Post-Deployment Care: Lessons from COVID19

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VA National Director
Post-Deployment Integrated Care Initiative

Research Advisory Committee for Gulf War Illnesses

Virtual Meeting
July 7, 2020

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Are GW Veterans at higher risk?

In-vivo imaging of neuroinflammation in veterans with Gulf War illness

Zeynab Alshelh, 1, Daniel S. Albrecht, 1, Courtney Bergan, Oluwaseun Akeju, Daniel J. Clauw, Lisa Conboy, Robert R. Edwards, Minhae Kim, Yvonne C. Lee, Ekaterina Protsenko, Vitaly Napadow, Kimberly Sullivan, Marco L. Loggia; Brain, Behavior, and Immunity; Volume 87, July 2020; 498-507

"Our study provides the first direct evidence of brain upregulation of the neuroinflammatory marker TSPO in veterans with GWI and supports the exploration of neuroinflammation as a therapeutic target for this disorder."

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Post-Deployment Care: COVID19

Are GW Veterans at higher risk?

Brain glial activation in fibromyalgia – A multi-site positron emission tomography investigation

Daniel S. Albrecht, Anton Forsberg, Angelica Sandström, Courtney Bergan, Diana Kadetoff, Ekaterina Protsenko, Jon Lampa, Yvonne C. Lee, Caroline Olgart Höglund, Ciprian Catana, Simon Cervenka, Oluwaseun Akeju, Mats Lekander, George Cohen l, Christer Halldin, Norman Taylor, Minhae Kim, Jacob M. Hooker, Marco L. Loggia; **Brain, Behavior, and Immunity;** Volume 75, January 2019, Pages 72-83

"Our work provides the first in vivo evidence supporting a role for glial activation in FM pathophysiology. Overall, our data support glial modulation as a potential therapeutic strategy for FM."

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Are GW Veterans at higher risk?

We don't know for sure, but it certainly is a possibility. So we should take all steps possible to mitigate risks and optimize health.
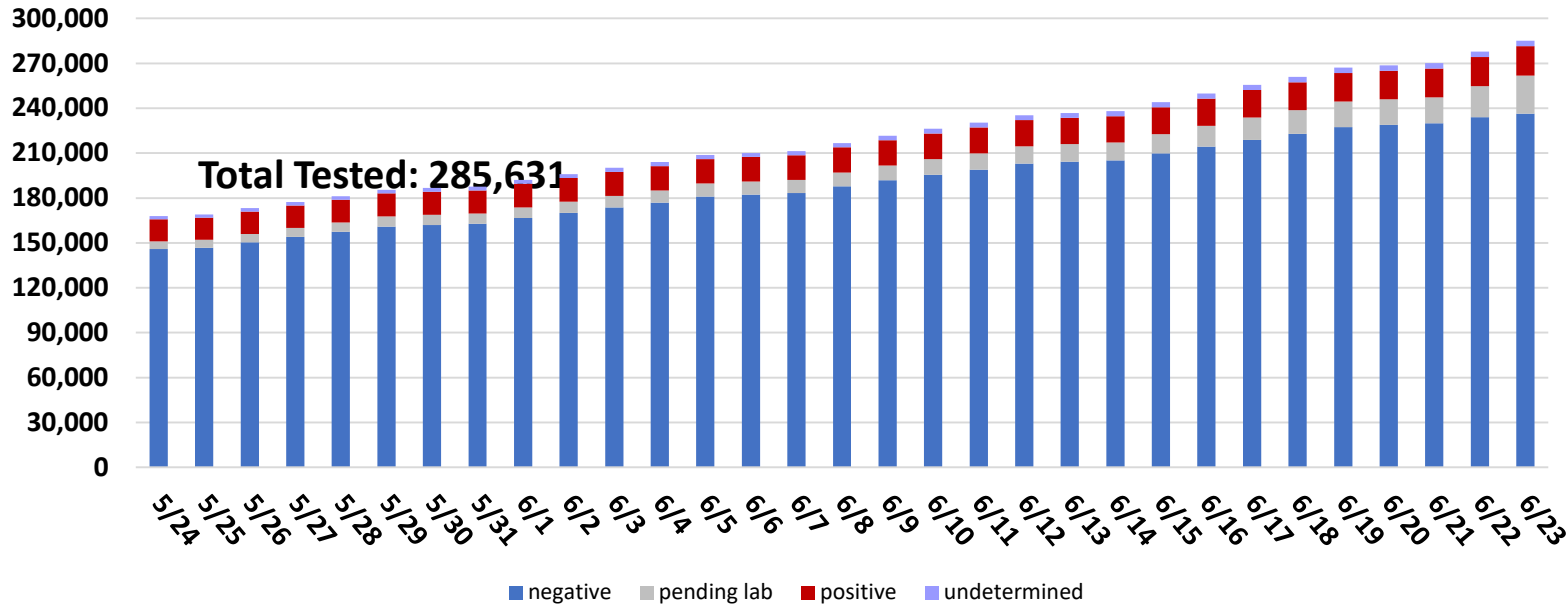
COVID19 Testing and Case Status
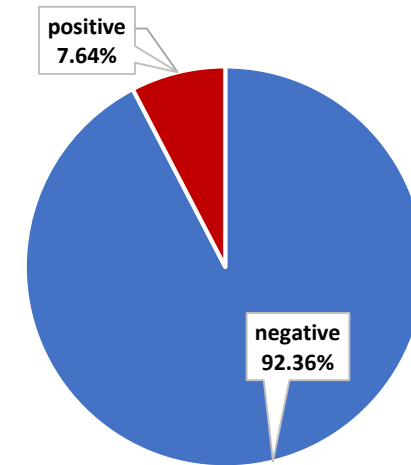
Unique Patients Tested and Status

