

A Great Journey Begins



2010 HIGHLIGHTS REPORT
National Center for Health Promotion and Disease Prevention
"Keeping Veterans Well and Well-informed"



2010 Preventive Care Program Transformational Journey

LINDA KINSINGER, MD, MPH, Chief Consultant for Preventive Medicine

2010 was quite a year of change for NCP and all of VA! VA Secretary Shinseki's *Transformational Initiatives for the 21st Century* (T21) signaled a new direction for VHA in how it provides health care for the more than 5.8 million Veterans it serves—a direction that's "people-centric, results-driven, and forward-looking." The Under Secretary for Health, Dr. Robert Petzel, stated his vision of VHA health care as "Defining Excellence in the 21st Century" and noted in a new vision statement that "VHA will continue to be the benchmark of excellence and value in health care and... will emphasize prevention and population health..." Included within the T21 is a set of initiatives called "New Models of Care." These comprehensive programs address a wide range of patient care, including Patient-Aligned Care Teams (PACT), Specialty Care, Women's Health, Non-institutional Care, Virtual Medicine-Telehealth, Virtual Medicine-Non-Telehealth, and Preventive Care.

The Preventive Care Program is NCP's transformational initiative that directed nearly all our activities for

the year. Through this initiative, we began a number of new projects, both within our office and medical facilities across the country. These new projects are briefly described in the summaries from the sections of NCP in this Highlights Report. You'll note a focus on several key strategies:

- Developing a set of clear, simple "healthy living" messages for Veterans
- Initiating development of tools to help Veterans and clinicians use the healthy living messages
- Building an infrastructure for Preventive Care at the local facility level
- Training clinical staff in patient-centered communication techniques
- Integrating health promotion/disease prevention (HPDP) services closely within PACT
- Acquiring resources that support the delivery of HPDP services to Veterans, wherever they live and whenever they want

2010 was also a year of change for several staff at NCP. We were sad to say good-bye to Program Support Assistant Bobby Lucas and Program

Manager for Health Behavior Training Dr. Richard Harvey, both of whom moved away from Durham. Thanks to Bobby and Rich for all their great contributions to NCP! We were very happy to have several new staff join us:

- Becky Hartt Minor, Health Educator, from the National Cancer Institute
- Debbie Hester, Program Support Assistant, from the Durham VAMC
- Eric Bell, Project Manager, new to VA
- Dr. Michael Goldstein, Associate Chief Consultant for Preventive Medicine, from the Providence (RI) VAMC, where he was the Chief of Mental Health and Behavioral Sciences Service

We also enjoyed working with several University of North Carolina Preventive Medicine residents, Drs. David Halpern, Sapna Kalsy, and Tiffany Wedlake, whose fresh perspectives and stimulating questions kept us on track.

Thanks to everyone who contributed to our work at NCP. We consider you to be valuable partners in VHA's efforts to provide "the best preventive care anywhere!"

Linda Kinsinger



NCP—A Landmark Year for Transformation

LEILA KAHWATI, MD, MPH, Deputy Chief Consultant for Preventive Medicine

VHA's transformational efforts went into full swing in FY 2010. With leadership from the Office of Healthcare Transformation, NCP led the Preventive Care Program sub-initiative within the New Models of Care Transformational Initiative. NCP developed plans, metrics, budgets, and staffing to ensure that all components of the sub-initiative were smoothly implemented. These components included:

- Developing facility infrastructure with new HPDP personnel positions
- Integrating PACT with prevention by focusing on health behavior

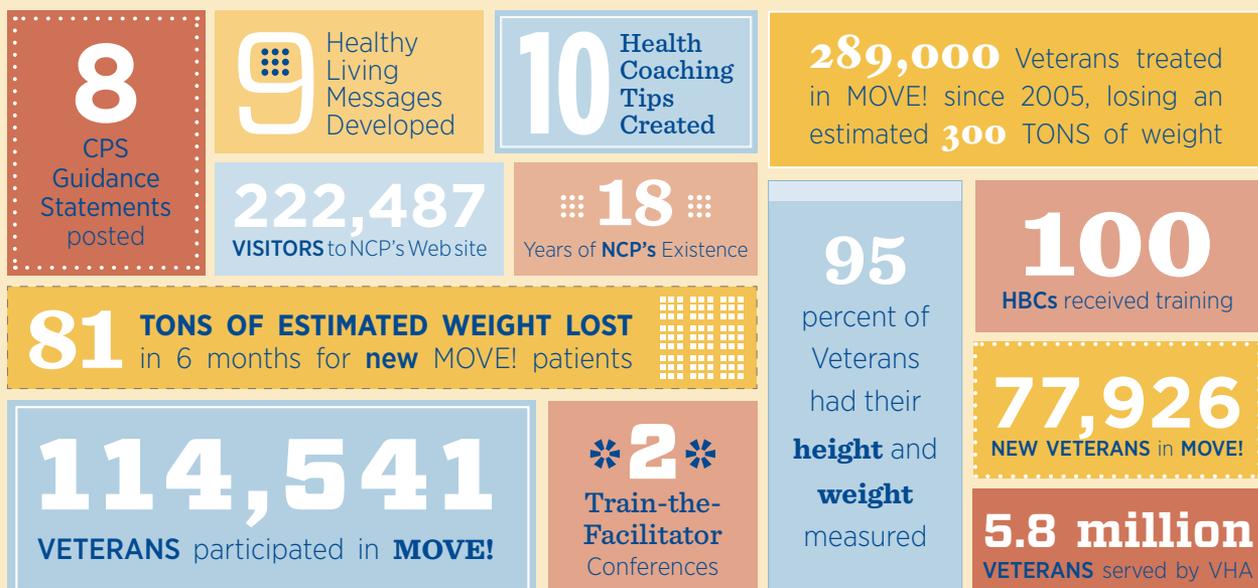
change and patient-centered communication

