From the Editor

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TLC Success Story—Veteran John Sarris
The results of our August survey of HealthPOWER! readers are in, and they are great. Almost 200 respondents from across the Veterans Health Administration (VHA) agreed that the newsletter was a valuable clinical and program resource. They reported using the newsletter for lots of things in their day-to-day work—such as educating other staff and Veterans, designing and enhancing programs, and developing support for their initiatives. They also characterized the newsletter as one they “refer to very regularly, more so than any other” and a “great publication...well done, and very helpful.” This feedback was satisfying for us at the VHA National Center for Health Promotion and Disease Prevention (NCP) to hear because it confirmed that we’re providing a range of VHA staff with a not just a “good read”, but also something of practical value in their roles as leaders, clinicians, and administrators.

This fall newsletter offers more of what we hope is useful and perhaps even inspiring information to enhance Veteran care. Our Feature Article describes how staff at the VA Central Western Massachusetts Health Care System (HCS) creatively enhanced their local MOVE!* Program—and recently won local awards for those efforts. NCP’s MOVE!* Team discusses some important MOVE!* Program achievements, and a local Health Promotion and Disease Prevention (HPDP) Program Manager explains the multi-partner, multimedia approach that the VA Gulf Coast HCS has taken to promoting healthy living. We also feature some high praise for the Veterans Health Library (VHL), as well as early data from the Salem (VA) VAMC that demonstrate the positive impact of Motivational Interviewing (MI) and shared medical appointments (SMAs). Lastly, we spotlight one Veteran who calls the National Telephone Lifestyle Coaching (TLC) Pilot, “the best thing he ever did,” and joins thousands of patients who’ve successfully set, then met, their healthy lifestyle goals through this program.

In future newsletter issues, we’ll continue to highlight all the innovative, effective HPDP that VHA staff members are providing for Veterans. And we’ll continue to welcome your feedback on the newsletter because, like you, we’re always striving to enhance our efforts to give Veterans the personalized, proactive, patient-driven care they deserve.

Happy Fall!

Ted Slowik, Ph.D.
Saving Lives, One Pound at a Time: VA Central Western Massachusetts HCS MOVE!® Team and HBC Win Local Awards

The Federal Executive Association of Western Massachusetts recently honored staff from the VA Central Western Massachusetts HCS with both team and individual awards at its 2013 Annual Excellence in Government Awards ceremony. The HCS’ MOVE!® Program was recognized for “Outstanding Innovation and Creativity—Team,” and Psychologist and Health Behavior Coordinator (HBC) Dr. Mark Schneider was named “Professional Employee of the Year—Health Services” by the Association.

Registered Dietitian Seth Maas, the facility’s MOVE!® Program Coordinator, says that the innovation award was a true team effort, with Schneider’s accomplishments and contributions as HBC being a critical part of the program’s achievements.

“As a highly skilled HBC, Mark was able to spark the initial changes to our MOVE!® Program. Then the rest of our great team—Physician Champion Dr. Alice Abbott, Dietitians Patricia Lariviere, Dina Manekas, Suzanne Burchman, and Nicole Vallee, Mental Health Nurses Eva Parrish and Dina Malone, and HPDP PM Mary Rodowicz—made those enhancements reality,” Maas explains. “Both awards speak to the kind of team we have here—passionate about helping Veterans better manage their weight and get healthy, and ready to challenge each MOVE!® participant to improve!”

And that “challenge to improve” was the driving force in enhancing MOVE!® care at the HCS. In nominating the MOVE!® Team for the Association’s award, Local Service Line Manager for Primary Care Dr. Michael Therrien wrote that they “identified creative and innovative changes…resulting in improved outcomes and patient satisfaction. Veterans enrolled in VA health care now have a cutting-edge MOVE!® Program that is offered at convenient times and locations.”

Maas says that the process of revamping MOVE!® started in 2011. “The MOVE!® Committee identified a number of opportunities for improving the program, including increasing Veterans’ enrollment, weight loss, and satisfaction, as well as staff satisfaction and engagement,” he says. “Mark and Mary helped provide a critical review of what works and what doesn’t. It was all part of our comprehensive assessment of MOVE!®—analyzing data and outcomes, looking at VA best practices, and soliciting patient feedback.”

The first focus of program improvement was on “tightening up” existing MOVE!® practices. “We had a more loosely organized program based on general criteria,” explains Maas. “So we started by formalizing the program dates, schedule, and classes, and began a new referral process.” They
also instituted an 8-week curriculum, created a new format for the 1-hour classes, and rewarded program completers with certificates and mugs. “We took a more multi-disciplinary approach to the class,” he says. “Unlike before, our dietitian and psychologist now teach the class together, for example, and we’re incorporating telehealth, too. We debuted this new approach at the main Northampton facility in April 2011, and are now slowly rolling it out at our six Outpatient Clinics (OPCs).”

Visibility has been a particularly important aspect of improving and promoting MOVE!* “We set up a marquee in front of our main facility that displays the cumulative weight loss of all of our MOVE!* patients,” Maas says. “It’s rewarding to our staff and Veterans to see that accomplishment as they come in, and it’s really gotten people talking about the program.” Another promotional tactic was an “extravaganza” party held recently at five of the OPCs. “We did it to publicize the program for participants and local media,” says Maas. “It was also an opportunity for everyone to celebrate the great results staff and Veterans have achieved through MOVE!* And it’s actually helped increase enrollment!”