Total Tested: 285,631

(Bar chart: y-axis 0 to 300,000; x-axis dates 5/24 through 6/23)

Legend: negative ■ pending lab ■ positive ■ undetermined ■

All Tests To Date: Positive and Negative Results

positive 7.64%
negative 92.36%

Veteran Test Results

positive 8.42%
negative 91.58%

Employee Test Results

positive 4.16%
negative 95.84%
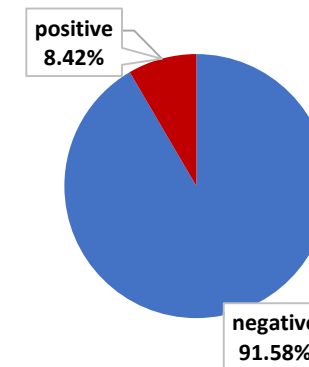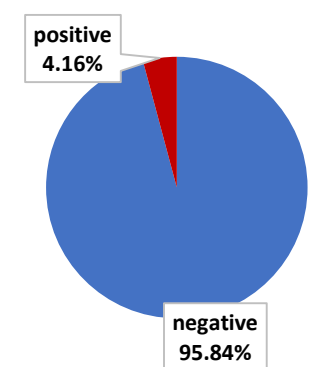
Details	All Unique Patients			Veterans			Employees		
	6/23/2020	6/24/2020	Day to Day Change	6/23/2020	6/24/2020	Day to Day Change	6/23/2020	6/24/2020	Day to Day Change
Total Tested	279,232	285,631	6,399	216,174	221,515	5,341	52,675	53,463	788
Number Negative	232,108	236,415	4,307	178,444	182,272	3,828	45,336	45,768	432
Number Positive	19,167	19,561	394	16,428	16,765	337	1,957	1,989	32
Number Pending	24,256	25,853	1,597	19,269	20,371	1,102	4,173	4,474	301
Other**	3,701	3,802	101	2,033	2,107	74	1,209	1,232	23

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7/6/2020

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Veterans Health Care In Times of COVID19

Connection and Integration: More connected than ever. Annie app

Annie App for Clinicians

Your **Life**
Your **Health**
Your **Schedule**

The Annie App helps you support patients in their self-care. It allows you to assign protocols to your patients, prompting them to track and submit health information. Text messages are automated and condition-specific, and allow patients to reply and receive responses directly from Annie. Messages from Annie are motivating and educational, and encourage patient wellness.

With the Annie App for Clinicians, you can:
- Enroll patients in automated text messaging that supports their care plan
- Start automated text messaging to remind patients to track their blood pressure, weight, glucose and more
- Alert patients by text if their readings fall above or below pre-set thresholds
- View patients' messages when you decide it's needed
- Use an existing protocol or customize messages tailored to individual patient needs
- Initiate automated reminders for VA appointments

If you need technical assistance with the Annie App for Clinicians call the Help Desk at 1-844-482-6245 weekdays from 7 a.m. – 7 p.m. (CT).