- Developing plans to acquire and implement a Health Risk Assessment
- Contracting for a VHA-wide Veterans Health Library (VHL)
- Developing a national Telephone Lifestyle Coaching (TLC) program pilot for reaching out to Veterans using non-face-to-face means
- Collaborating with DoD and the Office of Public Health Policy and Prevention for Web-based Tobacco Cessation Services for Veterans

It has been exciting to watch these programs develop and mature since the finalization and approval of the NCP strategic plan over a year ago. Since then, new resources are in place at the facilities and our staff education efforts are beginning to pay dividends to Veterans.

We look forward to even more progress in FY 2011 and plan to have contracts awarded for the TLC program and the Health Risk Assessment. Both are critical steps toward providing these valuable resources to Veterans.

NCP 2010 by the Numbers





Sue Diamond, RN, MSN



Kathy Pittman, RN, MPH

Preventive Care Program— Enhancing Health With Ambitious Initiatives

SUE DIAMOND, RN, MSN, National Program Manager, HPDP Program

KATHY PITTMAN, RN, MPH, Program Manager for Prevention Practice

During FY 2010, VISNs were provided with the resources to fund the establishment of an HPDP Program Manager and a Health Behavior Coordinator (HBC) position at each medical center. The addition of these two new positions represents a critical infrastructure improvement to promote multidisciplinary HPDP Programs throughout VHA in support of the VHA Vision of assuring that clinical care emphasizes prevention and population health. Here's what they do:

The facility HPDP Program Manager replaces former collaterally assigned Prevention Coordinators and HealthierUS Veterans points of contact. In addition to establishing and chairing the facility HPDP Program Committee, the HPDP Program Manager is responsible for strategic planning, HPDP Program development, enhancement, implementation, monitoring, and evaluation for the facility and affiliated Community Based Outpatient Clinics (CBOCs). The HPDP Program Manager will work closely with PACT staff to help integrate health promotion and

disease prevention into clinical care.

The HBC is a psychologist, social worker, or advanced practice nurse with experience and training in health behavior change. In addition to prevention-related clinical responsibilities, the HBC is responsible for training, mentoring, and guiding PACT and other clinical staff in patient self-management of health-related behaviors using health behavior coaching, motivational interviewing, and other empirically based communication and health behavior management approaches. The HBC will work closely with the HPDP Program Manager and will co-chair the facility HPDP Program Committee.

In FY 2010, in an effort to standardize and guide hiring, NCP developed role descriptions and sample functional statements for the HPDP Program Manager and HBC positions.

In spring 2011, the Healthy Living Messages campaign will launch to reinforce positive health style behaviors and continue with the ambitious schedule of TEACH conferences.

NINE HEALTHY LIVING MESSAGES

- Be Involved in Your Health Care
- Be Tobacco Free
- Eat Wisely
- Be Physically Active
- Strive for a Healthy Weight
- Limit Alcohol
- Get Recommended Screening Tests and Immunizations
- Manage Stress
- Be Safe
 - Prevent Sexually Transmitted Infections (STIs)
 - Prevent Falls
 - Prevent Motor Vehicle Crashes and Injury

Veterans Health Education and Information—Advancing the Clinician-Patient Partnership

ROSE MARY PRIES, DrPH, National Program Manager, Office of Veterans Health Education and Information



TEACH Program

One of our proudest achievements in FY 2010 was implementing the Veterans Health Education and Information's (VHEI) TEACH Program, which is highly effective in helping clinicians communicate in a patient-centered way. TEACH provides evidence-based strategies to enhance VHA clinical staff's health education, health coaching, and partnering skills. In FY 2010, VHEI conducted two TEACH train-the-facilitator conferences. Another important development has been the training of HBCs and HPDP Program Managers as local TEACH facilitators. Working together, these key members of the HPDP Committee will ensure that more PACT team members are trained on these important communication and health education skills.

