



2017 WATCH: An update on the Implementation of Comprehensive Women's Health

Women's Assessment Tool For Comprehensive Health (WATCH)
Fiscal Year 2017

Prepared by Women's Health Evaluation Initiative and the Center for the Study of Healthcare Innovation, Implementation & Policy for Women's Health Services

Version date: 7/12/2018

WOMEN VETERANS
HEALTH CARE



VA
HEALTH
CARE | Defining
EXCELLENCE
in the 21st Century

Poll Question #1

- What is your primary role in VA?
 - Women's Health Primary Care Provider
 - Other clinician or trainee
 - Researcher
 - Women Veteran Program Manager
 - Other Administrator

Poll Question #2

- Were you involved in the WATCH survey?
 - Directly completed survey
 - Provided data for survey
 - Aware of WATCH but not involved
 - Was not aware of WATCH survey

WATCH Initiative: Methods

- Administered as an online survey completed by Women Veteran Program Managers (WVPM) for Fiscal Years (FY) 2010-2017 for each Health Care System (HCS)
- Self-assessments were reviewed by facility and VISN leadership before submission

WATCH Initiative: Methods

- FY17 Design
 - Part A: Health Care System Survey
 - Characteristics of the Women's Health Program (WHP) at the HCS level
 - Demographics, enrollment and utilization data for women Veterans served at the HCS
 - Program management staff and strategic planning
 - Part B: Site Specific Survey
 - Completed for each Medical Center and Community-Based Outpatient Clinic (CBOC)
 - Completed for each model of primary care delivery at each site of care
 - Collects information on designated WH Primary Care Providers/Patient Aligned Care Teams (PACT) in each site of care/model of care.

WATCH Initiative: Methods

- WVPs completed self-assessments of their WH Programs for 140 Health Care Systems (HCS) FY11-FY17
 - A HCS contains one parent site defined by the Veteran Affairs Site Tracking (VAST) and all sites affiliated with that parent
- Sites included in the self-assessment
 - Assessments included drop-down menus for the sites in each HCS based on VAST
 - FY17 analyses only included primary care sites found on VAST

WATCH Self-Assessment Report

Select FY: Select VISN(s):

Select Category: Select Report Group(s):

Select Facility Level Report: Select Report Table(s):

Select Model of Care:

1 of 2 ? 100% Find | Next



Women's Assessment Tool for Comprehensive Health (WATCH) Self-Assessment: FY2017

This report presents VISN and VHA level data collected through the WATCH Self-Assessment. The WATCH Self-Assessment is completed by Women Veteran Program Managers at every healthcare system. It evaluates the status of the Women's Health Program and the delivery of comprehensive primary care to women Veterans within VA.

[Models of Care Flowchart within the HCS](#) [WATCH Briefing Book](#) [Ask a Question About The Report](#) [Data Definitions](#)

Below are links to additional WATCH Survey Reports:

[Women's Assessment Tool for Comprehensive Health \(WATCH\) Self-Assessment: Health Care System Report](#)
[Women's Assessment Tool for Comprehensive Health \(WATCH\) Self-Assessment: Site Specific Detail Report](#)

Question	1V01	1V02	1V04	1V05	1V06	2V07	2V08	2V09	3V10	3V12	3V15	3V23	4V16	4V17	4V19	5V20	5V21	5V22	VHA
Part A-1 Important Data Points																			
1.1 Important Data Points																			
Total HCS	8	10	9	6	7	8	7	5	11	8	7	8	8	7	8	8	7	8	140
Total Women's Health Medical Champions		4	3	1		1	4	2	2	3	1	1	3		3	1	1		30
Total Women's Health Medical Directors	8	9	7	5	5	6	4	5	9	7	7	8	5	7	5	7	6	7	117
Part A-4 Key Personnel of the Women's Health Program																			

Number of Sites Delivering Primary Care By Fiscal Year for the WATCH Self-Assessment

	Fiscal Year 2011	Fiscal Year 2012	Fiscal Year 2013	Fiscal Year 2014	Fiscal Year 2015	Fiscal Year 2016	Fiscal Year 2017
Medical Centers	150	148	146	147	154	161	165
CBOCs	795	743	774	781	876	864	870
Total Sites	945	891	920	928	1,030	1,025	1,035

Women Veteran Enrollment¹

- **740,217 unique women Veterans were enrolled in the VHA in FY17**
- Age of women Veterans enrolled in VHA in FY17

Age Range	Number of Unique Women Veterans Enrolled in VHA ²
Under 29 years old	61,960 (8%)
30-44 years old	246,669 (33%)
45-64 years old	325,900 (44%)
65-84 years old	87,601 (12%)
Over 85 years old	18,086 (2%)

¹Per VSSC WATCH Report for FY17:

http://reports2.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fPMR%2fWomenVeterans%2fWATCH_Survey%2fTEST14_WATCH&rs:Command=Render

²Total does not equal 740,217 due to unknowns in the Current Enrollment Cube

Note: numbers here might not match WHEI data

VHA Utilization by Women Veterans³

- **489,865 unique women Veterans received care from the VHA in FY17**
- Of those women, 70,970 were from the Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn (OIF/OEF/OND) cohort
- Age of women Veterans receiving care from the VHA in FY17:

Age Range	Number of Unique Women Veterans Receiving Care from VHA ⁴
Under 29 years old	34,549 (7%)
30-44 years old	150,369 (31%)
45-64 years old	227,211 (46%)
65-84 years old	59,463 (12%)
Over 85 years old	9,088 (2%)

³Per VSSC WATCH Report for FY17:

http://reports2.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fPMR%2fWomenVeterans%2fWATCH_Survey%2fTEST14_WATCH&rs:Command=Render

⁴Total does not equal 489,865 due to unknowns in the Uniques Cube

Note: numbers here might not match WHEI data

VHA Utilization by Women Veterans⁵

Number of unique women Veterans receiving care per Stop Code in FY17

(Note: women can be seen in more than one Stop Code):

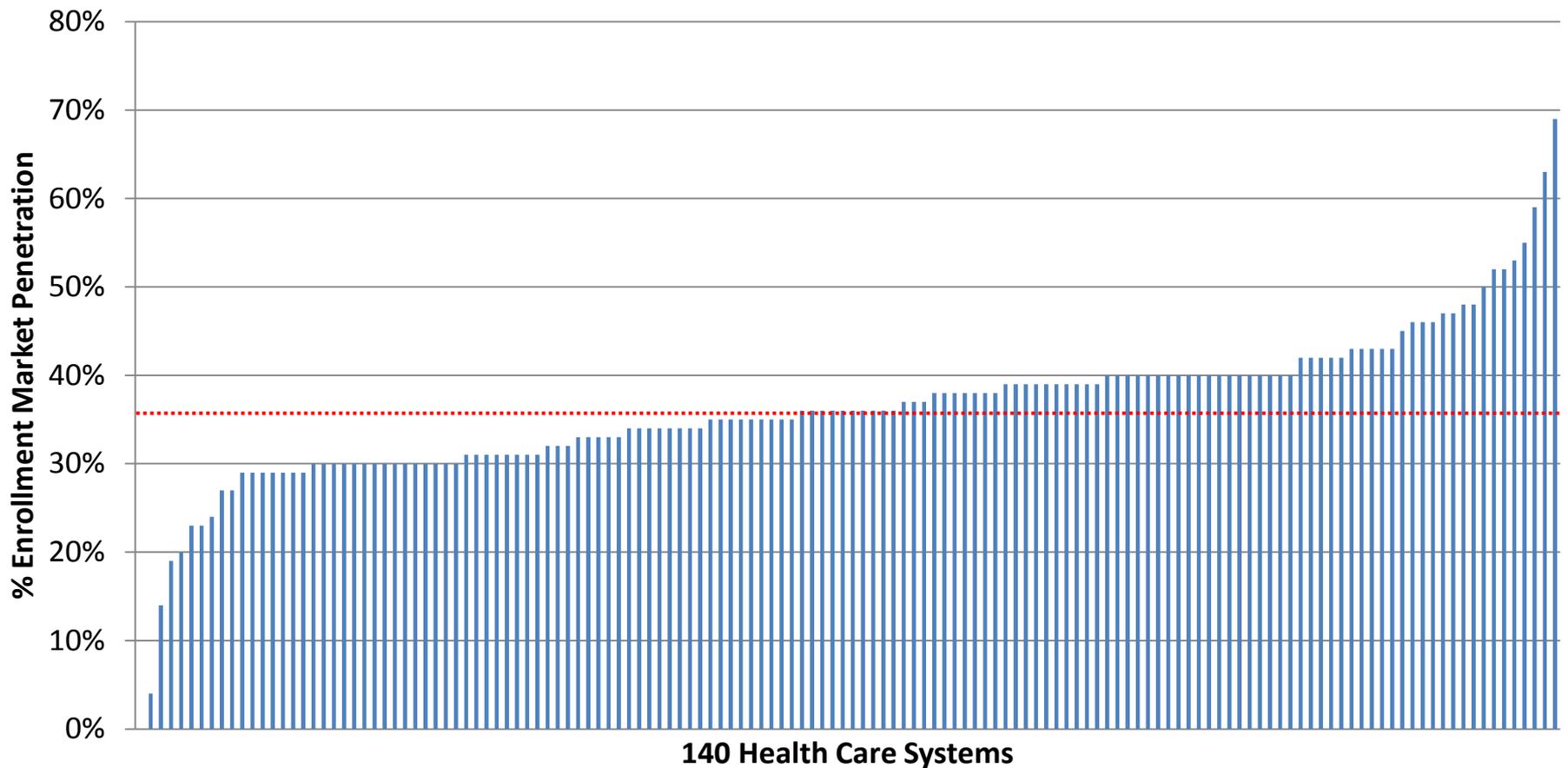
Stop Code	Number of Unique Women Veterans
(323) Primary Care/Medicine	326,233
(322) Comprehensive Women's Primary Care Clinic	163,584
(404) Gynecology	56,303
(704) Women's Gender-Specific Preventive Care	14,956
(130) Emergency Department	121,390

⁵Per VSSC WATCH Report for FY17:

