FISCAL YEAR 2013 HIGHLIGHTS

VHA National Center for Health Promotion and Disease Prevention (NCP)
Office of Patient Care Services

“Keeping Veterans Well and Well-informed”
Read a few pages of this highlights report and you’ll see that it was another banner year for NCP* and our many partners. New initiatives were launched, numerous milestones were passed, and the list of accomplishments was long. Clinicians and Veterans everywhere benefitted from the efforts of dedicated HPDP and VHE staff here in Durham and out in the field.

As VHA’s Preventive Care Program sub-initiative started the transition to long-term sustainment as part of the overall Transformation, NCP continued to take a lead role in accomplishing the missions of the T21 and NMOC initiatives. Our maturing HPDP programs, updated clinical preventive services guidance, ongoing TEACH and MI training, enhanced VHE resources, and our flagship program, MOVE!®, have resulted in tangible improvements to VHA preventive care and thus improved care for Veterans.

Several more recently implemented pilots—the National TLC Pilot and “Be Active and MOVE!®” CVT, for example—achieved impressive outcomes and progressed into follow-on phases. Other novel projects and resources, such as the Lung Cancer Screening Clinical Demonstration Project and the Veterans Health Library, will help ensure that VHA continues to provide results-oriented, Veteran-centered, forward-looking health care in the future.

As in past years, wide-ranging partnerships were critical to our successes. We collaborated strategically with many VHA program offices and non-VA government partners, and regionally with field-based VHA staff. Locally, we again provided a training experience for Preventive Medicine Residents (Drs. David Ham and Kelly Kimple) from University of North Carolina at Chapel Hill. We also welcomed two new staff members to the NCP team: Program Support Assistant Kevin Buckner and Project Coordinator Martha Larson, both of whom had previously worked at the Durham VAMC.

But we don’t plan to stop there.

Moving into 2014, an old proverb seems particularly apropos: “what the caterpillar calls the end, the moth calls the beginning.” We’ve achieved a lot as VA’s 4-year transformational journey turns into one of sustainment. But it’s not an end, just another beginning—with new goals and potential challenges—as we strive to provide the personalized, proactive, patient-driven VHA care our Nation’s Veterans deserve.

Linda Kinsinger

LINDA KINSINGER, M.D., M.P.H.,
Chief Consultant for Preventive Medicine

*All acronyms in this report are defined in a glossary on page 19.
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Focus on Veterans

In FY 13, NCP built on the Veteran-centered successes achieved previously. New and ongoing programs, training, educational resources, clinical tools, pilot studies, and initiatives helped NCP staff and field clinicians continue to promote and provide personalized, proactive, patient-driven health care.

LITTLE CHANGES, LOTS OF WEIGHT LOSS: TLC helped Veteran Michael Sleigher lose 40 pounds and achieve his health goals at VA Butler (PA) Healthcare.
WHAT THEY’RE SAYING ABOUT: MOVE!®

“The dividends [from MOVE!]® are finally starting to pay off. I am hoping [that]…when I see my VA primary physician…I will be able to ditch my [cholesterol] and maybe my blood pressure medications.

You, Dr. S., and VA’s MOVE!® and DPP programs have been able to accomplish what I have not been able to in the last 30-something years: motivate myself, change my attitude, and help me prevent…diabetes. Thanks again for all the great help and time you and the team have given me. My two main goals have always been to get down to 200 pounds…and to make you guys look good for all…you’ve contributed. At this point, I believe I can accomplish both!”