Veterans Health Education Network

VHEI continues its commitment to support the field-based Veterans Health Education Network. In FY 2010, VHEI hosted a conference for Veterans Health Education Coordinators (VHECs) from each facility to help them implement PACT and the Preventive Care Program. Conferences also provided effective strategies for health education using evidence-based theory and practice.

New Patient Orientation Program

In FY 2010, VHEI implemented the New Patient Orientation Program Toolkit. This Web-based Toolkit helps facilities provide the information that new enrollees need to access and use health care services. It also includes source information for VA staff on relevant policies and procedures:

templates and suggestions for local program enhancements, and guidance on local program development and delivery models. The Toolkit permits facilities to provide the New Patient Orientation Program in a Veteran-centered way that offers consistent information tailored to each Veteran's preferred facility.

Veterans Health Library

In FY 2010, the Veterans Health Education team began the process of selecting a contractor to provide educational content for the VHL. In FY 2011, the team will work to launch the VHL, which will be hosted on My HealthVet and offer Veterans, their caregivers, and VHA clinicians easy access to health information. VHA clinicians will use the VHL to educate and counsel patients in face-to-face, telephone, and secure messaging encounters.



IN FY 2010, NCP BEGAN WORK ON A WEB SITE REDESIGN to better meet the needs of Veterans and VHA clinicians. The new Web site will prominently feature the nine Healthy Living Messages (left) and a new design to improve functionality.

MOVE!—Connecting With Veterans in New Ways

KENNETH R. JONES, PhD, National Program Director, Weight Management



In FY 2010, MOVE! made tremendous efforts to further improve the health of Veterans. MOVE!, in collaboration with the Office of Telehealth Services, launched TeleMOVE! nationally on March 15, 2010. We are now using TeleMOVE! home messaging devices to support Veterans in managing their weight. Veterans weigh in weekly and report their progress toward personal weight loss, dietary change, and physical activity goals. Care coordinators monitor Veteran progress and call and support them when they experience difficulties.

In the first quarter of FY 2010, MOVE! TLC was completed in VISN 2 as a pilot program. Veterans participated in telephone calls weekly for 3 weeks and then every other week for a total of 19 weeks. As capacity was limited, we were able to compare the results of the MOVE! TLC Veterans with those of Veterans who received more traditional telephone MOVE! support. Remarkably, 49 percent of MOVE! TLC Veterans achieved a 5-percent weight loss, the highest weight loss levels seen with MOVE!. Currently, MOVE! TLC is being integrated into a larger TLC project

being planned by NCP.

In FY 2010, the Prosthetics and Sensory Aids Service collaborated with the National Acquisitions Center to select a new, much improved pedometer for distribution at medical centers.

The MOVE! team began revising the popular MOVE! Quickstart Manual and MOVE! Clinical Reference Manual; now both texts are combined into a single MOVE! Reference Manual. The first four revised chapters were posted in FY 2010.

The Evaluation Section at NCP completed two important MOVE! Evaluation Projects: a Best Practices Evaluation and a facility-level Patient Outcomes Evaluation. In the Best Practices Evaluation, 11 representative facilities with larger patient weight loss outcomes and 11 with smaller patient weight loss outcomes were examined to determine best practices for the MOVE! program. This evaluation project identified that facilities with larger outcomes offered group care and utilized standardized treatment approaches in conjunction with at least one additional best practice.

The MOVE! Outcomes Evaluation

allowed facilities to examine their local outcomes for Veterans receiving MOVE! care with non-participants matched for BMI, age, gender, and comorbidities. The analysis demonstrated evidence of a modest weight loss as a result of participating in MOVE!. On average, MOVE! patients lost 2.6 pounds more than comparison patients at 6 months, with 18.6 percent of MOVE! participants and 12.5 percent of non-participants achieving a 5-percent weight loss. By contrast, only 29 percent of MOVE! participants gained weight at 6 months, whereas nearly 38 percent of non-participants had gained weight. These findings support a modest overall treatment effect for MOVE!. As MOVE! is a translation of clinical research recommendations into a complex national health care system, these outcomes are significant and point to VA as a national leader in weight management care.



MEET WALLY LIND

After weighing in at 378 pounds, he said, “That’s it!” and decided to try MOVE! Intensive.

With the help of his MOVE! Nurse Kathy, his wife, and friends, he’s lost over 118 pounds, gone from a XXXL to an XL, and reduced his waist from 44 to 40 inches.

