Service Members and Veterans Mental Health

Goal Leaders:
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FY2014 Quarter 4

Overview

Goal Statement

- Improve mental health outcomes for Service members, Veterans, and their Families.

Background

- Since September 11, 2001, more than 2.6 million Service members have deployed to Iraq or Afghanistan with unprecedented duration and frequency.
- A number of returning Service members have reported difficulties with PTSD, depression, and problematic alcohol use.
- The Departments of Defense (DoD), Veterans Affairs (VA), and Health and Human Services (HHS) are committed to ensuring that all Service members and Veterans have access to high quality, effective, and evidence-based mental health care.

Vision

- To identify and build on effective programs and initiatives that reduce barriers to seeking care, enhancing access and improving the quality of mental health care, and to support innovative research on mental health and substance use care and treatment for Service members, Veterans and their Families.

Progress Update: Quarter 4 Highlights

- Visits to the Make the Connection website (722,698 visits) continue to trend upward and are on track to substantially exceed the target.

- *These Hands* PSA for the Veterans Crisis Line/Military Crisis Line is in top 5% of PSAs being aired nationwide.

- Views of *VA Community Provider Toolkit* increased from 12,697 to 15,355; Toolkit was promoted or presented at 1) Substance Abuse and Mental Health Services Administration meeting on *Behavioral Health Needs of Service Members, Veterans, and Their Families Through Workforce Development* (9/8/14 – 9/9/14); 2) *2014 VA Palo Alto Health Care System Mental Health Summit* (9/20/14); 3) VHA National Mental Health inpatient listserv; and 4) *VA Patient Care Services Annual Report* for 2013.

- Established interagency workgroup to identify, expand and promote DoD, VA and HHS efforts to reduce negative perceptions and increase awareness of resources. The workgroup compiled a list of DoD, VA and HHS initiatives that address barriers to seeking help.

- Several reviews were recently published in American Journal of Prevention Medicine that identify ways to use risk and protective factor findings to improve the short term prediction of suicidal behavior and prognostic models to detect and monitor near-term risk of suicide that may be tested in various health care settings.

- The Research Prioritization Task Force (RPTF) of the National Action Alliance for Suicide Prevention analyzed funded U.S. research studies to assess the "state of the science" for suicide prevention. Portfolio analyses of research from 2008-2013 have been drafted on 1) interventions, services and infrastructure for suicide research and 2) factors related to why people become suicidal, risk detection and prediction.

Action Plan Summary

Sub-goal	Major Actions to Achieve Impact (Lead Agency)	Key Indicators
1: Reduce barriers for Service members, Veterans and their Families to seeking mental health treatment and support	• Reduce negative perceptions and increase awareness of resources (VA, DoD, HHS) • Evaluate quality and effectiveness of Military OneSource (DoD) • Evaluate quality and effectiveness of Veterans Crisis Line (VCL)/Military Crisis Line (MCL) (VA, DoD) • Host VA Mental Health Summits (VA)	• **Make the Connection**: Total number of visits to www.maketheconnection.net • **Veterans Crisis Line /Military Crisis Line (VCL/MCL)**: Total number of Public Service Announcements (PSAs) media impressions for PSAs • **Real Warriors**: Expand reach through targeted media activity (e.g., Print features, PSAs, Audio news releases, Satellite media tours) • **HHS Media Campaign**: Number of "clicks" on each campaign URL total and by social media platform • **Military OneSource**: Percent of participants receiving non-medical counseling who report being satisfied with services • **VCL/MCL**: Percent of calls for which end-of-call outcomes is obtained • **VCL/MCL**: Percent of monitored calls that meet monitoring expectations • Number of VA facilities that led a Mental Health Summit
2: Enhance access to and improve the quality of mental health care and support available to Service members, Veterans and their Families	• Evaluate and improve existing community collaboration efforts (VA, HHS) • Expand telemental health (VA, DoD) • Enhance integration of mental health and substance use care into primary care (VA, DoD) • Support open resource directory of vetted resources (VA, DoD, HHS) • Extend data sharing across DoD and VA health care	• Report results of formal evaluation of VA/Community Mental Health (CMH) Pilots to VA stakeholders • FY14 telemental health unique users will increase to 115,914 • There will be a 10 percent increase in Army telemental health encounters in FY14 • Number of Service members, Veterans and their Families receiving behavioral health services in primary care settings • Number of page views/visits for Community Provider Toolkit, military culture website and SAMHSA Store • Number of users of Joint Legacy Viewer: 3,500 by 10/1/14; 200,000 by 10/1/15

