



# Office of Public Health Highlights Report



# Our Mission

Our Veterans have sacrificed to keep our country—and everything it represents—safe. We honor and serve those men and women by fulfilling President Lincoln’s promise “to care for him who shall have borne the battle, and for his widow, and his orphan.”

We strive to provide Veterans with exceptional health care that improves their health and well-being.

**Thank you for your service. Now let us serve you.**

U.S. Department of Veterans Affairs

Veterans Health Administration T 202.461.1000  
Office of Public Health (10P3) F 202.495.5965  
810 Vermont Avenue, N.W. [www.publichealth.va.gov](http://www.publichealth.va.gov)  
Washington, DC 20420

# Office of Public Health Highlights Report

2015 Edition

**VA**



**U.S. Department of Veterans Affairs**

Veterans Health Administration  
*Office of Public Health*

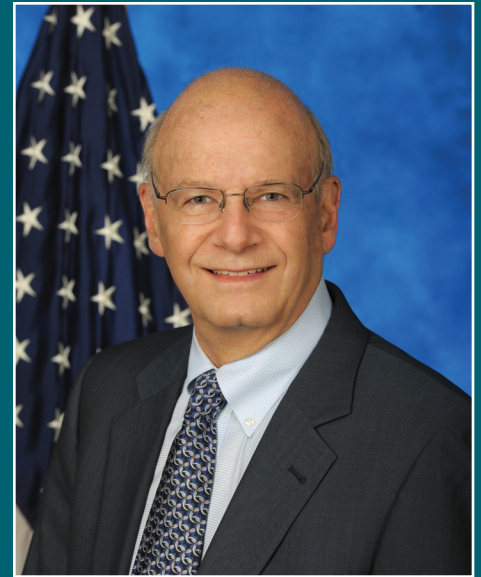
# Introduction

The Office of Public Health (OPH) has critical responsibilities for promoting health and preventing disease among Veteran and VA staff populations. By developing evidence-based public health policy, conducting cutting-edge operations research, and performing effective educational outreach, we continue to support America's Veterans as well as the VA workforce.

In the past two years, OPH has continued to make significant strides toward improving the health and well-being of Veterans and VA staff. This report, while only a condensed summary of the many recent accomplishments by our office, provides a broad overview of initiatives primarily during Fiscal Years 2014 and 2015. It reinforces not only the OPH mission but the overall VHA mission to honor America's Veterans through exceptional health care.

Our organization has recently been challenged by contraction of resources, restrictions on how those resources can be deployed, and other uncertainties about future operations. In fact, by the time this publication is released, our OPH family may have been further impacted by organizational changes. Although our office's realignment will temporarily require the redirection of some staff resources, it will not diminish the inherent commitment of our dedicated public health professionals to the promotion of optimal health and delivery of the best care anywhere to Veterans.

Richard A. Kaslow, MD, MPH  
Acting Chief Officer  
Office of Public Health



# Table of Contents

Introduction.....	iv
Who We Are .....	6
Post-Deployment Health .....	6
War Related Illness and Injury Study Center .....	6
Clinical Public Health.....	6
Population Health.....	6
Occupational Health.....	7
National Center for Occupational Health and Infection Control.....	7
Veterans Emergency Management Evaluation Center .....	7
Understanding Veterans .....	8
Clinical Consult Program.....	8
Airborne Hazards and Open Burn Pit Registry.....	8
Camp Lejeune .....	8
Population Health Assessments.....	9
Improving HIV and Hepatitis Care .....	10
Social Media Monitoring.....	12
Searching for Answers .....	12
Preparing Staff .....	14
Exposure Ed .....	14
Public Health Reference Laboratory.....	14
Public Health Grant Program.....	14
Ongoing Studies .....	15
Employee Health Promotion .....	16
OEMedicine Consult Program.....	16
Workplace Violence Prevention .....	16
Safe Patient Handling.....	17
Disaster Preparedness.....	17
Education and Risk Communication.....	17
Promoting Health .....	18
SmokefreeVET .....	18
Infection: Don't Pass it On .....	18
News for Veterans.....	19
Health Education .....	19
OPH by the Numbers.....	20
Glossary.....	22

# Who We Are

Within the U.S. Department of Veterans Affairs (VA), public health is the science and practice of promoting health and preventing disease among Veteran and VA staff populations. The mission of the Office of Public Health (OPH) in the Veterans Health Administration (VHA) is to serve as the leader and authority in public health, a core element of the VA mission to serve and honor America's Veterans. The groups and centers within the office cover a range of programs to protect and promote the health of Veterans and staff.

## Post-Deployment Health

Post-Deployment Health administers various programs related to environmental and occupational exposures of U.S. Veterans during military service. The group consists of two interrelated programs: the Epidemiology Program and Environmental Health Program. The Epidemiology Program conducts surveillance and studies on Veterans' health and health care that help health professionals and policymakers, including VA and Congress, improve health care policies and practices for Veterans. The Environmental Health Program evaluates research, recommends policy, and develops educational and outreach materials covering various environmental issues and health outcomes related to military exposures.

### ★ ★ ★ ★ ★ WAR RELATED ILLNESS AND INJURY STUDY CENTER

★ Within the Post-Deployment Health group is the War Related Illness and Injury Study Center (WRIISC). The ★ WRIISC, dedicated to improving the lives of Veterans, serves ★ Veterans from all combat eras who suffer from chronic or ★ difficult to diagnose and manage medical conditions that ★ may be related to deployment. The WRIISC provides clinical, ★ education, and research expertise to support the care for ★ these Veterans. It is central to VHA's systematic evaluation and management of Veterans with complex post-deployment health issues, representing an anchor for the VHA system of care that is dedicated to these high priority Veteran concerns.