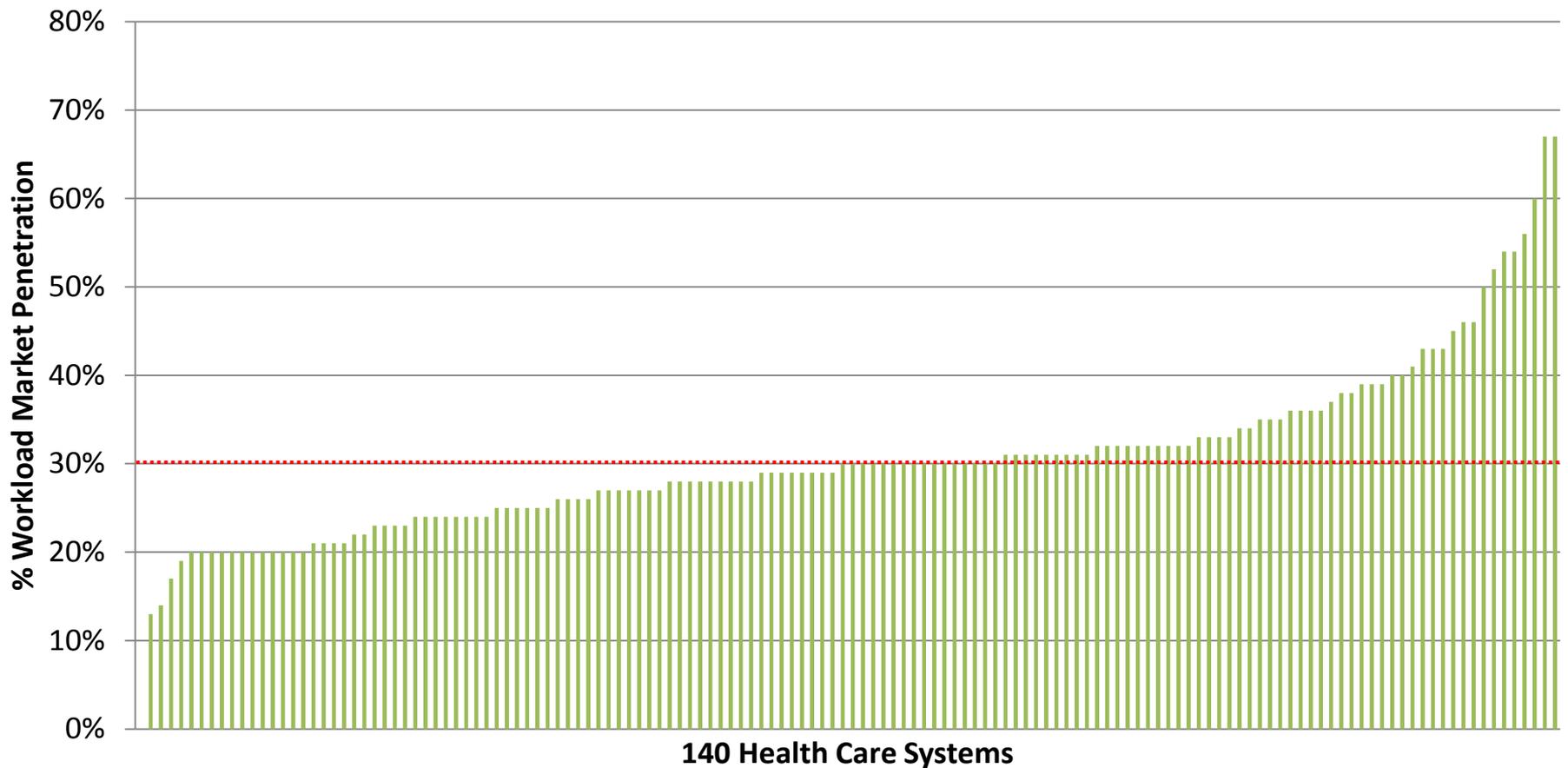
http://reports2.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fPMR%2fWomenVeterans%2fWATCH_Survey%2fTEST14_WATCH&rs:Command=Render

Note: numbers here might not match WHEI data

FY16 Women Veterans Enrollment Market Penetration



FY16 Women Veterans VA Users Market Penetration



Women Veterans' Diagnoses⁷

Ten most common ICD-10 codes used for women Veterans in FY16:

ICD-10 Code and Description
(401.9) Hypertension
(311.) Depressive Disorder
(309.81) Posttraumatic Stress Disorder
(724.2) Lumbago
(250.00) Diabetes Mellitus without Complication
(272.4) Hyperlipidemia
(719.46) Joint Pain-Lower Leg
(300.00) Anxiety State
(296.30) Recurrent Depressive Disorder
(346.90) Migraine

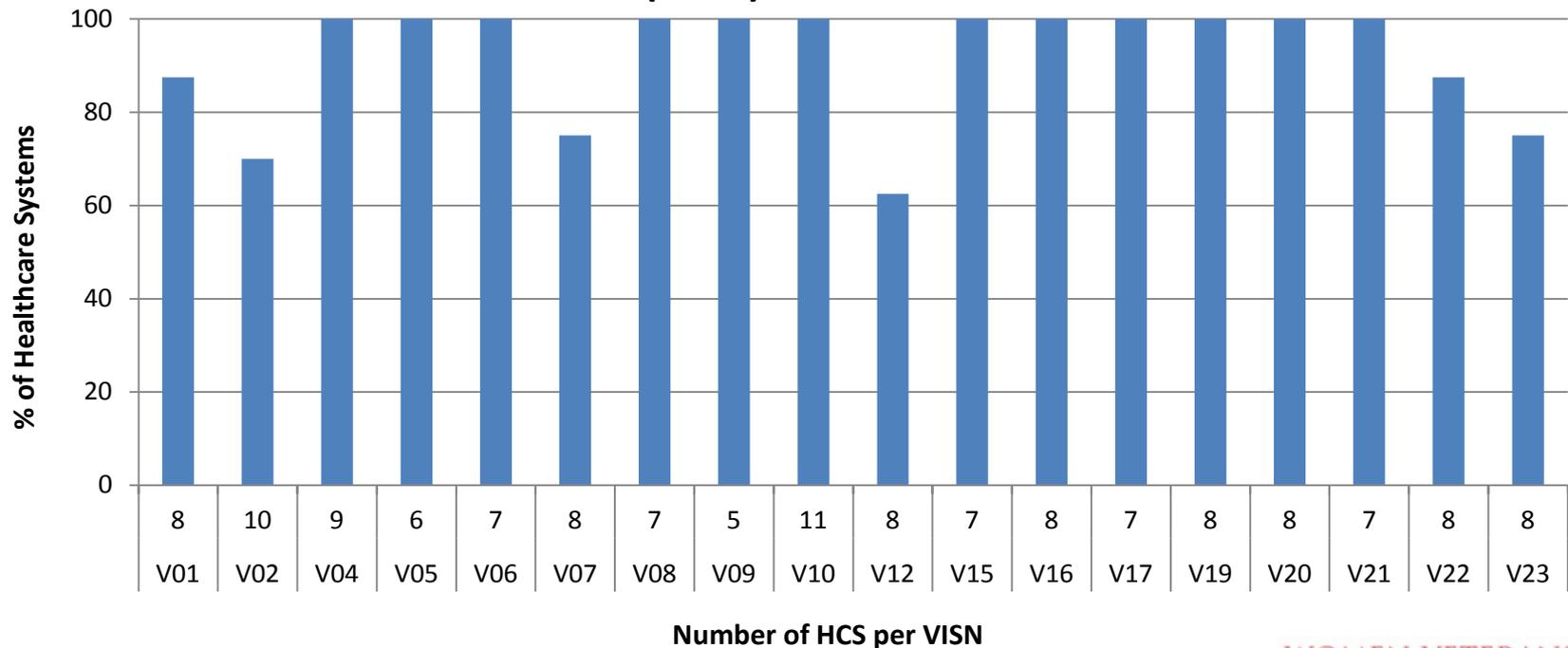
⁷Per VSSC WATCH Report for FY16:

http://reports2.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fPMR%2fWomenVeterans%2fWATCH_Survey%2fTEST14_WATCH&rs:Command=Render

Women Health Program Strategic Planning

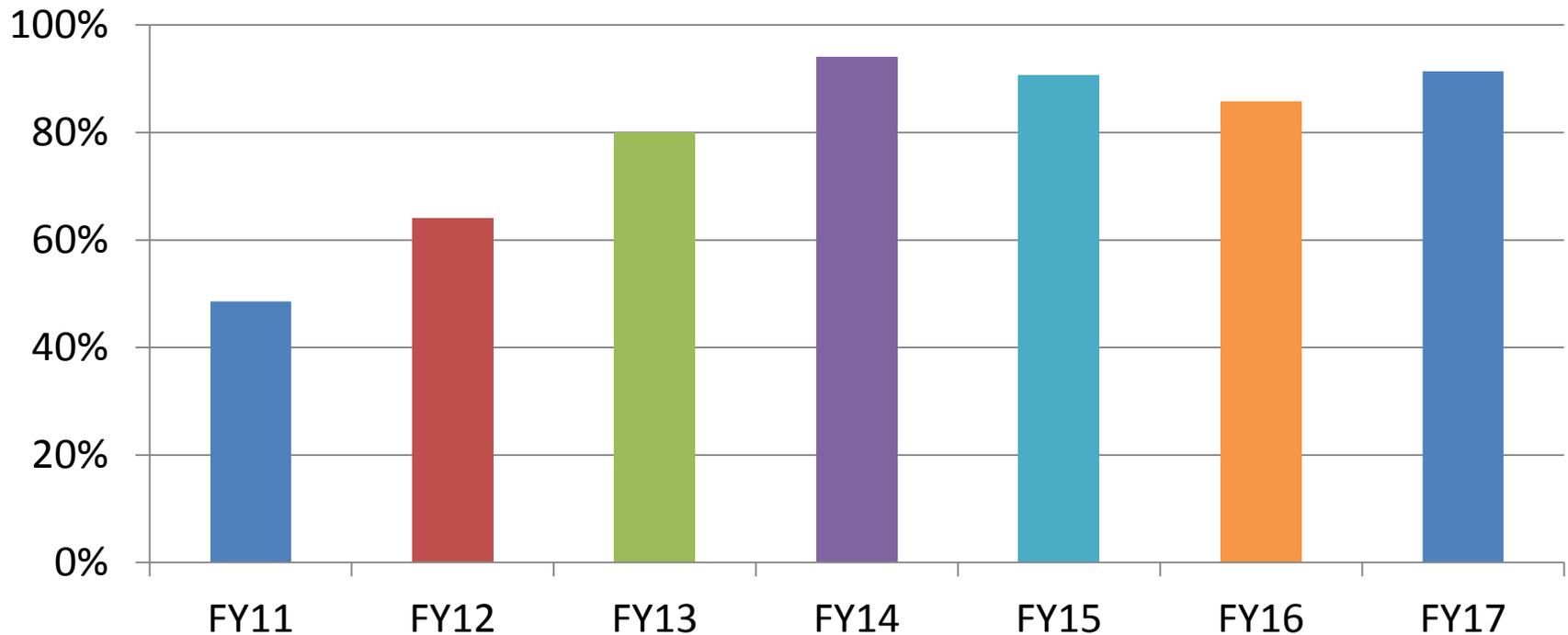
- 91% of 140 Health Care Systems had a written strategic plan for their WH Program

Percent of Healthcare Systems (HCS) with a Written Strategic Plan for their Women’s Health Program by Veterans Integrated Service Network (VISN) in Fiscal Year 2017



Women Veterans Health Strategic Planning

Percent of Health Care Systems with a Completed Written Strategic Plan for the Women's Health Program FY11-FY17



