



WHOLE HEALTH

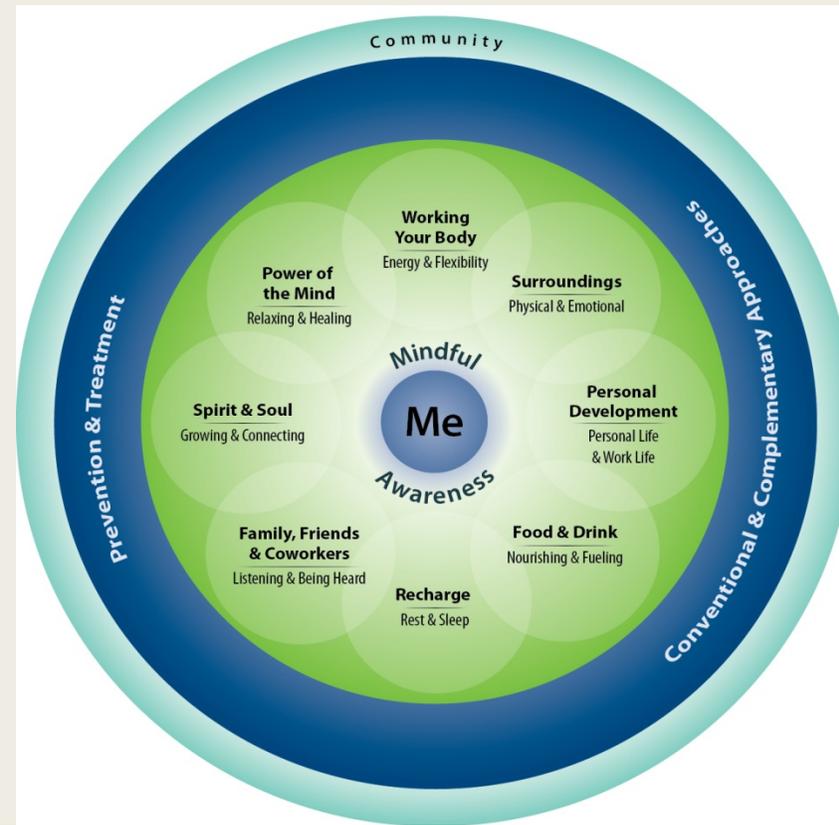
Sustainability



Whole Health System IS Healthcare Delivery Model



Components of Health and Wellbeing



Testimonial

- “This is the first time I have experienced a group setting of other veterans talking about their life experiences. I feel much more comfortable in the group setting than with one on one counseling I am accustomed to.

We respect and listen to one another. No one judges us. **I have learned, I am not alone. I'm not as different as I thought I was.** We veterans have a lot more in common than I could have ever imagined. We all struggle with our own 'demons.' I look forward to my Tuesday afternoons with my fellow veterans. This has been a great experience for me and I am truly grateful for the opportunity.”