NOTE: Annie is for patient self-care and not for directing texting between Veterans and staff.

Enroll your patients in Annie today!
Visit the VA App Store to learn more:
mobile.va.gov/app/annie-app-clinicians

VA Mobile | VA U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Connected Care

Virtual Care has Increased 5-6 fold in 3 weeks. Now over 90% of elective care is virtual. Enhanced partnering with community

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A Research Priority

**Standardizing and Enhancing
Point of VA Service for DSDS (GWI) Veterans**

Connecting Combat Veterans with Their VA

*Looking back,
Looking ahead*

Stephen C Hunt MD MPH

Research Advisory Committee on Gulf War Veterans Illnesses

June 23, 2015

Expanding Telehealth to the Home: Video To Home Encounters

Video Visits to Home or Off-site
March - April 2020

↑800%
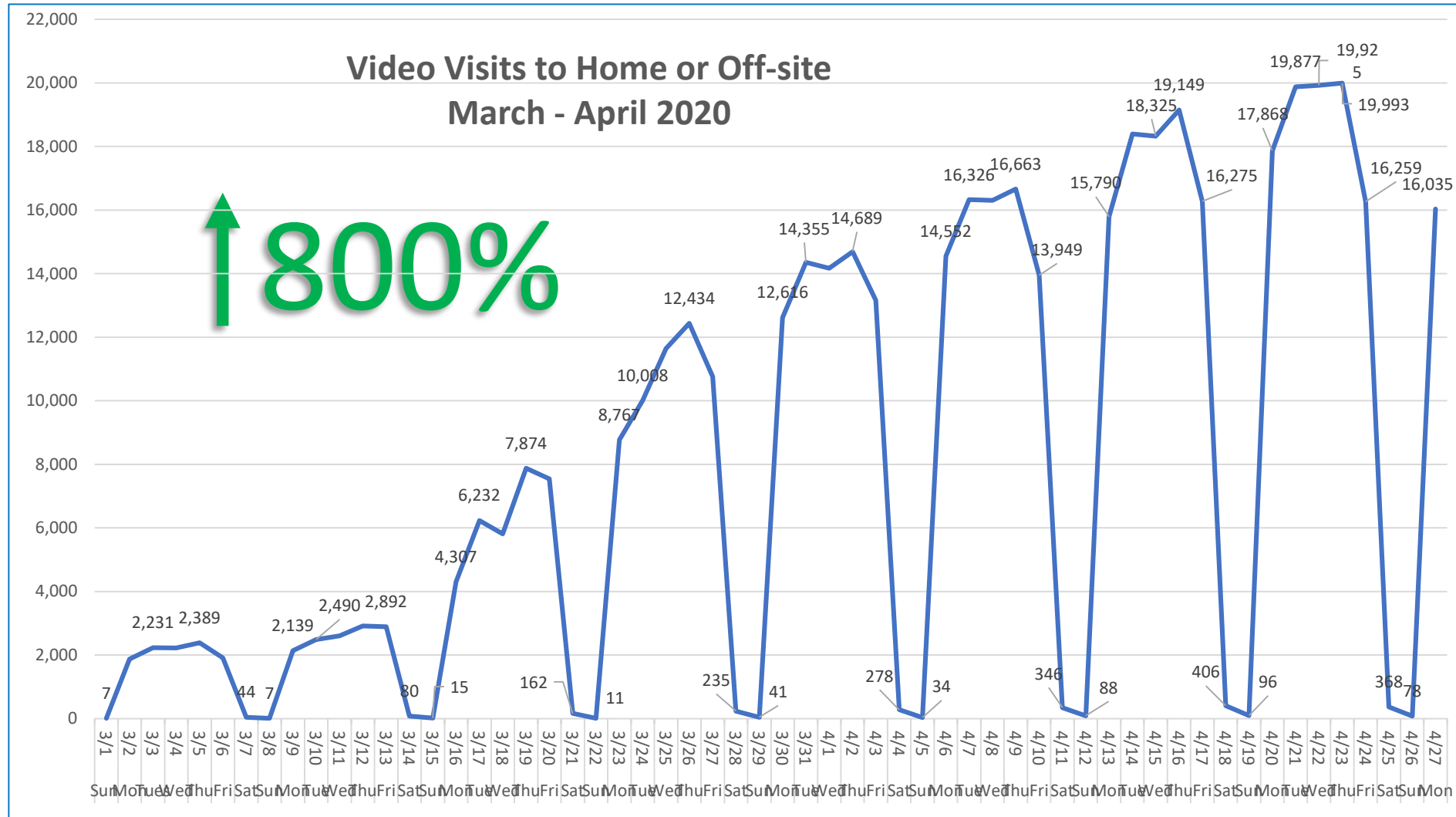
Connected Care: Major Initiatives

Clinical Resource Hubs

- Standardize all VISN CRH to include standard organizational structure, FTE, oversite, governance, and resource deployment to underserved areas.

- Establish a clinical resource hub communications and marketing plan.

- Fully establish framework and structure for hub expansion of specialty, rehabilitation, medical specialty, and surgical services.

- Ensure all hubs have the required resources and ability to effectively function in an environment with multiple scheduling systems.

Expansion of ATLAS Sites

- Expand ATLAS access points for Veterans in areas with low connectivity (Access to Telehealth through Local Access Stations)

Cerner Integration

- Integration of My Health*e*Vet and Cerner's patient portal into a VA.gov user interface, producing a seamless unified patient portal experience.

- Integration of Mobile Health and Telehealth technologies into Cerner, without experiencing any loss in functionality

Connected Care Device Expansion

- Increase the number of connected care devices provided to Veterans and providers. This includes iPads into patients' homes, phones for homeless veterans and connected health devices such as FitBits and Apple watches for patients.

- Data from Connected Device that come to VA for analysis and display in Virtual Care Manager and Get Care apps.