Regular MOVE!* Committee meetings that involve all the HCS’ facilities have also helped get buy-in and support from staff. “Everyone’s able to provide input at these meetings, and that enhances morale and program satisfaction,” Maas notes. “Because staff are more invested and passionate about MOVE!* now, I think it’s become more of a highlight of their clinical work, rather than just another thing they have to do.”

Some impressive program metrics demonstrate that the Team’s changes to the HCS’ MOVE!* Program have indeed paid off:

- Almost 95 percent of “obese” (body mass index (BMI) greater than 30) or “overweight” (BMI greater than 25) patients with other health risks (e.g., diabetes) are now referred to MOVE!* or other weight management programs, a figure that exceeds the national performance measure.
- The total number of enrolled Veterans is up to 455 in 2012, from 51 in 2010.
- Total weight loss in those attending the program has increased from 193 pounds in 2010 to 2,292 pounds in 2012.
- Patients’ average weight loss is up from 3.8 pounds in 2010 to about 5 pounds in 2012.
- All the HCS’ OPCs have converted to the new program format, and at least one is now using telehealth. Feedback from patients continues to be positive (see right), and a significant number of spouses are now attending the program with their Veterans. The MOVE!* Team is also receiving accolades from VHA. “Seth and his team have always been local innovators with MOVE!*,” notes NCP’s National Program Manager, Dr. Ken Jones. “Whenever we’re ready to test new MOVE!* products, Seth is one of the first to volunteer. And he’s often provided us with very helpful input that’s reflected in the final products.”

In the future, Maas says that the MOVE!* Team will continue to evaluate ways to improve MOVE!*’s value to those who not only want to manage their weight, but also improve their health. “The changes we’ve made to our MOVE!* Program are a great example of how process improvement and system redesign can succeed at the local level,” he explains. “We’ve all worked together to enhance the program, and the results for both Veterans and staff have been exciting. And being recognized by both the Association and our patients is truly satisfying.”

**Veteran Comments on VA Central Western Massachusetts HCS’ MOVE!* Program:**

- “Going to MOVE!* is the best thing you can do to improve your health. Our lives have changed in every way. We breathe, walk, feel, and look better…we have a lot more energy!”
- “MOVE!* is great! It really keeps you on the ball because it…gets into your mind and you are constantly reminded not to overeat…Going to MOVE!* every week, listening to what others are going through, and especially the weigh-in every week [are what works].”
- “I set a goal. It took me 15 months to do it even with a bad hip and knee, and costochondritis. Losing weight…could save your life!”
Veteran Rodney Breaux (center) prepares a meal with Faith Anaya (left) and Nora Baltz
How did the program develop?
“We originally talked about doing a ‘healthy kitchens’ program but deferred. Recently, I had been partnering with a local food shelter and met with a representative from the Cooperative Extension Service, Faith Anaya. I asked about shadowing her to ‘learn the ropes’ and we started discussing options for our needy and homeless Veterans who were eligible for SNAP. That led to our current partnership, wherein the Arkansas Hunger Alliance (AHA) helps support this Extension program at CAVHS. Both the partnership and program help us as HPDP staff promote nutrition from a lifestyle management perspective.”

How is the program structured and delivered to Veterans?
“It began as evening classes at a local church, but now we do a program of 4 consecutive days of classes, held at our Veterans Day Treatment Center. Each session focuses on topics like healthy cooking skills, reading food labels, healthy food substitutions, food safety, healthy shopping on a budget, healthful preparation methods, and even dining etiquette. We plan, cook, and taste in each session, and also talk about NCP’s nine Healthy Living (HL) messages. Faith brings elements of Cook Smart, Eat Smart into each session, which includes one-to-one and group instruction. Veterans typically do the program alone, but are encouraged to go home and share what they’ve learned. The program requires a commitment from each Veteran, which is really important to the overall learning process. And the program also helps us promote cooking time as ‘quality time.’”

Tell us about the post-program shopping tour.
“The ‘Cooking Matters’ shopping tour is the culmination of the program, and helps the Veterans learn to actively manage a budget at the grocery store and get to know the five food groups. At the end of each program, we do the tour—which is sponsored by the Hunger Alliance—at a local grocery store. Veterans apply class skills in ‘real life’: they get a $10 gift card and go through the aisles and learn how to find ‘value-added’ products, healthier food options, and food to make different kinds of dinners—we call them ‘non-classic meals.’ They try new things and typically find they can accomplish a lot with only $10. The tour gives them a new sense of success and pride in themselves, as well as fellowship with other Veterans.”
Tell us about the USDA Under Secretary’s recent participation in a local food shopping tour.
“The United States Department of Agriculture (USDA) Under Secretary for Food, Nutrition and Consumer Services Kevin Concannon visited Arkansas recently as part of his ‘shopping tour’ aimed at showing people how to shop healthy on a budget. The AHA hosted him for a visit the day of the one of our post-program tours, and he came along with our Veterans to a local market. CAVHS Associate Director Cyril Ekeh and Dr. Estella Morris, who heads the VA Homeless Program, also accompanied the Under Secretary and Veterans. It was a great event, and everyone who attended was privileged to be part of the festivities!”