– Vietnam-era Veteran, Minneapolis VAMC –

MOVE!® WEIGHT MANAGEMENT

VETERANS and their clinicians continue to benefit from the MOVE!® Program, now in its 7th year of national implementation. In FY 13, MOVE!® staff:

- Estimated the program has treated nearly 1 in 10 Veterans (assuming about 5 million regular users of VA health care)
- Released a streamlined, more interactive version of MOVE!® Online Training
- Revised and enhanced almost 100 MOVE!® Patient Handouts
- Revised and improved NCP’s HL Messages for weight, physical activity, and nutrition
- Continued development of MOVE!® Coach Mobile Smartphone Application to be patient-tested in 2014
- Revised Chapters for MOVE!® Reference Manual
- Presented in National Calls and Meetings, including the Society of Behavioral Medicine, VHA PCS Grand Rounds, and National Institutes of Health
- Collaborated with EES to release 3 Whiteboard videos: Strive for a Healthy Weight with MOVE!®, Be Physically Active, and Eat Wisely
- Shared evaluations of MOVE!®, which showed:
  - Change in weight from MOVE!® participation appears stable 2–3 years after joining the program, which suggests patients are making and maintaining lifestyle changes

Enrolled the 500,001st patient

{ September 2013 }
**MOVE!® RESEARCH UPDATE:**
American Diabetes Association 73rd Annual Scientific Sessions, June 2013

**PRESENTER:** Sandra Jackson, dietitian with Atlanta VAMC research team and Ph.D. student at Emory University

**METHODS:** Retrospective analysis of national MOVE!® outcomes data comparing patients who had not yet been diagnosed with diabetes with a sample of Veterans who met entry criteria for MOVE!®, but had not yet participated.

**RESULTS:** At 3 years follow-up, those participating in MOVE!® in an intense (≥8 contacts) and sustained (≥4 months) manner had 33-percent reduction in diabetes incidence over a 3-year period. Each additional pound lost at 6 months was also associated with a 1 percent-lower likelihood of developing diabetes over the 3-year span.

**CONCLUSIONS:** MOVE!® lowers the incidence of diabetes in active participants in the program; diabetic patients are using MOVE!® more to lower their weight, which can improve diabetes management.

**WHAT THEY’RE SAYING ABOUT: MOVE!® TLC**

“**MOVE!® IT ANDLOSE IT:** Veteran **Tony Denoi** “stuck to it” and lost 101 pounds at VA Butler (PA) Healthcare

**DEFEATING LIMITATIONS:** Through MOVE!®, Veteran **T.J. Schaaf** and his wife found the drive and determination to together lose over 170 pounds at the Victorville (CA) Community-Based Outpatient Clinic.

**MOVE!® RESEARCH UPDATE:**

**AMERICAN DIABETES ASSOCIATION 73RD ANNUAL SCIENTIFIC SESSIONS,**

**JUNE 2013**

**PRESENTER:** Sandra Jackson, dietitian with Atlanta VAMC research team and Ph.D. student at Emory University

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**WHAT THEY’RE SAYING ABOUT:**

**MOVE!® TLC**

“**It’s a great opportunity for someone who is motivated, but unable to attend regular classes, to have a regular check-in with a coach to work on weight loss.”**
NATIONAL TLC PILOT

Piloted in 24 facilities in 5 VISNs

More than 5,300 Veterans participated in TLC

17% of participants were Women Veterans

WEIGHT

35% lost at least 5% of starting weight

TOBACCO

45% quit using tobacco

PHYSICAL ACTIVITY

36% improved physical activity time by at least 1 category

EATING WISELY

88% rated their diet as reasonably or very healthy

ALCOHOL

16% improved Audit-C score by at least 1 category

STRESS

1.6 point average decrease in stress reported (1–10 scale)

(data through November 2013)

OF ALL PARTICIPANTS SURVEYED:

96% are SATISFIED with TLC

93% are SATISFIED with the TLC Workbooks

96% would RECOMMEND TLC to others

86% would REPEAT TLC if available

THE BEST THING HE EVER DID: TLC gave Veteran John Sarris (with June Laver, left) the coaching and positive reinforcement needed to lose 30 pounds at the Philadelphia VAMC

“I like telephone MOVE!* because it offers more convenience to Veterans with busy schedules. Telephone MOVE!* is a great option for our Veterans to stay on track with their healthy lifestyle changes.”

