

# VA Southeast Network

## Post Deployment Integrated Care for OEF/OIF Veterans

Robin Anderson, MSPH

VISN 7 OEF/OIF Point of Contact

Patient Safety Officer/Health Systems Specialist



# VISN 7 Presentation Overview

- Description of VISN 7
- Combat Veterans Served
- Seamless Transition Timeline
- Post Deployment Integrated Care Initiative Timeline

# VA Southeast Network



8 VA Medical Centers: 25 CBOC:1 Clinic

# **VA Southeast Network**

## **Three Promises to Veterans**

- 1) Provide Care 2<sup>nd</sup> to None – Best Care Anywhere!**
- 2) Maintaining and Expanding Services to Veterans!**
- 3) Every Veteran will be Personally Satisfied, Based on the Outcome**

# Frequency Distribution of OEF and OIF Veterans According to the VISN Providing the Treatment

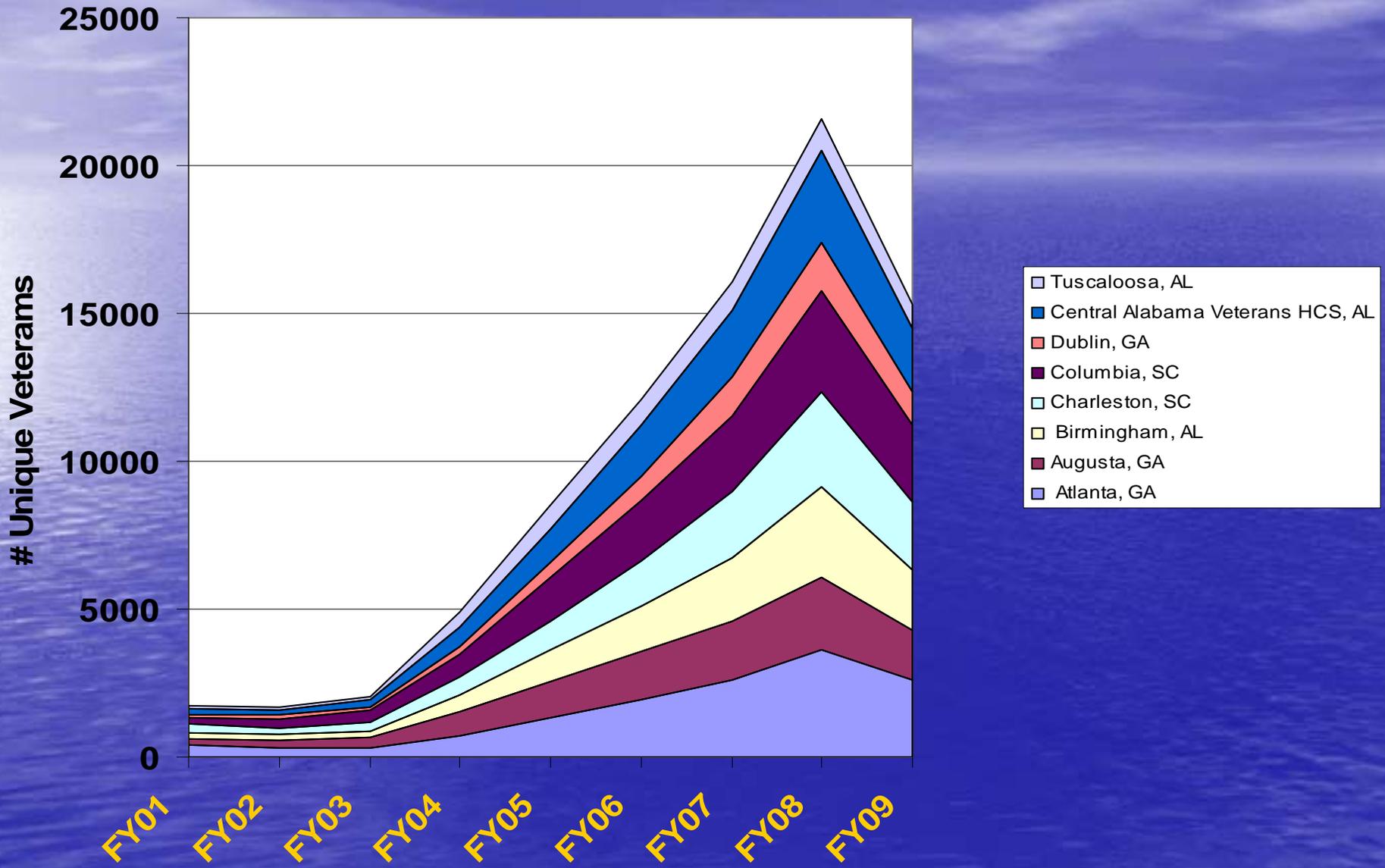
| Treatment Site                                       | Frequency     | %          |
|--|---------------|------------|
| • VISN 1 VA New England Healthcare System            | 18,423        | 4.6        |
| • VISN 2 VA Healthcare Network Upstate New York      | 10,923        | 2.7        |
| • VISN 3 VA New York/New Jersey Healthcare System    | 14,757        | 3.7        |
| • VISN 4 VA Stars & Stripes Healthcare System        | 19,018        | 4.8        |
| • VISN 5 VA Capital Health Care System               | 11,984        | 3.0        |
| • VISN 6 VA Mid-Atlantic Healthcare System           | 23,804        | 5.9        |
| • <b>VISN 7 VA Atlanta Network</b>                   | <b>30,445</b> | <b>7.6</b> |
| • VISN 8 VA Sunshine Healthcare Network              | 32,274        | 8.1        |
| • VISN 9 VA Mid-South Healthcare Network             | 23,223        | 5.8        |
| • VISN 10 VA Healthcare System of Ohio               | 11,669        | 2.9        |
| • VISN 11 Veterans in Partnership Healthcare Network | 16,178        | 4.0        |
| • VISN 12 VA Great Lakes Health Care System          | 22,794        | 5.7        |
| • VISN 15 VA Heartland Network                       | 15,463        | 3.9        |
| • VISN 16 South Central VA Health Care Network       | 35,379        | 8.8        |
| • VISN 17 VA Heart of Texas Health Care Network      | 27,461        | 6.9        |
| • VISN 18 VA Southwest Healthcare Network            | 20,990        | 5.2        |
| • VISN 19 VA Rocky Mountain Network                  | 17,389        | 4.3        |
| • VISN 20 VA Northwest Network                       | 22,031        | 5.5        |
| • VISN 21 VA Sierra Pacific Network                  | 18,593        | 4.6        |
| • VISN 22 VA Desert Pacific Healthcare Network       | 33,337        | 8.3        |
| • VISN 23 VA Midwest Health Care Network             | 24,815        | 6.2        |