What kind of feedback have you gotten from Veterans?
“Our program’s been a success—since November 2012, CAVHS has completed 5, 4-6 week sessions, each with 4-6 adult students. These participants have provided great feedback so far. They’ve really enjoyed learning new skills, connecting with community resources, and interacting with staff and classmates. They’ve told us that they’ve learned about making educated dietary choices, using new healthy foods to make old favorites, and trying alternative cooking and food options. Many told us how impressed they were with the class content and outcomes, and how it can help so many Veterans get back on track. One Veteran, an experienced cook, told us that even he learned something new!”

What is the future of the program at your facility?
“I think our program is a prototype for a new Cook Smart, Eat Smart for groups of adults, and we have interest from several programs at CAVHS. We’re planning to incorporate the program into Women’s Health in the SMA setting, for example, and expand it as part of Wellness Group activities—we have a number of Veterans already signed up for this. And we have other external partners—a local food bank and TV news station, for example—to expand the program’s focus on population health. Our HCS is becoming known as a ‘partner in population health’ and we hope that this is the beginning of future programs to work with Veterans and their families on overall health and wellness.”
An Excellent Product: Dr. Kathryn Corrigan Discusses the Value and Potential of the Veterans Health Library

When Dr. Kathryn Corrigan saw the NCP’s recent PowerPoint presentation on the recently launched VHL, she was impressed and intrigued. “Right after I saw the presentation, I visited the VHL Web site and was able to see its value up close. It’s nicely organized and covers a robust list of disease and conditions, yet the content is succinct and to the point. And the videos and go-to-guides that I watched were excellently done,” she says. “The VHL is really nice because it puts consistent, vetted health information right at the fingertips of staff, patients, and their caregivers.”

Corrigan, who is VHA’s National Primary Care Lead for Telehealth and a Patient-Aligned Care Team (PACT) physician based at the James A. Haley Veterans’ Hospital in Tampa, made a point to show the Library to staff at the facility. And she continues to publicize the VHL in part because she thinks it’s a great tool to help staff more proactively engage patients.

Corrigan says that she is most impressed with the efforts made to ensure that the Library’s information matches Department of Veterans Affairs (VA) guidance and policy—both now and in the future. “The VHL’s content aligns with VA’s clinical practice guidelines, preventive guidance statements, policies, and directives, which is a really important aspect of its overall value,” she explains. “To maintain that alignment as policies and guidance change, periodical reviews and updates of the content are planned. These updates will ensure that the Library continues to be useful and relevant to users.”

The Library’s extensive, pre-launch field testing with key audiences is another reason why Corrigan knows that it’s an excellent product. “I really encourage staff to look for more opportunities to advocate for patients, and use MHV and secure messaging services more, too,” she says. “The VHL can help them effectively do all of these things, in part because it incorporates a lot of user feedback.”

Corrigan also likes that the VHL can help clinical staff reduce their reliance on print and paper materials at the facility level.

Like many other patients, caregivers, and staff who have started using the VHL, Corrigan is a satisfied customer. “I particularly like the information on physical activity contained in the Library’s ‘Rehabilitation’ section,” she notes. “It’s helpful to use the visuals in the clinic and also have them available online for Veterans to review at home. I think the VHL’s potential to enhance the patient experience is great, and it’ll be exciting to see the additional ways it will be integrated into VA care in the future.”

What They’re Saying About: HealthPOWER!

“I enjoy reading it…It’s always a good read, thank you! I just referred our Veterans Integrated Service Network (VISN) primary care group to the article in the spring issue on overuse of prostate CA screening.”

-- VISN 2 MOVE!* Program Coordinator
VA Gulf Coast HCS Takes a Multi-Partner, Multi-Media Approach to HPDP

HPDP Program Manager Laura Pistey believes that to effectively promote healthy living, you have to make it timely and relevant. So she did some epidemiological homework to help enhance the value and impact of the September HL message, Be Safe.

“I looked at 2012 government health data on HIV and syphilis prevalence and found that they had increased in Florida, part of which is covered by our HCS,” she explains. “I found that these increases correlated with VA rates, and in fact, our facilities had some of the highest numbers of these infections. These data were particularly relevant, because preventing sexually transmitted infections (STIs) is a key part of our Be Safe message.” So Pistey encouraged the facility’s primary care providers to increase education on and testing for these STIs, and she e-mailed all the PACTs more general information about STIs. “We send our PACTs a ‘message of the month’, which typically provides them with content related to the monthly HL message,” she says. “In September, we just augmented the monthly e-mail with more resources related to STI prevention, testing, and treatment.”

Pistey, who works in the VA Gulf Coast HCS from the Pensacola facility, says that the team has been able to effectively promote HPDP in part because of a good system of communication. “We’ve designated several Primary Care liaisons for HPDP, as well points-of-contact at each of our four Community-Based Outpatient Clinics (CBOCs),” she says. “Working directly with them makes it much easier to disseminate Healthy Living and HPDP information and resources.” Likewise, Pistey also has developed effective partnerships with—and received support from—leadership. “We’re in the process of adding a HPDP resource list to the computerized patient record system (CPRS) Tool and to staff computers as a non-removable desktop screen icon,” she explains, “and now I’m coordinating with VISN 16 HPDP leaders Nora Baltz and Lawrence Daily, who initiated this valuable project, to make it happen.”