Ms J.S. Participant in Taking Charge of My Life and Health

EQUIP-SELF-CARE

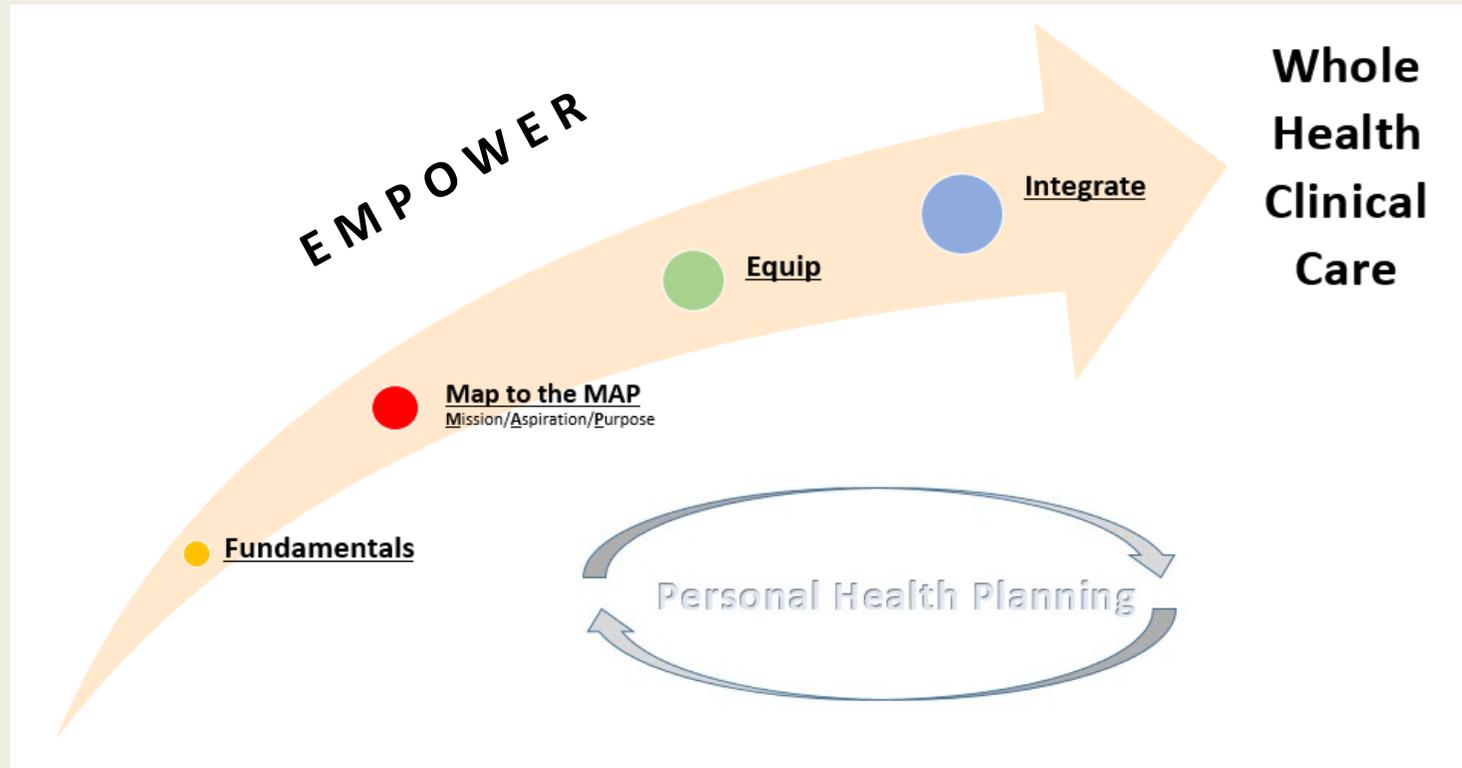


Testimonial

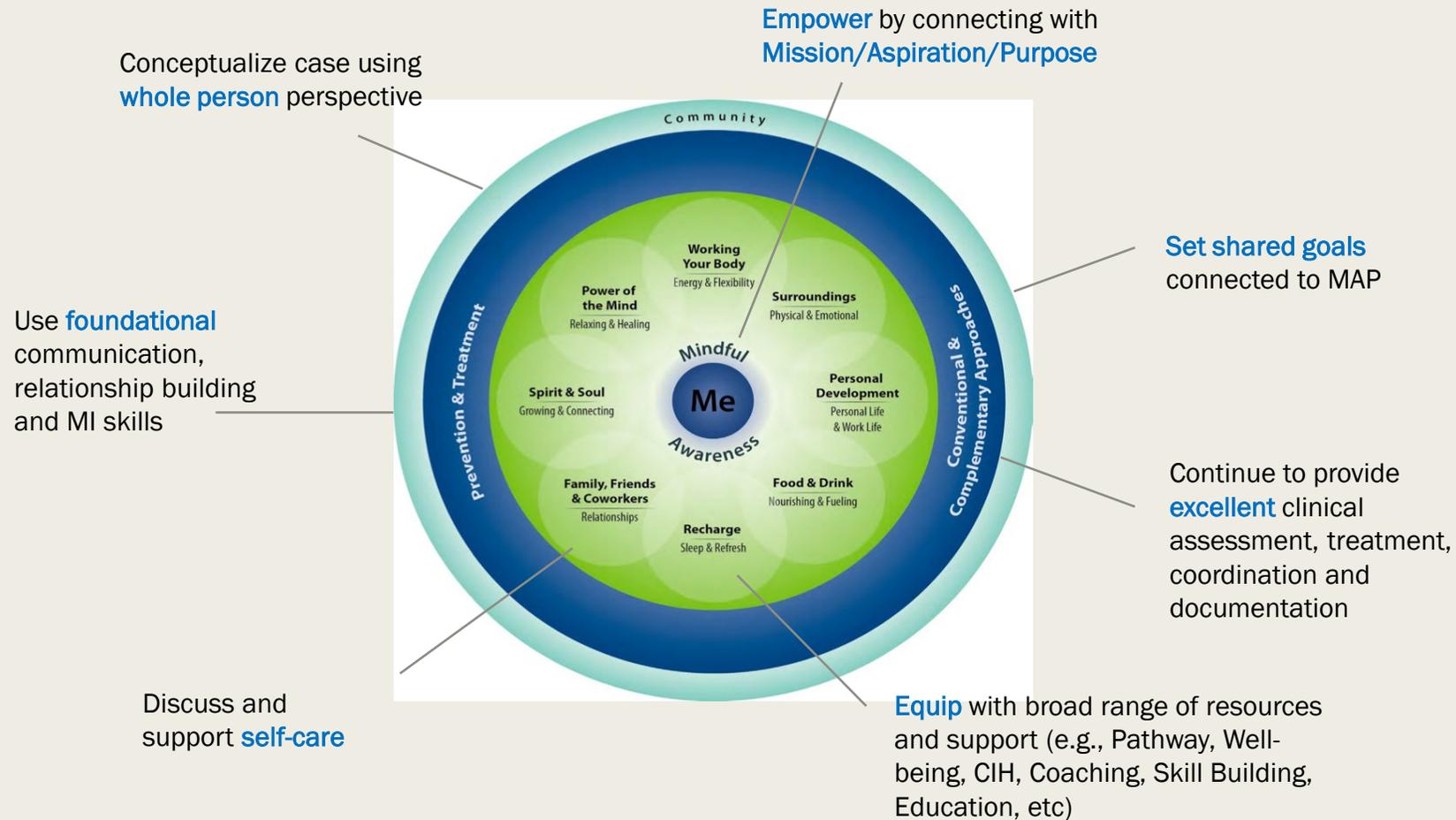
- When you have PTSD, you don't realize that you're not flexible. You get so rolled up into a ball of yarn that you don't realize the stress and tension and everything that you're carrying. The yoga has improved my flexibility and ability to move. I've felt stuck at times because of the trauma, and the yoga has helped me feel empowered to move my body and to realize that I have control over myself. All of your symptoms are connected in some way, so your mental trauma is affecting your body physically. What's great is it's not military style. It's not like dress right dress, formations, pushups, do this, do that. We'll pick a topic like breathing and focus on whatever concerns you're hanging onto during that session. In every movement that you're making, like a warrior pose, you're specifically focusing on releasing whatever it is that you're dealing with.

Male Army Veteran
Participant in trauma informed yoga, acupuncture, Tai Chi & prolonged exposure