\* Veterans can be treated in multiple VISNs. A veteran was counted only once in any single VISN but can be counted in multiple VISN categories. The total number of OEF-OIF veterans who received treatment (n = 400,304) was used to calculate the percentage treated in any one VISN.

# VISN 7 OEF/OIF Demographics

|                   | VISN7  | ATL<br>508 | AUG<br>509 | BIRM<br>521 | CHAR<br>534 | COL<br>544 | DUB<br>557 | CAVHCS<br>619 | TUSC<br>679 |
|-------------------|--------|------------|------------|-------------|-------------|------------|------------|---------------|-------------|
| Total Veterans    | 71,518 | 16,610     | 4,788      | 7,130       | 9,479       | 7,302      | 8,835      | 14,407        | 2,967       |
| % Male            | 86.1%  | 85.5%      | 84.4%      | 91.0%       | 84.8%       | 86.2%      | 85.1%      | 85.7%         | 89.5%       |
| % Female          | 13.9%  | 14.5%      | 15.6%      | 8.9%        | 15.2%       | 13.8%      | 14.8%      | 14.3%         | 10.5%       |
| VA Total Users    | 31,013 | 6,266      | 2,408      | 3,249       | 3,998       | 3,724      | 3,348      | 6,186         | 1,834       |
| VA Users % Male   | 84.2%  | 81.7%      | 82.9%      | 89.6%       | 82.4%       | 84.9%      | 82.8%      | 84.4%         | 88.5%       |
| VA Users % Female | 15.8%  | 18.3%      | 17.1%      | 10.4%       | 17.6%       | 15.1%      | 17.1%      | 15.6%         | 11.5%       |

# VISN 7 Unique OEF/OIF Veteran Users



# Seamless Transition Timeline: 2003

- Consistent with the Secretary of Veterans Affairs Seamless Transition goals, VA Southeast Network leadership and the Department of Defense Southeast Regional Medical Command (SERMC) began exploring opportunities for collaboration in early 2003.
- December 2003 - The VA/Army OIF/OEF Workgroup was established.