Moreover, Pistey has expanded the HPDP collaborations to include external partners, and that is helping to enhance care for the more than 50,000 Veterans that the HCS serves in the Florida Panhandle and southern Alabama and Mississippi.

“The Florida Council on Aging offers free Tai Chi classes to people over age 60, so we recently began working with them to provide that training to our Veterans,” Pistey recounts. “Tai Chi nicely complements the Be Safe message because it can help aging Veterans improve their balance and flexibility.” Going one step further, Pistey and the facility’s HBC, Dr. Kellee Bivens, recently certified as Tai Chi instructors. “Tai Chi can also improve mental health, which may be a more important benefit to younger Veterans,” she explains. “And because Dr. Bivens and I are trained to offer Tai Chi now, more of our Veterans can benefit from it.”

Currently, Pistey and the HPDP team are also coordinating training for staff on the evidence-based Stanford Chronic Disease Self-Management Program (CDSMP). “In the near future, CDSMP trainers will train lay leaders at our facility,” she says. “These lay leaders will be on-site peer support staff—not simply volunteers—and we believe that will enhance Veterans’ experience with the CDSMP here.”

Pistey believes that these two new external collaborations will enhance the HCS’ array of existing HPDP efforts. “Right now, we promote the HL messages broadly and continually by using things like table displays, phone messages for patients who are on hold, and the facility’s various other media, such as electronic bulletin boards, social media, and newspapers,” she says. “We’re also improving the HPDP content on our facility’s Internet site, and I’m working with staff to promote NCP’s excellent Whiteboard videos, too. We’re disseminating and developing a lot of great HPDP resources and tools, and we’re already reaping rewards in terms of improving patient-centered care and Veteran health.”
Major Milestone: MOVE!® Weight Management Program Treats 500,001st Patient

NCP’s National MOVE!* team discusses how over a half million Veterans have benefited from this weight self-management program, and how the program is being continually enhanced to improve patients’ experiences.

Tell us about the recent milestone that MOVE!* reached.

Dr. Ken Jones, National Program Manager for MOVE!*/Weight Management: “We looked at our most recent data and found that we had reached a major program milestone. With about 6,500 patients presently entering MOVE!* each month, we estimated that we enrolled the 500,001st patient in mid- to late August. In other words, over half million Veterans have participated in at least one MOVE!* session since its October 1, 2005 inception! That’s a really big accomplishment for a program that began as an optional clinical program in 2005 and became mandatory in all facilities in March 2006. And it’s also a really big accomplishment for VA.”

Megan Skidmore, MOVE!* Physical Activity Program Coordinator: “We estimate that VHA has seen these MOVE!* patients in more than 3.6 million clinical encounters, which is an average of over 7 encounters per patient. So assuming that around 5 million Veterans regularly participate in VA health care, it means that nearly one in 10 patients have now benefited from MOVE!*#. These Veterans’ stories are impressive and inspiring, and a number of their stories of improved health and successful weight management can be found on our MOVE!*# Web site.” (http://www.move.va.gov/SuccessStories.asp)

What kinds of outcomes has the program achieved?

Jones: “Outcomes for MOVE!*# have steadily improved over time. Based on the most current Fiscal Year (FY) 2012 data, over 70 percent of Veterans seen just once in MOVE!*# stop gaining weight or lose some weight. Over 50 percent of these Veterans lose at least 1 percent of their initial weight, and over 18 percent achieve a 5-percent weight loss. And longer-term data show that most patients tend to maintain these weight-loss trends.”

Lynn Novorska, MOVE!*# Dietitian Program Coordinator: “We also discovered that patients seen for a greater number of sessions—8 or more—over at least 4 months have much greater weight loss than those who participate less frequently. This ‘intense and sustained’ participation also helps patients to achieve a 5-percent weight loss in higher percentages. Eighty percent of them halt weight gain or lose some weight, more than 60 percent lose some weight, and over 25 percent lose 5 percent or more of their initial weight! Since 2010, we’ve been promoting this kind of participation in MOVE!*#, and the percentage of patients seen with intensity and sustainment has risen from 13 percent to 22.5 percent.”

Has MOVE!*# changed or expanded over the years?

Susi Lewis, MOVE!* Special Projects Coordinator: “Since the program was introduced about 8 years ago, the ways to participate have expanded greatly, from individual care to telephone care and group sessions. MOVE!* now also offers individual or group
care using clinical video telehealth technologies. So Veterans can get home-based care using either a home-messaging device or an interactive voice response system, with a care coordinator who monitors their progress and provides consultation as needed.”

Sophia Hurley, National Telephone Lifestyle Coaching Pilot Project Manager: “We are also wrapping up a pilot of a telephone coaching intervention where live coaches help Veterans lose weight using the support of a structured MOVE!® workbook. Telephone Lifestyle Coaching or ‘TLC’, is a healthy lifestyle telephone coaching pilot that includes MOVE!® TLC as the weight management intervention. The preliminary outcomes data on achieving weight management goals through the project were excellent. Of the over 5,300 Veterans who enrolled in the TLC pilot, for example, 34 percent of those who set a goal of losing weight successfully lost at least 5 percent of their starting weight after 6 months of coaching calls. Additionally, Veterans improved their consumption of vegetables and fruits, and increased their weekly minutes of moderate-intensity physical activity during their participation in TLC.”