IMPLEMENTATION: JOURNEY TO WHOLE HEALTH CLINICAL CARE



Whole Health Clinical Care In Practice



TESTIMONIAL

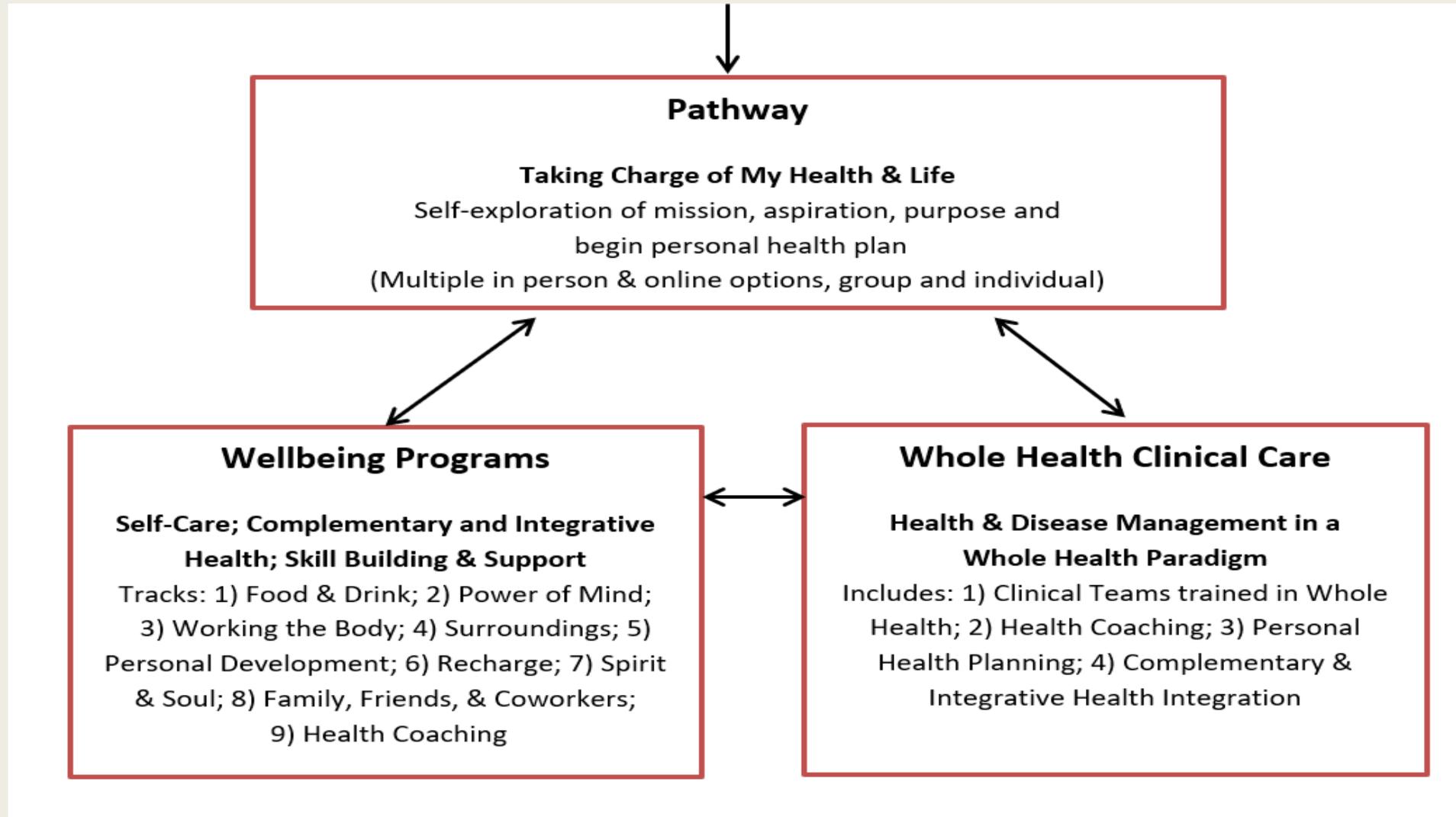
“In recent months, [Mr. X] has been in a multi-pronged therapeutic program at the VA. He participates with a psychologist in a trauma-focused psychotherapy, prolonged exposure therapy, takes medication, uses acupuncture, and attends a trauma-based yoga class. He also works with a whole-health coach to target specific well-being goals, such as weight control and proper nutrition. Per [Mr. X], everything he’s doing to alleviate his PTSD symptoms has helped with his depression, anxiety, anger, and physical issues.”

“Everyone I talk to about it, every Veteran that I see, has been trained to suck it up,” says [Mr. X], his voice cracking with emotion. “We have to realize that we don’t have to suck it up. Twenty people kill themselves every day because they suck it up. They don’t get help. If I can help just one person get off that list a day, then I want to help, too.”

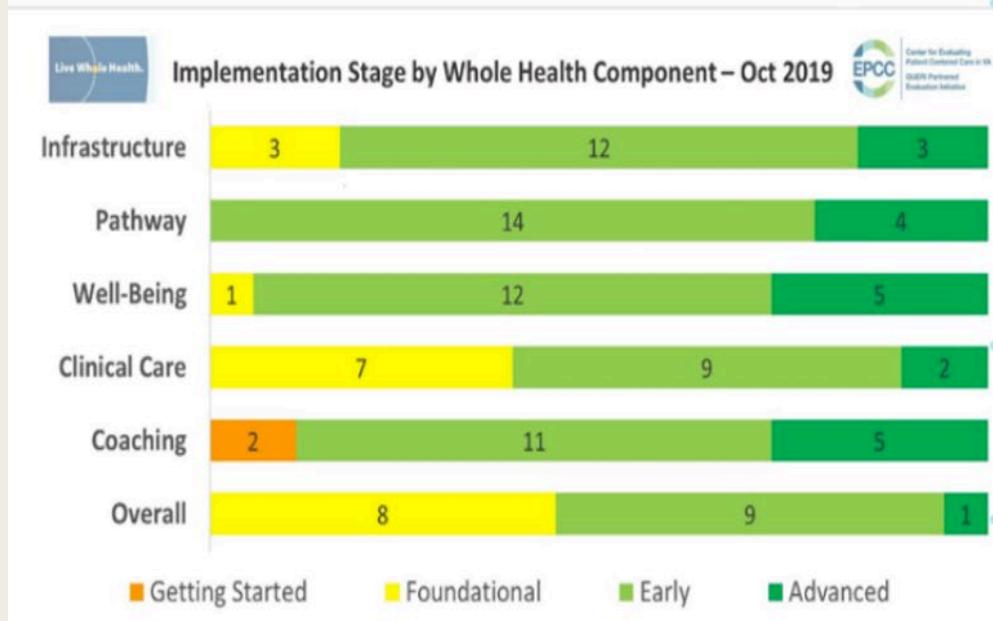
January 16,2019

VA Research Communications

THE FLOW WITHIN A WHOLE HEALTH SYSTEM OF CARE



Implementation: All 18 Sites made progress along the implementation continuum.



Distribution of Sites by Stage of Implementation, October 2019

- Foundational = 8
- Early = 9
- Advanced = 1
- Most foundational sites close to early
- Two early sites close to advanced

Variation: Implementing CIH and well-being services furthest along; implementing WH clinical care slowest to progress.