A Returning Combat Veteran in 2030: Putting together a care plan in the future

A 27 y/o female Marine returns home from a conflict in a distant region. This was her second 10 month deployment to this same conflict over the past three years. She returned a month earlier than scheduled following a blast injury that resulted in severe injuries to her right lower extremity as well as a mild TBI. She has been having intermittent fevers; the combat theater is in a location of endemic COVID-21, the new novel corona variant. She also had possible exposures to biological weapons and ionizing radiation. She is not sleeping more than an hour or two nightly and has nightmares nightly; she has chronic anxiety and depression. Her 28 y/o partner is scheduled to deploy to this conflict in 3 months. Their 5 y/o daughter and 2 y/o son are living with their grandparents (the Veteran's parents). What might a care plan for this Veteran include?
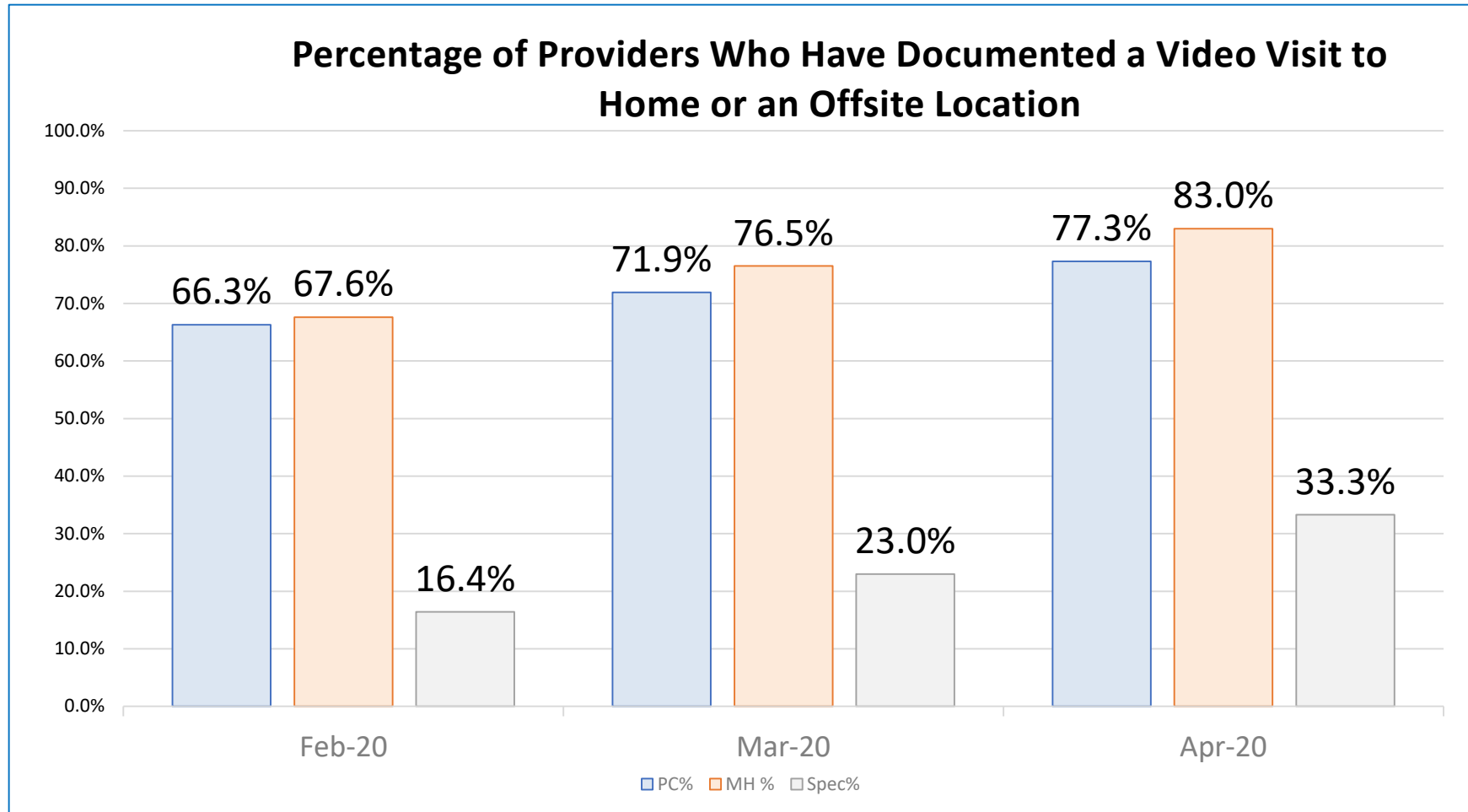
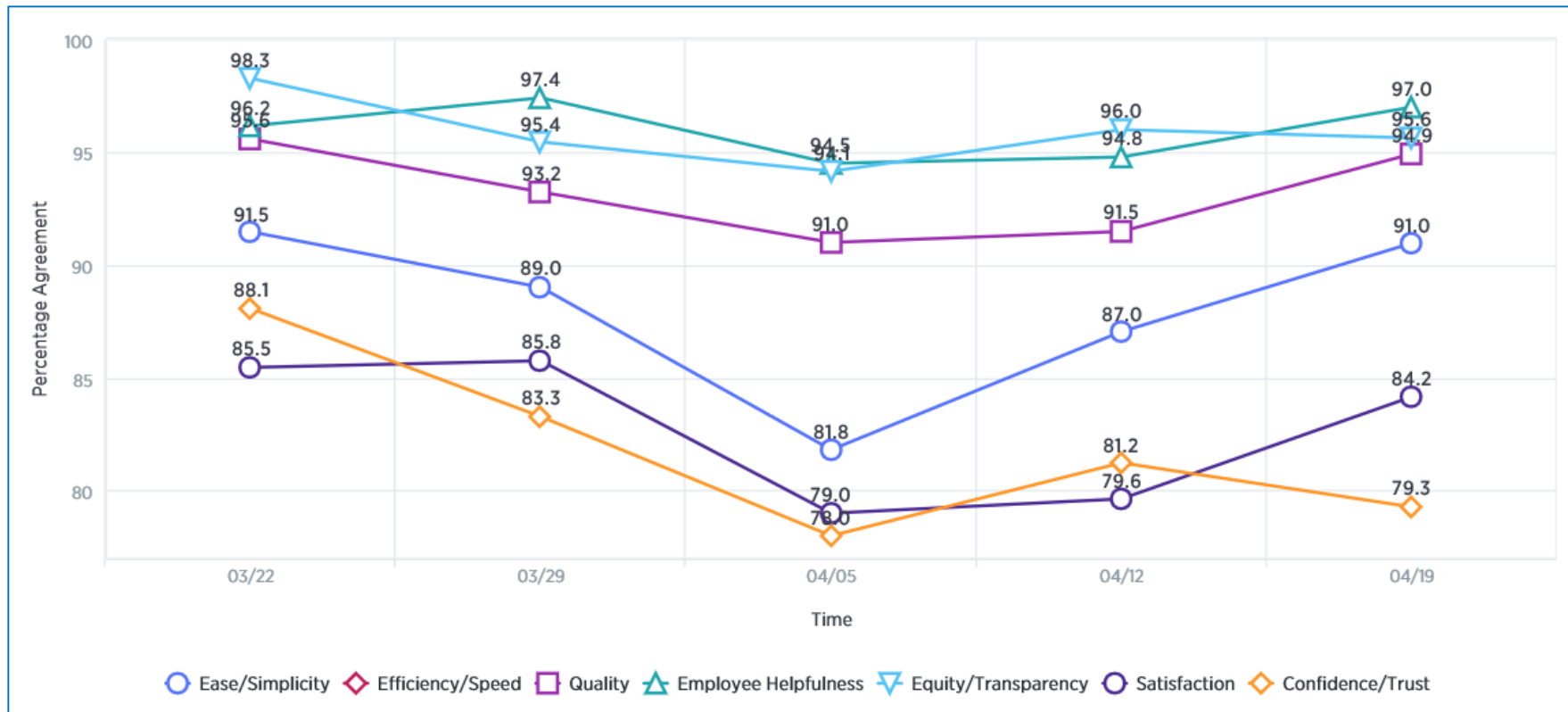**PDICI COP call 6/12/2020**   CALL FOLDER