Skidmore: “We’ve also recently introduced ‘Be Active and MOVE!’, a pilot that is designed to help sedentary Veterans gradually become more physically active to help manage their weight. We’re doing a multi-phase pilot of the program now at selected VA facilities. It’s designed to be administered simultaneously at medical centers and CBOCs, and we’ve had excellent preliminary results so far.”

Tony Rogers, MOVE!® Communications and Data Program Coordinator: “MOVE!®’s Web-based weight assessment tool, called ‘MOVE!23’, was successfully integrated with CPRS and is widely accepted throughout all VISNs. Over the years, we’ve made several software revisions to improve the functionality and security of the MOVE!23 application.”

What does the future hold for MOVE!® and for participating Veterans?

Jones: “We’re working on additional ways enhance the MOVE!® experience for Veterans and make it more to convenient for them to participate. For example, we’re currently developing Web- and mobile device-based tools to help Veterans better manage their weight—those apps should roll out next year. And we teamed up with our NCP Communications staff to develop an innovative series of Whiteboard videos that deliver NCP’s nine HL messages—specifically on Weight Management, Be Physically Active and Eat Wisely—in ways that that nicely augment MOVE!®. We feel that all of these initiatives and tools will help ensure that MOVE!® continues to provide Veterans with effective, evidence-based, patient-centered care that benefits them as much in the future as it has in the past.”

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 patient’s care did change here…very positive! Great team, great members, great tool, great process…what else would you expect from a facility that always places our Veterans FIRST!”

-- Dale Van Duyn, R.N., Clinical Information Systems Coordinator, Illiana (IL) HCS
Clinical Reminders Recently Released for Breast and Cervical Cancer Screening

Several recently released CPRS Clinical Reminders will help clinicians continue to provide women Veterans with the most up-to-date preventive care, according to Terri Murphy, NCP’s National Program Manager for Prevention Policy.

“These new women’s health clinical reminders were implemented to update breast cancer and cervical cancer screening and follow-up in VA,” Murphy explains. “We developed these new reminders because the existing national reminders on these topics had not been updated since March 2005. VHA clinical guidelines on screening for these two cancers changed significantly several years ago. There was also a need to re-align the existing My HealthVet (MHV) reminders with the new guidance, as well as to improve readability.”

The new reminders reflect revised guidance on the target age ranges for both screenings, but other changes are covered, too. “The new breast cancer screening discussion reminder for women in their 40’s reminds clinicians to have a one-time discussion with women ages 40 to 49 about when to start screening,” says Murphy. “The cervical cancer reminder reflects the addition of a 5-year screening frequency for women age 30 and older who get both a Pap test and an HPV test. There is also a new algorithm for following up on abnormal Pap test results.”

Released in mid-July, the new reminders were developed through a collaboration involving several VA partners. “Women’s Health Services—specifically Drs. Sally Haskell and Laurie Zephyrin—were co-clinical sponsors. Philip VanCamp and Dr. Bryan Volpp also provided invaluable IT and informatics assistance,” notes Murphy. “Their exceptional technical expertise was critical to producing excellent products and ensuring a smooth development process.”

The process began in late 2012 with the release of the initial test version and usability testing of the reminders, and continued through the development of a fourth and final test version in May 2013. “The Medical Centers in Northern California, Greater Los Angeles, Long Beach, and VA Loma Linda, and VISN 2’s Upstate New York Health Care System all did a great job as test sites,” she says. “And the National Clinical Reminders Committee, Clin4 team, and Ross Speir from the Usability Lab were important contributors, too.”

To support the new clinical reminders, NCP also developed a discussion guide on breast cancer screening for women in their 40’s for VHA clinicians, along with cervical cancer screening resources aimed at educating both patients and staff. These resources are available on the NCP Internet site and also available in the VA Depot for ordering in quantity. And work continues on updating other clinical reminders.

“Guidance on pneumococcal immunization recently changed to include two different pneumococcal vaccines on the adult schedule, so we’re now working on new national clinical reminders for this topic. We’ve also identified new test sites and started testing these reminders in mid-September,” says Murphy. “Field staff report that they’re happy to have the new Women’s Health clinical reminders and screening resources, which help them continue to provide Veterans with the most proactive and up-to-date care possible.”

The new Clinical Guidance is available at:
http://vaww.prevention.va.gov/Screening_for_Breast_Cancer.asp
http://vaww.prevention.va.gov/Colorectal_Cancer_Screening.asp
Preliminary Data Show the Value of MI Training at the Salem VAMC

According to former HBC Dr. Sarah Hartley, MI training has had a number of benefits for clinicians and Veterans at the Salem (VA) VAMC. “In the second quarter of FY 2012, we began evaluating a number of outcomes associated with MI training at our facility,” she explains. “I worked with colleagues to assess the value of MI for both staff and patients, and the early results have been impressive.”

MI training was provided to a variety of Salem staff, and their feedback has been overwhelmingly positive. “This pie chart shows how many different types of staff participated our MI training,” says Hartley. “I think it demonstrates that you can provide this training to a broad range of both clinical and non-clinical staff in VA, and it can be beneficial to all of them.”

The participants’ positive view of the MI training also was validated by statistical analysis. Led by Dr. Christina Shook, a former psychology resident who collected the data, the team assessed staff members’ use of key MI skills before and after training. “We evaluated 49 staff who completed all 16 hours of MI training—that is, 4, 4-hr training sessions,” says Hartley. “The table below shows that their average scores improved post-training in all five categories of MI skills. And in almost all of the categories, the changes were statistically significant.”

