

CONSORTIUM • PBRN

VA WOMEN'S HEALTH RESEARCH NETWORK

Supporting Practice and Research Collaboration

Spotlight on Women Cyberseminar Series

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Conducting Research with VA Data on Military Sexual Trauma

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Poll Question

- What best describes your position in the VA?
 - Researcher
 - Clinician
 - MST Coordinator
 - Administrator/Policy maker
 - Other

Poll Question

- How much familiarity do you have with VA administrative data on military sexual trauma (MST)?
 - Very familiar
 - Moderately familiar
 - Somewhat familiar
 - A little bit familiar
 - Not familiar at all

Topics

- Military Sexual Trauma (MST) Support Team
- Overview of MST Screening and Treatment at the VA
- MST Data Issues
- VA Administrative Data on MST
- Examples of Recent MST Research
- Future Directions for MST Research

The MST Support Team

The MST Support Team was established by the Office of Mental Health Services to:

1. Conduct legally mandated monitoring of MST screening and treatment within VHA
2. Oversee legally mandated MST-related education and training within VHA
3. Promote best practices for MST screening and treatment within VHA
4. Offer policy recommendations related to MST for consideration by OMHS

**Monitoring
Division:** Monitor
MST screening &
treatment



**Education &
Training Division:**
Oversee MST-
related education
& training



MST Support Team:
Promote best
practices for MST
screening &
treatment; offer policy
recommendations
related to MST

MST Support Team Annual Reports

1. MST Screening Report
2. Summary of MST-Related Outpatient Care
3. MST Screening in Community Based Outpatient Clinics (CBOCs)
4. Summary of MST-Related Outpatient Care in CBOCs
5. MST Screening and Summary of MST-Related Outpatient Care: Special Report of OEF/OIF Veterans

<https://vaww.mst.va.gov>



Overview

- Quick Reference to Key Resources
- Background Information on MST

Find a Person in the MST Community

- Find an MST Coordinator
- Find an MST VISN-level Point of Contact
- MST Support Team

MST Administration and Benefits

- VA MST Policies and Treatment Benefits
- Monitoring
- **National MST Screening & Treatment Data**
- Information for Clinical Application Coordinators
- For MST Coordinators and VISN-level POCs

Provider Training & Education Materials

- Raising Awareness and Increasing Access
- Training Opportunities
- Handouts, Manuals and Websites
- MST Teleconference Training Series
- MST Training Videos

Resources to assist with interpreting and using the data for your facility

- 📄 **Worksheet: Using the MST Reports to Evaluate Standards within VHA Directive 2010-033**
This tool will help you apply the information from the MST Monitoring Reports. Completing it will provide you with a number of comprehensive sentences that you can use to communicate to staff and leadership at your facility.
- 📄 "How to" step by step instructions and an example of a completed worksheet
- 📄 **Orientation to MST Screening and Treatment Reports**
This presentation will walk you through the types of information you can find in the MST Screening and Treatment Reports, and how to find and interpret the data for your facility. The focus is on the reports providing numbers for both medical centers and CBOCS.
- 📄 **Orientation to MST CBOC Reports**
This presentation will walk you through the types of information you can find in the MST CBOC Reports, and how to find and interpret the data for your facility. The focus is on the reports providing numbers just for CBOCS.

FY '10

- 📄 **Monitoring MST Screening Nexus Clinics, FY '10**
Lists clinics included in MST Support Team Screening Reports
- 📄 **Memo Releasing MST Screening and Treatment Reports FY '10**
Provides an overview of report findings and comparison with previous years
- 📄 **MST Screening Report, FY '10**
Provides rates of screening of all Veterans broken down by facility for Fiscal Year 2010
- 📄 **Summary of MST-Related Outpatient Care Report FY '10**
Provides MST-related outpatient treatment encounters broken down by facility for all Veterans for Fiscal Year 2010

MST Resources Homepage

- Archived Teleconference Training Series Calls
- Public laws and regulations related to MST
- Training handouts
 - “Top 10 Things All VA Staff Should Know About MST”
- Monitoring/documentation handouts
- Sample presentations

What is Military Sexual Trauma (MST)?

VA's definition of MST comes from Public Law

“Psychological trauma, which in the judgment of a mental health professional employed by the Department, resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment [“repeated, unsolicited verbal or physical contact of a sexual nature which is threatening in character”] that occurred while a Veteran was serving on active duty or active duty for training.”