## Clinical Public Health

Clinical Public Health improves the health of Veterans through the development of sound policies and programs related to several major public health concerns including human immunodeficiency virus (HIV) infection, hepatitis C infection, seasonal influenza, smoking and tobacco use cessation, public health surveillance and research including epidemiologic look-back investigations, health care associated infections, and other emerging public health issues. Clinical Public Health's mission is accomplished through a variety of efforts including education and outreach, policy development, clinical demonstration projects, quality improvement initiatives, population based surveillance, performance measurement, clinical practice guidelines, and research.

## Population Health

Population Health identifies behavioral, community, economic, and social information on Veterans to combine with health care information for a more complete view of Veteran health. The group repackages existing information and performs limited analyses of these factors and their trends to report on the health and health needs of America's Veterans. In this way, patterns that are recognized may help Population Health to turn numbers into knowledge, which can then guide Veterans, their health care providers, and VHA toward more informed and effective health care for all Veterans.

## Occupational Health

The Occupational Health group serves as a national leader in occupational health, aiming to achieve optimal workforce productivity and health through innovation, prevention, and health management. The group supports the mission of VA through the use of evidence-based principles of occupational health in order to maintain and advance a productive, healthy, safe, and agile workforce through policy, assessment, consultation, and assurance. Occupational Health consists of several programs including: Employee Health Promotion Disease and Impairment Prevention, Employee Occupational Health, Workers' Compensation, Occupational Health Surveillance and Evaluation, Safe Patient Handling, and Workplace Violence Prevention.

## National Center for Occupational Health and Infection Control

The National Center for Occupational Health and Infection Control (COHIC) helps identify and solve important occupational health and infection control challenges facing VA at national and local levels. COHIC's mission is to equip

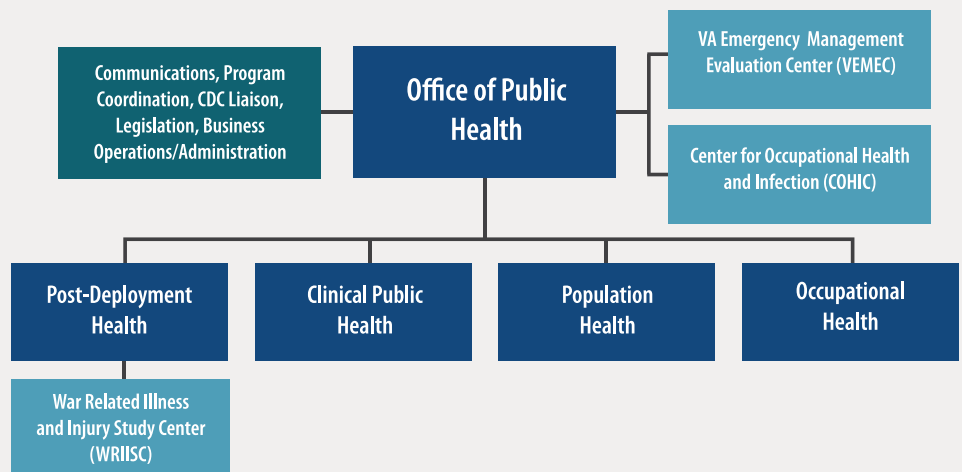
VHA with evidence-based guidance about preventing and responding to infections associated with health care delivery; to initiate and broker projects that aim to diminish the consequences of infectious diseases among health care workers and the Veterans they serve; and to diminish health care costs by identifying and demonstrating money-saving strategies that seek to optimize outcomes.

## Veterans Emergency Management Evaluation Center

The Veterans Emergency Management Evaluation Center (VEMEC) creates science-based tools to help minimize disruptions to medical care and keep VA open and functioning during natural disasters. Through research, training, and consulting, VEMEC applies its scientific and clinical expertise to the most urgent emergency management issues. VEMEC collaborates with local, national, and global partners to serve as a vital resource within and outside VA. The center is devoted to identifying best practices and advancing the field of public health preparedness and response. Through its work, VEMEC helps support VHA as a national leader in emergency management.

### ★ OFFICE OF PUBLIC HEALTH

OPH is organized into four key components and includes dedicated personnel working within multidisciplinary teams.



# Understanding Veterans

Today, there are more than 22 million living Veterans. OPH studies diverse populations of Veterans to identify public health trends and to continuously improve health care delivery.

## Clinical Consult Program

The WRIISC offers several clinical programs for Veterans who have post-deployment health concerns. All clinical services begin with an Inter Facility Consult (IFC) request from a Veteran's VHA primary care provider. In Fiscal Year (FY) 2014, the WRIISC received 587 IFC requests and provided 180 comprehensive evaluations. WRIISC clinical services can include clinical evaluations, exposure consultations, eConsults, and/or a Comprehensive Airborne Hazards Evaluation. In addition, in FY 2014, the WRIISC provided specialty stand-alone services to 1,612 local Veterans. Standalone services include neurological examinations; mental health treatment groups and social work consultations; yoga, including classes for VA community clinics through Telehealth; and individual and group acupuncture.

## ★ VETERANS GIVE THE WRIISC TWO THUMBS UP

Upon completion of the comprehensive clinical evaluation:

- » **99%** of Veterans felt that the WRIISC team explained things to them in a way that was easy to understand and showed respect for what the Veteran had to say.
- » **98%** of Veterans who completed the satisfaction survey would recommend the WRIISC program to other Veterans.