# Seamless Transition Timeline: 2003

- Membership: VISN 7 CMO, facility points of contact, VISN 8 and 9 representatives, VBA representatives, case managers from the South Eastern Regional Medical Command (SERMC) military treatment facilities
- During a joint meeting four groups of active duty soldiers with special needs were identified: amputees, TBI/SCI, acute and long-term rehabilitation and mental health/PTSD.
- The group developed criteria for referrals, outline a transfer process, developed a tracking mechanism for soldiers transferred to VISN 7 medical centers, discussed decision points to refer active duty personnel for Medical Evaluation Board, and continuity of care throughout the treatment process.

# Seamless Transition Timeline: 2004

- Network site (Charlie Norwood VAMC, Augusta leads education & coordination for seriously ill/injured – i.e. "Current Practices in Amputee Rehabilitation", in January 2004. The training was provided by the Amputee Coalition of America
- The first patient was admitted to the SERMC/VA Active Duty Rehabilitation Unit in February 2004. The Unit is the true realization of President Lincoln's promise ----To Care for Him who has borne the battle –

# Seamless Transition Timeline: 2004

- Hired a Clinical Director for Seamless Transition in July 2004 to provide leadership and focus on all components of VA/DOD collaborations.
- He has visited each of the medical centers to review programs and developed an overall VISN 7 road map to ensure a consistent approach to seamless transition of active duty soldiers and combat veterans.

# Seamless Transition Timeline: 2004

- **Seamless Transition** strategic plan developed to include the following elements:
- **Outreach** -Outreach teams to be established at each site
- **Outpatient Care** - Primary Care teams and care coordinators to coordinate the care of the OEF/OIF veterans and active duty personnel
- **Inpatient Care** – Point of Contacts at each site to facilitate transfers from Military Treatment Facilities
- **Education** - Combined SERMC/VISN7 conference - March 2005, training modules developed
- **One discharge physical** – Memorandum of Agreements with Fort Banning, Fort Gordon and Fort Stewart to ensure that the appropriate discharge physical examinations meets the meet DOD and VA requirements for compensation and pension benefits at discharge

# Seamless Transition Timeline: 2004 - 2007

- Post Deployment Health Reassessment Evaluation (PDHRA) Outreach Initiatives formalized
- State Collaboration with each Guard and Reserve – Memoranda of Understanding with each state in VISN 7
- Collaborative efforts with Veterans Readjustment Counseling Centers (GWOTs) and VBA

# Seamless Transition Timeline: 2004 - 2008

- Polytrauma System of Care formalized- Charlie Norwood VAMC, Augusta, GA and other sites
- VA/DOD Liaison appointed at Dwight D. Eisenhower Army Medical Center
- OEF/OIF and TBI Screening implemented
- Case Management Tracking (evolved from VTA in 2007 to current CMTRA in 08)
- Welcome Home Events, Focus Groups, PDHRA Onsite & Call Center events

# Seamless Transition Timeline: 2004 - 2008

- Transition Centers established in Georgia and Alabama as models of care coordination for OEF/OIF veterans and active duty personnel.
  - Tuscaloosa, AL
  - Charlie Norwood VAMC, Augusta, GA
- Active Duty Behavioral Health Residential Rehabilitation

# Seamless Transition Timeline: 2004 - 2008

- March 2007 – VHA Handbook mandates creation and composition of case management teams
- OEF/OIF Program Manager
- Case Managers
- Transition Patient Advocates

# Seamless Transition Timeline: 2004 - 2008

- VHA Demobilization Initiative – 2008
- Yellow Ribbon Reintegration Program – 2008
- Disability Evaluation System initiative – Fort Stewart - 2008
- Suicide Prevention Coordinators and Suicide Hotline – Working collaboratively with OEF/OIF Teams