Title 38 US Code 1720D

MST Screening

- Universal screening for MST began in FY 2002.
- All Veterans are screened for MST once using clinical reminder
 - Although the screen is only given once, MST status can be changed by a provider at any time
- VHA Directive 2010-033 states that screening must be conducted in appropriate clinical settings by providers
- Completed using Clinical Reminder in CPRS

MST Screening

Questions: “When you were in the military...

- Did you ever receive uninvited or unwanted sexual attention (i.e. touching, cornering, pressure for sexual favors, or inappropriate verbal remarks, etc?)”
- Did anyone ever use force or the threat of force to have sex with you against your will?”

Veterans who respond positively to either item are considered to have a positive screen for MST.

MST Screening

- Responses to MST Screening

NO-Denies prior MST (answered “No” to both questions)

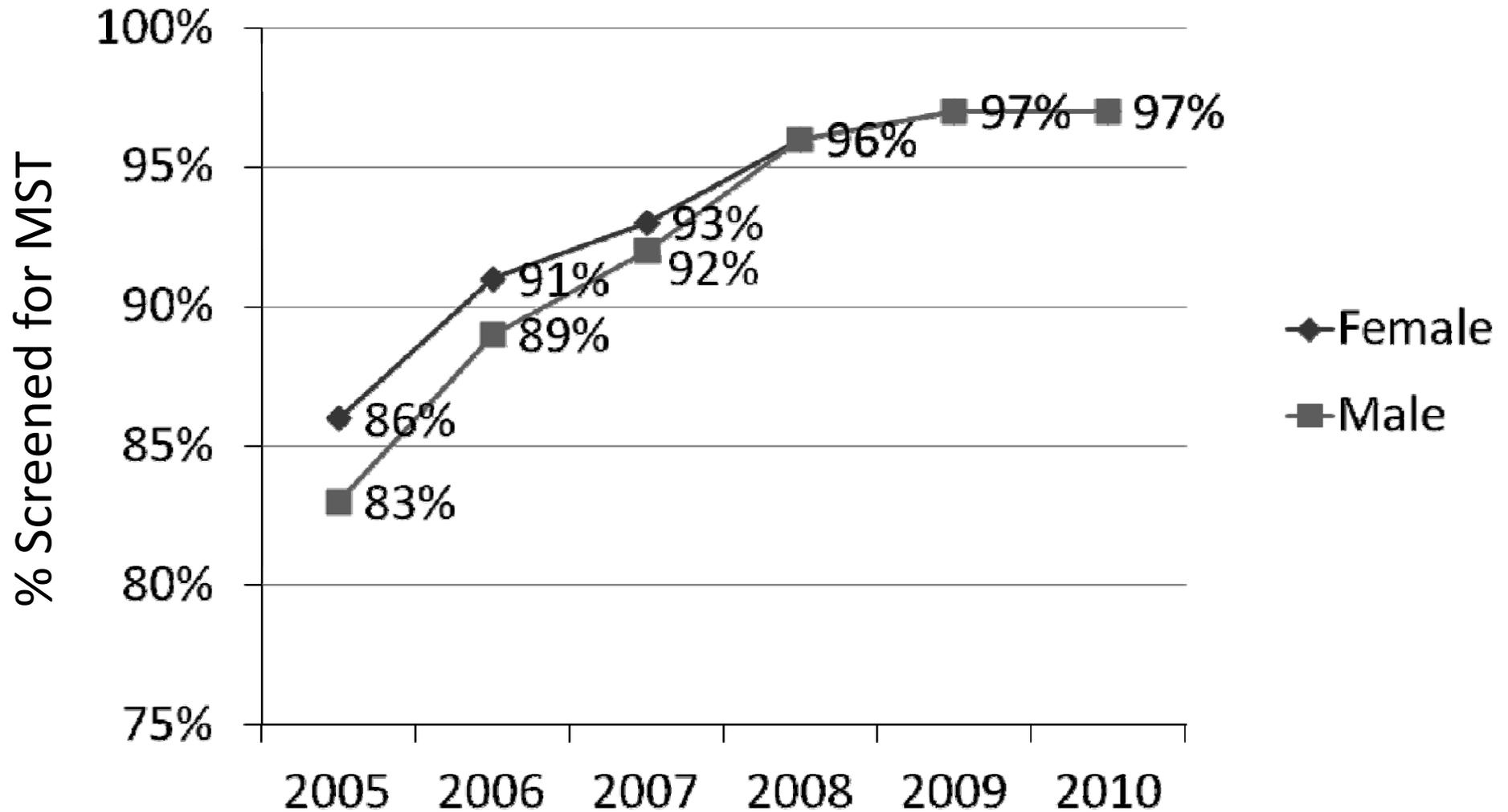
YES-Reports MST in the past (answered “Yes” to one or both questions)

