerns important to Veterans. There were 746 attendees to the seminars. Additionally, the seminars were archived on the OHE Web site, and to date, were accessed and downloaded over 705 times.

The 2016 Focus on Health Equity and Action Cyberseminar series wrapped up the fiscal year with a panel discussion on Veteran TBI disparities. The panel featured VA TBI expert Dr. David Cifu along with Dr. Bennet Omalu, whose research and discovery inspired the 2015 motion picture Concussion starring Will Smith. Over 1100 individuals registered for this session setting a new record for the HSR&D CIDER that provides the technical platform for hosting the cyber seminars. An editorial was published by the panelist in the American Journal of Public Health (AJPH) highlighting disparities in head traumas. Overall, the FHEA Cyberseminar sessions has encouraged and resulted in new partnerships, support efforts to increase access and rebuild trust, increase Veteran and /or employee engagement on issues of health equity, and promote best practices and a high performing network.

- Archived FHEA Sessions
 <u>http://www.va.gov/healthequity/FHEA_Cyberseminar.asp</u>
- AJPH Editorial http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.2016.303293

Healthcare Equality Index – OHE has facilitated, coordinated and supported VAMCs voluntary participation in the HEI annually. As of February 2015, 114 VAMCs participated and 84% of these facilities (n=96) achieved leader status. The 96 facilities represent the highest number achieving Leader Status since VHA-wide HEI participation began in 2013. VAMC involvement in the HEI has forged new partnerships, restored trust in VA efforts to increase access and care for LGBT Veterans and support LGBT staff, and promotes a best practice enterprise wide. Visit <u>http://www.va.gov/HEALTHEQUITY/Healthcare_Equality_Index.asp</u> for more information.

• VA News Release



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http://www.longbeach.va.gov/pressreleases/Press_2016_05_10_HEI_2016_LGB T_Leaders_.asp

Hepatitis C–Advanced Liver Disease Disparities Dashboard and Factsheet – The Hepatitis C–ALD dashboard was launched in November 2015 in an effort to accelerate treatment for Veterans with hepatitis C and advanced liver disease (ALD). The dashboard works by using a set of criteria, including age, gender, geography, service era along with and race and ethnicity, to distinguish Veteran groups at highest risk for ALD as a result of hepatitis C. OHE also developed a robust fact sheet examining hepatitis C virus, advanced liver disease, and health disparities among vulnerable Veteran populations in October 2015. The fact sheet presented results from OHE's analysis of this health issue among vulnerable Veteran populations and educated vulnerable Veterans about the increased risk for advanced liver disease resulting from Hepatitis C Virus infection. The Dashboard has increased engagement of Veterans and staff, promoted access, created new partnerships for OHE and other VA and external program offices, and highlights a best practice for visualizing actionable data.

- Dashboard link
 <u>http://www.va.gov/healthequity/Tools.asp</u>
- VA News Release <u>http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2736</u>
- Office of Rural Health's (ORH) quarterly newsletter, "The Rural Connection" <u>http://www.ruralhealth.va.gov/docs/news/ORH_Newsletter_Fall2015_FINAL.pdf</u>

National Academy of Medicine (NAM) Perspective – OHE partnered with VA medical center staff and a community partner to highlight a best practice for ending homelessness that was identified in the Health Equity Environmental Scan. The paper describes a data-sharing collaboration that sought to reduce homelessness and increase collaborations in the VA and the community. The paper showcased a VA promising practice for a presidential initiative and demonstrates an effort to increase access for Veterans. Visit <u>https://nam.edu/wp-content/uploads/2016/09/Local-Bidirectional-Data-Sharing-Collaboration-to-End-Veteran-Homelessness-The-Erie-Model.pdf</u> to read the article.

National Academy of Sciences (NAS) and Veteran Voices – OHE Chief Officer continues to represent the Department of Veterans Affairs on the NAS Roundtable on the Promotion Health Equity and the Elimination of Health Disparities and ensures Veteran voices and concerns are represented in meeting proceedings and workshops. The Roundtable co-hosted a one-day workshop titled People Living with Disabilities:



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Health Equity, Health Disparities, and Health Literacy. The workshop included the involvement of a Veteran who was recommended by the OHE Chief Officer as the voice of the community. This participant represented many health equity issues of concern to many racial/ethnic minority and disabled Veterans during the proceedings. This activity has aided OHE efforts to engage Veterans. Visit

http://www.nationalacademies.org/hmd/Activities/SelectPops/HealthDisparities/2016-JUN-14.aspx?utm_source=HMD+Email+List&utm_campaign=9e155321cd-7_12_2016_RT_on_Health_Equity_presentati7_11_2016 for more information on the workshop.