<table>
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<th>Motivational Interviewing Skill - Staff</th>
<th>Pre-Training Score</th>
<th>Post-Training Score</th>
<th>Statistical Significance (P-value)</th>
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<td>Spirit of MI</td>
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<td>3.92</td>
<td>&lt;0.001*</td>
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<td>Complex Reflections</td>
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<td>37.86</td>
<td>0.009*</td>
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<td>% Open-Ended Questions</td>
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<td>Ratio of Reflections:Questions</td>
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<td>MI-Adherent Behaviors</td>
<td>50.05</td>
<td>82.57</td>
<td>&lt;0.001*</td>
</tr>
</tbody>
</table>

*Statistically significant (P < 0.05)
The Salem team also assessed the value of a women’s health SMA, which was initiated in the summer of 2011, based on an MI model, and led by MI-trained staff. “Dr. Shannon Cohen developed the Women’s Lipid Clinic SMA here, and the results have been excellent, as you can see in the bar graph below,” Hartley explains. “It shows the percentages of patients’ responses to statements about their experience with that SMA. Patient satisfaction was very high, and we think that it’s due in large part to the incorporation of MI.” Both staff and patients like the new SMAs, with patients crediting the SMAs for the information, motivation, and group support they provide.

Taken together, these early data from Salem demonstrate the broad value of MI training, for example, in increasing staff communication skills, SMA effectiveness, and Veteran satisfaction. “We’ve continued to train a variety of staff here in MI, and we’ll soon have more outcomes data to assess,” says Hartley, who now works as the facility’s Program Director for Primary Care-Mental Health Integration, but is still part of the facility’s HPDP Committee. “In addition to the lipid clinic, we’ve started looking at metrics like BMI and weight for patients in our other SMAs, including groups targeting coronary artery disease, healthy living, and difficult metabolic conditions. Veterans are really engaging with the SMAs, and the early health outcomes look promising!”

Patient Quotes on Women’s Lipid Clinic SMA

• “This group helps to keep me motivated to stay healthy. It helps to listen and share with others our experiences with exercising and choosing the right foods. I’ve learned a lot from others...”
• “I have reached some of my goals. I learned things that I didn’t know before...”
• [The benefits included] “group support to understand I’m not the only one, and tips and motivation.”
• [The group helped me to] “make healthier decisions about my diet, encouraged me to exercise... [It] made me more aware that other women deal with some of the same issues as I do, and [I] received new ideas.”
NCP is happy to announce that Bryan Volpp, M.D., has agreed to be officially ‘detailed’ to NCP as a 0.125 FTEE Informatics Consultant. Dr. Volpp is an infectious diseases physician and a nationally recognized expert in the field of VA informatics, particularly the CPRS clinical reminders. He will assist NCP with national CPRS and My HealtheVet prevention clinical reminders, mentor detailed Clinical Applications Coordinator (CAC) positions (see announcement below), and provide consultation on a wide variety of other projects, including integration of the VHL and Health Risk Assessment (HRA) with CPRS and enhancement of the Veterans Health Information Systems and Training Architecture (VISTA) immunization files. Dr. Volpp has supported NCP for years and we are thrilled to have him on our staff.

NCP is also seeking one or two CACs to help create and maintain prevention-related clinical reminders sponsored by our National Program Office. Funding for two 0.2-detailed FTEE positions is available, and Dr. Bryan Volpp will be part of the NCP team and available for consultation and support. If you are interested and have at least an intermediate level of expertise with clinical reminders, please contact Terri Murphy, R.N., M.S.N. (annterri.murphy@va.gov) no later than November 15, 2013.

NCP is pleased to announce that the following new HPDP staff educational tools are now stocked in the VA Forms Depot:

- **10-Step Health Coaching Process Using the My Health Choices Tool** offers tips and strategies for applying the Veteran-centered health coaching strategies featured in Patient Education: TEACH for Success (TEACH). These steps may be used with the My Health Choices tool to partner with a Veteran to set a SMART goal, then plan to accomplish it.
- **Clinician Guide to SMART Goals** offers examples of SMART goals for each of the nine HL messages.

If you are interested in ordering these tools at no cost to your facility, please talk to your facility HPDP Program Manager.

Several articles of interest to VHA clinicians were recently published:

- “The state of health in the United States,” Fineberg HV. *JAMA.* Published online July 10, 2013

NCP programs were mentioned recently in the following articles:


Clinicians interested in learning more about the concept of “overdiagnosis” may find these Web sites informative:

- “The Do No Harm Project” from University of Colorado School of Medicine’s Department of Medicine, available at: http://www.ucdenver.edu/academics/colleges/medicalschool/departments/medicine/GIM/education/DoNoHarmProject/Pages/Welcome.aspx.
The following article from the Center for Advancing Health provides some background for patients on understanding health risks: [http://www.cfah.org/prepared-patient/seek-knowledge-about-your-health/uncovering-your-healthrisks#](http://www.cfah.org/prepared-patient/seek-knowledge-about-your-health/uncovering-your-healthrisks#).


In FY 2013, **TEACH and MI facilitators** trained:

- 53 **TEACH** facilitators (472 have been trained since 2010)
- 29 **TEACH** and MI facilitators in Clinician Coaching (212 have been trained since 2011)

Approximately 3,500 staff participated in 371 local TEACH courses in FY 13; over 20,000 have been trained since October 2010.