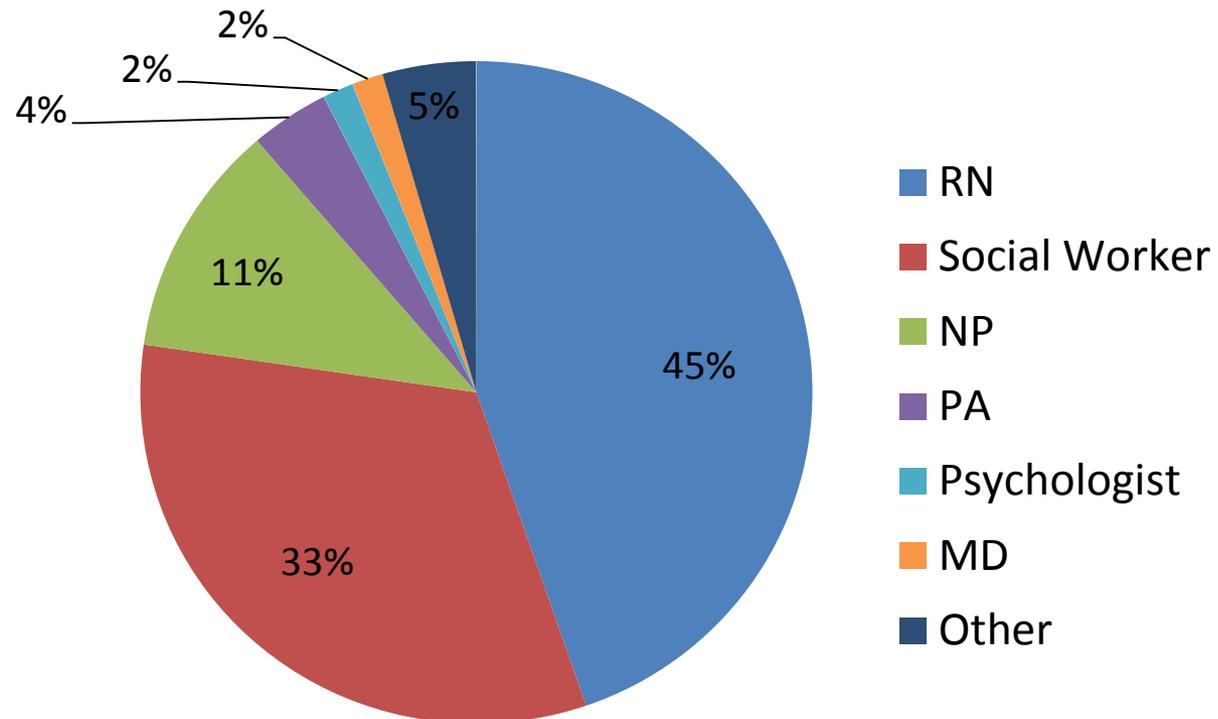
Key Personnel of the WH Program

- **Women Veteran Program Managers (WVPM) for 140 HCSs:**
 - 130 HCSs had at least one full-time WVPM⁸
 - 2 HCSs had a part-time WVPM
 - 6 HCSs had their WVPM position filled in an “acting/interim” capacity
 - 2 HCS did not have their WVPM position filled
- **WH Medical Director or Champion for 140 HCSs:**
 - 130 HCSs had a WH Medical Director and/or a WH Champion
- **CBOC WH Liaison for 140 HCSs:**
 - 119 of 140 Health Care Systems had a WH Liaison at each CBOC

⁸Note: One HCS had a second WVPM

Key Personnel of the WH Program

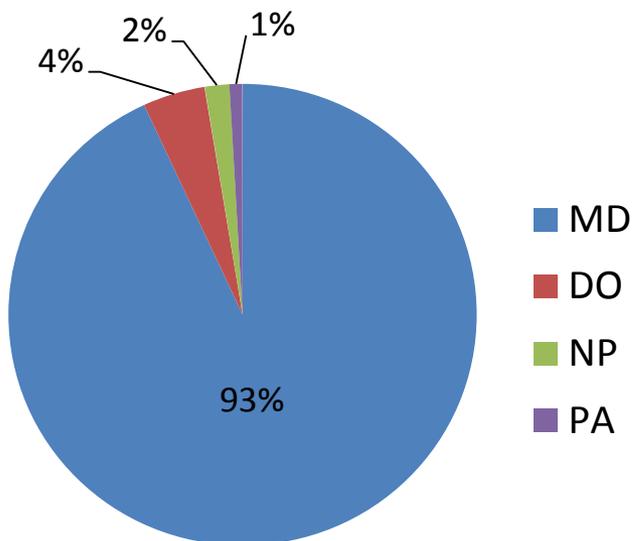
Professional Designation of Women Veteran Program Managers (WVPM)



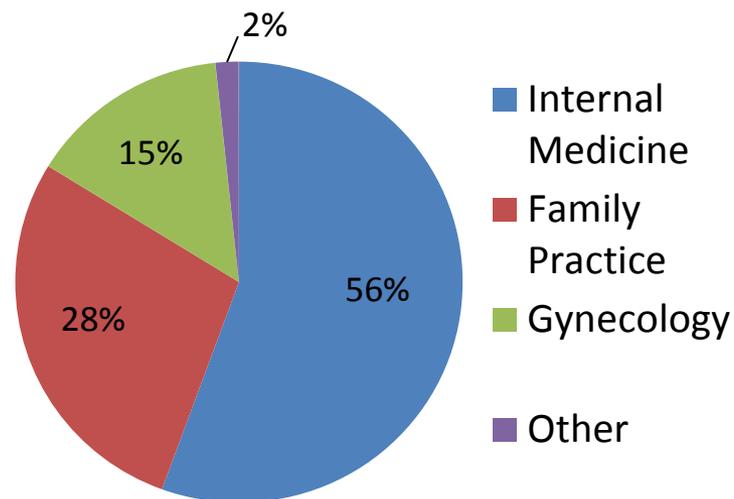
⁹Note: One HCS had a second WVPM

Key Personnel of the WH Program

Professional Designation of Women's Health Medical Director (WHMD)

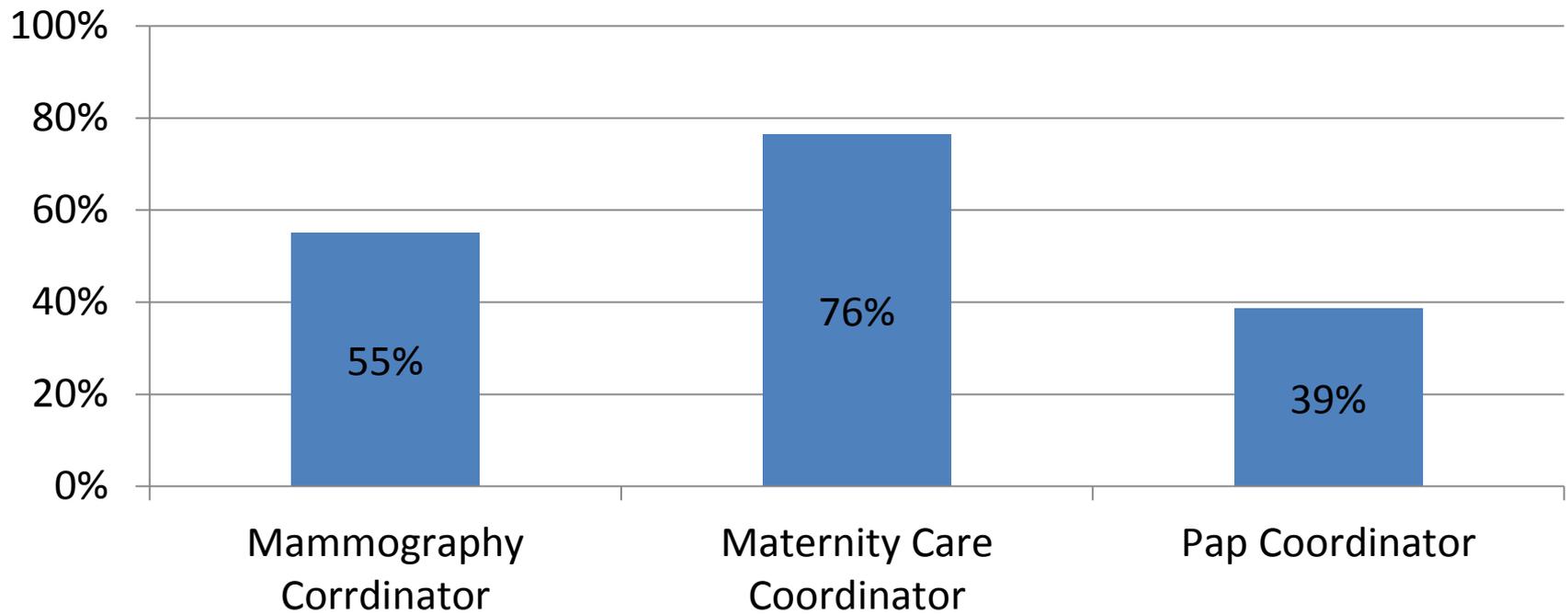


Clinical Specialty of Women's Health Medical Director (WHMD)



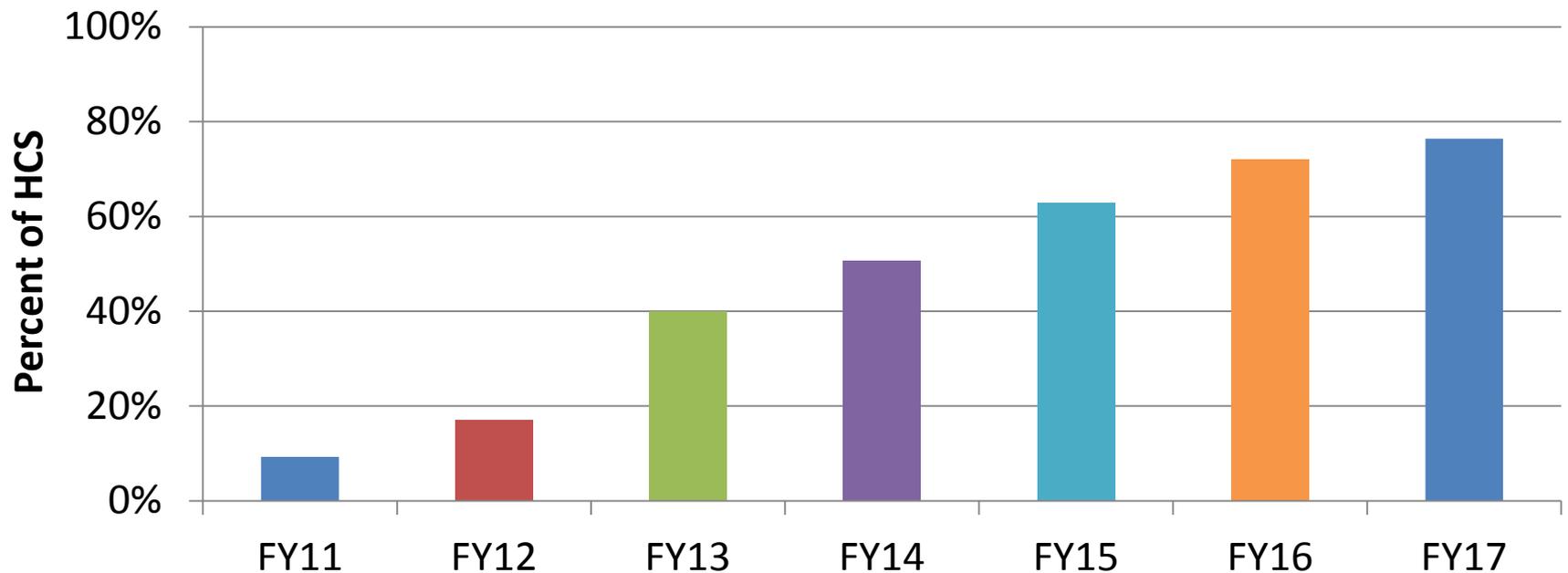
WH Program Support Staff

Percent of HCS with Mammography, Maternity Care & Pap Coordinators in FY17



WH Program Support Staff

Percent of HCS with Maternity Care Coordinators FY11-FY17



Comprehensive Primary Care

- Provision of complete primary care and care coordination at one site by a Designated Women's Health Primary Care Provider (WH-PCP) and Women's Health PACT team
- The WH-PCP and WH PACT should, in the context of a longitudinal relationship, fulfill all primary care needs, including:
 - Care for acute and chronic illness
 - Gender-specific primary care
 - Preventive services
 - Mental health services
 - Coordination of care