Key Facilitators:

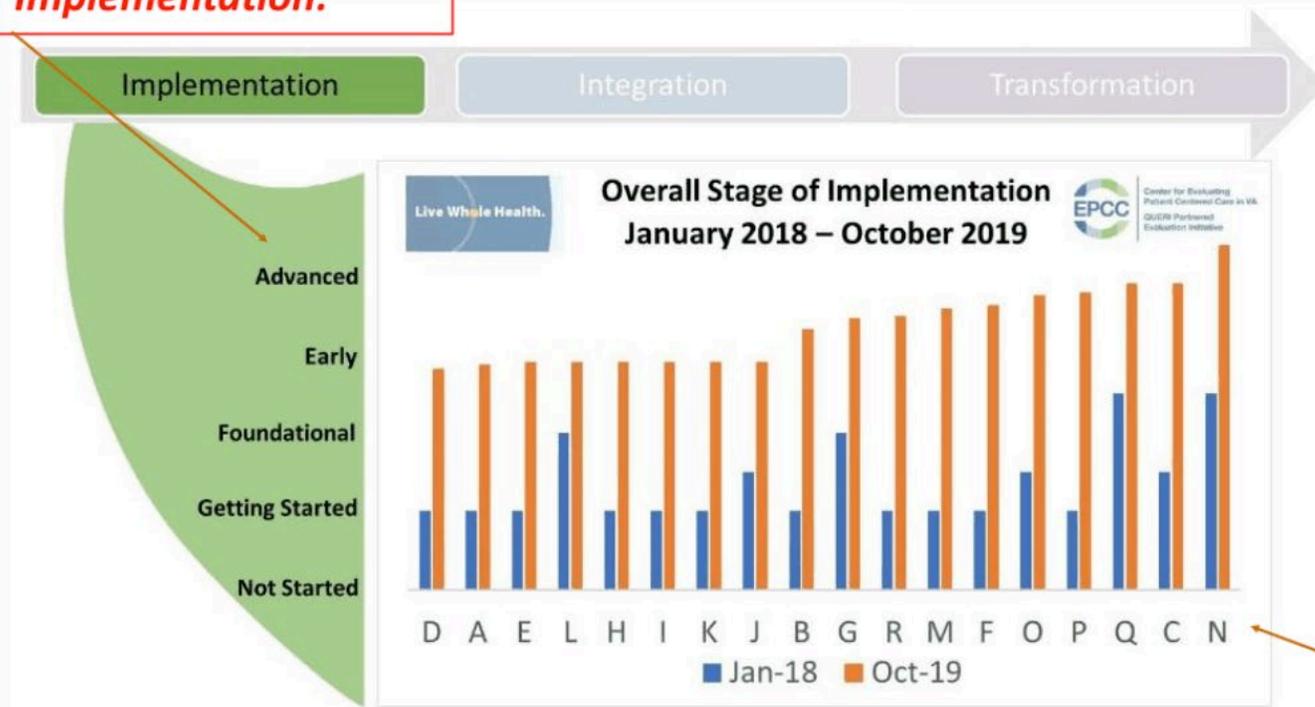
- Strong leadership with tangible support for WH
- Organizational culture: learning organization

Key Barriers:

- Infrastructure constraints
- WH as program (not approach)
- Clinical/facility incentives misaligned

Q.: What are the X & Y axes for the implementation phases scale?

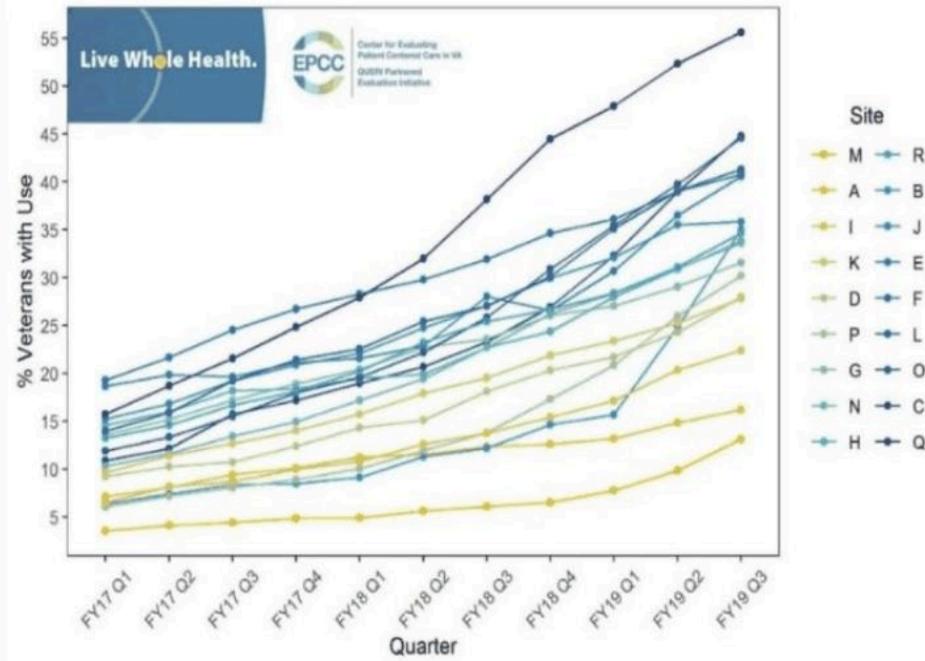
Y Axis: Stage of Implementation:



X Axis: Each Flagship Site, Represented by a Letter (not site name)

Figure 2: Stage of Implementation at 18 flagship sites, Jan 2018 and Oct 2019

Utilization: 31% of Veterans with chronic pain engaged in some WH services across the 18 sites (Q3FY19).