## Airborne Hazards and Open Burn Pit Registry

In FY 2014, VA launched the Airborne Hazards and Open Burn Pit Registry. The "Burn Pit Registry" was created in response to concerns that Veterans and Servicemembers were experiencing a range of respiratory illnesses after being exposed to open air burn pits at military sites in Iraq and Afghanistan. The first year of the registry has been highly successful with more than 65,000 unique users having logged into the site and more than 42,500 participants having completed the online self-assessment questionnaire. Eligible users are also able to complete a no-cost, in person examination at their local VA medical center or with their Department of Defense (DoD) health care provider. OPH has implemented a robust outreach plan to make sure all Veterans and Servicemembers who are eligible for the registry are aware of its existence and know where to go to sign up. OPH has estimated that of the three million individuals who are eligible, roughly one million will participate over the life of the registry. While the first year of the registry was focused on getting the registry website operational, the second year will focus on improving the site's usefulness for VHA clinical staff and enhancing the Veteran experience.

## Camp Lejeune

From the 1950s through the 1980s, people living or working at the U.S. Marine Corps Base Camp Lejeune in North Carolina were potentially exposed to drinking water contaminated with industrial solvents, benzene, and other chemicals. This chemical exposure may have led to health conditions. To address concerns, the President signed into law the "Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012." This law allows VHA to provide eligible Veterans with VA



health care and specific care for 15 identified health conditions at no cost to the Veteran. In addition, eligible family members of those Veterans receive reimbursement for out-of-pocket medical expenses incurred from the treatment of qualifying health conditions (after all other health insurance is applied). OPH, along with the Chief Business Office, has spearheaded the implementation of this law to ensure that Veterans and their families are receiving the care they need and deserve.

## Population Health Assessments

The Population Health group measures, monitors, and identifies trends that impact the health and health needs of all Veterans.

### EXPANDING HEALTH ASSESSMENT IN VETERANS

In order to assess the overall health of the Veteran population, VHA must consider non-health factors associated with health including community, social, behavioral, and economic factors. OPH, in collaboration with other VA offices, is now expanding its health assessments to include service connected disability ratings (i.e., Veterans Benefits Administration economic data) and health care related data from DoD. OPH has also turned to existing national survey data from the Centers for Disease Control and Prevention (CDC) to understand social and behavioral predictors of health in all U.S. Veterans. Additional foundational work has been completed or is underway to compare all U.S. Veterans to those who have opted to receive VA health care. Utilizing data from DoD, OPH has initiated efforts to compare the Veteran to Servicemember populations.

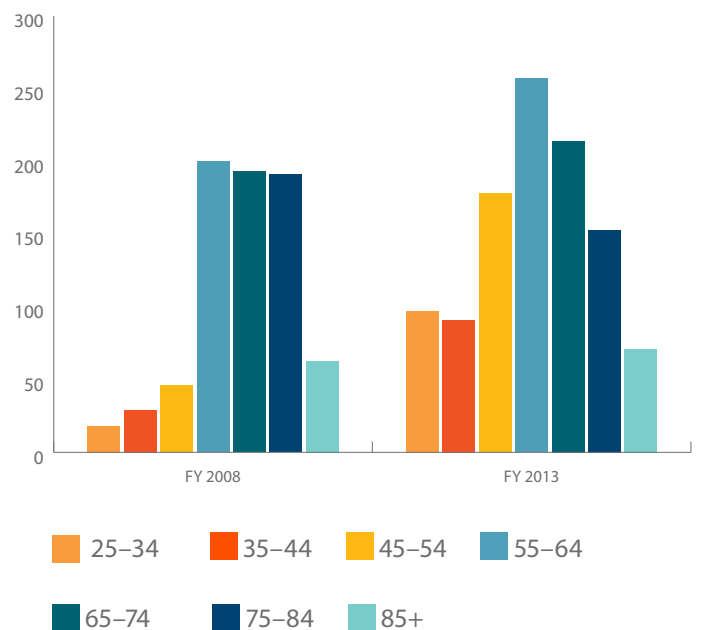
### BAKKEN COMMUNITY HEALTH ASSESSMENT

Population Health’s assessment of the health of Veterans requires an understanding of the community in which the Veteran resides and those Veterans who do not access VA for services. In FY 2014, at the request of VHA’s Office of Rural Health, Population Health completed a community health assessment for the Bakken region near North Dakota.

The assessment included a review of social and behavioral issues that impact health (e.g., crime, substance use and abuse, community stressors), the impact of a “boomtown” environment (e.g., population changes, employment, housing, homelessness, environmental factors), and changes specific to the Veteran population compared with others in the community. Data collected and lessons learned from the review assisted local and national leadership in identifying gaps and shifts in resource requirements, and with forecasting future needs.

## VHA WILLISTON OUTPATIENTS BY AGE GROUP

Change in number and proportion of younger patients



Source: Veterans Support Service Center, Unique Patient Cube



## BOOM IN THE BAKKEN

Between 2010 and 2012, an “oil and gas boom” began in the rural Bakken region near North Dakota resulting in the creation of thousands of jobs and in a significant increase in the Veteran population and demand for VHA services.



## Improving HIV and Hepatitis Care

VA leads the country in hepatitis and HIV/acquired immunodeficiency syndrome (AIDS) screening, testing, treatment, research, and prevention.

### HIV, HEPATITIS, AND PUBLIC HEALTH PATHOGENS PROGRAMS

The mission of the HIV, Hepatitis, and Public Health Pathogens Programs is to provide state-of-the-art clinical public health services to VHA providers and patients in the areas of HIV, hepatitis viruses, and public health pathogens. The programs are supporting and funding Veterans Integrated Service Network (VISN) hepatitis innovation teams in almost

all of the VISNs to improve hepatitis care across VHA and reduce geographic variability in resources and quality of care. These teams are working collaboratively with the New England Veterans Engineering Resource Centers and VISN Systems Redesign leads to analyze system design issues and construct the business case for specific redesign efforts. The National Hepatitis C Resource Center, a facility-based working group within the program, is also supporting and coordinating projects across VISN teams, including facilitating the implementation of innovations and collection of data and analytic feedback to identify high and low yield innovations and processes.

