

SUMMIT 2011 National Training Summit on Women Veterans

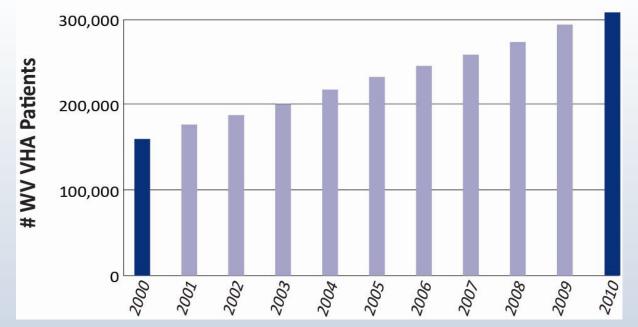
## **Women Veterans Health Care**

#### Patricia Hayes, PhD

Chief Consultant Women Veterans Health Strategic Health Care Group Department of Veterans Affairs July 16, 2011

#### **Women Users Doubled Since 2000**

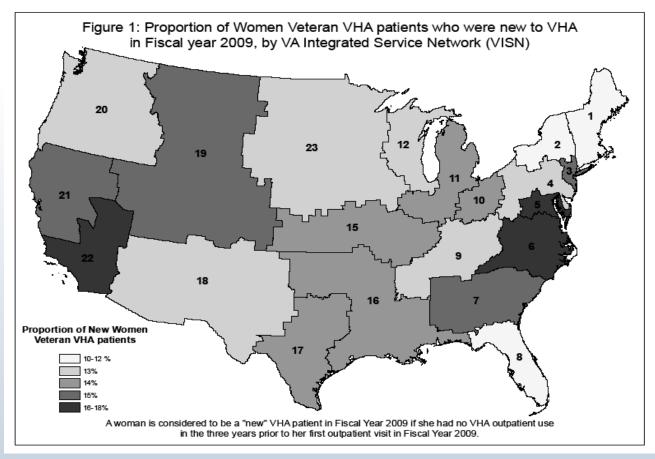
Number of women Veteran VHA patients in each year, FY00-FY10



Source: 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.



## New Women VA Users by VISN 2009

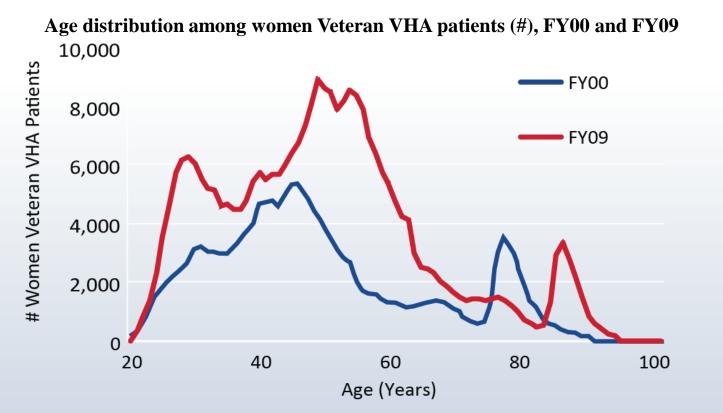


Source: Data compiled by Women's Health Evaluation Initiative (WHEI). March 2011.



7/16/2011

## **Women VA Patients: Three Peaks**



Source: 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.



#### **Greater Market Penetration**

	ALL VISNs
All living male Veterans	20,817,765
Unique male users	5,037,366
Market penetration (male)	24.2%
All living female Veterans	1,840,380
Unique female users	316,745
Market penetration (female)	17.2%

Source: VETPOP 2007, ADUSH for Policy and Planning, and VSSC Data Portal



## Full-time Women Veterans Program Managers (WVPMs)

#### Roles

- Manage facility women's health program
- Advocate for women Veterans
- Coordinate care across Patient Aligned Care Teams (PACTs)
- ✓ Increase outreach
  - Help develop best practices
- Ombudsman for women Veterans' issues



HEALTH CARE Defining EXCELLEN in the 21st Century

## **Implementing Comprehensive Care**

 Complete primary care from one designated Women's Health Primary Care Provider 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
- ✓ Model for PACT
- Measured with women's health primary care evaluation tools (WATCH Tool)