DECLINED TO ANSWER-Patient declined to answer questions regarding MST

MST Screening

- Determining those eligible for MST screening
 - Patient must be a Veteran
 - At least one outpatient encounter at a nexus clinic, as defined by the Office of Quality and Performance (OQP)
 - Consistent with performance measure monitoring
 - See OQP Technical Manual Q4, FY2010
 - Addition of Women’s Stress Disorder Treatment Team clinic as “nexus”

MST Screening Rates Over Time



VHA MST Screening Data FY 2010

	Women	Men
% of All Veteran VHA users with a positive screen for MST	22.4%	1.2%
% of OEF/OIF/OND Veteran VHA users with a positive screen for MST	18.5%	0.8%
% of Homeless Veteran VHA users with a positive screen for MST	38.7%	3.2%

Data Issue: Variations in MST Screening Questions

- Facilities are required to use the national version of MST Clinical Reminder [VHA Directive 2010-033]
- Recent efforts to standardize the MST screening questions
 - Initiative identified a small number of facilities using non-standard MST screening questions
 - All non-standard MST screening questions have been corrected as of FY 2012

Data Issue: Facilities with Default Responses

- Problems with MST Clinical Reminder implementation have resulted in data quality issues
 - For example, MST CR defaults to “yes” or “decline” for all patients during a period of time
- These facilities have been **grayed out** of our annual MST reports
- Consult annual MST reports produced by MST Support Team for facilities with known clinical reminder implementation problems

Data Issue: Incomplete MST Data

- Implementation problems have led to incomplete transmission of MST data from the local facility to national data warehouses
 - Facilities have incorrect health factor mappings; not using the national MST CR
- One facility has been **grayed out** of our annual MST reports (FY 2010)
- Consult annual MST reports produced by MST Support Team for facilities with known clinical reminder implementation problems

Data Issue: Low MST Screening

- Implementation problems related to the MST Clinical Reminder activation settings have led to low MST screening data at some facilities
 - Facilities may have an MST CR that is incorrectly assigned only to mental health clinics
- Consult annual MST reports produced by MST Support Team for facilities for facilities that have low MST screening rates

MST-Related Care is Free

- Inpatient, outpatient, and pharmaceutical care for physical and mental health conditions related to a Veteran's experiences of MST is provided free of charge
- Providers of services make the determination of whether the care provided in a session is MST-related
 - Based on clinical judgment
 - Providers indicate that care is MST-related by checking the encounter form checkbox
- The encounter checkbox ensures that Veterans are not billed for the visit

Mental Health Diagnoses Commonly Associated with MST

- VHA's national monitoring data reveals that the diagnoses most commonly associated with MST among users of VA healthcare are:
 - PTSD
 - Major Depression
 - Schizophrenia and Psychoses
 - Substance Abuse
 - Mania/Bipolar Disorders

Data provided by the Office of Mental Health Services' Military Sexual Trauma Support Team