### OPTIMIZING OUTCOMES FOR HEPATITIS C THERAPY

What began a decade ago as a complicated, highly toxic therapeutic approach with poor overall response rates, therapy for hepatitis C has evolved to now include well tolerated, highly effective drugs. Population Health has led a series of initiatives to improve awareness and treatment of hepatitis C among Veterans through the national Clinical Case Registry (CCR), measurement and reporting on population metrics, and close to real-time assessment of the appropriate use of drug regimens to treat hepatitis C. With nearly 140,000 Veterans with hepatitis C to treat, OPH is leading work to re-engineer care delivery through VISN-level initiatives, field targeted education and training, and closely monitor drug utilization and Veteran outcomes.

### HEPATITIS SCREENING

Veterans born between 1945 and 1965 have unusually high rates of hepatitis C, and are encouraged by VA to get tested. As of FY 2014, more than 1.8 million Veterans born during this time period had been screened for hepatitis C.

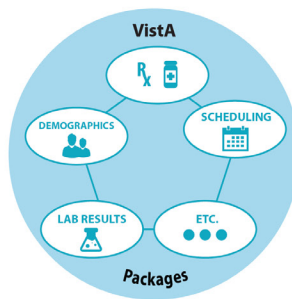
## ★ CLINICAL CASE REGISTRIES

VHA developed the Veterans Health Information Systems and Technology Architecture (VistA) and supporting software, such as the CCR software, to provide clinicians with timely access to comprehensive, accurate patient electronic medical records. The CCR software was developed to create condition-specific registries that contain a list of local patients who have been diagnosed with a specific condition. As of June 2015, there are 27 different registries, corresponding to 27 different diagnoses.

### Clinical Case Registries (CCR) – An Introduction

#### VistA Veterans Health Information Systems and Technology Architecture

Integrated system of nearly 200 software modules and data files used for electronic health records, care delivery and administrative operations. VHA sites designated under the same three-digit reporting code collect data and operate as a local VistA system. Generally these include only a single VA medical center and its associated clinics, nursing homes, and other sites, however there are several "integrated" VistA systems which include multiple medical centers.



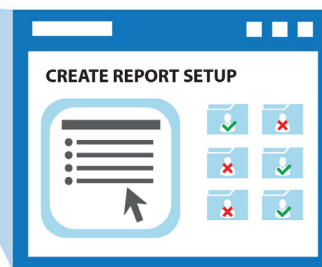
#### CPRS Computerized Patient Record System

Graphical user interface for viewing information in local VistA system. The majority of clinical users interact with VistA through CPRS. When you use CPRS to view or enter information about a patient, you are actually accessing and altering the information in that patient's VistA files.

#### CCR Clinical Case Registries

Software that compiles condition specific registries from VistA data. Each registry contains a list, updated daily, of local patients diagnosed with a specific condition. The CCR system software is designed to be expandable, and system updates sometimes include additional registries for additional conditions. CCR is available to all CPRS users, contact your local IT support for details.

The registries themselves are only lists and CCR is not a separate system of records. The details of each patient's medical history remain in the VistA system.



**CUSTOMIZABLE CCR REPORTS**

#### Customizable CCR Reports

Using CCR software, users can generate a wide range of customizable reports to address both administrative and clinical issues. Only data and patients included in the user's local VistA system can be included in a CCR report.

## Social Media Monitoring

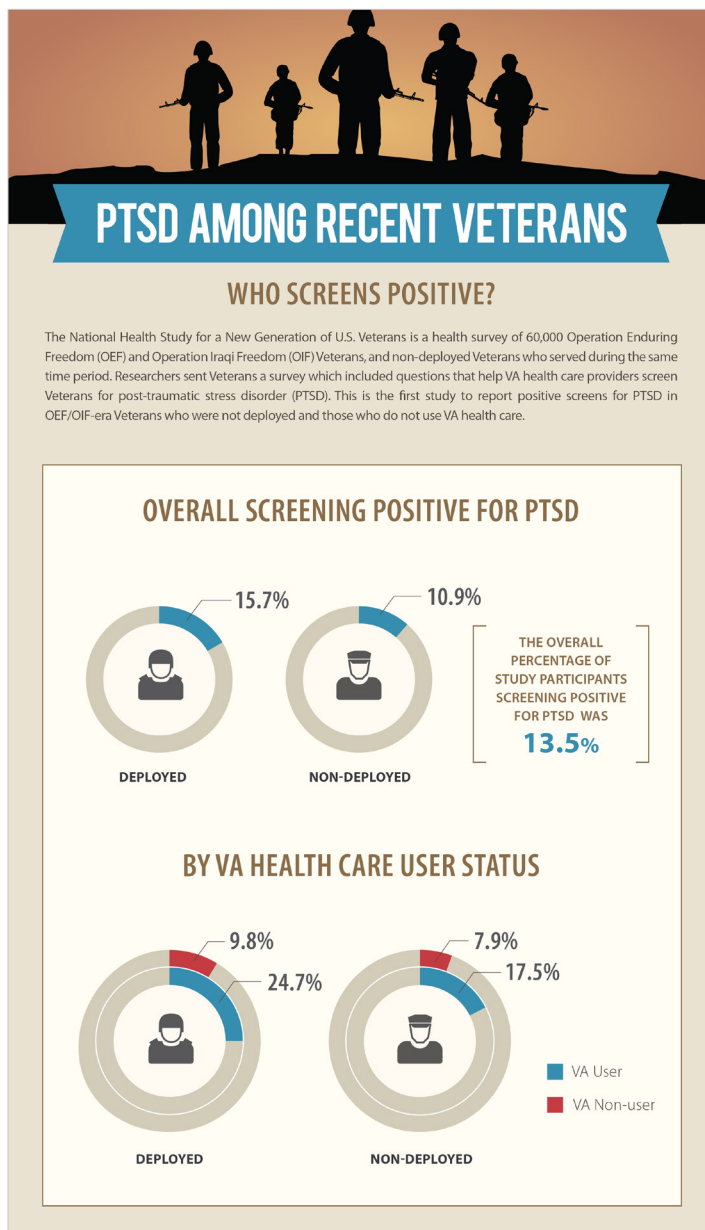
Social media, in particular Facebook and Twitter, serve as powerful tools for OPH to promote recent research, provide relevant Veteran resources, and better direct Veterans to the OPH website. In addition, OPH has been able to utilize social media to gain valuable insights into Veterans' interests and priorities. OPH closely monitors VA and VHA Facebook accounts for OPH topics in order to measure the success of promotions, track user comments, and engage with Veterans directly. In FY 2015, OPH subject matter experts partnered with like-missioned organizations to conduct OPH's first-ever Twitter chat to promote smoking and tobacco cessation tools. The hour-long chat resulted in more than two million impressions.