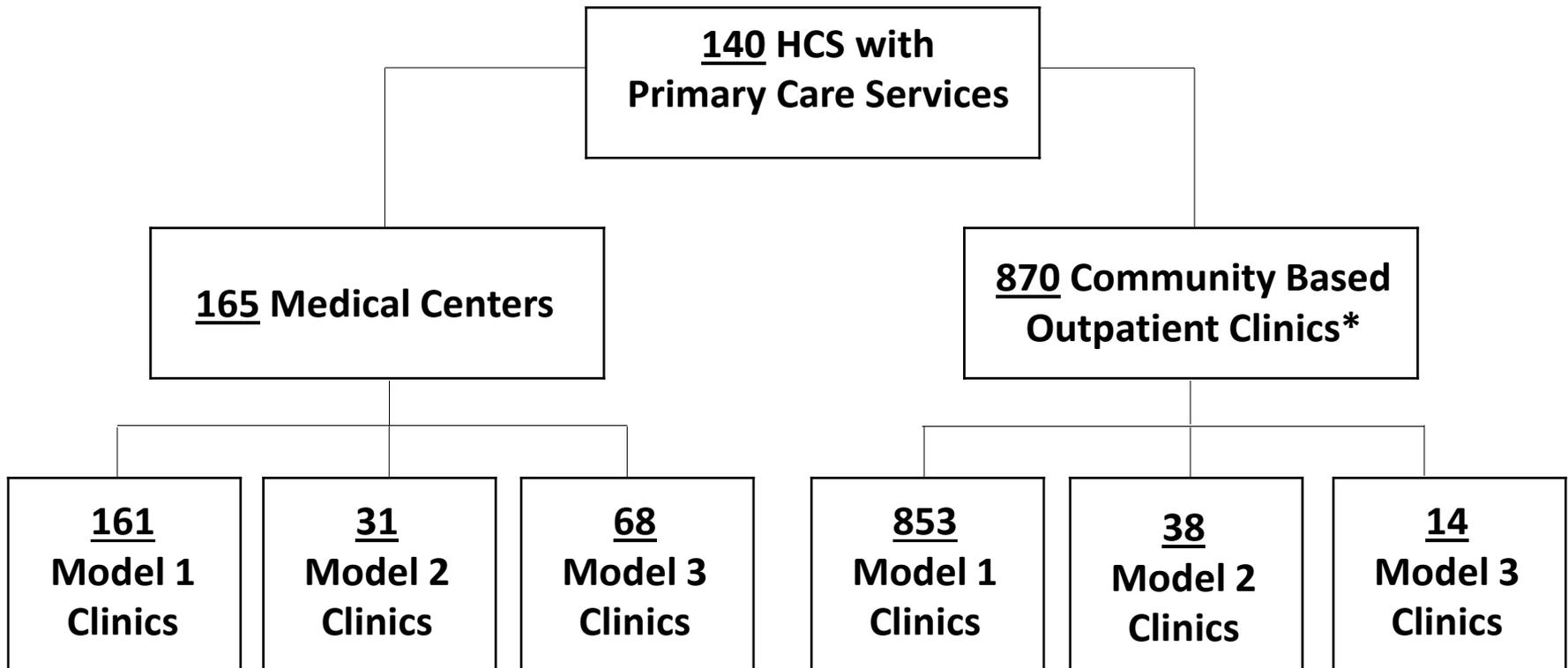
Note: From VHA Handbook 1330.01 (Feb 15, 2017)
VETERANS HEALTH ADMINISTRATION

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WH Models of Care

- Comprehensive Primary Care should be delivered by a designated WH-PCP in one of three models:
 - Model 1: General Primary Care Clinics
 - Model 2: Separate but Shared Space
 - Model 3: Women’s Health Center (WHC)

WH Models of Care as of 9/30/2017



Note: Sites may have more than one type of model clinic

*Health Care Centers are included under CBOCs

Designated WH Primary Care Provider (WH-PCP)

- Definition
 - Primary Care Provider (PCP) who is trained and experienced in women's health
 - Preferentially assigned women Veterans to their primary care panels

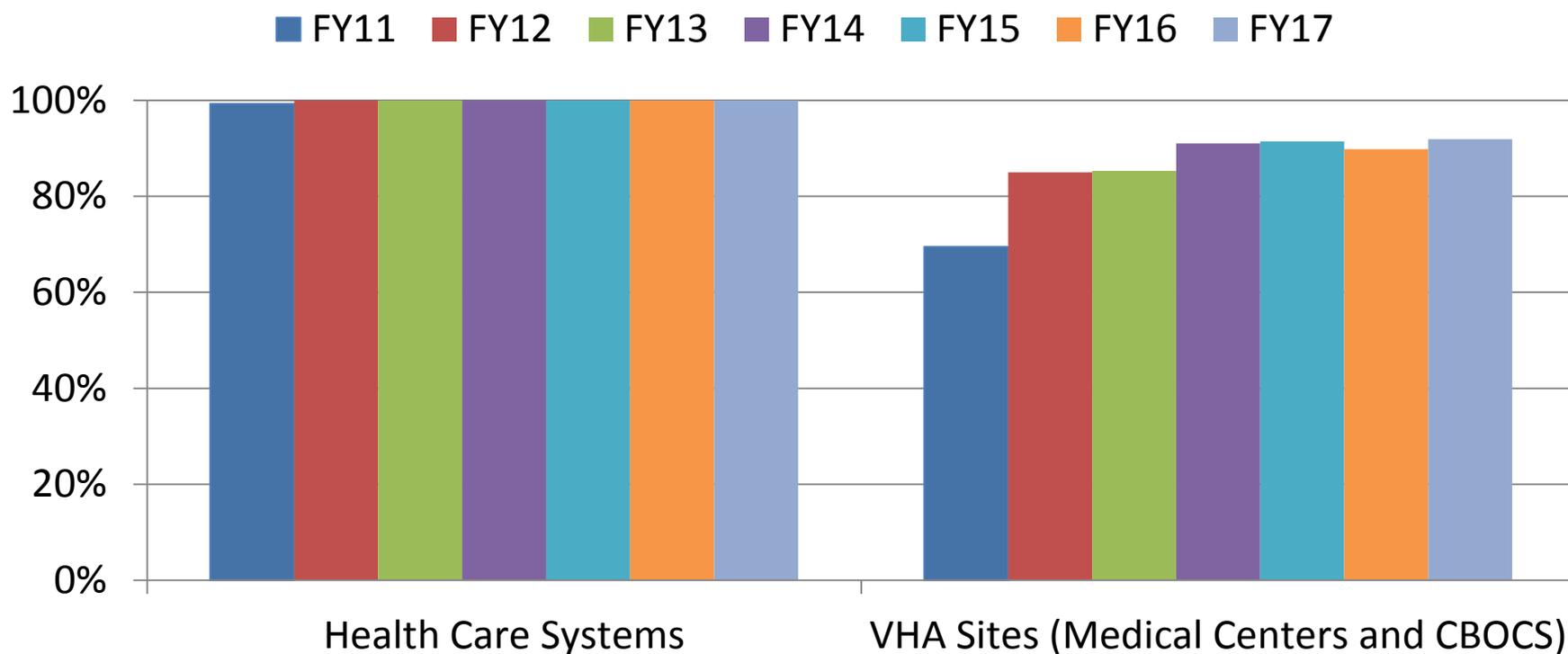
Requirements to be Designated as a WH-PCP

- To be initially designated, a provider must have one of the following:
 - Documentation of attendance at a WH Mini-Residency within the previous 3 years
 - Documentation of at least 20 hours of WH CME or CEU within the previous 3 years
 - Documentation of at least 3 years in a practice with at least 50% women patients within the previous 5 years
 - Evidence of completion of an internal medicine or family practice residency; WH fellowship; or WH, adult, or family practice NP or PA training within the previous 3 years
 - Documentation of a current preceptorship arrangement with an experienced WH-PCP such as weekly meetings (for at least 6 months)
 - Evidence of being recognized as a known WH leader and subject matter expert with experience practicing, teaching, and/or precepting WH
- To maintain the designation, a provider must complete at least 10 hours of CME or CEU in women's health every 2 years

Note: From VHA Handbook 1330.01 (Feb 15, 2017)