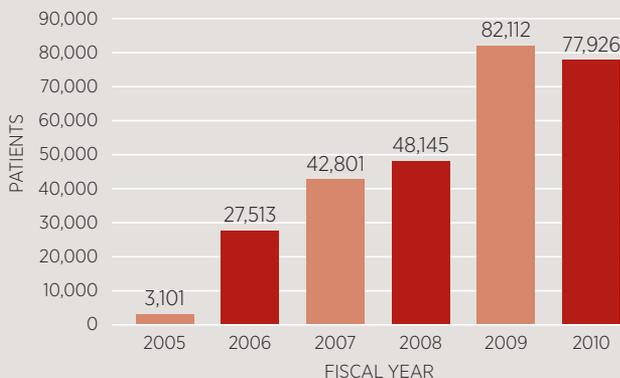
His pearl of wisdom: You have to be true to yourself and accept that this has to be your new lifestyle.

A VETERAN'S STORY

“The bottom line is that over a period of about 20 months I have lost approximately 70 pounds and now weigh in at roughly 180 pounds. My blood pressure is that of an athlete and my cholesterol levels are low... I went in for my annual visit in January of this year... they were so amazed at my lower blood pressure (without any meds) that they sat me down in a room for 20 minutes taking it over and over to make sure their instruments were recording properly.”

—Comment from a Veteran

NEW MOVE! PATIENTS BY FISCAL YEAR



Clinical Preventive Services—Promoting Optimal Care

TERRI MURPHY, RN, MSN, National Program Manager for Prevention Policy



NCP was busy in FY 2010 promoting high-quality recommendations for preventive care and developing VHA-specific tools that take our Veterans' unique health needs into account.

NCP worked closely with our Preventive Medicine Field Advisory Committee to publish guidance on eight clinical preventive services topics:

- Abdominal Aortic Aneurysm Screening
- Aspirin for the Primary Prevention of Cardiovascular Disease
- Aspirin or Non-Steroidal Anti-Inflammatory Drugs for the Primary Prevention of Colorectal Cancer (Not recommended)
- Colorectal Cancer Screening
- Herpes Zoster (Shingles) Immunization
- Lipid Disorders Screening
- Tetanus/Diphtheria and Tetanus/Diphtheria/Pertussis Immunizations
- Pneumococcal Immunization

NCP also launched a new Intranet Web site to display these guidance statements (http://vaww.prevention.va.gov/Guidance_on_Clinical_Preventive_Services.asp). Each guidance statement includes one or more brief statements (see the example at left), additional clinical and background information, scientific evidence for the recommendations, and tools for delivery of the service. So far, guidance statements are posted on all eight of these clinical topics.

In FY 2011, NCP will continue to develop guidance on additional topics. We also will launch a new Web site that will enable Veterans to personalize their health care by recommending preventive services based on factors such as age and gender.



Recommend screening for colorectal cancer in adults age 50 through 75 at recommended intervals.



Consider offering colorectal cancer screening in adults age 76 through 85 only if other considerations support providing screening to the individual patient.



Recommend AGAINST screening for colorectal cancer in adults older than age 85 years.

THE VHA NATIONAL CENTER FOR HEALTH PROMOTION AND DISEASE PREVENTION (NCP)

is a field-based national program office of the Office of Patient Care Services. NCP has several current programs, including MOVE!, an evidence-based weight management program for Veterans that has helped thousands of people lose weight, keep it off, and improve their health. The Veterans Health Education and Information program provides leadership in patient health education in VHA. NCP develops recommendations for clinical preventive services, such as screening tests, immunizations, health behavior counseling, and preventive medicines. The Preventive Care Program, a sub-initiative of the New Models of Care Major Transformational Initiative, is designed to promote healthy living among Veterans, provide facility support for preventive care, train clinical staff in patient-centered communication, and develop a number of resources for Veterans to receive health promotion and disease prevention services.

Our overall goal is to keep Veterans well and well-informed.

NCP VISION

An all-encompassing culture of health promotion and disease prevention throughout the continuum of care supports Veterans in achieving optimal health and well-being.

NCP MISSION

NCP, Office of Patient Care Services, advocates for health promotion, disease prevention, and health education. NCP advises VHA leadership on evidence-based health promotion and disease prevention policy. NCP provides programs, education, resources, coordination, guidance, and oversight for the field to enhance health, well-being, and quality of life for Veterans. To accomplish this mission, NCP partners with colleagues within and outside VHA.



Linda S. Kinsinger, MD, MPH
Chief Consultant for Preventive Medicine

National Center for Health Promotion and Disease Prevention
Office of Patient Care Services
Veterans Health Administration
Suite 200
3022 Croasdaile Drive
Durham, NC 27705