– PACT staff, VISN 17 –

“[It’s] user-friendly, structured, and focused.”
NCP PILOT PROGRAMS AND STUDIES: FY 13

**DPP PILOT**

**GOAL:** Determine whether modest weight loss through dietary change and increased physical activity can prevent or delay the onset of Type 2 diabetes and produce greater weight loss in Veterans than the MOVE!® Program

**DESCRIPTION:** Selected Veterans who are at risk for, but not diagnosed with, diabetes attend a series of group sessions and are given predetermined weight loss and physical activity goals

**COLLABORATION:** Diabetes QUERI • VA Ann Arbor HCS

**LOCATIONS:** Minneapolis VAHCS • Baltimore VAMC • VA Greater Los Angeles HCS

**STATUS:** Started in summer 2012; ongoing

**CLINICIAN COMMUNICATION EVALUATION PILOT PROJECT**

**GOAL:** Develop a Clinician Competency Assessment Tool to measure clinician competency in patient-centered communication skills

**DESCRIPTION:**

*Part 1:* literature review of skills necessary for clinician competency in patient-centered communication

*Part 2:* development of tool that can be used in a supportive feedback session in a busy primary care clinic, and field evaluation pilot

**COLLABORATION:** Ann Arbor HSR&D

**STATUS:** Initiated Part 1 in FY 13; Part 2 begins in FY 14

**LUNG CANCER SCREENING CLINICAL DEMONSTRATION PROJECT**

**GOAL:** Assess the feasibility of implementing VA-wide lung cancer screening program for Veterans at high risk for lung cancer

**DESCRIPTION:** Annual lung cancer screening with low-dose computed tomography (CT) scans for 3 years for people at high risk for lung cancer (current/former smokers ages 55 to 70 who have ≥30 pack-years of smoking; if former smoker, quit less than 15 years ago)

**COLLABORATION:** Durham (NC) HSR&D • Veterans Engineering Resource Center, VA Pittsburgh HCS

**LOCATIONS:** New York Harbor VAMC • Durham (NC) VAMC • Charleston (SC) VAMC • Cincinnati VAMC • VA Ann Arbor HCS • Portland (OR) VAMC • San Francisco VAMC • Minneapolis VAHCS

**STATUS:** Launched in November 2013

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**Lung cancer screening information for the field, designed to support the Lung Cancer Screening Clinical Demonstration Project**
**“BE ACTIVE AND MOVE!” CVT**

**GOAL:** Extend the reach of physical activity programming for Veterans

**DESCRIPTION:** CVT delivers MOVE!® physical activity classes to several sites in HCS/VISN

**COLLABORATION:** VISN 8 TS • VHA PM&RS

**LOCATIONS:**
- **Phase I:** Haley Veterans’ Hospital (Tampa, FL) • Bay Pines (FL) VAHCS • Dayton (OH) VAMC • NF/SW VHS • Memphis VAMC • Portland VAMC
- **Phase II:** VAMCs: Bath (NY) • Battle Creek (MI) • Rogers (Bedford, MA) • O’Brien (Big Spring, TX) • Birmingham (AL) • Cincinnati • Stokes (Cleveland) • Dallas • Dayton • Randall (Gainesville, FL) • Johnson (Iron Mountain, MI) • Louisville (KY) • Milwaukee • Portland • Holmes McGuire (Richmond, VA) • Lutz (Saginaw, MI) • Salem (VA) • VA Butler (PA) Healthcare • Bay Pines • VHCS of the Ozarks (Fayetteville, AR) • VA Hudson Valley (NY) HCS • VA Long Beach (CA) HCS • Southeast Louisiana VHCS (New Orleans) • Lovell Federal Healthcare Center (North Chicago) • Northern Arizona HCS (Prescott) • VA St. Louis HCS • Haley Veterans’ Hospital • Southern Arizona VAHCS (Tucson)

**STATUS:** 8-week Phase I completed; 8-week Phase II started in 2013 at 6 original and 28 additional locations. Continue work on training into FY 14

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**BE ACTIVE AND MOVE!® CVT OUTCOMES**