## Searching for Answers

OPH's cutting edge research shapes VA's national policies for health care, and informs OPH's educational outreach. OPH studies diverse populations of Veterans to identify public health trends and to continuously improve health care delivery.

### NATIONAL HEALTH STUDY FOR A NEW GENERATION OF U.S. VETERANS

OPH's Epidemiology Program researchers conducted a survey study and collected data on the health of more than 20,500 Veterans who served in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF), and Veterans who served elsewhere during the same time period. The survey included questions on a wide range of health topics, including health risk behaviors, health conditions, general health, health care utilization, and potential exposures. Researchers have published articles on such conditions as post-traumatic stress disorder (PTSD), respiratory illness, and infertility. They found that 13.5 percent of OEF/OIF deployed and non-deployed Veterans screened positive for PTSD. Deployed Veterans were 29 percent more likely to report having sinusitis compared to non-deployed Veterans. Also, 15.8 percent of women and 13.8 percent of men reported that they had experienced infertility. Researchers continue to analyze data from this study.



*PTSD Among Recent Veterans – Who Screens Positive?*  
 (view full infographic: [www.publichealth.va.gov/epidemiology/studies/new-generation/ptsd.asp](http://www.publichealth.va.gov/epidemiology/studies/new-generation/ptsd.asp))

## WRIISC RESEARCH ACTIVITIES

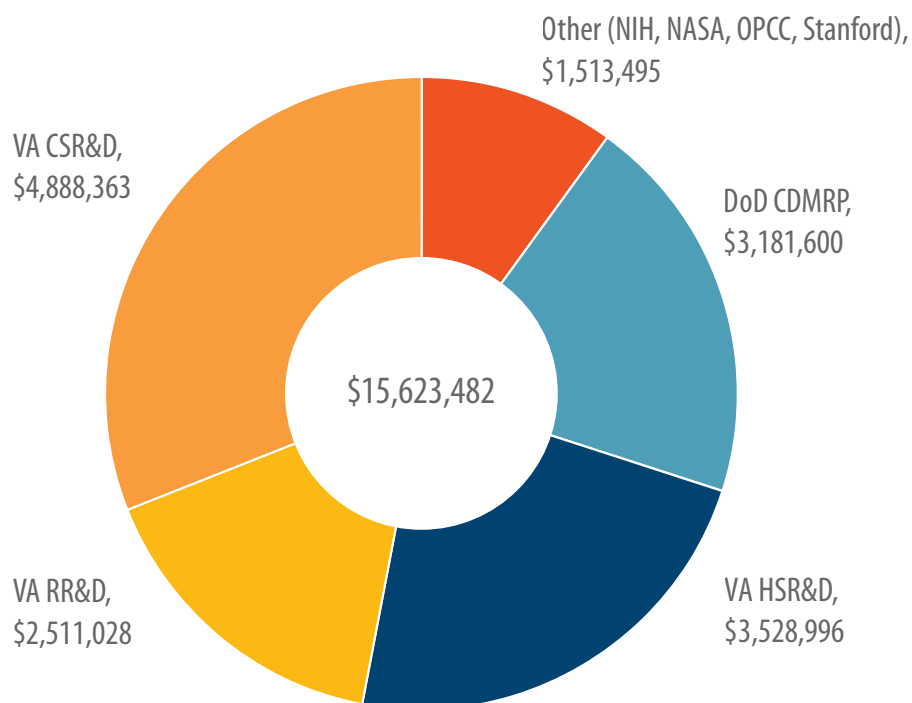
WRIISC researchers and clinicians work closely together to identify new problems in returning Veterans and respond to their health concerns. The WRIISC manages more than 15 million dollars in research funding from both VA and non-VA sources. Findings from WRIISC research are used to identify

promising treatments and the most current evidence-based care for Veterans. The WRIISC is a VA leader in the exploration of the underlying pathological causes of complex Veteran health issues, as well as in the adaptation of innovative and state-of-the-art clinical research techniques.

---

## WRIISC RESEARCH FUNDING

Research funding for the WRIISC for FY 2014 increased 38 percent from FY 2013, allowing WRIISC investigators to continue to produce high quality research.



WRIISC Research Funding Sources

# Preparing Staff

Recognizing that a healthy workforce best supports healthy Veterans, OPH oversees educational programs to improve staff safety and wellness, and gives staff the tools they need to provide exceptional health care.

## Exposure Ed

On January 22, 2015, OPH launched a new free mobile app, Exposure Ed, to help health care providers better address Veterans' questions about the health effects of military exposures and exposure-related benefits. The app allows providers to quickly identify potential military exposures and associated health effects that can be discussed during a Veteran's regular medical appointment, exposure assessment, or environmental registry evaluation. Not only can information be searched by location or service date in the app, but it can also be pasted into a note that can be emailed or printed for the Veteran. Other app features include tips on how to discuss exposure concerns with Veterans, information on presumptive service-connected health conditions and diseases, a tool to locate VA facilities, and information on VA's exposure-related policies and programs. As of June 3, 2015, there have been 1,644 total downloads of the app.