Action Plan Summary

Sub-goal	Major Actions to Achieve Impact (Lead Agency)	Key Indicators
3: Identify and develop more effective diagnostic and treatment methodologies to improve outcomes, including traumatic brain injury (TBI), posttraumatic stress disorder (PTSD) and related conditions	• Standardize and integrate measurements for traumatic brain injury (TBI), posttraumatic stress disorder (PTSD), and suicide prevention, across the research funded by DoD, VA, and NIH to advance research and health care (DoD, VA, HHS) • Develop and test suicide risk assessments and suicide prevention and treatment interventions for Service members and Veterans (DoD, VA, HHS)	• Release one set of general mental health CDE and 2 topic-specific CDE measures (for PTSD and suicide prevention), to allow scientists access to consistent assessment tools • Make at least one database available for all qualified researchers to upload appropriate mental health research data (including PTSD and suicide prevention CDE). Database will be active and open to scientific queries to researchers across agencies • Provide one set of recommendations on promising approaches for risk factor and protective factor assessments, based on comparative analyses for suicide risk detection in Service members and Veterans Complete one cross agency research portfolio analysis of methods to prevent and treat suicidal behaviors

Work Plan – Sub-goal 1: Barriers

Purpose

Reduce barriers for Service members, Veterans and their Families to seeking mental health treatment and support by identifying, expanding, and promoting programs, initiatives, and efforts to reduce negative perceptions, increasing awareness of resources, identifying needs of military-connected families, and linking with community resources. Evaluate and improve DoD and VA public awareness campaigns to overcome negative perceptions and promote awareness; evaluate the quality and effectiveness of the Military OneSource Platform and Programs and the Veterans and Military Crisis Lines and plan continued program improvements; continue to host VA Mental Health Summits to identify unmet needs of Veterans and their Families, and to identify and enhance understanding of community-based programs and services to support mental health needs of Veterans and their Families.

Barriers/Challenges

- Negative perceptions (internal, institutional, and/or social) of mental health issues
- Lack of confidence in systems of care
- Lack of psychological health literacy
- Lack of awareness of resources

Work Plan – Sub-goal 1: Barriers

Milestone Summary			
Key Milestones	**Milestone Due Date**	**Milestone Status**	**Owner**
Priority Action 1: Identify, expand, and promote efforts to reduce negative perceptions and increasing awareness of resources			
Increase visibility of current DoD, VA and HHS information campaigns related to outreach and reducing barriers	September 2015	On Track	DoD, VA, HHS
Priority Action 2: Evaluate the quality and effectiveness of Military OneSource Platform and Programs			
A participant feedback satisfaction survey will be designed to follow-up with participants to gauge quality and effectiveness measures of non-medical counseling services provided via the Military OneSource and Military and Family Life Counseling Programs	August 2015	On Track	DoD
Priority Action 3: Evaluate the quality and effectiveness of Veterans Crisis Line (VCL) and Military Crisis Line (MCL) and plan for continued program improvements			
Determine effectiveness of calls to VCL/MCL in real time, develop a plan to translate existing research on end-of-call outcomes into VCL/MCL practice	Q1 FY16	Complete	VA
Priority Action 4: Host VA Mental Health Summits to identify unmet needs and to identify and enhance understanding of community-based programs and services			
Hold facility led Mental Health Summits with community -based programs and organizations supporting Veterans and their Families	September FY14; September FY15	Complete for FY14	VA

Work Plan – Sub-goal 2: Access

Purpose

Enhance Service member, Veteran and Family access to mental health care and support by identifying, consolidating and building on successful DoD and VA programs and initiatives. Evaluate and improve existing VA-community collaboration pilot programs and promote expansion of formal arrangements and collaborations with community providers; expand telemental health care to meet demand and facilitate access to care; build on efforts to integrate mental health and substance use care into primary care programs; support an open source directory of vetted resources to aid community-based providers, Service members, Veterans and their Families in identifying available resources; extend data sharing across DoD and VA health care locations to ensure that critical data in DoD and VA medical records are viewable by clinicians, health professionals and program administrators who require access to treat Service members, Veterans and their Families.