**Phase I:**
- 72% *Lost Weight*
  - Mean weight loss = 5.6 lbs
  - Range: 0.5–21.4 lbs

**Phase II:**
- 78% *Lost Weight*
  - Workload Report:
    - 556 Unique Patients,
    - 2,137 Patient Encounters

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**VETERANS HEALTH LIBRARY**

- Launched **May 28, 2013**, 4 months before the September NMOC milestone
- Offers Veterans and family member/caregivers **24/7 online, comprehensive, consistent** health information via MHV and directly at www.veteranshealthlibrary.org
- Is **available to all Veterans, no matter where** they receive care
- Is **Veteran-focused** in content and design
- Contains health information **vetted by VACO-designated VHA SMEs**
- Helps VHA clinical staff **confidently provide health resources** in face-to-face, telephone, and secure messaging encounters to help Veterans:
  - Partner and communicate effectively with their health care teams
  - Participate as active team members
  - Share health care decision-making
  - Self-manage chronic and acute conditions
  - Optimize health and well-being
- Currently offers **thousands of health information resources**—Health Sheets, Flipbooks, Online Guides, and videos—in both English and Spanish

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**WHAT THEY’RE SAYING ABOUT:**

**VHL**

“Feedback from Veterans, the USH, other VHA leaders, and clinical staff in the field on the VHL’s contribution to Veteran-centered care has been extremely positive.”

— NCP VHEI staff —
Results-Driven

NCP’s transformational efforts began to turn towards **sustainment activities** in FY 13, as many of the goals of the Preventive Care Program sub-initiative of the T21 NMOC were achieved. NCP’s **multi-faceted support** of HPDP, HBC, and VHEC staff in the field—from training in patient-centered communication to up-to-date prevention policy and guidance—helped drive **excellent results in preventive health care** for Veterans.

**ENGAGED AND INFORMED:**
NCP’s “Eat Wisely” Whiteboard video plays for patients on a monitor in the Lebanon (PA) VAMC
**Patient Education:**

**TEACH for Success**

- **TUNE IN**
- **EXPLORE**
- **ASSIST**
- **COMMUNICATE**
- **HONOR**

**NCP and TEACH**

- NCP provides guidance and leadership on VHEC-led training program
- VHECs serve as facilitators/facility leads for local programming
- NCP supports VHECs, HBCs, and HPDP PMs by providing tools to assist them in integrating skills into the clinical practice of PACT staff and other clinicians, such as
  - TEACH Observational Checklist
  - TEACH Self-Evaluation Assessment
  - Moving Veterans to MOVE!
  - 10-Step Health Coaching Process Using the My Health Choices
  - Clinician Guide to SMART Goals

**Did you know?**

VISN 8 sponsored a **Network-wide TEACH Facilitator training** for 22 clinical and education staff from all 7 of its facilities. NCP staff provided on-site consultation and overall guidance.

**By the Numbers | MI**

- 31 Facilitators trained by NCP-Sponsored MI Facilitator Training Course in FY 13
- 247 Total facilitators trained by NCP-Sponsored MI Facilitator Training Course since 2010
- 1,169 Participants in EES-supported local MI training from May-September 2013
- 4,000 Estimated total participants in local MI training in FY 2013

**By the Numbers | TEACH**

- **53** Total TEACH facilitators trained in FY 13
- **371** Local TEACH courses offered in FY 13
- **472** Total TEACH facilitators trained since 2010
- **3,500** Approximate participants in local TEACH courses in FY 13
- **20,000+** Total participants in local TEACH courses since 2010

**By the Numbers | CLINICIAN COACHING COURSE**

- **29** TEACH and MI facilitators trained in Clinician Coaching, Facilitation, and Presentation Skills for TEACH and MI Facilitators Course in FY 13
- **212** TEACH and MI facilitators trained in Clinician Coaching, Facilitation, and Presentation Skills for TEACH and MI Facilitators Course since 2011

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**TEACH EVALUATION**

Using a large sample of participants who took the TEACH course in 2012, NCP teamed with EES to complete an evaluation of participation, satisfaction, skill acquisition, and application in clinical practice by clinical staff:

**INITIAL POST-TRAINING SURVEY**

- **87%** were SATISFIED with course
- **91%** deemed the learning activities/materials EFFECTIVE
- **93%** fully ACCOMPLISHED learning objectives
- **89%** LEARNED new knowledge and skills