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VA Health Care Professionals Offering Video to Home Services

Percentage of Providers Who Have Documented a Video Visit to Home or an Offsite Location

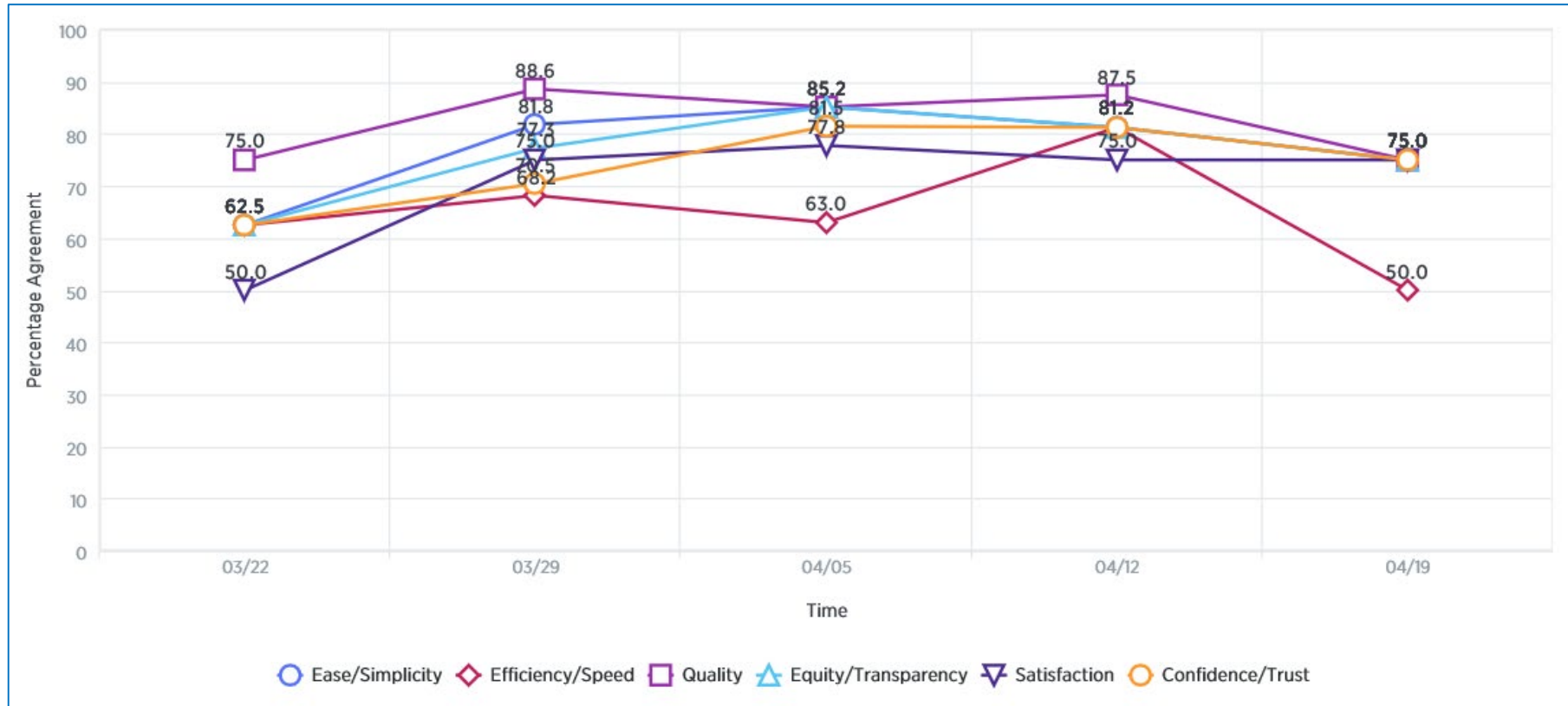|	Feb-20	Mar-20	Apr-20
PC%	66.3%	71.9%	77.3%
MH %	67.6%	76.5%	83.0%
Spec%	16.4%	23.0%	33.3%