Barriers/Challenges

- In some geographical areas there may not be VA sites nor available community mental health providers
- Contracting processes for establishing community partnerships may be lengthy and are not uniform across catchment areas

Work Plan – Sub-goal 2: Access

Milestone Summary			
Key Milestones	**Milestone Due Date**	**Milestone Status**	**Owner**
Priority Action 1: Evaluate/improve existing VA-community collaboration pilot programs and promote expansion of formal arrangements/collaborations with community providers			
Quantitative and qualitative evaluation of the 24 VA/Community Mental Health (CMH) Pilot sites	December 2014	On Track	VA
Priority Action 2: Expand telemental health			
Increase the number of Veterans in FY14 and FY15 receiving telemental health services across VA including those provided by the National Telemental Health Center by expert clinicians	December 2014; December 2015	Missed*	VA
Increase the number of Army telemental health providers to support Child and Family Behavioral Health Services	September 2014	Missed**	DoD
Priority Action 3: Enhance integration of mental health and substance use care into primary care programs*			
Increase Connection of Service Members, Veterans and their Families with mental health issues to primary care services	December 2014; December 2015	On Track	HHS
Increase Veteran access to behavioral health services within primary care settings	September 2015	On Track	VA
Increase Service member and Family access to behavioral health services within primary care settings to include retired Service members and their adult family members	September 2015	On Track	DoD

Continues to improve but fell short of goal for FY14.

** Fell short of aspirational goal for FY14 due to change in strategy; disruptions associated with TBH support after Ft. Hood incident; and re-organization.*

*** Milestones previously collapsed in earlier updates have been separated for DoD, VA, and HHS to account for differences in reporting cycles and trends.*

Work Plan – Sub-goal 2: Access (cont.)

Milestone Summary			
Key Milestones	**Milestone Due Date**	**Milestone Status**	**Owner**
Priority Action 4: Create a directory of vetted resources to aid community-based providers			
Continue to expand and promote vetted resources to aid community-based providers, including the military culture training, VA Community Provider Toolkit (www.mentalhealth.va.gov/communityproviders), and relevant publications on the SAMHSA Store	Ongoing	On Track	DoD, VA
Priority Action 5: Extend data sharing across DoD and VA health care			
Expand the pilot to at least 1,000 DoD and 2,500 VA users that includes all of the information in both AHLTA and VistA	October 2015	On Track	DoD, VA

Work Plan – Sub-goal 3: Research

Purpose

- DoD, VA, and NIH are collaborating on research on TBI, PTSD, and suicide prevention. However, research projects frequently use different measurements of key variables. This may make it difficult to compare and combine the results of multiple studies. The agencies will gain consensus on a set of Common Data Elements (CDE) for PTSD and suicide prevention research to complement and enhance the CDE that were recently developed for TBI research. This will improve the ability to combine data and compare findings across studies. Increased abilities to combine data across studies and to replicate findings are important for progress overall, and essential to address outcomes such as suicide among Service members and Veterans.

- DoD, VA, and NIH are collaborating on research on suicide prevention and related health conditions. There are numerous suicide screening and risk assessment tools; however, there has been insufficient research evaluating the ability of these tools to assess the likelihood of future suicidal behavior. Few evidence-based methods are available to assess prospective suicide risk. There is also a lack of evidence-based interventions that are ready to implement to effectively prevent and treat the spectrum of suicidal behaviors. This collaborative effort will advance the clinical care of individuals who are at risk for suicidal behavior.

Barriers/Challenges

- Barriers in data sharing among research projects currently delay the discovery and validation of improved diagnostic tools and effective treatments for TBI, PTSD, and suicide prevention for Service members and Veterans.

- Barriers in Coordination: The agencies need to determine how to build on the multiple existing efforts of DoD, VA, and NIH that are underway, and to traverse the landscape of disparate IT infrastructure capabilities and resources.