**3-MONTH POST-TRAINING SURVEY**

Respondents’ SUCCESS in implementing the 5 TEACH components ranged from **4.0 to 4.3** (1 - Not Successful, to 5 - Very Successful)

**6-MONTH POST-TRAINING SURVEY**

Participants reported increased comfort with, and enhanced use and effectiveness of, TEACH skills since completing training
HPDP

NCP guidance and support—via monthly national calls, acknowledgment and dissemination of success stories, technical consultation, and training activities and meetings—continued to help HPDP staff, programs, and committees in place in all VA facilities enhance VA care.

- **Revised Orientation Program** for HPDP PMs, HBCs, and VISN HPDP Program Leaders:
  - Quantitative/qualitative evaluation of each self-study module by the relevant SMEs
  - All modules—instructions, role-specific orientation checklists, evaluation and self-certification of completion—were revised
  - 2 new modules were added (*Clinical Reminders* and *Personalized, Proactive, Patient-Driven Care*)
  - Revised materials were posted to NCP SharePoint, to serve as ongoing resources

**FAST FACTS**

HPDP 1 and 2 Metrics

These T21 measures support the shift from transformation to sustainment of HPDP Programs, and reinforce core program requirements outlined in VHA Handbook 1120.02:

- **HPDP 1**: Composite measure of facilities’ attainment of each of the 7 sub-elements, HPDP 3–9
- **HPDP 2**: Measure of facilities’ maintenance of facility-level HPDP Committee or Sub-committee

**FY 13 RESULTS**

- 87.9% met HPDP 1
- 97.0% met HPDP 2

**RESULTS-DRIVEN**

**HEALTHY LIVING CPRS TOOLS**

The Healthy Living CPRS Tools guide and assist in documenting conversations on health behavior change and goal setting. Comprehensive training materials were developed so the Tools can be accessed from the national clinical reminders site. In FY 13, the Tools were:

- **IMPLEMENTED in 17** new facilities
- **EVALUATED by 27** facilities that implemented them in FY 12
- **VALUED by the majority of staff as ways to better use their TEACH- and MI-based skills**

**DRIVER’S SEAT: HPDP Staff at the Central Texas Veterans HCS collaborated with several facility services to develop a “Roadmap to Wellness” for Veterans (original graphic designed by Amber Everett and Sam Torres)**
WHAT THEY’RE SAYING ABOUT:
CPRS TOOLS

“The Tool was wonderful, and it pointed out where and what needed to be done. I truly believe that our patients’ care did change here…”

- Clinical Information Systems Coordinator, VA Illiana (IL) HCS -

Did you know?
NCP’s National Program Manager for HPDP Programs Sue Diamond and Prevention Practice Program Manager Kathy Pittman presented, “Unlocking Patients’ Potential: The Impact of Patient-Centered Care and Shared Decision Making,” for the first session of the VeHU Registered Nurse Care Manager Boot Camp Series.

CLINICAL PREVENTIVE SERVICES

• National Women’s Health Clinical Reminders for Breast and Cervical Cancer Screening and Follow-Up—updated and released to field
• Cervical Cancer Screening Staff and Patient Education Brochures—developed and stocked in VA Depot
• New National Clinical Reminders for Pneumococcal Immunizations—began development; will be released in FY 14
• Veterans Health Information Systems and Architecture (VISTA) Immunization files—provided input; modernization continues into FY 14
• New VHA Guidance Statement:
  - Prostate Cancer Screening—Patient/Provider Discussion Guides developed and stocked in VA Depot

2013 UPDATED GUIDANCE STATEMENTS

Pneumococcal Immunization (PPSV23 and PCV13)
Tetanus Immunization (Td and Tdap)
Human Papillomavirus Immunization
Hepatitis Immunization
Seasonal Influenza Immunizations
Cervical Cancer Screening
Tobacco Screening and Counseling

- Talk with your health care team today about which screening tests should most Veterans get?
- A. alcohol abuse
- B. depression
- C. high blood pressure
- D. HIV
- E. military sexual trauma
- F. obesity
- G. PTSD
- H. tobacco use
- I. all of the above

Which vaccinations should most Veterans get?
- A. tetanus (once every 10 years)
- B. flu (every year)
- C. both of the above

Which factors determine which additional vaccinations you should get?
- A. age
- B. medical conditions or risk factors
- C. not already immune
- D. all of the above

Talk with your health care team today about which vaccinations you need.