## Public Health Reference Laboratory

The Public Health Surveillance and Research program conducts public health investigations and surveillance within VHA. In support of its public health investigations, the Public Health Reference Laboratory provides subject matter expertise for evaluation of incidents of exposures to infectious disease, conducts retrospective epidemiologic studies, and supports epidemiological investigations and testing across VHA. Surveillance support at the Laboratory includes typing of isolates of influenza virus and norovirus and testing genotypic markers for resistance to various organisms. Other surveillance activities at the Laboratory include the detection and monitoring of health care associated infections, tracking significant disease outbreaks, and studying antimicrobial usage and resistance patterns.

## Public Health Grant Program

For the past nine years, OPH has supported front line clinicians through the Public Health Grant Program. The Public Health Grant Program was initiated in 2003 and was designed to enable clinicians to develop small demonstration projects in their field of expertise to improve Veterans' experiences and care. This program supports various grass roots efforts in improving care and prevention for significant public health concerns including: HIV/AIDS, viral hepatitis, tobacco use, influenza, health care associated infections, and public health preparedness. In 2015, the Dayton VA medical center was awarded \$12,000 to improve dental hygiene in vulnerable Veteran populations within Home Based Primary Care and homeless Veteran populations. Research has linked the lack of preventive dental hygiene and care to a number of health related issues including respiratory infections such as influenza and pneumonia. As a result, the grant funding was

### ★ PUBLIC HEALTH GRANT PROGRAM IN 2015

- » 40 grants were awarded throughout VHA in the amount of \$57,000 including 30 grants (\$42,000) supporting projects for flu, emergency preparedness, health care associated infections, and respiratory and hand hygiene.
- » In addition, 10 grants were awarded a total amount of \$14,000 for HIV/AIDS testing, prevention, and education purposes.
- » 10 flu projects were supported through the purchase of necessary supplies for drive-through flu vaccination programs.

used to purchase dental floss and tooth brushes to allow for independence in oral care.

## Ongoing Studies

In FY 2015, COHIC engaged in five ongoing studies that support COHIC's mission to protect VHA health care workers and diminish the potential adverse consequences associated with health care delivery.

### Project B.R.E.A.T.H.E.

COHIC, in cooperation with the private sector, is leading a federal interagency working group known as Better Respiratory Equipment using Advanced Technologies for Health care Employees (Project B.R.E.A.T.H.E). This project seeks to develop an improved respirator designed specifically to protect health care workers from inhaling influenza virus or other respiratory viral particles, while addressing the comfort and tolerability features necessary for use in the health care field.

### Respiratory Protection Effectiveness Clinical Trial (ResPECT)

The choice of N95 respirators or surgical masks for protection of health care workers against influenza and most other respiratory diseases is unsupported by solid scientific data. In partnership with the CDC, COHIC is supporting a prospective, non-blinded, cluster randomized study to assess and compare the effectiveness of respiratory protective equipment among health care workers in the outpatient setting.

### Engineering Surge Demonstration

Many hospitals have written pandemic surge plans, however, the operational feasibility of most plans has not been tested. COHIC is currently analyzing the results of a demonstration of the Palo Alto VA surge plan conducted in March 2015 in order to ascertain how quickly an entire wing or other area of the

building can be converted to negative pressure in order to create additional airborne infection isolation rooms without disrupting normal activities and operations.

### Ebola Response

During the recent outbreak of Ebola in West Africa and subsequent returning cases and transmission in the U.S., VA worked extensively to protect Veterans and the VA workforce, and to mitigate risk of transmission to the VA system. Key COHIC staff provided critical subject matter expertise and guidance during the VA response; and they continue to engage as efforts begin to shift to leverage Ebola response to an appropriate, sustainable, and scalable capability to address future infectious disease threats.

### Respiratory Protective Devices Stockpiling

Specific guidance on the size and composition of respiratory protective device stockpiles for use during a pandemic is lacking. COHIC explored the economic aspects of stockpiling various types and combinations of respiratory protective devices by adapting a pandemic model that estimates the impact of a severe pandemic on a defined population, the number of potential interactions between patients and health care personnel, and the potential number of health care personnel necessary to fulfill those needs. The results of the project were published in a peer-reviewed publication and were presented at a major annual conference to aid broad audiences in evaluating approaches to stockpiling respiratory protective devices.

#### ★ COHIC PUBLICATIONS

★ In FY 2015, members of COHIC staff and personnel  
★ supporting COHIC-led projects published five peer-  
★ reviewed publications.

## Employee Health Promotion

Armed with the vision that VA cannot provide high quality patient-centric care to Veteran patients without healthy and able employees, the Employee Health Promotion Disease and Impairment Prevention (EHPDIP) program provides training, resources, tools, and opportunities to assist employees in achieving their health and wellness goals. In FY 2015, EHPDIP trained 30 employee health promotion coaches and awarded 58 funding opportunities to support new programs and improve ongoing employee health promotion programs totaling more than \$571,500.

### ★ VA2K WALK & ROLL

EHPDIP also organizes national events such as the annual VA2K Walk & Roll. In FY 2015, there were more than 23,000 participants in the event at 211 VA sites across the country. The event encouraged healthy activity in employees and also raised more than \$325,000 worth of in-kind goods donated to homeless Veterans.