- Barriers in Infrastructure: There are several existing diverse databases where research data may be stored. Leveraging the appropriate infrastructure is needed for inclusion or expansion of PTSD and suicide prevention CDE.

- Barriers in Resources: Rigorously designed studies of risk assessments and interventions for suicide are expensive, time-consuming and difficult to conduct.

- Barriers in Expertise: There is a limited pool of researchers who have the expertise to successfully conduct studies related to suicide.

Work Plan – Sub-goal 3: Research

Milestone Summary			
Key Milestones	**Milestone Due Date**	**Milestone Status**	**Owner**
Priority Action 1: Standardize and integrate measurements for TBI, PTSD, and suicide prevention, across the research funded by DoD, VA and NIH to advance research and health care			
Define a minimum set of general and topic-specific Common Data Elements (CDE) that can be adopted for PTSD and suicide prevention research to complement and enhance CDE that were recently developed for TBI. The agencies will participate in a CDE consensus process based on recommendations of scientific leaders and agency liaisons and community input to identify CDE for PTSD and suicide prevention research	December 2016	On Track	DoD, VA, HHS
Establish or expand databases that use CDE. The agencies will work with existing and evolving databases and investigators to develop data dictionaries and unique data elements to represent new CDE being collected	December 2016	On Track	DoD, VA, HHS
Priority Action 2: Develop and test suicide risk assessments and suicide prevention and treatment interventions for Service members and Veterans			
Characterize prospective risk factors and protective factors associated with suicidal behaviors in Service members and Veterans. Translate these to risk detection actions that can lead to early intervention	Winter 2016 – Spring 2017	On Track	DoD, VA, HHS
Develop and test prevention and treatment interventions for suicidal behaviors	Winter 2016	On Track	DoD, VA, HHS

Key Indicators: Sub-goal 1: Barriers

Key Implementation Data

Indicator	Source	Baseline	Target	Frequency	Latest data	Trend
Make the Connection: Total number of visits to www.maketheconnection.net	VA	1,390,618 (FY13 Visits)	10% increase per year	Quarterly	722,698 (Q4 FY14) Total FY14 visits= 2,651,837	On track to substantially exceed target
Veterans Crisis Line /Military Crisis Line (VCL/MCL): Current PSA ranking	VA	FY14 PSA "These Hands" ranked 29th inside the top 2% according the Nielsen Sigma data	New PSAs will be within top 10% of all PSAs being aired nationwide	Bi-annually	"Commitments" PSA (4.5 month mark) top 5%	"Commitments" PSA gained a percent this quarter in rankings and far exceeds the target
Real Warriors: Expand reach through targeted media activity	DoD	N/A	4 per quarter	Quarterly	5 (Q4 FY14)	Exceeds quarterly target
HHS Media Campaign: Number of "clicks" on each campaign URL total and by social media platform	HHS	178 (based on Q3 FY14)	Increase clicks 10% annually	Quarterly	184 clicks	Not enough data to determine trend
Military OneSource: Percent of participants receiving non-medical counseling who report being satisfied with services	DoD	92%	90%	Quarterly	93.43%	No Change (within 1%)

Key Indicators: Sub-goal 1: Barriers (cont.)

Key Implementation Data						
Indicator	**Source**	**Baseline**	**Target**	**Frequency**	**Latest data**	**Trend**
VCL/MCL: Percent of calls for which end-of-call outcomes is obtained	VA	TBD (based on Q1 FY15 data)	TBD, Q2 FY15	Quarterly	N/A*	N/A*
VCL/MCL: Percent of monitored calls that meet silent monitoring expectations	VA	TBD (based on Q2 FY15 data)	TBD, Q3 FY15	Quarterly	N/A	N/A
Number of VA facilities that led a Mental Health Summit	VA	TBD	75%	Annually	141 (99% of 142)	99% complete; final summit will be conducted November 2014

Data capture system is in use; data expected end of Q1 FY15.