Which screening tests should most Veterans get?
- A. alcohol abuse
- B. depression
- C. high blood pressure
- D. HIV
- E. military sexual trauma
- F. obesity
- G. PTSD
- H. tobacco use
- I. all of the above

Talk with your health care team today about which screening tests are right for you.

Some immunizations are for certain age groups. For example, HPV vaccine is for those 26 years and younger, Zoster vaccine is for those 60 years and older, and pneumococcal vaccine is indicated at age 65 or older.

Some vaccines are recommended for adults with certain risks related to their health, job, or lifestyle that put them at higher risk for serious diseases. These include pneumococcal for those under age 65, meningococcal, hepatitis A, and hepatitis B.

If you are not already immune to chicken pox you should receive two doses of this vaccine. If you were born after 1957 and are not already immune to measles, mumps, and rubella, you should receive 1 or 2 doses of MMR vaccine.
VHEI continues to enhance VHECs’ practice by offering them knowledge and skills to support their collaboration with other clinical staff to plan, deliver, and evaluate Veteran-centered health education programs on a facility-wide basis. VHEI continues to emphasize and offer strategies across VHA to recognize how Veteran-centered health education is integral to VHA’s mission and strategic initiatives.

VHEC NETWORK SUPPORT

- Conducted monthly conference calls to inform VHECs of NCP, VHA, and VACO initiatives, especially related to VHE
- Showcased VHEC successes in developing VHE programs
- Provided consultation and technical assistance to VHECs and key VHE stakeholders
- Consulted on ways to offer more effective and Veteran-centered programs
- Provided health education resources that help Veterans enhance their health and well-being
- Encouraged collaboration opportunities for local VHECs, HPDP PMs, and HBCs
- As in past years, conducted The Joint Commission (TJC) Consultation Conference Calls and worked with TJC readiness consultant to provide information (webinar, white paper) on the value of patient education in navigating complex health care delivery systems
- Published the results of the VHEI FY12 Report, which focused on:
  - Facility organizational structures that support VHE
  - Deliverables and outcomes of VHEC work with critical clinical programs (eg, HPDP, PACT, Specialty Care)
  - Strategies and resources that can help VHECs use Report data to enhance facility VHE

VHECs help PACT and other clinical staff provide health education for Veterans and enhance patient self-management, which is a critical element of Veteran-centered care.

Help clinical staff develop self-management programs for specific patient populations

- 67% of full-time VHECs do
- 44% of collateral VHECs do

Help clinical staff make existing self-management programs more Veteran-centered

- 55% of full-time VHECs do
- 38% of collateral VHECs do

Manage the TEACH Program

- 71% of full-time VHECs do
- 44% of collateral VHECs do
VHEC PROFESSIONAL DEVELOPMENT PROGRAM

Built on the success of the FY 12 VHEC Professional Development Program by

• Using FY 12 VHE Report and other needs assessments to support VHEC development
• Conducting 2 professional development program modules, Systems Redesign to Improve Veterans Health Education and Meeting VHE Program Challenges
• Using small-group peer consultation calls clustered by similar facilities to encouraged sharing and discussion of issues, strategies, successes, and barriers among VHECs

WHAT THEY’RE SAYING ABOUT: VHEC Professional Development

“We’ve gotten positive feedback from VHECs about their experiences using the FY 13 professional development programs to help develop and strengthen their skills, and successfully manage and build VHE programs. Professional development focused on specific diagnostic concepts and skills to meet the specific adaptive challenges VHECs face in collaborating on VHE programs and activities, as well as engaging key stakeholders and VHE program teams to assess the Veteran-centeredness of local programs.”