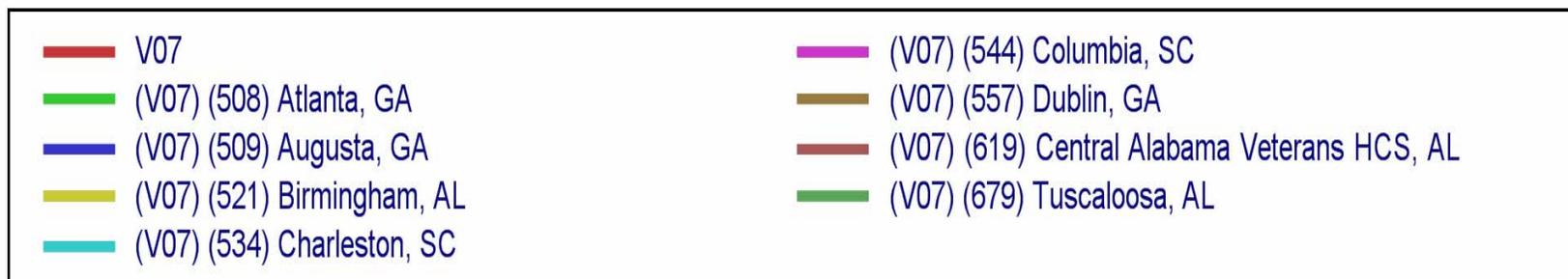
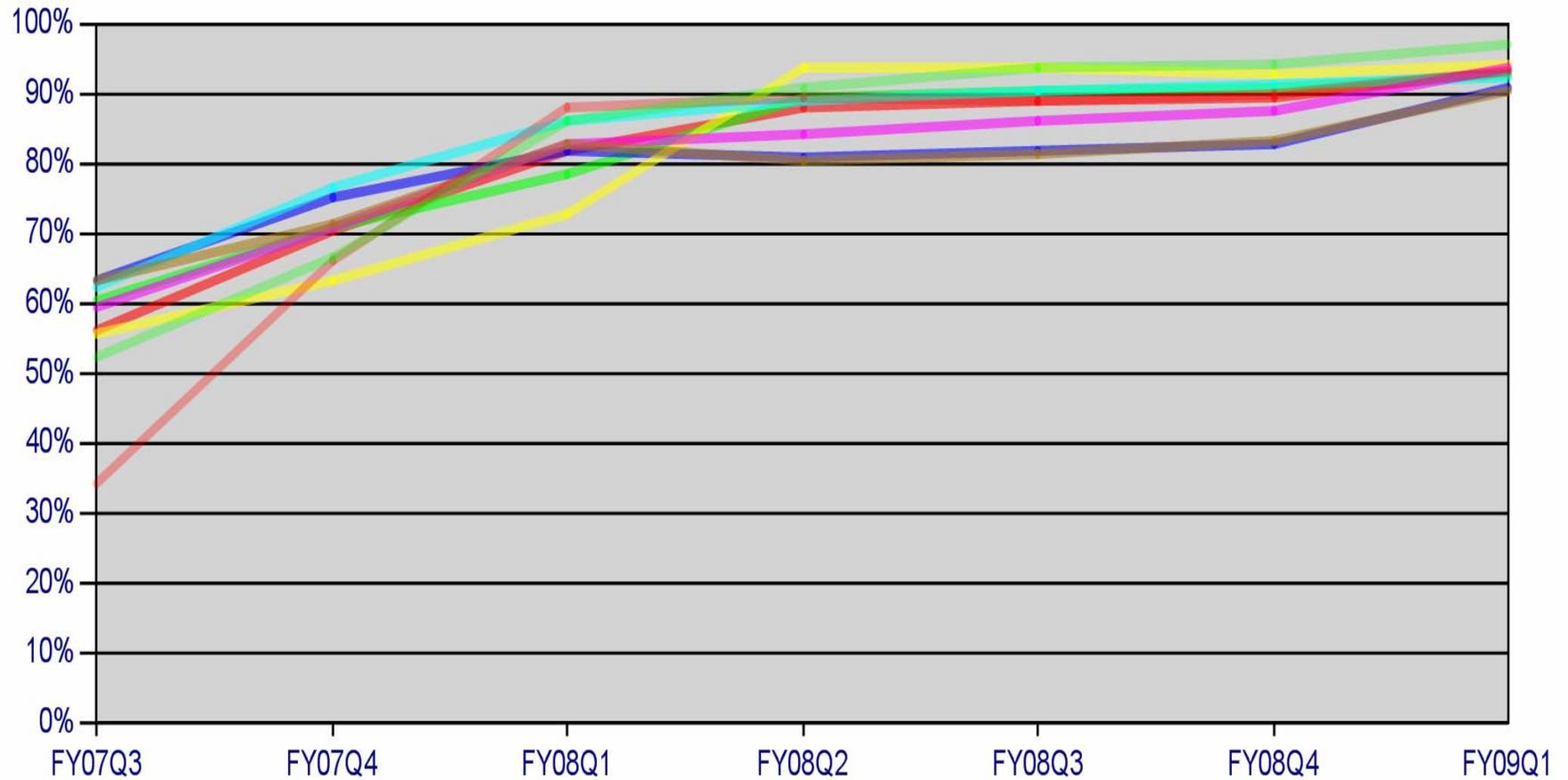
# Seamless Transition Timeline: 2004 - 2009