Key Indicators: Sub-goal 2: Access

Key Implementation Data						
Indicator	**Source**	**Baseline**	**Target**	**Frequency**	**Latest data**	**Trend**
Report results of formal evaluation of VA/Community Mental Health (CMH) Pilots to VA stakeholders	VA	0	1	Q2 FY15	N/A*	N/A*
FY14 telemental health unique users will increase to 115,914	VA	~100,990 (FY13)	115,914	Quarterly	108,766 (Q1-Q4 FY14)	Continues to improve; fell short of FY14 aspirational goal
There will be a 10 percent increase in Army telemental health encounters in FY14	Army	29,508 Encounters (FY13)	32,459 Encounters	Annually	27,688 (Q1-Q4 FY14)	Fell short of aspirational goal for FY14 due to change in strategy; disruptions associated with TBH support after Ft. Hood incident; and re-organization
Number of Service members, Veterans and their Families receiving primary care services in behavioral health settings	HHS	TBD	TBD	Quarterly	1,779 (Q3 + Q4)	Not enough data to determine trend
Percent of primary care population that has had a behavioral health care provider visit in primary care	VA	6.8%	10%	Quarterly	7 percent**	No change in past quarter;
Percent of patients that had at least one appointment with their primary care provider who also had at least one appointment with a primary care behavioral health provider	DoD	0.2%	2%	Quarterly	N/A***	N/A***

Analysis of findings from pilot program are underway and will be reported in Q2FY15.
**Data lags 6 months behind, reflects performance at end of Q2.*
*** Data anticipated to be ready for reporting beginning of 2015.*

Key Indicators: Sub-goal 2: Access (cont.)

Key Implementation Data

Indicator	Source	Baseline	Target	Frequency	Latest data	Trend
Number of page views for VA Community Provider Toolkit	VA	11,027 page views for Q1 FY14	Maintain or increase # of page views	Quarterly	15,355	Increase
Total number visits to VA/DoD military culture website	DoD	1,196 (based on Q3 FY14)	TBD	Quarterly	3,898 unique visitors 5,411 visits including return users	Increase
Total number of views of the relevant/highlighted on the SAMHSA Store	HHS	TBD	TBD	Quarterly	0	Website redesign will allow tracking of this indicator next quarter
Number of users of the Joint Legacy Viewer -3,500 by 10/1/14 -200,000 by 10/1/15	DoD	DoD 120, VA 150	DoD 1,000; VA 2,500	Quarterly	No changes as of Sept 30; approximately 250 total user at that time	The new release went live in October; User numbers will rise as the roll out proceeds

Key Indicators: Sub-goal 3: Research

Key Implementation Data						
Indicator	**Source**	**Baseline**	**Target**	**Frequency**	**Latest data**	**Trend**
Release one set of general mental health CDE and two topic-specific CDE measures (for PTSD and suicide prevention), to allow scientists access to consistent assessment tools	DoD, VA, HHS	Zero	November 2014	N/A	Expect to release general mental health (primarily demographics), suicide prevention, and PTSD CDE before end of year	N/A
Make at least one database for all qualified researchers to upload appropriate mental health research data (including PTSD and suicide prevention CDE). Database will be active and open to scientific queries to researchers across agencies	DoD, VA, HHS	Zero	October 2015	N/A	N/A	N/A
Provide one set of recommendations on promising approaches for risk factor and protective factor assessments, based on comparative analyses for suicide risk detection in Service members and Veterans	DoD, VA, HHS	Zero	May 2015	N/A	N/A	N/A

Key Indicators: Sub-goal 3: Research

Key Implementation Data						
Indicator	**Source**	**Baseline**	**Target**	**Frequency**	**Latest data**	**Trend**
Complete one cross-agency research portfolio analysis of methods to prevent and treat suicidal behaviors	DoD, VA, HHS	Zero	November 2014	N/A	The Research Prioritization Task Force (RPTF) of the National Action Alliance for Suicide Prevention analyzed funded U.S. research studies to assess the "state of the science" for suicide prevention; A portfolio analysis document of research on interventions, services, and infrastructure for suicide research spanning 2008-2013 has been drafted and circulated to all contributors for review and concurrence	

Contributing Programs

Department of Defense

- Defense Health Agency (DHA)
- Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE)

Department of Health and Human Services

- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Health Resources and Services Administration (HRSA)

Department of Veterans Affairs

- Veterans Health Administration (VHA)