



Federal Health Matters

Addressing Long Wait Times for Mental Health Care After VA Survey

A letter from U.S. Senator Patty Murray (also chairman of the U.S. Senate Committee on Veterans' Affairs) sent to Robert A. Petzel, MD, the top health official at the Department of Veterans Affairs, says improvements are needed after a VA survey revealed that a substantial number of VA mental health care providers nationwide don't feel as though they have adequate resources to provide timely mental health care to veterans. The survey, requested by Senator Murray, indicated that nearly 40% of the surveyed providers said they can't schedule an appointment at their own clinic within the VA-mandated 14-day window, 70% reported they didn't have the needed staff or space to attend to the mental health of the veterans they serve, and 46% cited the lack of off-hour appointments as a barrier preventing veterans from accessing care. At the time of this survey, 18 veterans a day were committing suicide.

Murray writes in her letter:

"The sad truth is that veterans who call to get a VA appointment have at least made the decision to reach out to the VA for help. That is the critical step in accessing care, and it is not acceptable to have veterans, who have stepped up and shown the courage to ask for help, to be denied that care. Additionally, there are many veterans who, because of their mental illness, are unwilling or unable to navigate the VA system to get the help they need. Many who have Post Traumatic Stress Disorder may develop severe symptoms a year or more after they return home.

VA must find a way to reach out to those veterans, and not wait for them to contact VA."

VA Campaign Launched With the Goal of Ending Veteran Homelessness by 2015

With studies reporting more than 75,000 veterans homeless on any given night, "Make the Call," a nationwide outreach initiative to end homelessness, has been launched to inform homeless veterans about the Department of Veterans Affairs' special programs to end homelessness among veterans by 2015. At press time, 28 communities across the nation planned to host special programs this fall describing local services for homeless veterans, their families, and those at risk of becoming homeless.

Secretary of Veterans Affairs Eric K. Shinseki said, "Those who have served this nation as Veterans should never find themselves on the streets, living without care and without hope."

Studies also indicate that about 135,000 spend at least 1 night at a homeless shelter each year.

A toll-free number has been available from the VA since March 2010 to provide assistance to homeless veterans, their families, and at-risk people. Calling 877-4AID-VET (or 877-424-3838) will connect callers with trained professionals around-the-clock. The VA plans to spend \$3.4 billion this fiscal year to provide homeless veterans with health care and another \$800 million in specialized homeless programs. The VA is focusing on more long-term solutions such as prevention, employment, permanent housing vs temporary, shelter-based services.

Shinseki asserts, "Working with our partners in state and local government, the non-profit and the private sectors, we can restore our homeless veterans and their families to the lives of dignity they've earned."

Probing a Probe's Efficacy in Evaluating Cardiovascular Health

ImaCor Inc., a manufacturer of hemodynamic services, developed the ClariTEE, a miniaturized disposable TEE probe, which can remain in place for up to 72 hours and provides all standard monoplane views. Five hours after a cardiac arrest, a 73-year-old female patient was brought to the intensive care unit (ICU), where she was sedated and paralyzed for induction of hypothermia. The ClariTEE was used to allow monitoring of cardiac functioning, which is crucial during the induction, maintenance, and warming phases of therapeutic hypothermia.

In more than half of the cardiac and general ICU patients studied, TEE monitoring with the TEE monitoring systems led to significant changes in hemodynamic management, resulting in economic benefits greatly exceeding the \$1,000 cost of the probes used. Hospital charges were reduced by at least \$504,000 in a noncardiac ICU group of 68 patients, out of which hemodynamic management was changed in 28 (41%). The 68 probes used cost \$68,000. This represents a gross savings of more than 7 times the cost of the probes.

In the cardiac surgery group of 46 patients, 5 patients did not require surgical reexploration after TEE monitoring, representing a \$150,000 reduction of hospital charges. Another

\$414,000 in hospital charges were reduced due to the changed fluid and pressor administration in 23 patients (50%). With the total reduction being \$564,000 and the cost of 49 probes being \$49,000 (some patients used more than 1 probe), gross savings were 11 times the cost of the probes.

Breast Cancer Screenings Urged by VA

The VA outperforms private health care systems with breast cancer screenings with figures at 87% of eligible women receiving mammograms. With 1 in 8 women receiving a breast cancer diagnosis, the VA urges all female veterans to discuss appropriate breast cancer screenings, such as mammograms, with their health care providers. Despite the high number of breast cancer diagnoses, the overall 5-year survival rate is almost 90%, and the odds jump to nearly 99% if the cancer is caught while it is still only in the breast. One of the most effective methods of early breast cancer detection is a regular mammogram.

The VA follows the national guidelines in encouraging all women between 50 and 75 years to get regular mammograms every 2 years, and advises women between 40 and 50 years as well as those older than 75 years to discuss the risks and benefits of regular mammograms with their health care providers based on their individual risk factors. Getting older, having a close family member with breast cancer, overweight or obesity, prior radiation therapy/exposure to the breasts or chest, no exercise, and certain gene mutations are some of the risk factors associated with breast cancer. Even though these risk factors don't guarantee that a woman will develop breast cancer, they should still be dis-

cussed with her health care provider.

Breast Cancer Awareness Month may have just passed, but the VA wants women to focus on their health needs the entire year. Dr. Stacy Garrett-Ray, the VA's deputy director of comprehensive women's health, said, "Mammograms can detect breast cancer early, and early detection makes a big difference in a woman's chance of surviving." Garrett-Ray adds, "If you're over 40 years old, talk with your provider about the best screening methods for you."

Though male breast cancer is rare, breast cancer can occur in both men and women. Another rarity is a younger woman developing breast cancer, which is why any change from normal should be brought to the attention of her health care provider.

Six Winners Announced for the VA Innovation Competition

The 2011 Veterans Affairs Innovation Initiative (VAi2) Employee Innovation Competition was designed to seek employee ideas to help veterans with military-related disabilities acquire employment. The VA plans to develop, test, and possibly implement winning ideas for use across the country in the VA's Vocational Rehabilitation and Employment (VR&E) Program. These innovations may significantly improve the quality of services provided to the VA's VR&E Program participants and reduce taxpayer cost of providing those services.

Selected entries include a paid internship program to help veterans gain work experience in the private sector; access to support systems for Post-9/11 veteran-students afflicted with a traumatic brain injury or posttraumatic stress disorder; a

mentorship development program for veterans from the employment community; providing Mental Health First Aid training to VR&E employees, to enrich their understanding of mental illness and empower them to provide quality service to guarantee successful veteran outcomes; online eligibility verification for VR&E services; and a preloaded debit card for purchasing educational books and supplies.

Under Secretary for Benefits Allison A. Hickey asserted, "Through the ingenuity of our employees and their deep understanding of what today's veterans need to gain good-paying jobs, we have a terrific set of innovations to pursue."

VA Study Reveals Computer Scanning of Doctors' Notes Benefits Patients

VA researchers conducted a study that revealed computer scanning of doctors' notes can reduce dangerous complications after surgery. Computer viewing of about 3,000 VA patients' records between 1999 and 2006 allowed the technology to dramatically increase the automated detection of complications after surgery, including acute renal failure, deep vein thrombosis, sepsis, and pneumonia.

Relying on a Google-like technology called *natural language processing*, the researchers examined the complete text in medical records, particularly doctors' notes, to find clues for possible postsurgery complications. The VA's under secretary for health Dr. Robert Petzel, said, "The excellent care VA provides to our nation's veterans relies, in part, on our electronic health records." Petzel added, "This latest study shows how we can continue to improve the usefulness of our electronic medical records." ●