-NCP VHEI Staff-

Did You Know?

VHEI collaborated with several VHA Program Offices to review and revise the content in VHA’s New Patient Orientation (NPO) Program, which helps new patients understand how to best use VA care and partner with their VA providers. The revised NPO was disseminated in January 2013, and VHEI staff also presented the revision on NCP field staff calls and calls with VACO Program Offices.

FY 12 VHE REPORT: VHEC NEEDS ASSESSMENT AND STRATEGIC PLANNING FUNCTION

VHECs conduct facility-wide needs assessments and assessments of specific health problems or patient populations to identify and analyze gaps in health education services for Veterans. They use these findings to develop strategic plans to address the gaps and align the VHE program with facility goals and priorities.

Conducted assessments for 1 or more specific health problems or patient populations

- 60% of full-time VHECs did
- 22% of collateral VHECs did

Other VHEC Staff Training Activities

- Provided or coordinated continuing education for clinicians on health education methods and strategies.

58% of full-time VHECs reported conducting facility-wide assessments

37% of collateral VHECs did

1-3 Year Plan

- 40% of full-time VHECs said they had developed a 1-3 year VHE strategic plan aligned with facility priorities

- 24% of collateral VHECs did
Forward-Looking

NCP partnered with internal and external stakeholders to develop clinical tools, guidance, and training to support and achieve Preventive Care Program goals into FY 14 and beyond. As in the past, these HPDP resources will help VHA staff enhance Veterans’ current and future quality of care and quality of life.

My HealtheVet healtheliving assessment (HLA)

In FY 13, NCP Staff continued development and testing of the online HLA, scheduled to launch in March 2014. Educational, promotional, and planning materials are being developed to assist Veterans and their health care teams in using the HLA, which will be available via the MHV health portal and will:

- Ask questions about the Veteran’s health history and habits
- Create a personalized health report summarizing health status, health risks, and recommended health changes
- Calculate the Veteran’s “health age”, which summarizes health status
- Recommend healthy changes to reduce the health age—a Veteran can then calculate the impact of making these changes on his/her health
- Calculate customized risks for developing conditions such as heart disease, stroke, diabetes, and lung, breast, and colorectal cancers
- Help the Veteran and health care team work together towards health goals
**Did You Know?**
In FY 13, NCP published several new “Whiteboard” videos to promote positive health behavior changes in Veterans. Posted to the VA’s YouTube channel and the NCP Web site, the videos present the HL messages using an engaging style of hand-drawn, stop-motion storytelling. Each approximately 2-minute video was designed in cooperation with EES and 508 Compliance partners.

**TOOLS AND RESOURCES**

- **Clinician Coaching/MI Activity Log**—developed for field staff use to record (quarterly) coaching and MI course experiences, which will be reviewed quarterly by NCP.

- **“A Better Way to Live” Goal-Setting Video Series**

- **DVD/video series**—developed by NCP and EES to demonstrate the Veteran-centered health education/health coaching skills featured in TEACH.
  - 5 vignettes depict PACT clinicians using health coaching skills, the My Health Choices tool, and other resources to guide and empower Veterans to address health behaviors. A sample health coaching session and a follow-up phone call is described.
  - Vignettes supplement TEACH trainings during follow-up, review, and coaching sessions, and demonstrate the principles, skills, and strategies featured in the course (eg, 10 steps of health coaching in the Clinical Staff Guide to Health Coaching).

- **Whiteboard Videos on NCP’s HL messages**

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**WHAT THEY’RE SAYING ABOUT:**

**NCP’s HL Message Whiteboard Videos**

“I watched all of [the Limit Alcohol video], [it's] terrific and so upbeat! We...use it in our groups and one-to-one sessions...the video...is a real depiction of how one feels...I know it will help so many people...[it's] a great ‘tool’ in the toolbox of ICARE!”
– Patient Health Education Coordinator, VISN 17

“These Whiteboard videos are ingenious, and a great way to capture the visual acuity of the audience...very useful! [We're working] to...provide [them] to patients in our waiting areas.”
– Public Affairs Specialist, VISN 8
NCP developed a variety of communications resources, including 3 (FY 12 Highlights Report, DPP launch, and Whiteboard videos) that won VHA Office of Communications annual awards.