Video to Home Patient Satisfaction - Weekly

Experienced Video Provider Satisfaction- Weekly

Understanding Risk Perception

| Less Risky	More Risky
Voluntary	Involuntary
Individual Control	Controlled by Others
Familiar	Unfamiliar
Low Dread	High Dread
Affects Everybody	Affects Children
Naturally Occurring	Human Origin
Little Media Attention	High Media Attention
Understood	Not Understood
High Trust	Low Trust
Consequences Limited/Known	Catastrophic Consequences
Benefits Understood	Benefits Unclear
Alternatives Available	No Alternatives

From Susan Santos
New Jersey WRIISC

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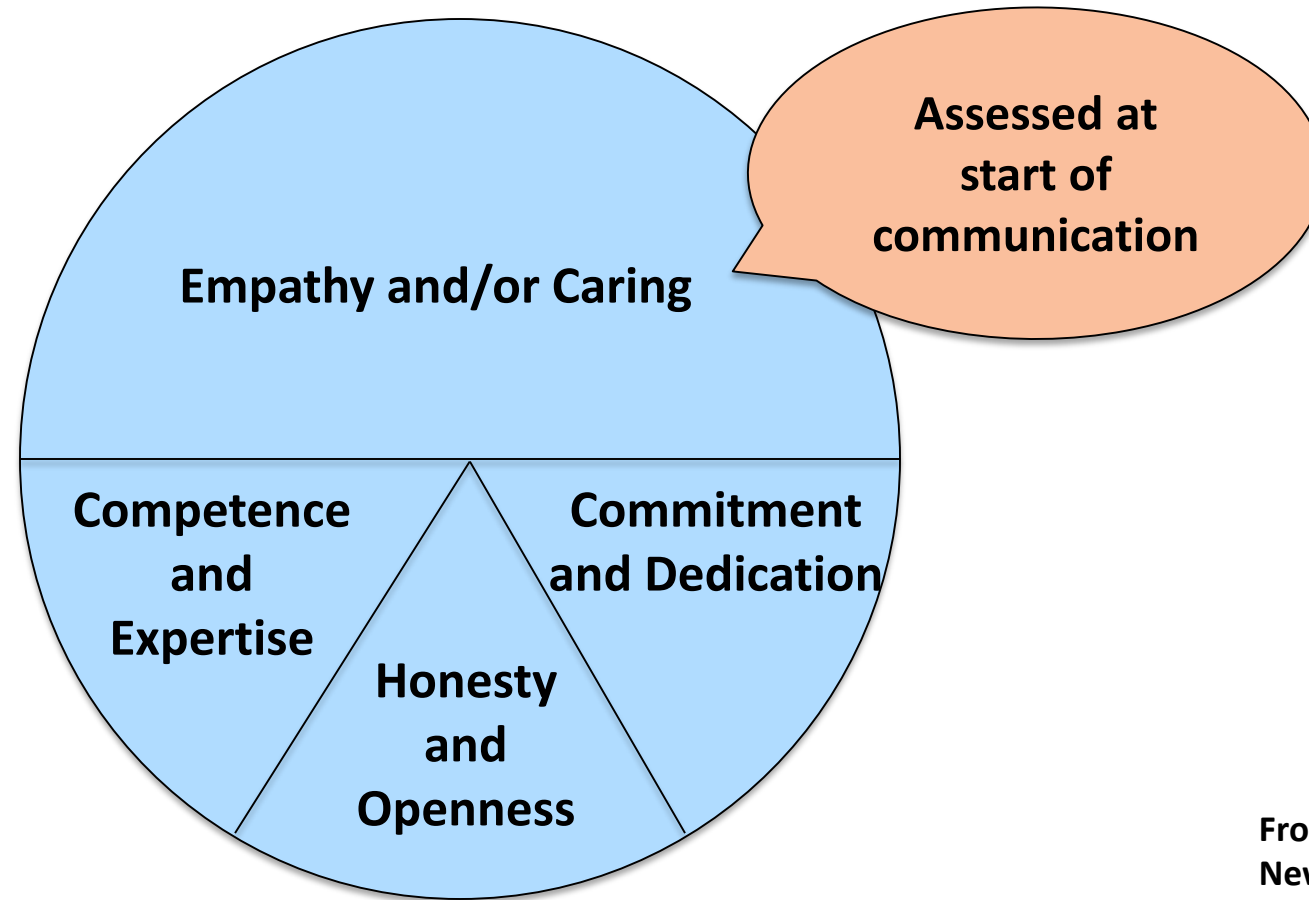VA | U.S. Department of Veterans Affairs