## OEMedicine Consult Program

The Occupational and Environmental Medicine (OEMedicine) Consult Program is a provider-to-provider telephone consultation program in which VHA employee health clinicians can get guidance on how to proactively identify and medically optimize the personal employment goals of employee patients. Employee health providers can speak directly with OEMedicine specialist physicians about employee medical assessments, work risk assessments, occupational medicine decision-making, improving injury and illness care, and employee and provider educational resources for occupational and environmental medicine. Since its conception, the OEMedicine Consult Program has delivered more than 500 consults and expanded access from 20 percent to 100 percent of VHA facilities.

## Workplace Violence Prevention

The Workplace Violence Prevention program develops and implements inter-disciplinary initiatives for comprehensive violence prevention in health care. Disruptive Behavior Committees were first required by VHA in 2003 and now exist in all VA medical centers. They were established in order to assure that all Veterans maintain access to health care regardless of behavioral challenges. Through integration of research findings and evidence-based practice, the Workplace Violence Prevention program provides toolkits and resources to support Disruptive Behavior Committees in their mission of

## OEMEDICINE CONSULT PROGRAM REACH

In 2014, the teleconsult program expanded access to occupational medicine specialty care for VHA health care workers by more than 200 percent.



Source: OEMedicine Consult Data



promoting early identification and appropriate risk mitigation of behavioral incidents that undermine VHA's culture of safety. During FY 2015, Workplace Violence Prevention has implemented the Disruptive Behavior Reporting System nationally in VHA. This secure, web-based system is simple, easy to use, and available to all personnel with a VA computer login/access code.

## REPORTING AN INCIDENT

Incident reports in the Disruptive Behavior Reporting System, implemented in FY 2015, have five data fields.

LOCATION & TIME	Facility, date, and time
WHO IS REPORTING?	Contact information
WHO EXPERIENCED?	Who <i>experienced</i> the disruptive behavior
WHO WAS THE DISRUPTOR?	Brief information about the disruptive individual
INCIDENT DETAILS	Description of the incident and other related details

## Safe Patient Handling

As part of the Occupational Health group, the Safe Patient Handling Program uses proven methods and the latest specialized devices and equipment to keep Veterans and VA staff safe when patients need to be moved and lifted. National policy requires facility coordinators at every VA medical center as well as Unit Peer Leaders on each patient care unit who coach front-line caregivers. Between FY 2006 and FY 2014, the program led to a greater than 50 percent reduction in the rate of injuries to care providers from moving and handling patients. During FY 2014, the program trained facility coordinators from 114 facilities at a national conference.

## Disaster Preparedness

VEMEC is co-leading a collaboration with the Department of Health and Human Services, the Department of Housing and Urban Development, and other governmental, non-profit, and private sector organizations to develop a Homeless Disaster Planning Toolkit. The purpose of the toolkit is to improve the integration of homeless populations and service providers into disaster preparedness, planning, and response efforts. The toolkit will be geared toward practitioners and policymakers, providing practical guidance and solutions to improve efforts during disasters to assist both homeless service providers and Veterans and families experiencing homelessness. This toolkit will identify best practices, lessons learned, and recommendations from prior efforts to improve disaster preparedness and response for homeless Veterans and their families.

## Education and Risk Communication

Because the WRIISC serves as a leader and innovator in post-deployment health care and research, education and risk communication is a key component and a core part of the WRIISC mission. Reaching providers and VA staff with the right information at the right time is at the forefront of WRIISC education efforts. In FY 2014, the WRIISC completed a series of training projects intended to provide clear, concise, and timely information to Veterans and their providers. The WRIISC National Post-Deployment Provider webinar series reached 2,900 attendees on a variety of post-deployment health topics. The WRIISC also hosted presentations on the clinical management of airborne hazard concerns and environmental exposure assessments to more than 500 attendees, as well as other specialty topic webinars including a webinar on airborne hazards that had more than 800 attendees.

### SUCCESS STORY



In FY 2015, a National Public Radio investigative series featured the Safe Patient Handling program as a success story for reducing nurses' injuries.

# Promoting Health

OPH outreach educates Veterans to improve their health behaviors and to encourage participation in available programs and services, including HIV and hepatitis testing, routine immunizations, smoking cessation, and environmental exposure registries.

## SmokefreeVET

OPH's Tobacco and Health program develops and oversees tobacco use cessation public health policy, clinical programs, and clinical resources for VHA. It is the lead tobacco program within VA and collaborates with other VA program offices and federal Government agencies on joint initiatives and public health campaigns. In FY 2013, Tobacco and Health established SmokefreeVET, a free text messaging program that provides 24/7 encouragement, advice, and tips to help smokers quit smoking and stay quit. In FY 2014, a Spanish version of the program, SmokefreeVET en Español, was made available for the large and growing Spanish-speaking population of Veterans. The texting program is one of the first of its kind in VHA.

## Infection: Don't Pass it On

*Infection: Don't Pass It On* is an ongoing public health campaign lead by OPH to involve VA staff, Veterans, their families, and visitors in preventing the transmission of infection. The campaign develops and distributes education and communication materials for the VA community that promote hand hygiene and respiratory etiquette, annual seasonal influenza vaccination, correct and appropriate use of personal protective equipment, pandemic influenza preparedness and response, and basic public health measures to prevent transmission of infection. The campaign's many resources include the VHA Seasonal Influenza Manual; numerous fact sheets and posters developed in English and Spanish on

## ★ #SMOKEFREEME

In FY 2015, OPH collaborated with VHA Web Communications to host a social media photo collection event. The event, entitled #SmokeFreeMe, was intended to promote tobacco cessation resources such as SmokefreeVET, and to increase engagement with Veterans on social media. Veterans and their friends and families were encouraged to submit photos of themselves participating in healthy activities that are tobacco-free, using the hashtag #SmokeFreeMe. At the end of the submission period, OPH compiled the photos into a collage that was shared on VHA social media platforms with links to OPH resources.



influenza, hand and respiratory hygiene, and pandemic influenza; the Women’s Health Guide on infection prevention; and weekly data reports on patient and staff vaccination, patient hospitalizations, and lab testing.