## Revised VHA Handbook 1330.01: "VHA Services for Women Veterans"

- Outlines specific services at facilities and CBOCs
- Defines "Comprehensive Primary Care for Women Veterans"
- Requires women be seen by Women's Health Primary Care Providers
- Offers three clinic models
- Details safety and security requirements
- Establishes systematic data collection process



## Women's Health Transformation Initiative

- Implementing comprehensive primary care is one piece of Women's Health Transformation Initiative
- Other initiatives over 3+ years:
  - Women Veterans Call Center
  - Privacy and Environment of Care
  - Homelessness
  - Improved care coordination





## Privacy, Safety, and Security

- Top VA priority
- VA policy requires women Veterans have a female chaperone for all gender-specific exams or procedures
- Environment of Care rounds ensure privacy, safety, and security requirements are met
- In FY11
  - \$29M to field for clinical program improvements
  - \$21M to field for facility privacy corrections
- Correction of remaining deficiencies under way



## Homelessness

- Vulnerability screening tool
  - Identifies a woman Veteran's risk for homelessness
  - Tool piloted, validated within Women's Health
  - Coordinated with homeless program to expedite services
  - Planned completion: 9/2011
- Parallel efforts
  - Compensated work therapy programs specific to women
  - VBA, DOL, state partnerships to improve employment options



TIENT CARE

Defining EXCELLENCE in the 21st Century

SUMM

## Women's Health Transformation Initiative

- Improved Care Coordination
- Emergency room care
  - Assessment tool development
  - Ongoing provider/staff education
- Breast cancer
  - Tracking of abnormal test results
  - Breast Cancer Clinical Case Registry
- Teratogenic identification of drugs (birth defect risk)



## **Women's Health Education**

- Recruiting and retraining providers interested and proficient in women's health
- National Women's Health Mini-Residency Program
  - 1,000+ primary care providers educated in basic and advanced women's health care
  - Flagship education model for VA
  - SimLEARN partnership: Large mini-residency, ED-WH curriculum, task trainer dissemination
- Advanced fellowships in women Veterans' health
- VA HSR&D Cyber Seminar Spotlight on Women's Health Series



# **Reproductive Health**

- Upcoming policies
  - Maternity Care Coordination Handbook
  - Infertility Handbook
  - Emergency Contraception Rights of Conscience (ROC)
- Maternity care
  - 2010 Caregiver Law
  - Newborn care
  - Childcare pilots





SUMM



## **Benchmarking**



7/16/2011

## **Women's Health Evaluation Initiative**

- Acquiring data on women Veterans
- Producing key demographic and VHA health care usage data
- Goal: To understand the effects of military service on women's lives





16

### Sourcebook

- Volume 1: Sociodemographics and Use of VHA Care
- Future volumes focus on
  - Analysis of data on non-VA purchased care
  - Diagnoses in women
  - Race and ethnicity

7/16/2011



Sourcebook: Women Veterans in

the Veterans Health Administration

VOLUME 1: Sociodemographic Characteristics and Use of VHA Care

Women's Health Evaluation Initiative (WHEI) Center for Health Care Evaluation VA HSRED Center of Excellence VA Palo Alto Health Care System Palo Alto, CA

Women Veterans Health Strategic Health Care Group Office of Public Health and Environmental Hazards Veterans Health Administration Washington, DC

December 2010

Construction of Veterans Affairs



17

## **Opportunities Ahead**

- Women's Health leverages partnerships and collaborates across offices
  - Primary care, PACT
  - Mental health
  - Prevention
  - Specialty medicine (e.g., cardiology, pain management)
- End goal: Needs of women Veterans are always considered across program offices, in policy and key decisions



#### **National Survey of Women Veterans 2008**

- National stratified random sample
- 3,500+ participants thru telephone interviews
- Findings
  - Access: Fragmentation of care
  - Quality perception: VA nonusers had poorer assessments of VA quality than VA users
  - Barriers to using VA Care\*
    - 31% did not think they were eligible
    - 21% did not know how to apply for benefits
    - 20% noted closest VA is too far from their home



\*Among women Veterans who considered but did not use VA. Factors are not mutually exclusive.

#### **Next Survey of Women Veterans**

- Required by PL 111-163
- Expands on National Survey of Women Veterans (NSWV)
- Larger sampling
- Telephone interviews
- Stratified by race/ethnicity
- Independent contractor
- Start date: 2012





## **Question and Answer**