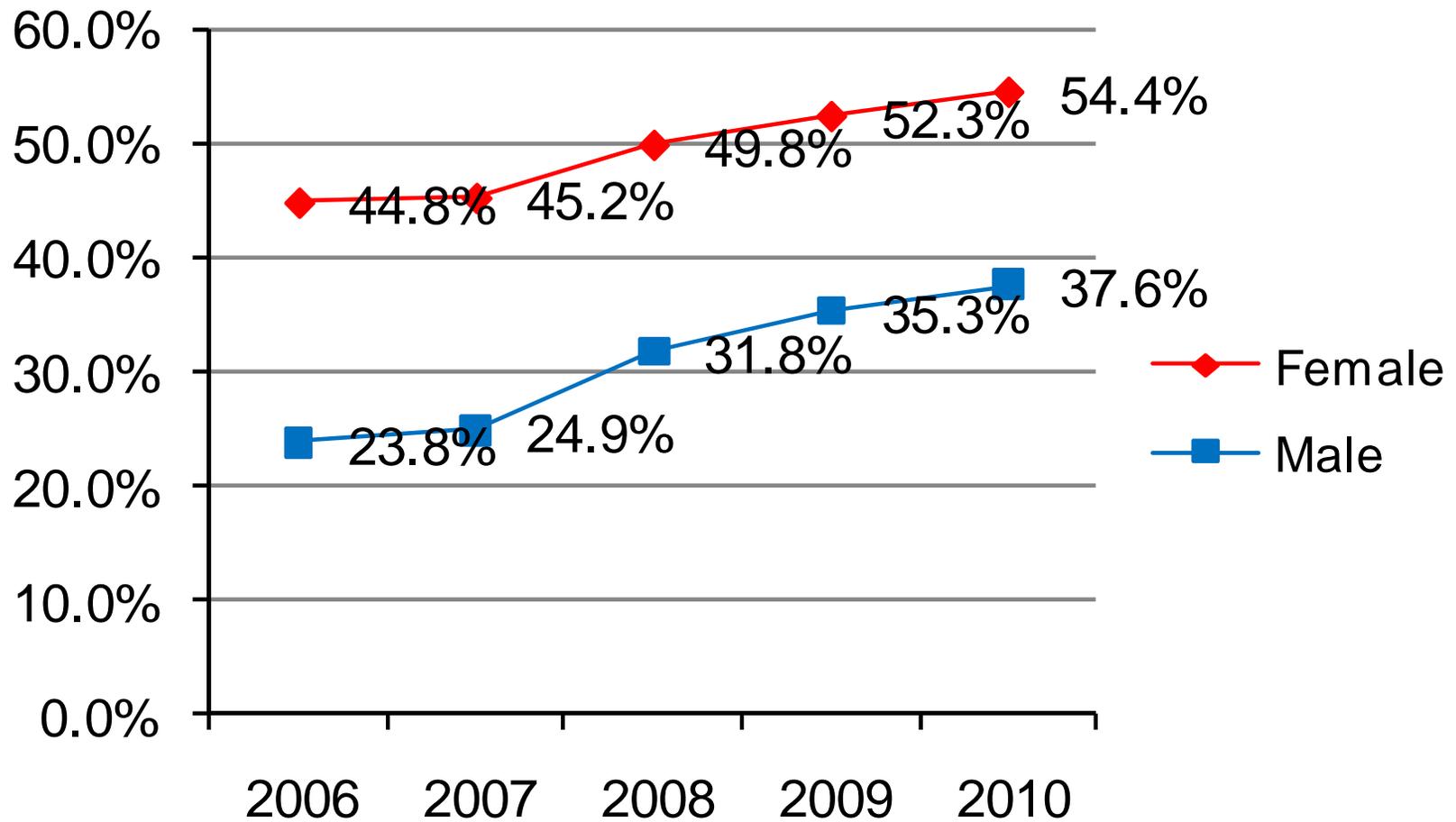
Medical Issues Commonly Associated with MST

- Behaviorally linked conditions, including liver disease, pulmonary disease, obesity, and hypertension are associated with MST among VHA patients (Frayne et al., 1999; Kimerling et al., 2007)
- Sexually transmitted infection and sexual dysfunction disorders (Turchik et al, in press)

MST-Related Care

- MST is an experience, not a diagnosis
- Although VHA clinicians offer services to all Veterans with positive screens, not all Veterans who report MST will require care in any given year
- The amount of MST-related care required by each Veteran will vary due to the wide range of associated clinical conditions and their severity

Proportion of MST+ Veterans with an MST-Related MH Encounter by Year



MST-Related Mental Health Care FY 2010

	% of Veterans with at least one MST-related MH Encounter	
	Women	Men
All Veterans	54.4%	37.6%
OEF/OIF/OND Veterans	58.4%	48.3%
Homeless Veterans	87.2%	77.5%

MST-Related Encounters

- There were 696,250 MST-related encounters of any type in FY 2010
- The majority (81%) of MST-related encounters are for mental health care
 - Equal to 562,986 MST-related mental health encounters

Why not Clinic Stop 524?