NCP’s engaging infographics help clinicians communicate, and Veterans understand, the 9 HL messages.

WHAT THEY’RE SAYING ABOUT: NCP Communications

“We have used NCP’s logos and HL Message marketing materials, which have really made all the difference. Our Information Technology staff loves how useful it is to not have to create these materials from scratch. We hope that people have an idea of how rich this resource can be.”

– Katherine Hamilton, R.N., B.S.N., P.H.N., M.F.T., HPDP PM, San Francisco VAMC –

WHAT THEY’RE SAYING ABOUT: NCP’s HealthPOWER! Quarterly Newsletter

“This newsletter is one I refer to very regularly, more so than any other.”

“It’s useful in enhancing programs locally and supporting ideas…”
Did You Know?
As part of VHA’s Connected Health Showcase in Washington D.C. in spring 2013, NCP staff displayed 3 technologies, completed or in development, that are key components of VA’s personalized, proactive care: the HLA, VHL, and downloadable mobile application, “MOVE! Coach.” These technologies are examples of how VA provides care how, when, and where Veterans want it.

Glossary

ACIP  Advisory Committee on Immunization Practices
CPRS  computerized patient records system
CVT  Clinical Video Telehealth
DPP  Diabetes Prevention Program
EES  VA Employee Education System
FAQ  Frequently Asked Questions
FY  fiscal year
GEC  Geriatric and Extended Care Services
HBC  Health Behavior Coordinator
HCS  Health Care System
HHS  U.S. Department of Health and Human Services
HL  Healthy Living
HPDP  Health Promotion and Disease Prevention
HSR&D  Health Services Research & Development
MHS  Mental Health Services
MHV  My HealtheVet
MI  Motivational Interviewing
MOVE!®  MOVE!® Weight Management Program for Veterans
NF/SG VHS  North Florida/South Georgia Veterans Health System
NMOC  New Models of Care Initiative
OSI  Office of Strategic Integration
PACT  Patient-Aligned Care Team
PCC  Patient-Centered Care
PCS  Patient Care Services
PM  program manager
PM&RS  Physical Medicine and Rehabilitation Services
QUERI  Quality Enhancement Research Initiative
SME  Subject matter expert
T21  VA Transformational Initiatives
TEACH  Patient Education: TEACH for Success
TLC  Telephone Lifestyle Coaching
TS  Telehealth Services
USH  Under Secretary for Health
USPSTF  U.S. Preventive Services Task Force
VA  Department of Veterans Affairs
VACO  VA Central Office
VAHCS  VA Health Care System
VAMC  VA Medical Center
VCS  Veterans Canteen Services
VeHU  VA eHealth University
VHA  Veterans Health Administration
VHEC  Veterans Health Education Coordinator
VHEI  Veterans Health Education and Information, NCP
VHL  Veterans Health Library
VISN  Veterans Integrated Service Network

“I love the graphics and well-written articles…and content.”
– VHA clinicians and staff commenting on NCP’s HealthPOWER! newsletter –
NATIONAL CENTER FOR HEALTH PROMOTION AND DISEASE PREVENTION (NCP) is a field-based national program office of the Office of Patient Care Services that strives to improve the quality of life for Veterans by providing VA clinicians evidence-based health care practices.

We are
• Results-Oriented
• Veteran- and Clinician-Centric
• Forward-Looking

Our programs highlight the VA’s Integrity, Commitment, Advocacy, Respect, and Excellence (ICARE) and we
• Are committed, prepared, and equipped to meet the health care needs of Veterans and caregivers
• Strive for excellence in our work, products, and services for Veterans and caregivers
• Foster teamwork and innovation to achieve our mission for Veterans
• Communicate effectively in a professional, timely, thorough, and succinct manner

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

NCP MISSION
NCP 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.

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“Keeping Veterans Well and Well-informed”