- Focus on outreach to OEF/OIF Veteran
  - Transition Patient Advocates hired –9
  - VISN Veteran Advocates – 14
  - Additional TPA and Advocates planned

# VISN 7 OEF/OIF Veteran Workload

|                                      | VISN7  | Atla<br>508 | Augu<br>509 | Birm<br>521 | Char<br>534 | Colu<br>544 | Dubl<br>557 | CAVHCS<br>619 | Tusc<br>679 |
|--------------------------------------|--------|-------------|-------------|-------------|-------------|-------------|-------------|---------------|-------------|
| OEF/OIF Unique Patients All<br>Years | 33,435 | 6,116       | 5,464       | 4,869       | 5,279       | 5,937       | 2,914       | 5,218         | 1,998       |
| OEF/OIF Unique Patients<br>FYTD      | 13,230 | 2,363       | 1,459       | 1,839       | 2,092       | 2,408       | 922         | 1,949         | 751         |
| OEF/OIF Inpatient<br>Discharges      | 244    | 22          | 45          | 31          | 22          | 34          | 20          | 32            | 38          |
| OEF/OIF Outpatient<br>Encounters     | 71,247 | 12,532      | 7,586       | 8,436       | 10,067      | 11,158      | 4,940       | 9,961         | 6,567       |

## V07 Stations - Rate of TBI Screening for OEF/OIF Veterans by Quarter



# VISN 7 OEF/OIF Case Management Workload

- Seriously Ill/Seriously Injured Veteran currently being case managed in VISN 7 -254
  - Severe TBI
  - SCI
  - Major Blindness/Visual Impairment
  - Major Amputee
  - Severe Burns
  - Severe Psychiatric/Mental Health Condition

# VISN 7 Active Duty Rehabilitation Unit Workload

- Active Duty Admissions (2004-2008) – 589
- Returned to Active Duty – 180 (29%)
- Active Duty Behavioral Health Residential Rehabilitation pilot – 12 admissions

# VISN 7 Post Deployment Integrated Care Initiative

- **Post Deployment Clinic Model**
  - Dedicated space and staff
  - Full time if volume indicates
  - Part time, with shared space
- **Cohort Model**
  - Specific Primary Care Provider or Providers identified to develop skills and experience
  - OEF/OIF patients assigned to these providers
  - Representatives from other professions similarly identified
- **Consultative Model**
  - OEF/OIF veterans assigned to all Primary Care Providers; cared by usual staff
  - Medical/Mental Health/Social Work resources with specialized knowledge and skills identified to assist in consultative role

# 2008 Post Deployment Integrated Care Time Line

- Facility survey to determine existing models completed in June 2008
- VISN Champions appointed in August 2008
- Planning Committee established in December 2008
- Goal - Using existing VISN 7 experience/expertise and Seattle VAMC staff, facilitate implementation the Post Deployment Clinics at each medical center.
- VISN 7 Post Combat Integrated Care Conference – April 7 & 8, 2009

# VISN 7 Post Deployment Integrated Care Initiative

- Atlanta VAMC – Consultative Model
- Augusta VAMC – Post Deployment Clinic
- Birmingham VAMC – Consultative Model
- CAVHCS – Consultative Model
- Charleston VAMC – Consultative/Cohort Model
- Columbia VAMC – Consultative Model
- Dublin VAMC – Cohort Model
- Tuscaloosa VAMC – Post Deployment Clinic

# VA Southeast Network



The image features a blue gradient background that transitions from a lighter blue at the top to a darker blue at the bottom. A thin, white horizontal line is positioned near the top, suggesting a horizon. The text "QUESTIONS ?" is centered in the middle of the image in a bold, yellow, sans-serif font with a black outline.

QUESTIONS ?