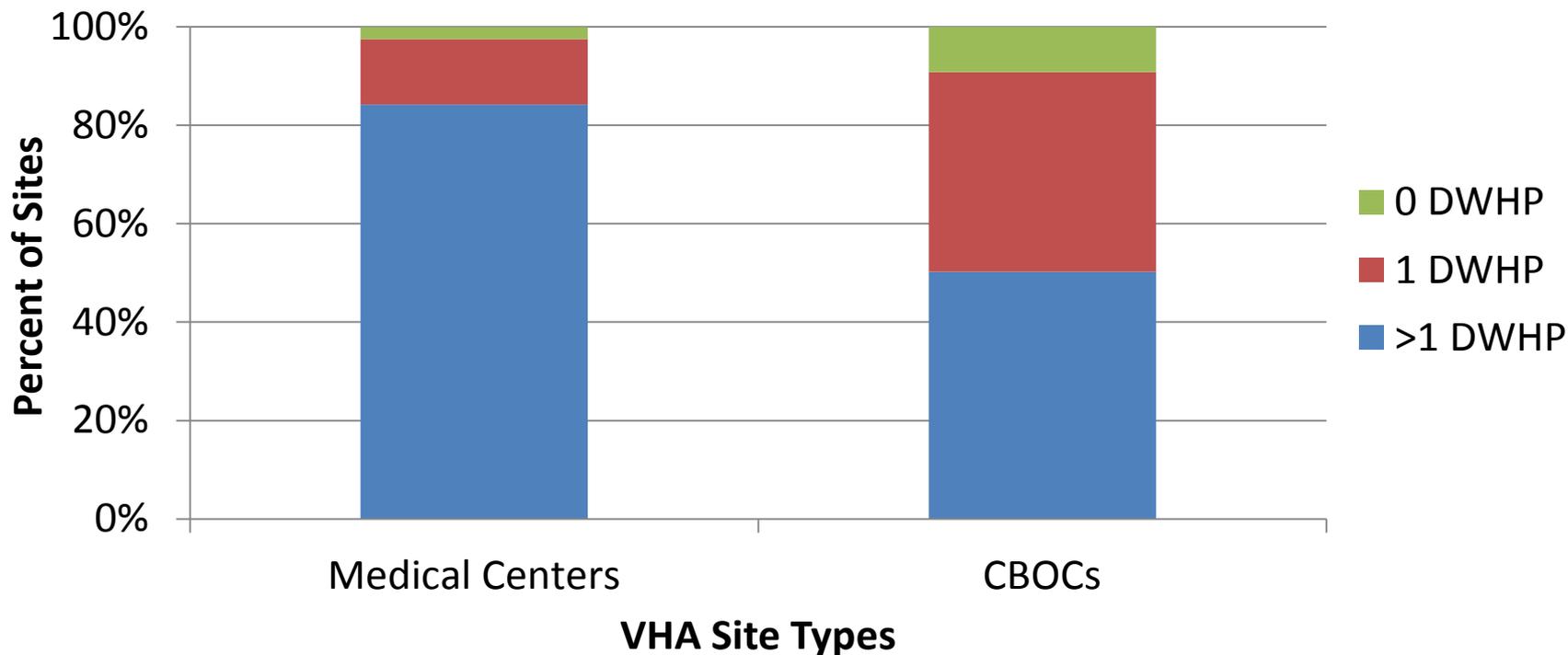
Designated WH Primary Care Provider

Percent of Health Care Systems and VHA sites with a Designated Women's Health Primary Care Provider (DWHP) FY11-FY17



Designated WH Primary Care Provider

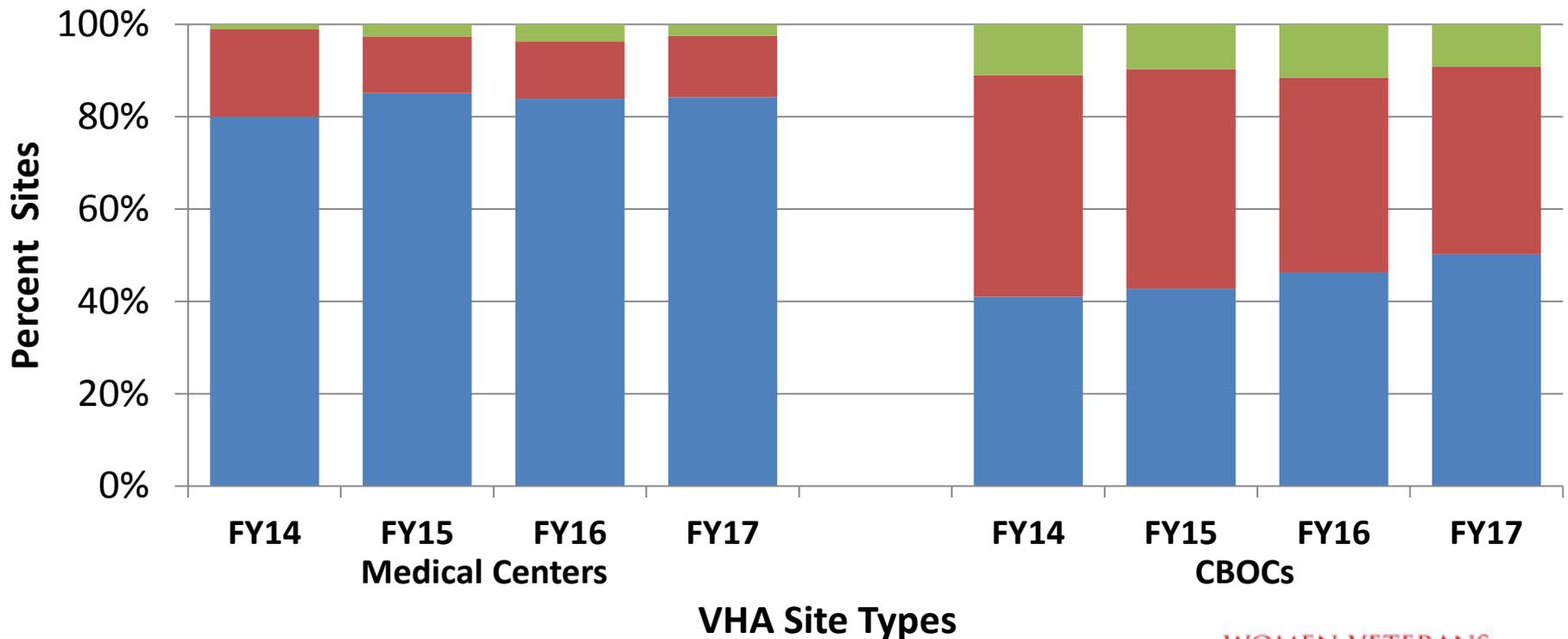
Percent of VHA Sites with 0, 1, or more than 1 Designated Women's Health Primary Care Provider (DHWP) in FY17



Designated WH Primary Care Provider

Percent of VHA Sites with 0, 1, or more than 1 Designated Women's Health Primary Care Provider (DHWP) FY14-FY17

■ >1 DWHP ■ 1 DWHP ■ 0 DWHP

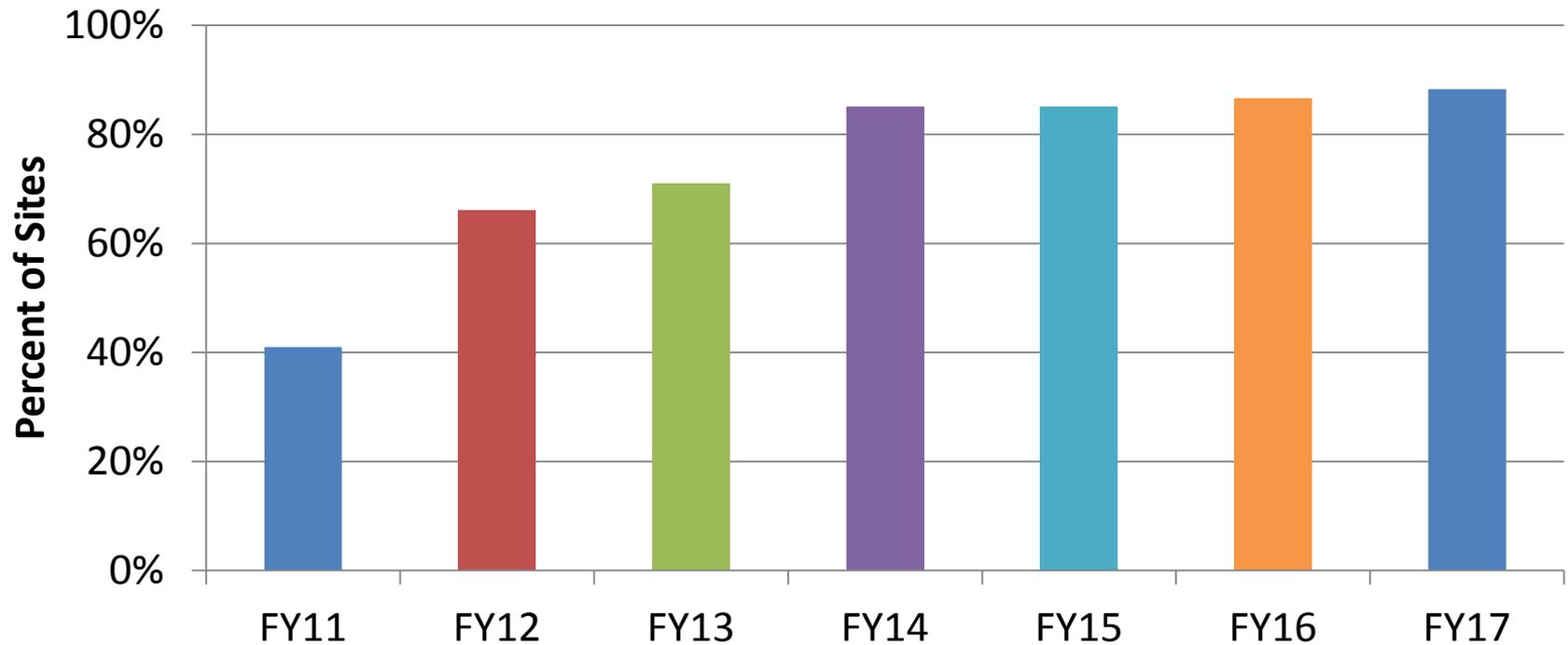


Patient Aligned Care Teams (PACT)

- WH PACT Teamlets should include
 - Designated WH-PCP
 - Required 3:1 staffing ratio (3 support staff to 1 PCP) (4:1 is recommended for WH teams)
- In FY17, 88% of the 1,035 sites delivering primary care had at least 1 WH PACT Teamlet designated in PCMM.