National Access Stand Down – OHE staff participated in efforts to reduce Veterans wait times. Staff joined teams of clinical and administration staff and other stakeholders in Baltimore, MD and St. Petersburg, FL to reach out and schedule Veterans with urgent care needs. The effort was part of VA's national stand down initiative where staff willingly gave up a portion of their weekend to support VA's commitment to improving access for Veterans. Visit

http://www.va.gov/HEALTH/NewsFeatures/2016/February/National-Access-Stand-Down.asp for more information on National Access Stand Down activities.

National Veteran Health Equity Report – OHE finalized the production of the National Veteran Health Equity Report in September 2016. The National Veteran Health Equity Report details patterns and provides comparative rates of health conditions for vulnerable Veteran groups. Specifically, this report is designed to provide basic comparative information on the sociodemographics, utilization patterns and rates of diagnosed health conditions among the groups over which OHE has responsibility with respect to monitoring, evaluating and acting on identified disparities in access, use, care, guality and outcomes. Data for the National Veteran Health Equity Report are from centralized, national VHA administrative databases of enrollment, outpatient, inpatient, and Non-VA (Fee) medical care, but do not include long-term care services or care received privately by VHA users. All of the report chapters are drafted by VA subject matter experts. The Report also includes a foreword by Darrell G. Kirch, MD, President and Chief Executive Officer of the Association of American Medical Colleges. The Report supports efforts to increase access and engage Veterans and employees on health equity issues. Visit http://www.va.gov/healthequity/NVHER.asp for more information on the report.

 FHEA Cyberseminar: Release of the Inaugural VHA National Veteran Health Equity Report (October 27, 2016) <u>http://www.hsrd.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=1234</u>



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Transgender Veterans Research Protocol – The main paper from the Transgender Veterans Research Protocol was accepted by LGBT Health in December 2015. From the abstract: "This is the first study to examine a large cohort of clinically diagnosed TG patients for psychiatric and medical health outcome disparities using longitudinal, retrospective medical chart data with a matched control group. TG veterans were found to have global disparities in psychiatric and medical diagnoses compared to matched non-TG veterans. These findings have significant implications for policy, healthcare screening, and service delivery in VHA and potentially other healthcare systems." The protocol and resulting manuscripts have aided in efforts to increase access for Veterans and engage both Veterans and employees. Also, two OHE co-authored papers from this protocol were presented at the 21st Biennial Symposium sponsored by World Professional Association for Transgender Health (WPATH). The Symposium was held in Amsterdam, Netherlands. Visit

<u>http://www.va.gov/HEALTHEQUITY/Research.asp#transgender</u> for more information on manuscripts produced from this protocol.

Virtual Patient Cultural Competency Trainings – OHE developed two virtual patient cultural competency training under the Employee Education Service contract for Virtual Medical Center Project. The trainings are meant to assist VA clinicians, non-clinicians, Veterans, and stakeholders in understanding the importance of assessing, and increasing competency, of health equity issues for Veterans. Training scenarios for each module are based on healthcare experiences of Veterans collected by OHE over the years. The intent is for users to hear the voices of vulnerable Veterans, learn about their experiences, and use this knowledge to reflect on everyday interactions between staff and vulnerable patients. The trainings are meant to increase access of Veterans, engage Veterans and employees on health equity issues, and restore trust in VA's commitment to addressing health equity issues. The trainings are available on the VA Talent Management System (TMS) for VA employees and VHA TRAIN for both VA employees and the general public. Visit <u>http://www.va.gov/healthequity/Tools.asp</u> for more information on the trainings or click the links below.

- <u>Determinants of Health and Healthcare for All Employees</u> Provides an awareness of Veteran populations that are at risk for health disparities, factors that put them at risk, and what you can do within your area of influence to move toward attaining the highest level of health for Veterans. <u>TMS | TRAIN</u>
- <u>Casting the Health Equity Lens on Routine Check-up: Lucille F. 54</u> Provides an interactive example of incorporating social determinants of health in the delivery of patient-focused care. TMS | TRAIN