- Clinic Stop 524 (Active Duty Sexual Trauma) cannot capture the breadth of treatment for which Veterans with experiences of MST are eligible
- Providers are asked to use the MST encounter checkbox to indicate care that, in their clinical judgment, was delivered for the treatment of conditions related to MST

VA Administrative Data: MST Screening Data

- DSS National Outpatient Extract
 - ***Variable Name: MST***
 - Definition: MST status
 - Data available: FY 2002 Q2 to date
 - Responses are
 - Y, N, D
 - “D” is counted as “screened” for annual MST reports

MST Encounter Data

- NPCD/Medical SAS Outpatient Events (SE) File
 - ***Variable Name: MST***
 - Definition: Indicates whether encounter relates to Military Sexual Trauma
 - Data Available: FY 2006 to date
- DSS National Outpatient Extract
 - ***Variable Name: MST_ENC***
 - Definition: Encounter MST
 - Data Available: FY 2006 Q3 to date

Other Considerations when Working with MST Data

- Veterans can change their response to the MST screen at any time
 - Generally, last MST status is appropriate for analyses
- MST screening data cannot be separated between sexual assault and sexual harassment
- Inconsistent gender data
- May consider excluding facilities outside of U.S. (e.g., Manila)

Examples of MST Data in Research

- Kimerling, R., Pavao, J., Valdez, C., Mark, H., Hyun, J.K., Saweikis, M. (2011). Military Sexual Trauma and Patient Perceptions of Veterans Health Administration Health Care Quality. *Women's Health Issues*. 21(4S): S145-S151.
- Hyun, J.K., Kimerling, R., Cronkite, R.C., McCutcheon, S., Frayne, S.M. (in press) Organizational Factors Associated with Screening for Military Sexual Trauma. *Women's Health Issues*.

MST and Satisfaction with VHA Care

- Purpose: To investigate patient satisfaction between women and men who do and do not report experiences of MST

MST and Satisfaction with VHA Care

- Data Sources:
 - FY 2007 data
 - Office of Quality and Performance's Survey of Healthcare Experiences of Patients (SHEP)
 - MST Data Archive

MST and Satisfaction with VHA Care

- 10 satisfaction measures were analyzed using standard OQP satisfaction measures
 - Overall Satisfaction with VHA care in the last two months
 - Overall Coordination
 - Continuity
 - Access
 - Courtesy
 - Education & Information
 - Emotional Support
 - Patient Preferences
 - Visit Coordination
 - Specialist Care

MST and Satisfaction with VHA Care

- Key Findings:
- MST status was not associated with overall satisfaction ratings of VHA health care, after adjusting for patient characteristics
- Among male Veterans, there was no association between MST status and subdomains of health care satisfaction