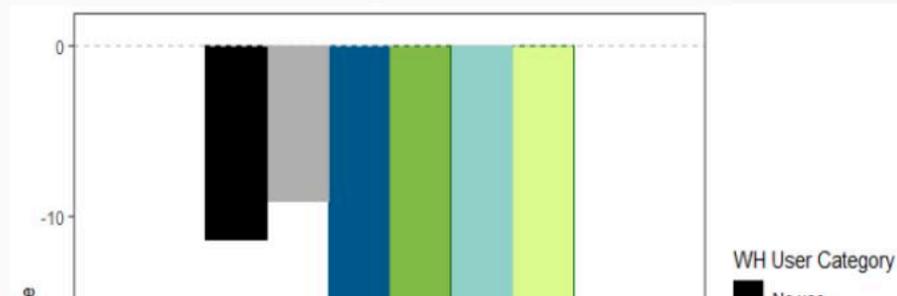
Changes in WHS Utilization Among Veterans with Chronic Pain

- At 1 flagship site, engagement = 55%
- Expectation: 44% Veterans with chronic pain will engage in WH services by the end of 2020.
- Increases in utilization since 2017:
 - Veterans with chronic pain: 193%
 - Veterans with MH diagnoses: 211%
 - Veterans with chronic conditions: 272%
- CIH utilization:
 - 26% of Veterans with chronic pain
 - Includes services delivered in the community
 - Increasingly being delivered within VA

Impact on Veterans: Opioid use decreases with WHS services use for Veterans with chronic pain.

Opioid dose levels decreased for all Veterans across the evaluation time period –

Rate of decrease in Flagship sites similar to non-flagship VAMCs – reduction across the board



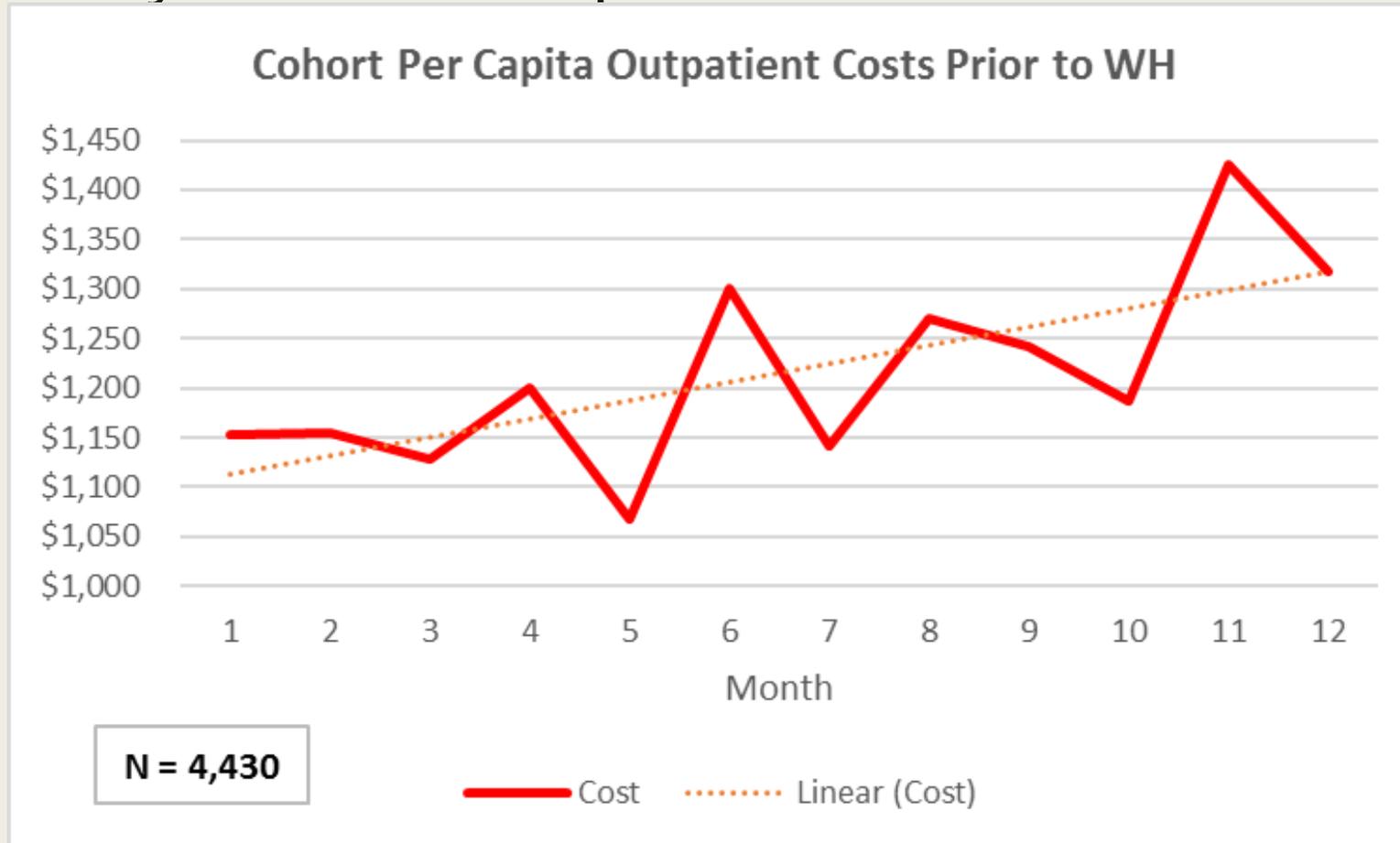
Impact on Veterans: Comprehensive WHS service use may produce pharmacy cost savings.*

- Veterans with MH conditions:
 - 3.5% annual increase in pharmacy costs for WHS service users
 - 12.5% annual increase in pharmacy costs for non-users
- Veterans with chronic conditions:
 - 4.3% annual increase in pharmacy costs for Comprehensive WHS service use
 - 15.8% annual increase in pharmacy costs for non-users
- Data not yet available to determine if WHS service use results in:
 - Cost savings;
 - Lower utilization of more expensive care;
 - Avoiding costly procedures;
 - Reducing ER visits; or
 - Reducing inpatient admissions and other types of care