In early September, NCP’s Sue Diamond attended a **VISN 23 HPDP Program strategic planning meeting** that included HPDP Program Managers, HBCs, MOVE! Coordinators, and Veterans Health Education Coordinators. VISN 23 HPDP Program Leader Jaime Bland organized the meeting, which provided an opportunity for collaboration and planning, and allowed attendees to provide valuable input to NCP on ways to promote and integrate the Healthliving Assessment (HRA) into clinical care.

NCP’s Sue Diamond and Kathy Pittman recently partnered with the Office of Patient Centered Care and Cultural Transformation’s Janet Vertrees to give a VeHU session as part of the “RN Care Manager Boot Camp” series. The presentation is now available on demand in VeHU. To access the presentation, go to [http://www.vehu.va.gov/default.cfm](http://www.vehu.va.gov/default.cfm), login, click the **On Demand** button, then click on presentation 10390 entitled, “Unlocking Patients’ Potential: The Impact of Patient-Centered Care and Shared Decision Making.” The presentation promotes the work of HPDP Programs and highlights training opportunities and other resources available to RN Care Managers through HPDP Programs. Special thanks to HBC Jen Hightower (Portland VAMC) and VISN 17 staff for their assistance with the presentation.

In August 2013, the following new clinical guidance was posted:

- **An updated Pneumococcal Immunization Guidance Statement**, which is available at: [http://vaww.prevention.va.gov/Pneumococcal_Immunization.asp](http://vaww.prevention.va.gov/Pneumococcal_Immunization.asp). The revisions include the addition of pneumococcal conjugate vaccine (PCV13, Prevnar 13®) vaccine as an additional recommended pneumococcal vaccine, and a slight change to the guidance on revaccination with pneumococcal polysaccharide vaccine (PPSV23, PNEUMOVAX®). These new recommendations are complex and the full guidance statement should be read carefully. National clinical reminders for both vaccines are being developed.
- **A new Screening for Prostate Cancer Guidance Statement**, which is available at: [http://vaww.prevention.va.gov/Prostate_Cancer_Screening.asp](http://vaww.prevention.va.gov/Prostate_Cancer_Screening.asp)
Kevin Buckner recently joined NCP as a Program Support Assistant. Prior to coming to NCP in August, he worked at the Durham (NC) VAMC for 15 years. Kevin is a Veteran of the U.S. Air Force, and was honorably discharged after serving in South Carolina, the Republic of Korea, Germany, and several other European stations. He looks forward helping NCP staff develop policies and programs that will enhance Veteran health care.

Kelly Kimple, M.D., M.P.H., is our newest resident from the University of North Carolina at Chapel Hill (UNC) Preventive Medicine Residency Program. She is a second-year resident who completed her residency training in Pediatrics at UNC. She received her medical and public health degrees from UNC and received her undergraduate degree from the University of Pennsylvania. Her interests include health disparities, underserved populations, and global health.

Martha Larson, R.N., B.S.N., M.S., joined NCP in September as Project Coordinator for the VHA’s Lung Cancer Screening demonstration project. Prior to joining NCP as a part-time contractor, she worked for the Durham VAMC as a Nurse Practitioner serving patients with chronic pain. She has held positions as study coordinator at the National Institutes of Health’s Clinical Center, as well as positions in the private sector. Marty began her nursing career in the U.S. Navy at Corpus Christi, Texas, and the National Naval Medical Center. She is indebted to our Veterans and feels fortunate to be working to improve their well-being.

Congratulations to Megan Skidmore, who received the “Above and Beyond” NCP Staff Award for her outstanding contributions on several MOVE!* team projects. This quarterly, peer-nominated honor recognizes Megan’s work as MOVE!* Physical Activity Program Coordinator, including her recent acquisition of NCP’s office treadmill.

Congratulations to several NCP staff members whose efforts garnered recognition as 2012 VHA Communications Awards. Jay Shiffler, Susi Lewis, Dr. Ken Jones, Lynn Novorska, Megan Skidmore, and Dr. Ted Slowik composed the team that won a 1st Place in VHA’s Innovation category for NCP’s Healthy Living Messages Whiteboard Videos. Shiffler and Slowik also collaborated to develop NCP’s 2013 Highlights Report, which won 2nd Place in the Special Purpose Publication category. For the October 2012 launch of the Diabetes Prevention Program, Dr. Linda Kinsinger, Shiffler, and Slowik partnered with Ralph Heussner (Minneapolis VAMC) and Jean Stith (VHA Communications) to garner 3rd Place in the Special Events category.
NCP staff are now enjoying the in-office health benefits of a recently installed treadmill work station. Since installing the treadmill in late August, staff members have worked and walked a total of 700,498 steps, burned almost 14,000 total calories, and traveled a total of 141.5 miles!

In September, Dr. Linda Kinsinger presented at Dartmouth College’s Preventing Overdiagnosis Conference, which attracted attendees from 28 countries. Titled “Veterans Health Administration activities to reduce overuse of cancer screening tests,” Kinsinger’s presentation was one of seven oral and poster abstracts presented by VHA employees at the 3-day conference.