## News for Veterans

OPH is committed to providing Veterans and their families with the latest information on topics related to public health, and in empowering Veterans to improve and/or maintain their own health and well-being. OPH publishes three newsletters annually: *Post-9/11 Vet*, for OEF, OIF, and Operation New Dawn Veterans; *Gulf War Newsletter* for Veterans who served in Operations Desert Shield and Desert Storm; and the *Agent Orange Newsletter*, for Vietnam-era Veterans. These newsletters feature clear calls to action for Veterans and their families as well as information on the benefits and resources available to them through VA. In FY 2014, OPH refreshed the newsletter template to incorporate a more modern, attention-grabbing design and to increase readability through better organization of text and the use of graphics to emphasize content. The fall 2014 edition of *Post-9/11 Vet* was the first to be published in the new template.



Gulf War and Agent Orange Newsletter Covers, FY2015

## ★ ★ ★ ★ ★ FLU TIPS

As part of the *Infection: Don't Pass It On* campaign, OPH established the "Flu Tip" email series to distribute information on relevant deadlines, guidance and policy, resources, and related flu prevention and program news.

## Health Education

The WRIISC is an educational resource for combat Veterans and their family members and health care providers. The WRIISC's educational programs cover information on topics ranging from environmental exposures and deployment health conditions to self-management techniques for chronic health concerns. Some of the WRIISC's activities during FY 2014 included the development of time-sensitive materials targeting Veterans about exposure to airborne hazards during deployment; a guide for Veterans about the clinical airborne hazard evaluation and registry process; and educational offerings for Veterans and providers, such as classes, webinars, and conferences.

## WRIISC EDUCATIONAL MATERIALS

In addition to print and online brochures and factsheets that are published throughout the year, the WRIISC publishes its newsletter, WRIISC Advantage, three times per year. All of these activities resulted in nearly 34,000 materials being distributed to Veterans in FY 2014.

# OPH by the Numbers

FY2015\*

## Mission

VHA's mission is to honor America's Veterans by providing exceptional health care that improves their health and well-being. **Within VHA, OPH brings a public health approach to protecting the health of Veterans and VA staff.**

## THIS INCLUDES VHA'S NETWORK OF:

**8.93 M**

Veterans enrolled in the VA Health Care System

**151**

VA Medical Centers

**958**

Outpatient Clinics

**300**

Vet Centers

**70**

Mobile Vet Centers

**103**

Domiciliary Residential Rehabilitation Programs

**135**

Community Living Centers



## Response to Congress

OPH provided timely responses to approximately

**41**

congressional inquiries.



## Social Media

» VHA posted **31 Facebook posts** on OPH topics, and VA posted 6.

» OPH posts on Facebook received **27,334 Likes, 2,584 Comments, and 17,808 Shares.**



## Outreach

An integral part of the OPH mission is to promote public health information and resources developed through its several key groups. Toolkits of outreach materials on public health topics are housed on the OPH Public Health Communications Toolkits SharePoint site for access by internal VA/VHA information intermediaries who can ensure that OPH products are reaching their intended audiences.

» The site includes toolkits on **11 different public health topics** including flu, smoking cessation, HIV/AIDS, hepatitis, exposures, burn pits, Camp Lejeune, National Public Health Week, and the VA2K Walk & Roll, with more than 150 components.

» In FY 2015, the site received **12,493 pageviews** and had **2,452 unique visitors.**



## Publications

More than

**50 ARTICLES**

on OPH research studies were published in at least

**33 DIFFERENT JOURNALS**

and other publications including:

- » Medical Care, Official Journal of the Medical Care Section, American Public Health Association
- » Journal of Occupational and Environmental Medicine
- » Prehospital and Disaster Medicine

# Glossary

- » **AIDS**  
Acquired Immunodeficiency Syndrome
- » **CCR**  
Clinical Case Registry
- » **CDC**  
Centers for Disease Control and Prevention
- » **CDMRP**  
Congressionally Directed Medical Research Programs
- » **COHIC**  
National Center for Occupational Health and Infection Control
- » **CSR&D**  
Clinical Science Research and Development
- » **DoD**  
Department of Defense
- » **EHPDIP**  
Employee Health Promotion Disease and Impairment Prevention
- » **FY**  
Fiscal Year
- » **HIV**  
Human Immunodeficiency Virus
- » **HSR&D**  
Health Services Research and Development
- » **IFC**  
Inter Facility Consult
- » **NASA**  
National Aeronautics and Space Administration
- » **NIH**  
National Institutes of Health
- » **OEF**  
Operation Enduring Freedom
- » **OEMedicine**  
Occupational and Environmental Medicine
- » **OIF**  
Operation Iraqi Freedom
- » **OPCC**  
Office of Patient Centered Care
- » **OPH**  
Office of Public Health
- » **PTSD**  
Post-traumatic Stress Disorder
- » **RR&D**  
Rehabilitation Research and Development
- » **VA**  
Department of Veterans Affairs
- » **VEMEC**  
Veterans Emergency Management Evaluation Center
- » **VHA**  
Veterans Health Administration
- » **VISN**  
Veterans Integrated Service Network
- » **WRIISC**  
War Related Illness and Injury Study Center

## ★ CONNECT WITH US



SUBSCRIBE TO RECEIVE EMAIL UPDATES AT  
[WWW.PUBLICHEALTH.VA.GOV](http://WWW.PUBLICHEALTH.VA.GOV)



[FACEBOOK.COM/VETERANSHEALTH](https://FACEBOOK.COM/VETERANSHEALTH)



[TWITTER.COM/VETERANSHEALTH](https://TWITTER.COM/VETERANSHEALTH)