**These are preliminary findings.*

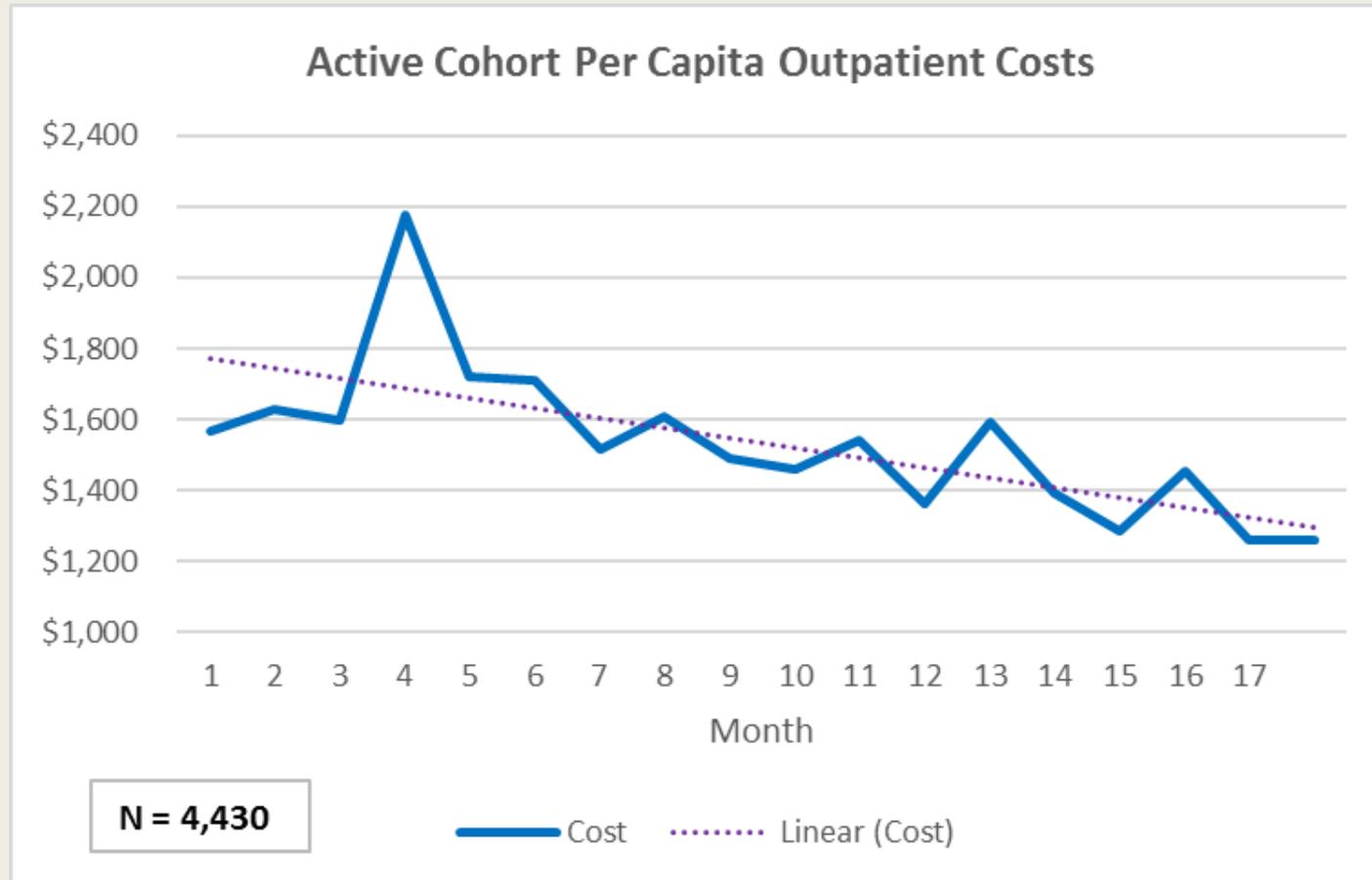
NATIONAL COSTING DATA

FY 18 January Cohort: Outpatient Costs Prior to Whole Health

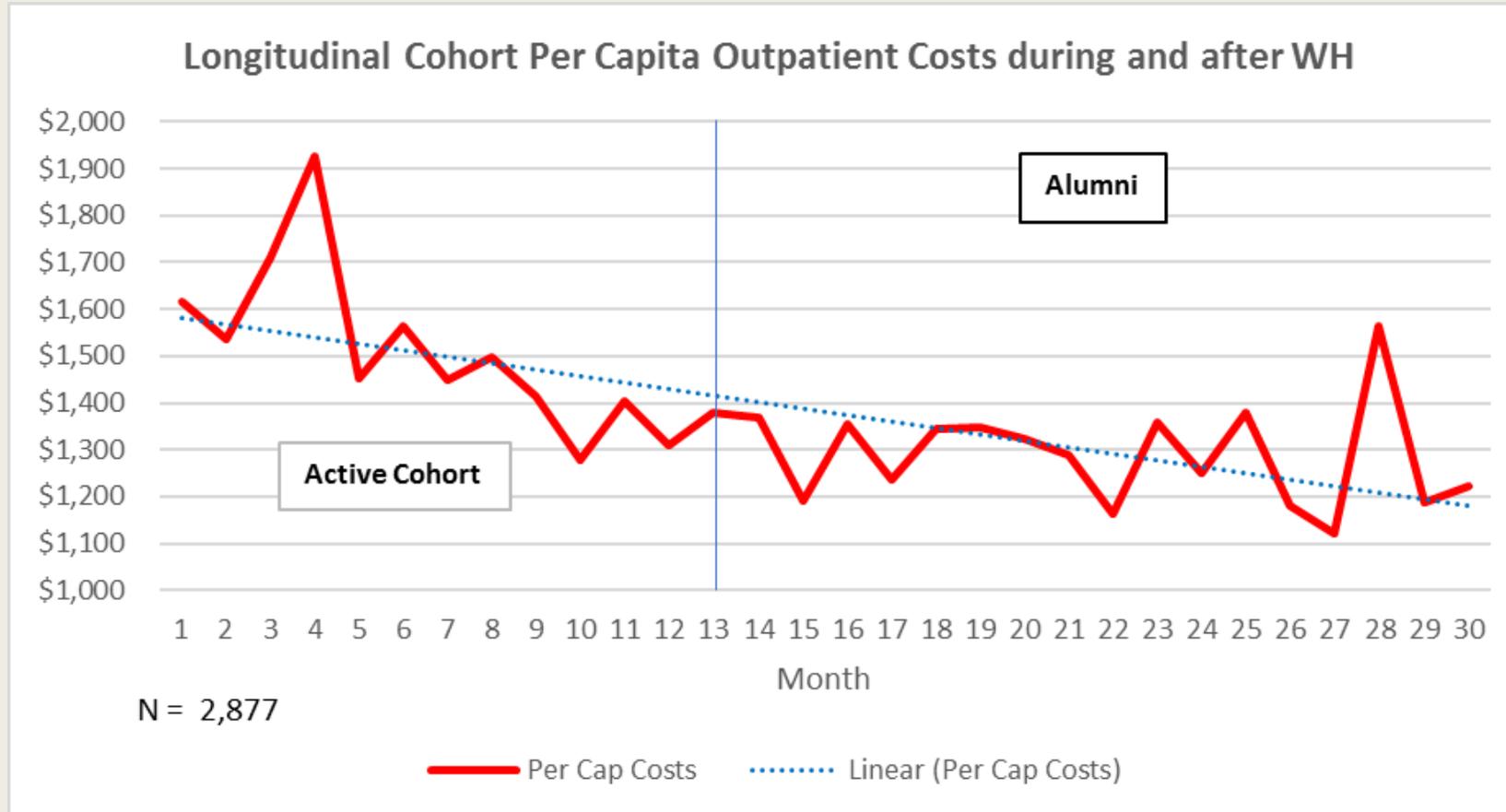


NATIONAL COSTING DATA

FY 18 January Cohort: Outpatient Costs During Whole Health Use

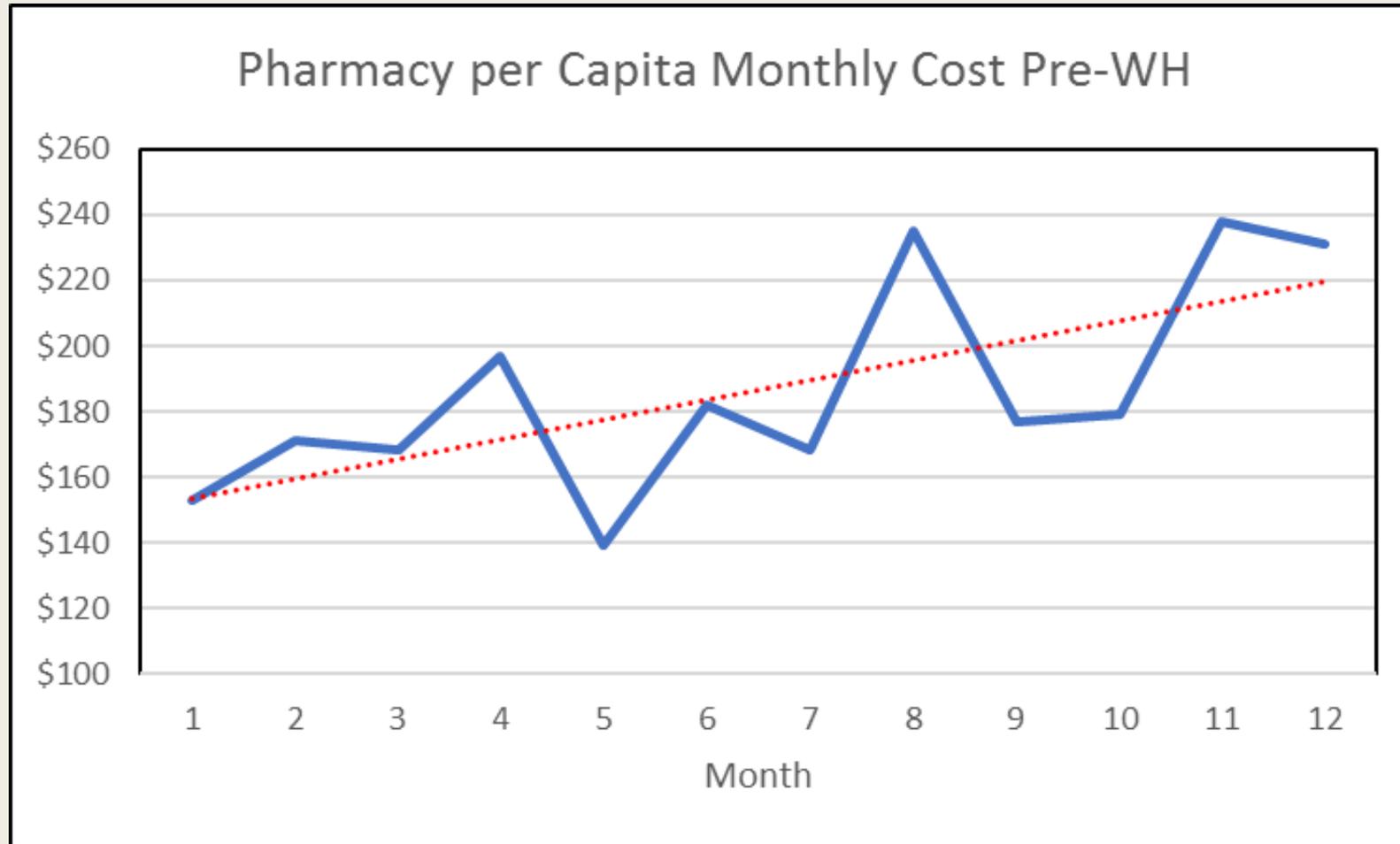


FY18 January Cohort Active & Alumni: Outpatient Costs



NATIONAL COSTING DATA

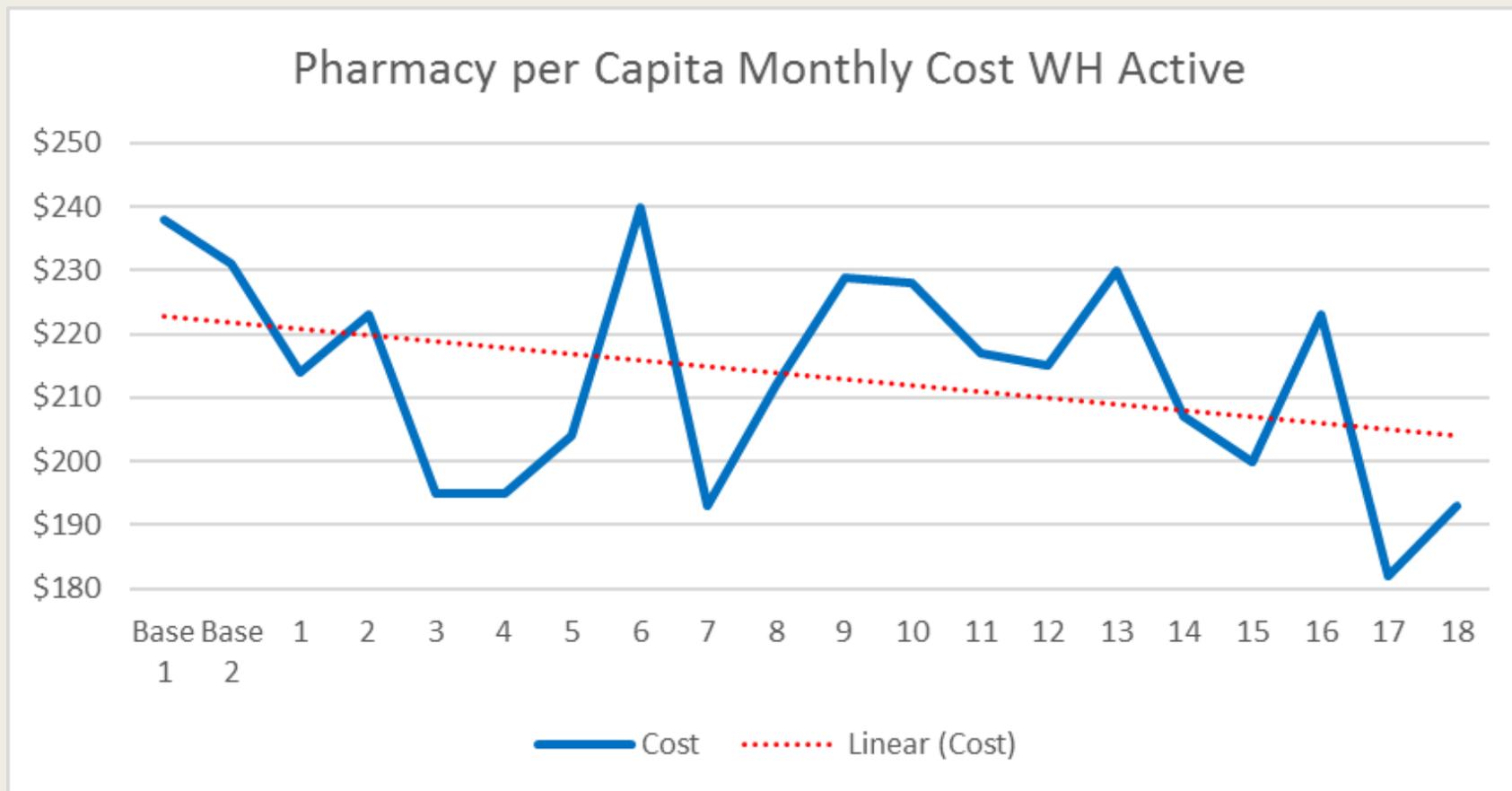
FY18 January Cohort: Pharmacy Costs Prior to Whole Health



41.9% increase
n = 4,430