Success Stories

“The Best Thing I Ever Did”:
Veteran John Sarris Gets the Coaching and Positive Reinforcement Needed to Lose 30 Pounds

It was a phone call from his primary care provider that started everything in motion for Veteran John Sarris.

“She wanted to put me on more pills—increase my statins and start me on metformin for diabetes,” he says. “But I said, ‘no way, let me try it my way first.’” John’s provider then suggested that a “coach” might help with the lifestyle changes needed to prevent the medication adjustments. At first, John resisted. But as he was getting dressed a few days later, he had a realization. “I was sick and tired of trying to squeeze into my pants,” he says. “It was the wake-up call I was waiting for.” John agreed to the TLC referral and says, “it was the best thing I ever did.”

John Sarris (R) and June Laver at the Philadelphia VA Medical Center
Support, Awareness

John attributes much of his success to his coach, Erin. “She was very informative and patient,” he explains. “She shared the latest research findings in a supportive manner—even when they differed from my beliefs.” And importantly, she never used the words “you should” or “do this.”

In terms of lifestyle changes, John believes that the most important thing was becoming aware of his unhealthy activities. “I realized, for example, that the taste and enjoyment I get from eating 4 cashews is the same as I’d get from 100 cashews,” he says, “but without the high calorie count.” Accurate expectations also have helped keep him on track, especially after he started to lose weight. “Erin told me that I might not lose another pound for a week, or maybe for 5 weeks,” he reports. “But just having that bit of information prevented me from getting discouraged and backsliding.”

John’s also realized that it’s essential to know what you’re putting into your body, and be aware of those calories. Sweets remain his biggest temptations, but he’s learned to make cakes and brownies with sugar-free mixes, for example. “If I want to cheat, I cheat,” he says, “but now I really don’t feel like I’m missing anything.”

Do-able

In addition to making changes to his eating habits, John’s also incorporated regular physical activity. “I had this treadmill that I was using as a clothes rack,” he says. “But I saw on TV that alternating 5 minutes of intense walking with a few minutes of walking at a comfortable pace can be effective for weight loss. So I started doing this and found that brief bursts of intense activity were easier to complete than sustained intense activity. Now, I put the TV on and walk—it’s really do-able!”

When John realized that he’d lost 30 pounds through TLC, he almost didn’t believe it—until he tried on those same old pants. “They fit comfortably, and I even fit into a pair of pants that hadn’t fit in 20 years,” he recalls. “It was a great feeling!” Several months later, John met an old acquaintance who immediately recognized his weight loss. Having someone notice that change was “really reinforcing” for him.

Positive Reinforcement

At a subsequent visit to his provider, John got his labs re-checked. “When the results came back later that afternoon, my provider was so excited that she called me on my way home,” he says. “She said she’d never seen that happen before!” Backed by “nothing but positive reinforcement”, John has now maintained his weight loss for 7 months. He also feels confident that he has the knowledge he needs to continue to lose even more pounds.

John tells other Veterans to be open to trying TLC. “Stick with your coach and listen to what he or she is telling you,” he explains. “Don’t block anything out. And create your own remedies!”
### CALENDAR of EVENTS

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<tr>
<th>Event Type</th>
<th>Regular Call</th>
<th>1st Tuesday of the month</th>
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<tr>
<td>NCP Education Conference Call</td>
<td>2nd Tuesday of the month</td>
<td>1:00 pm ET</td>
<td>1-800-767-1750, Access Code 18987#</td>
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<td>• Upcoming calls—November 12, December 10</td>
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<tr>
<td>Health Promotion/Disease Prevention Conference Call</td>
<td>1st Tuesday of the month</td>
<td>1:00 pm ET</td>
<td>1-800-767-1750, Access Code 35202#</td>
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<td>• Upcoming calls—November 5, December 3</td>
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<tr>
<td>VISN MOVE!® Coordinators Call</td>
<td>2nd Tuesday of the third month of each quarter</td>
<td>3:00 pm ET</td>
<td>1-800-767-1750, Access Code 59445#</td>
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<td>• Upcoming call—December 10</td>
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<tr>
<td>VISN/Facility MOVE!® Coordinators and Physician Champions Call</td>
<td>2nd Tuesday of the first and second month of each quarter</td>
<td>3:00 pm ET</td>
<td>1-800-767-1750, Access Code 59445#</td>
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<td>Veterans Health Education Hotline Call</td>
<td>4th Tuesday of the month</td>
<td>1:00 pm ET</td>
<td>1-800-767-1750, Access Code 16261#</td>
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<td>• Upcoming calls—November 26, December 24</td>
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<tr>
<td>National Health Behavior Coordinators Call</td>
<td>2nd Wednesday of the month</td>
<td>12:00 pm ET</td>
<td>1-800-767-1750, Access Code 72899#</td>
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<td>• Upcoming calls—November 13, December 11</td>
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**HealthPOWER!** is an award-winning, quarterly publication from the VHA National Center for Health Promotion and Disease Prevention, highlighting health promotion and disease prevention activities in VA.

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**VHA National Center for Health Promotion and Disease Prevention (NCP)**

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**NCP MISSION**

The VHA National Center for Health Promotion and Disease Prevention (NCP), a field-based office of the VHA Office of Patient Care Services, provides input to VHA leadership on evidence-based health promotion and disease prevention policy. NCP provides programs, education, and coordination for the field consistent with prevention policy to enhance the health, well-being, and quality of life for Veterans.

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