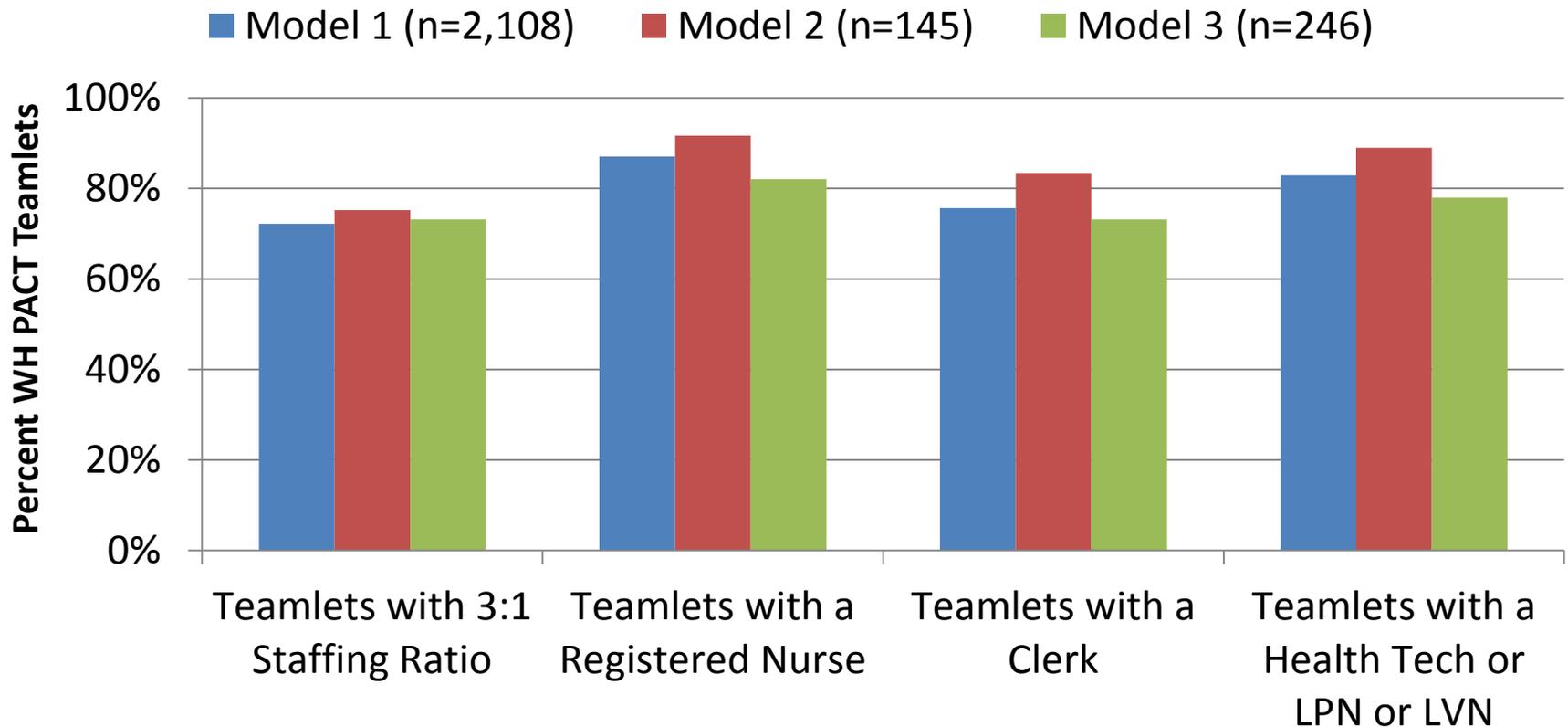
Patient Aligned Care Teams (PACT)

**Percent of VHA Sites at least 1 WH PACT Teamlet
FY11-FY17**



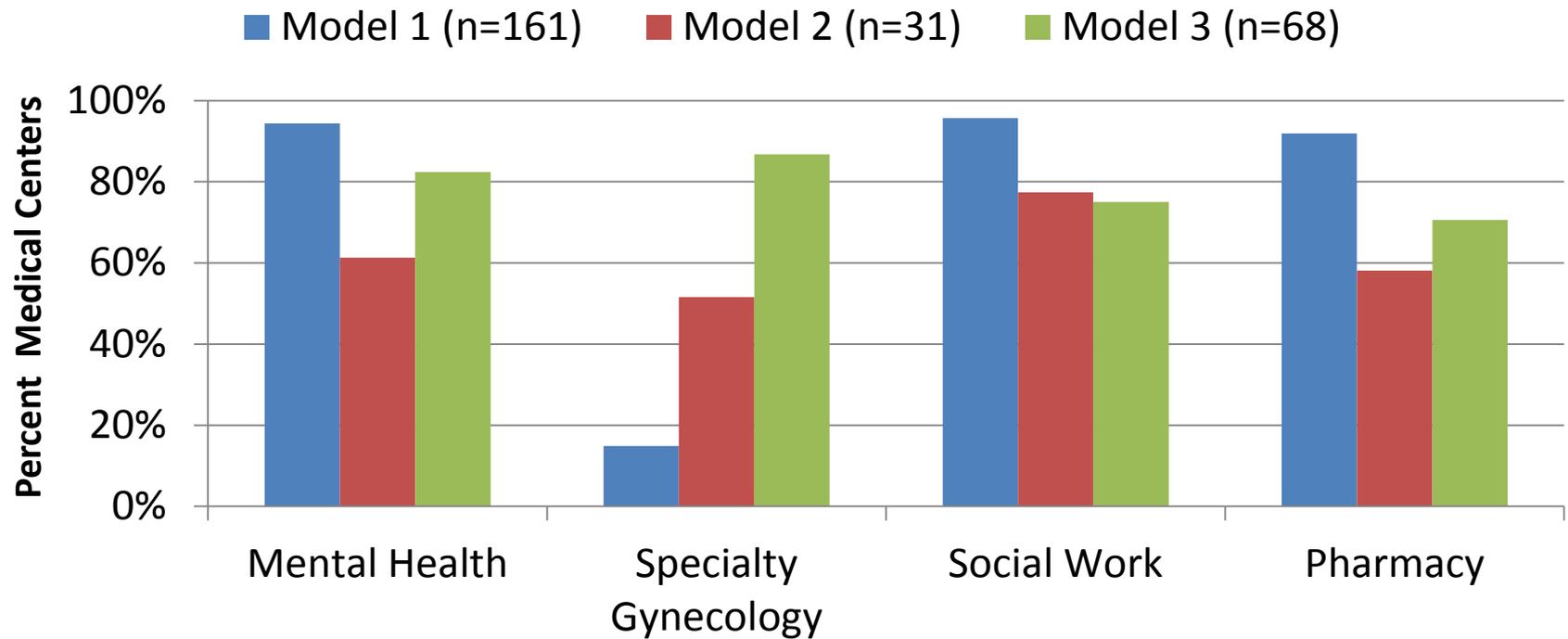
Patient Aligned Care Team (PACT) Staffing