NATIONAL COSTING DATA

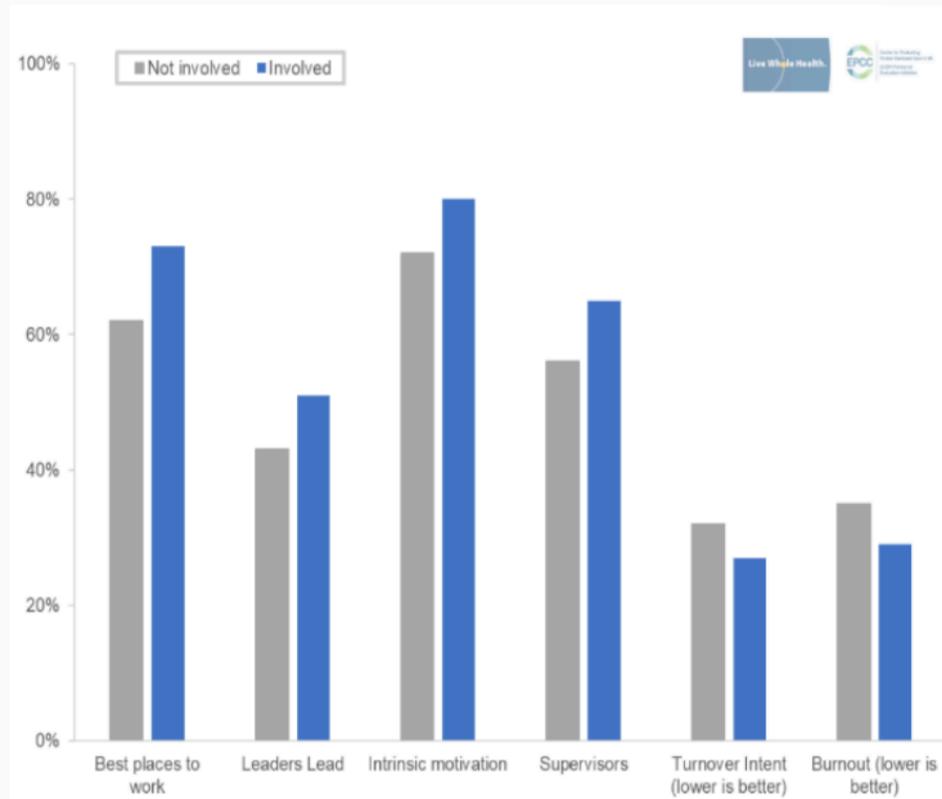
FY18 January Cohort: Pharmacy Costs During Whole Health Use



5.8% reduction at 12 months 8.5% at 18 months

n = 4,430

Impact on Employees: Involvement in providing WH was associated with important employee outcomes.



Employee Engagement Index, Best Places to Work, Burnout, and Turnover by individual involvement with any WHS activity at flagship sites.

- Employee involvement expanded from 2018-2019 in all sites.
- Variation across clinical areas, greatest uptake in primary care, mental health, rehabilitation, and home/community care.
- Employees who reported involvement with WH also reported:
 - Their facility as a 'best place to work'
 - Lower voluntary turnover
 - Lower burnout
 - Greater motivation
- Facilities with higher employee involvement
 - higher ratings on hospital performance, as measured by *Strategic Analytics for Improvement and Learning (SAIL)*.
 - had higher ratings from Veterans on receiving patient-centered care as measured in the *Survey of Healthcare Experiences of Patients (SHEP)*.