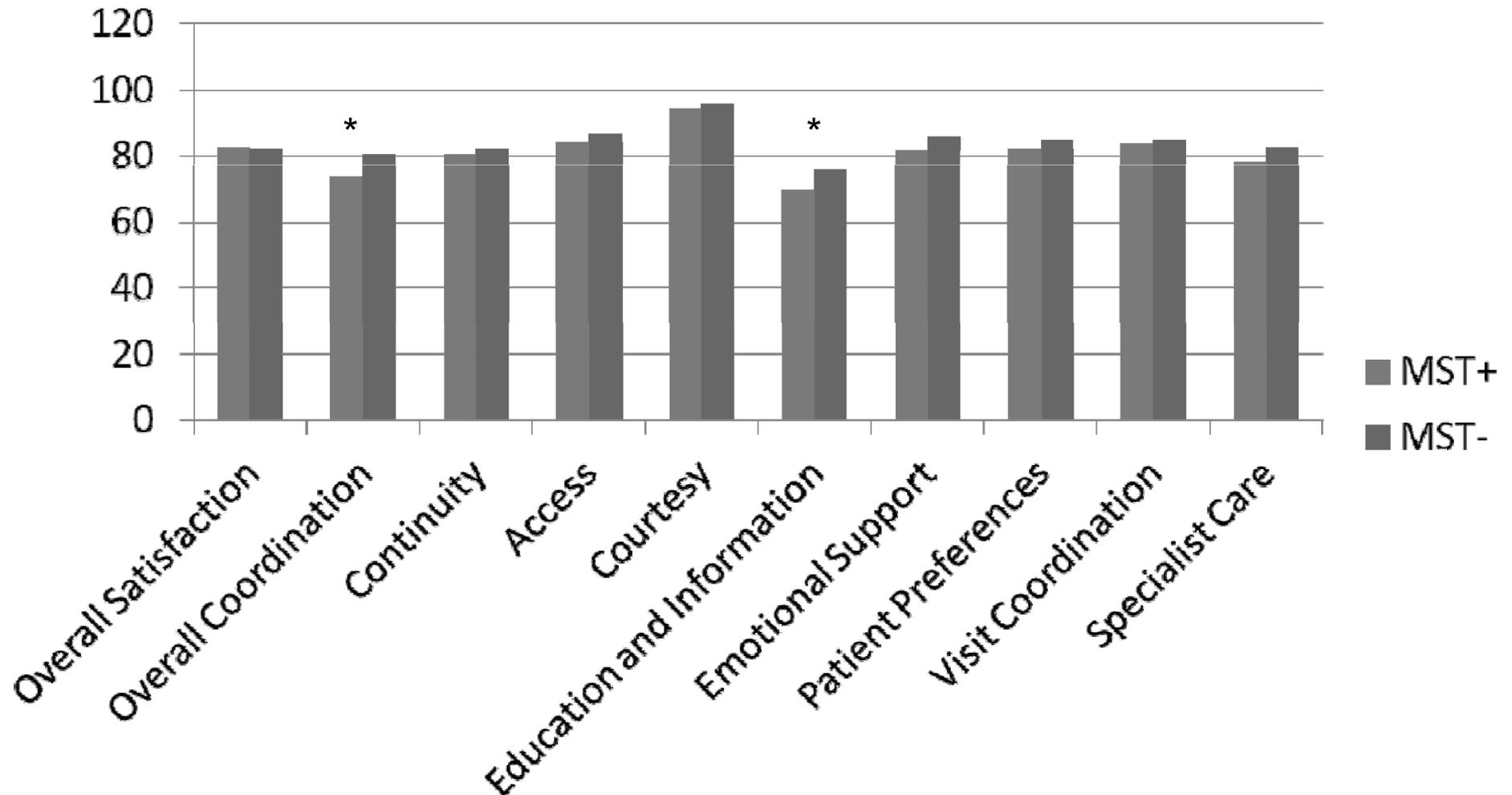
MST and Satisfaction with VHA Care

- Female Veterans with a history of MST rated satisfaction *lower* in these subdomains:
 - Overall Coordination
 - Education & Information
- Findings may reflect generally on the experiences of Veterans with complex medical and mental health disorders

MST and Satisfaction with VHA Care

Adjusted Mean Scores for Overall Satisfaction and Dimensions of Satisfaction Stratified by MST Status, Women (n=5,758)			
	MST+	MST-	p-Values for Differences by MST
Overall Satisfaction	82.5	82.2	0.888
Overall Coordination	73.8	80.4	0.006
Continuity	80.3	82.2	0.509
Access	84.2	86.7	0.195
Courtesy	94.5	95.9	0.356
Education and Information	69.7	76.1	0.012
Emotional Support	81.8	85.8	0.066
Patient Preferences	82.1	85	0.166
Visit Coordination	84	84.9	0.636
Specialist Care	78.4	82.5	0.08

Adjusted Mean Scores for Overall Satisfaction and Dimensions of Satisfaction Stratified by MST Status, Women (n=5,758)



Organizational Factors and MST Screening

- Purpose: To investigate organizational factors related to MST screening and the differential influence of these organizational factors on new, as well as continuing, VHA users

Organizational Factors and MST Screening

- Data Sources: This study merged 5 facility-level datasets with patient-level data from the VHA Outpatient Events File, FY 2005
 - Facility data from VHA's Outpatient Events File
 - Decision Support System Account Level Budget Cost Centers (ALBCC)
 - New England PTSD Evaluation Center (NEPEC) report on specialized PTSD programs
 - Plan of Care/Clinical Inventory Survey by the Women Veterans Health Strategic Healthcare Group
 - National Survey of MST Practice

Organizational Factors and MST Screening

- Key Findings:
 - Facility policies that promote universal MST screening, as well as audit and feedback practices at the facility, significantly improved the odds of patients receiving MST screening.
 - Women (both new and continuing) who used a Women's Health Clinic were more likely to have been screened for MST

Organizational Factors and MST Screening

- However, women in facilities with a Women's Health Clinic, but who did not receive their care at those clinics were no more likely to have been screened for MST than women in facilities without a Women's Health Clinic
 - Suggesting either no or equal diffusion of specialized knowledge across all VHA facilities

Future Directions in MST Health Services Research

- Access to MST-related care
 - Patient level and system level
- MST and men
- Processes of care and organizational factors
- MST and clinical outcomes

...to name only a few

Questions?

THANK YOU

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