Women's Health PACT Staffing in FY17



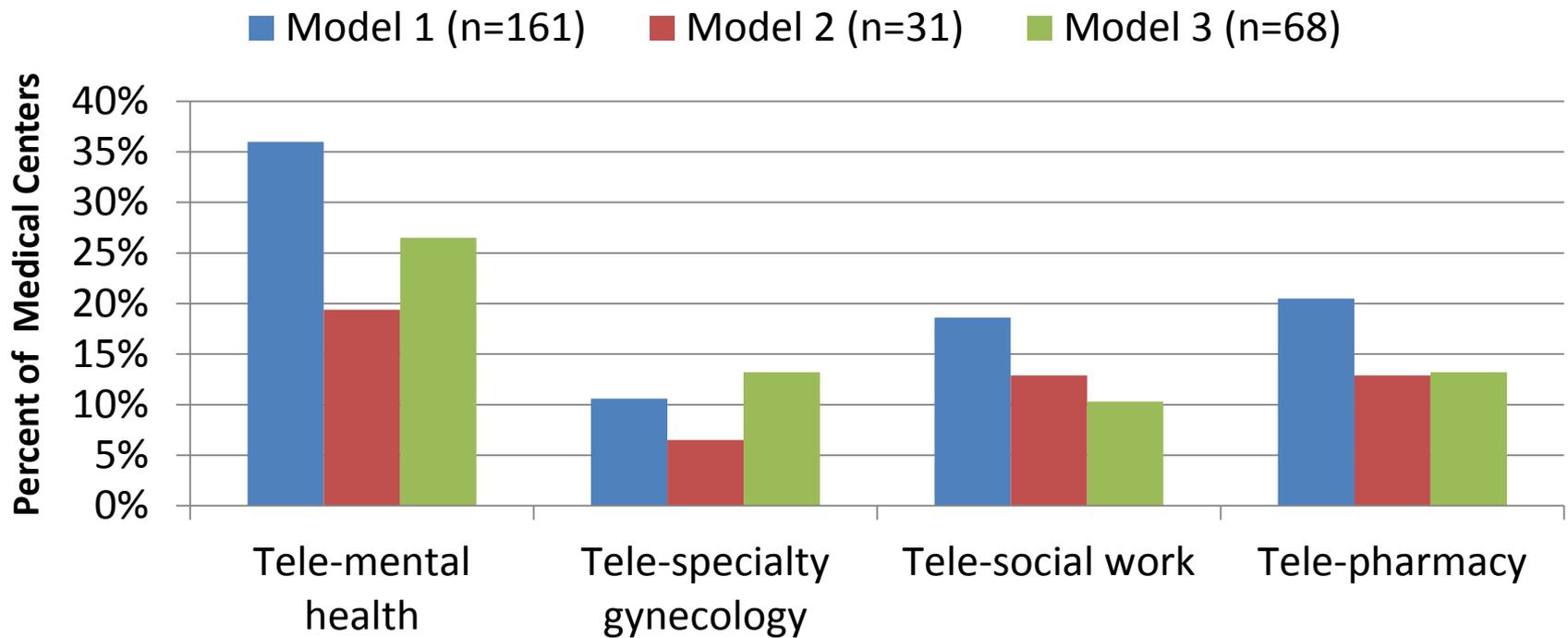
WH Specialty Services

Co-located Specialty Services in Medical Center Primary Care Clinics FY17



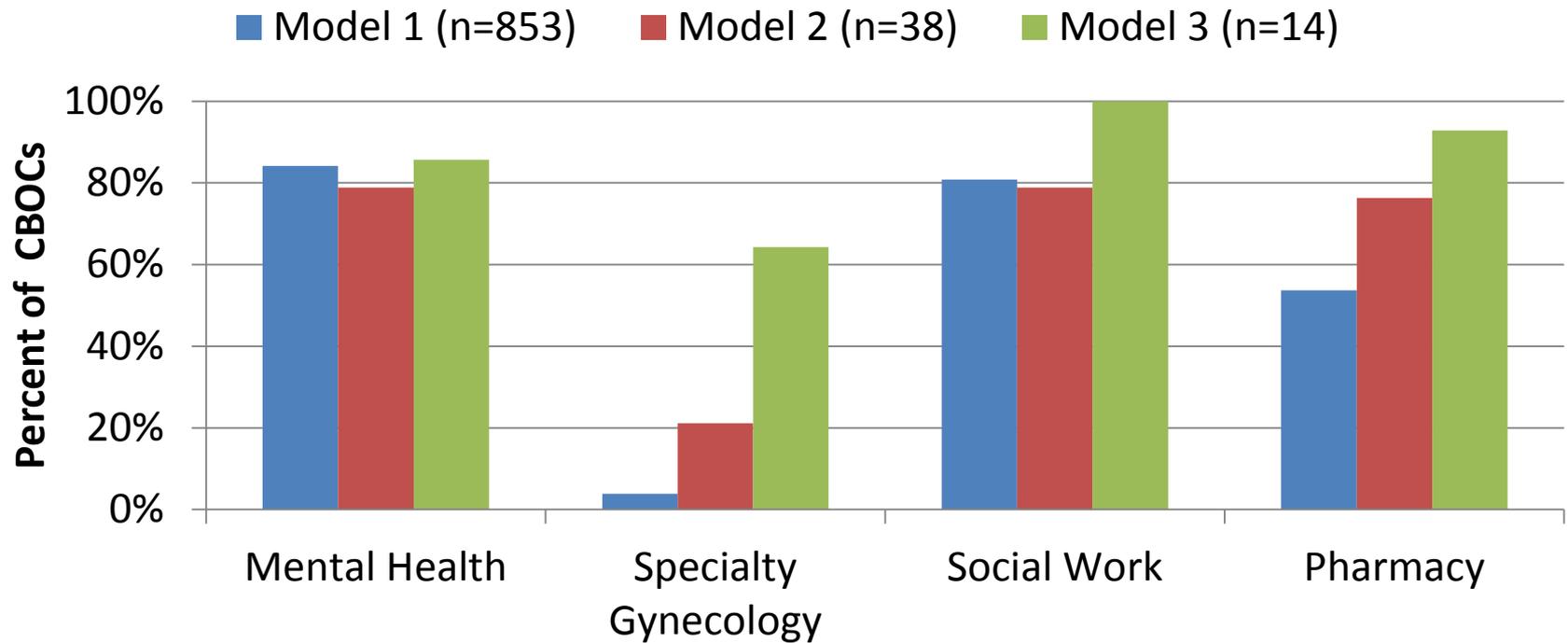
WH Specialty Services

Co-located Telehealth Services in Medical Center Primary Care Clinics in FY17



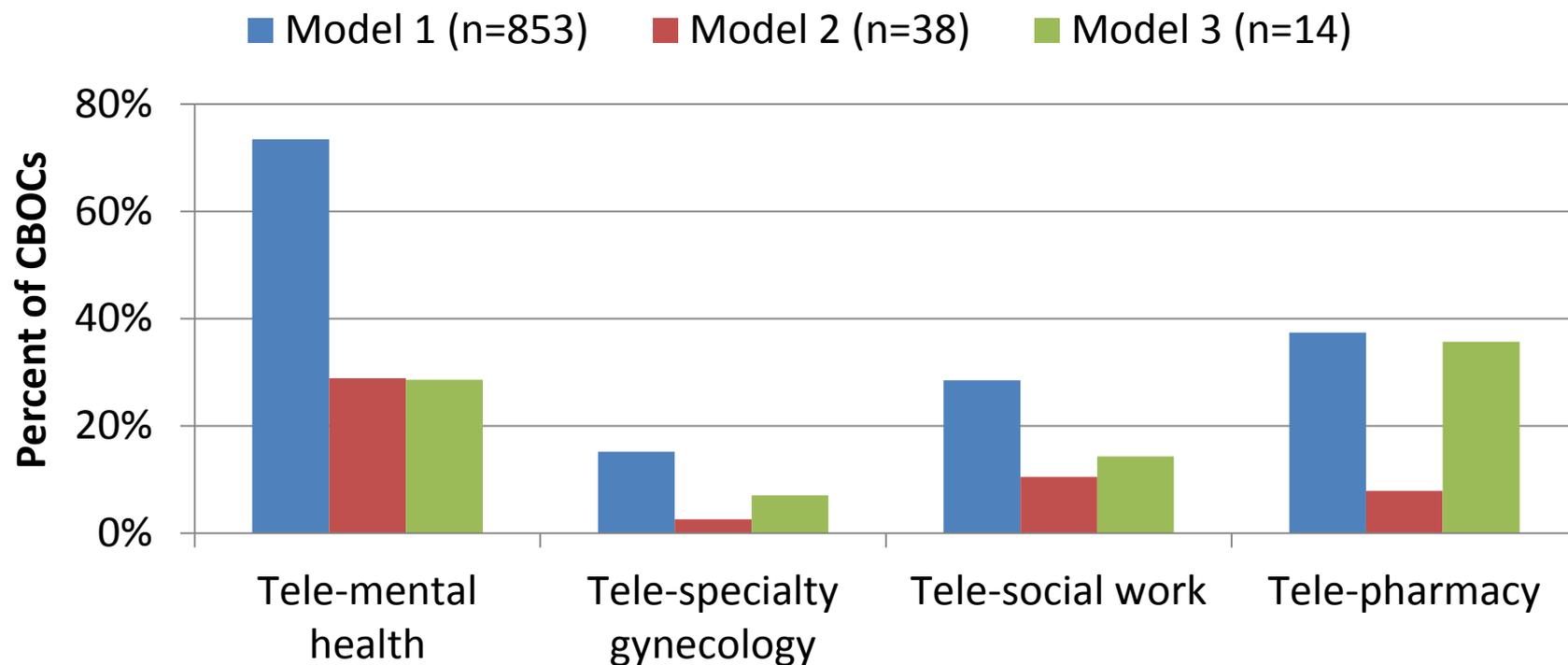
WH Specialty Services

**Co-located Specialty Services in
CBOC Primary Care Clinics in FY17**



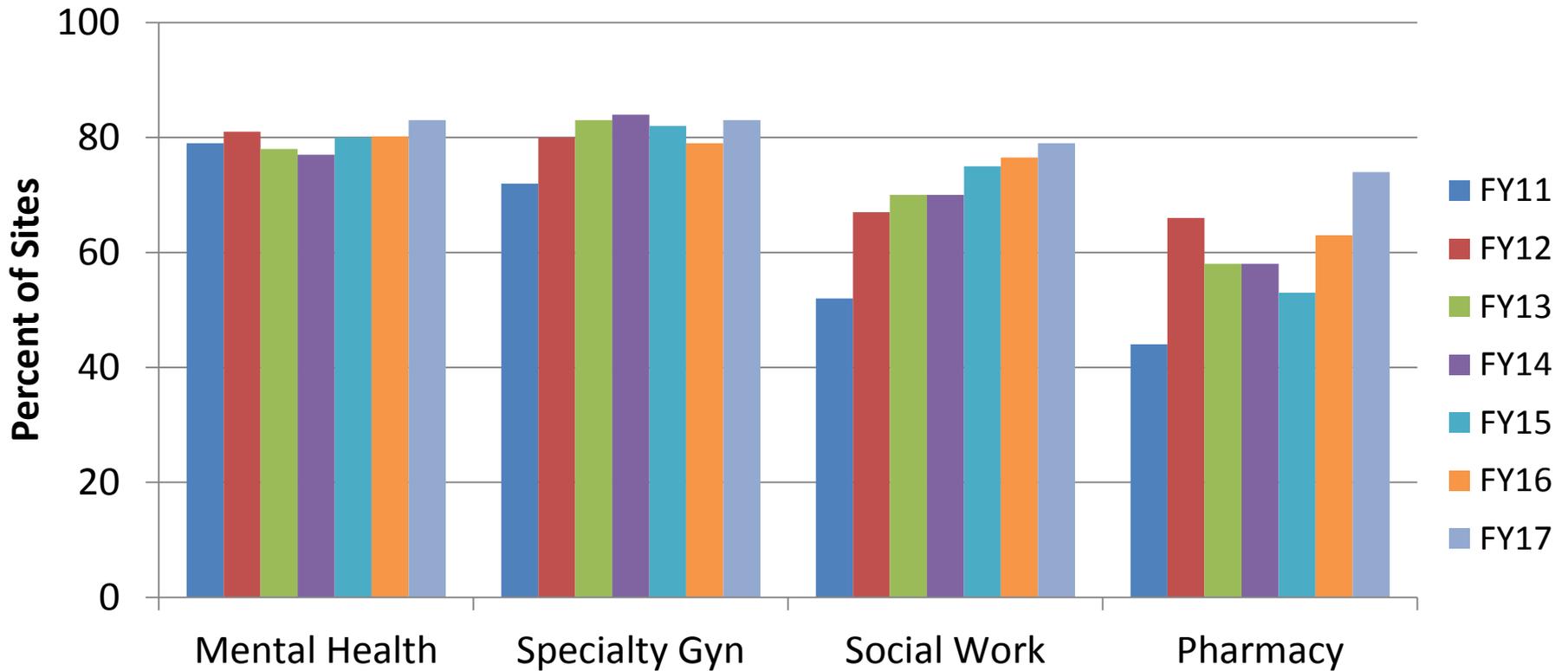
WH Specialty Services

Co-located Telehealth Services in CBOC Primary Care Clinics in FY17



WH Specialty Services

Co-located Specialty Services in Model 3 Clinics FY11-FY17

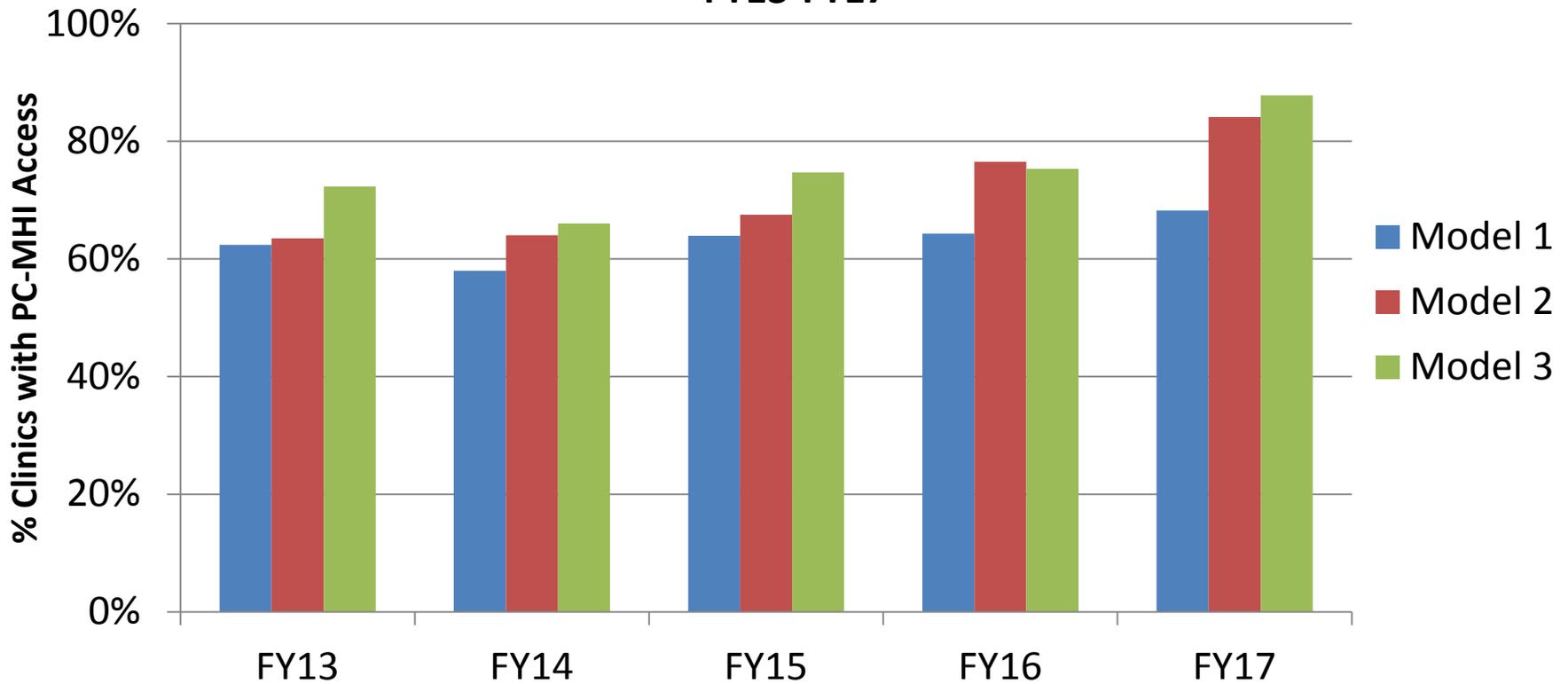


Percent of Clinics with Primary Care-Mental Health Integration (PC-MHI) Access in FY17