Institutional Trust and Perceived Risk

Perceived Risk

Institutional trust
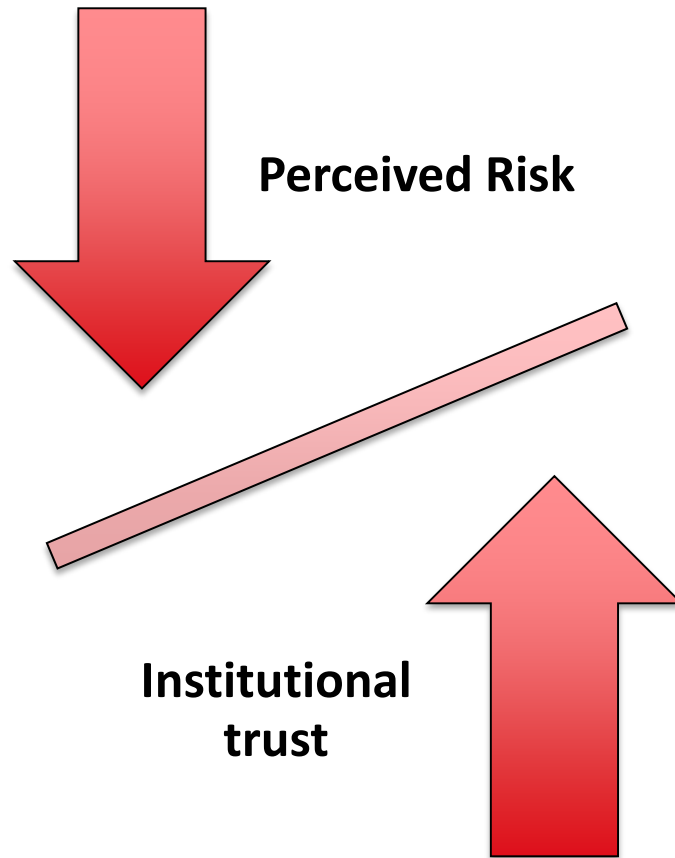
- Numerous studies indicate that as institutional trust increases –perceived risk decreases
-Flynn et. al., 1992; Siegrist et. al.,2000,2002; Allum, 2007

- Magnitude of effect depends on population and hazard

From Susan Santos
New Jersey WRIISC

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Empathy and/or Caring

Assessed at start of communication

Competence and Expertise

Commitment and Dedication

Honesty and Openness

From Susan Santos
New Jersey WRIISC

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Post-Deployment Care in the Future: Lessons from COVID19

The Need for a System of Care:
Pandemics, National Disasters, Post-Combat Care

MESSAGE FROM THE VHA EXECUTIVE IN CHARGE   **May 28, 2020**
COVID-19: Monitoring PPE from the HOC   video

MESSAGE FROM THE VHA EXECUTIVE IN CHARGE   **June 5, 2020**
COVID-19: The Emergency Management Coordination Cell   video

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