- Model 1: 68% of 1,014 clinics
- Model 2: 84% of 69 clinics
- Model 3: 88% of 82 clinics

Primary Care-Mental Health Integration

Percent Clinics with PC-MHI Access by Model of Care
FY13-FY17

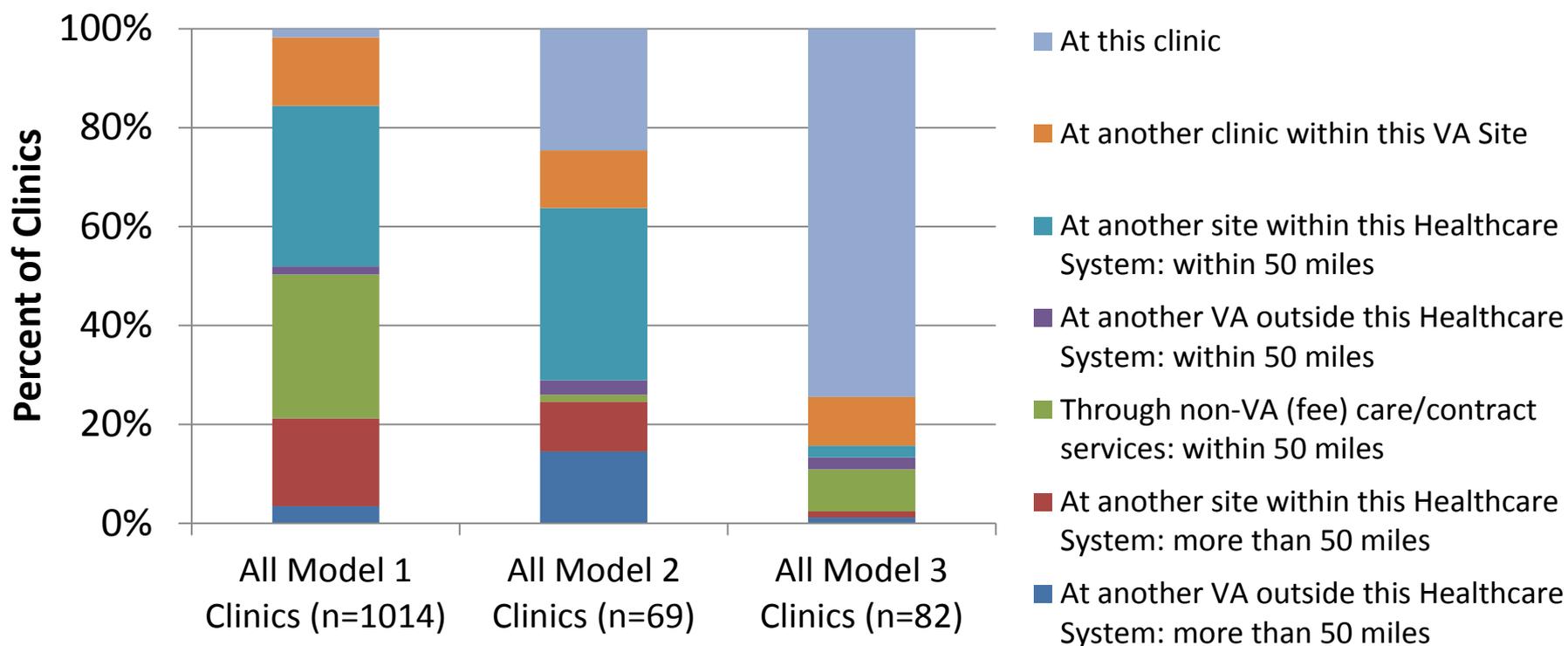


Specialty Gynecology

- Services by a provider trained in general gynecological care or subspecialty gynecological care
- Screening Pap and breast exams performed by a non-gynecologist or non-gynecology advanced nurse practitioner do not fall into this category

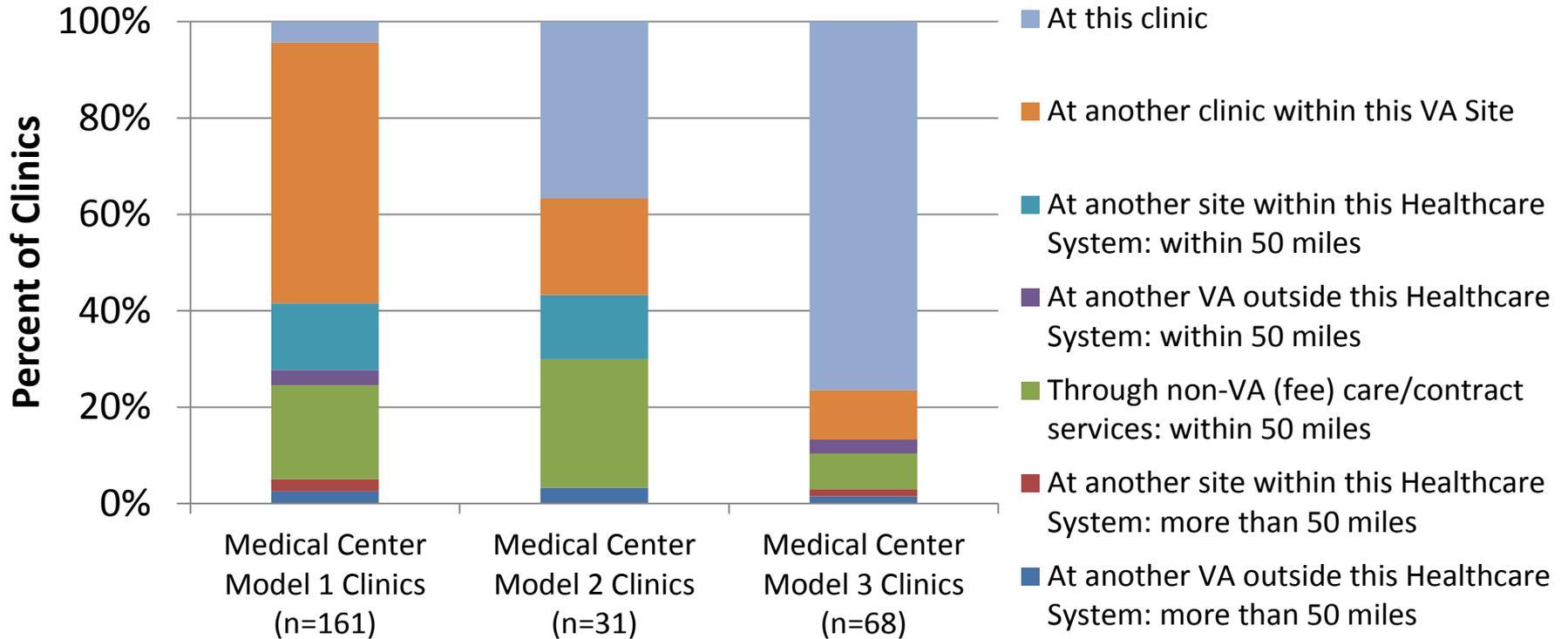
Specialty Gynecology

**Location Where Specialty Gynecology is Reported to be Received
Most Often by Model of Care in FY17**



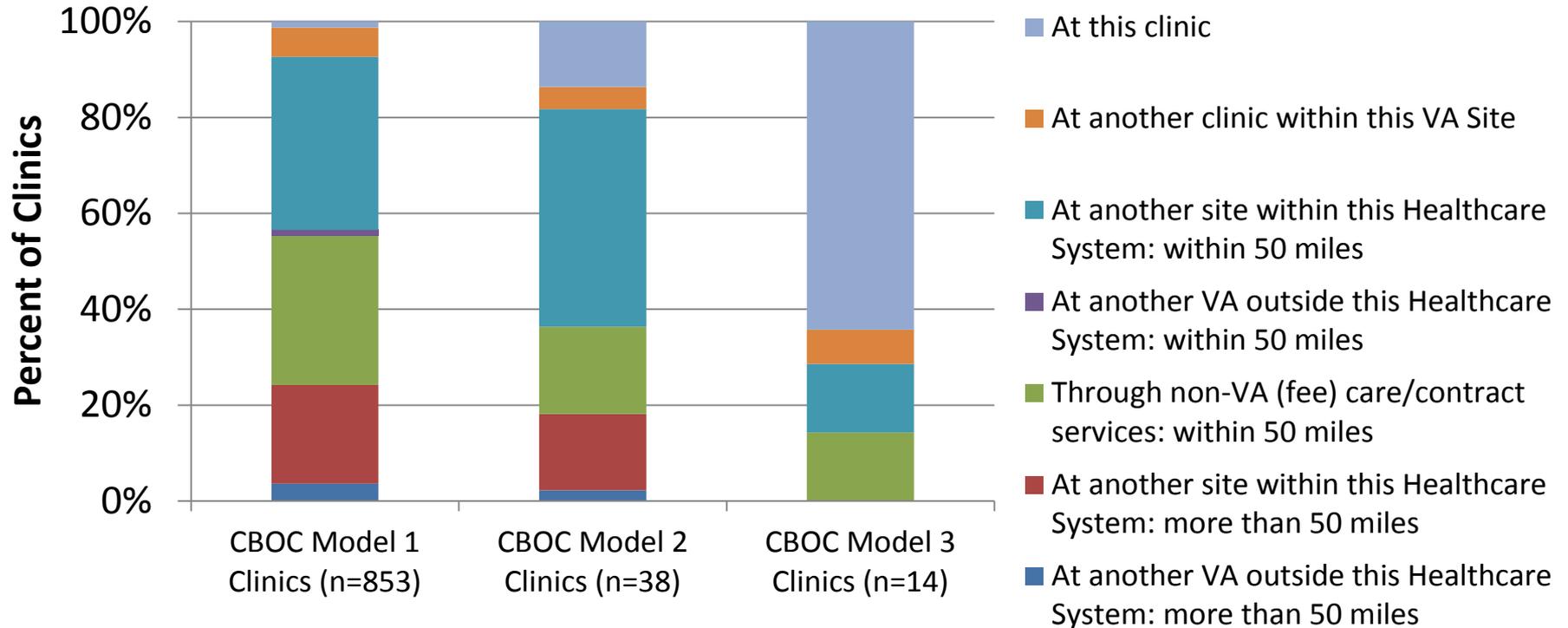
Specialty Gynecology

**Location Where Specialty Gynecology is Reported to be Received
Most Often in Medical Centers by Model of Care in FY17**



Specialty Gynecology

**Location Where Specialty Gynecology is Reported to be Received
Most Often in CBOCs by Model of Care in FY17**



Questions:

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