Department of Veterans Affairs

Memorandum

Date: SEP 0 1 2009

From: Acting Deputy Under Secretary for Health for Operations and Management (10N)

Subj: Request for Technical Assistance in Support of Bereaved Family Surveys

To: Network Director (10N1 – 23)

1. The Hospice and Palliative Care Program requests the assistance of VISN Information Technology staff in the national rollout of a pilot quality measure known as Bereaved Family Survey (BFS). As background, the three-year Comprehensive End of Life Care (CELC) Initiative was funded to improve the access, quality and expertise in providing end of life care across VA (fact sheet is attached). As part of this Initiative, BFS has been implemented in 13 VISNs to drive quality initiatives. More recently, Patient Care Services has approved this survey as a quality measure nationwide for fiscal year 2010 as a prelude to consideration as a performance measure. This will require an additional 9 VISNs to implement a data extraction process for reporting their inpatient deaths and family contact information to the hospice and palliative care program as part of the BFS.

2. At the core of this effort are the bereaved family survey results which give a voice to families and indirectly to the Veterans served by The Department of Veterans Affairs (VA). The CELC Initiative established the PROMISE (Performance Reporting and Outcomes Measurement to Improve Standards of care at End-of-life) Center to administer these surveys and to measure the quality of end of life care throughout VA. BFS has been approved by the Office of Management and Budget for data collection. It is expected that all VISNs will be participating in the BFS at the beginning of fiscal year 2010. The following VISNs are currently participating in BFS and have successfully implemented the associated data extraction process; 1, 2, 3, 4, 5, 6, 8, 9, 11, 15, 16, 22, and 23 leaving the remaining VISNs to join in on this process.

3. The purpose of this request is to engage IT support from those VISNs that are not yet participating in the data extraction process needed for implementation of BFS. This support requires VISNs to identify and collate deceased Veteran names, identifiers, next of kin names, and contact information on a monthly basis. A sample data extraction algorithm and excel spreadsheet reporting formats are attached. VISNs will post these data on a secure VISN 4 server on a monthly basis, beginning no later than September 15, 2009.

4. It is expected that VISNs will identify an IT point contact for BFS. This IT person will work closely with their VISN's Palliative Care Program Manager who will be primarily responsible for ensuring submission of data is initiated by September 15, 2009, and monthly thereafter. From experience in implementing this process in other VISNs, the collaboration among IT and the Palliative Care Program Manager is central to successful implementation.

5. To begin preparation for the data extraction process, please contact Hien Lu, Associate Director of the CELC PROMISE Center. Ms. Lu can be reached at (215) 573-7282 or Hien.Lu@va.gov. Please share this memorandum and attachments with your VISN Chief Information Officers.

6. For any questions about the CELC Initiative please contact Scott T. Shreve, DO, National Director, Hospice and Palliative Care, Office of Geriatrics and Extended Care Services at (717) 228-5946 or Scott.Shreve@va.gov.

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Attachments:
- Bereaved Survey Instructions
- Comp EOL Care Initiative Fact Sheet
- BFS Data Extraction Sample Template

VISN 4 Bereaved Family Member Contact Routine
Overview for Technical Implementation

1. VISN 4 automatically receives inpatient files (PTF & Extended Care) from the VSSC on a weekly basis, i.e. EXT_XB08, EXT_XM08. INPT_PB08, INPT_PM08. Documentation regarding the contents and fields in above files can be found at: http://vaww.va.gov/NDS/SAS/SASDataDictionaries/SASDataDictionaries.asp

They are loaded onto SQL Server along with other files from VistA.

2. Using an Access database, the following are run:

- A Treating Specialty table is created and loaded into the database using the PTF Code and Treating Specialty name from the Treating Specialty File #42.4 in VistA

- Links are created to following files via ODBC Connections:
  - V04_EXT_XM08 (from VSSC)
  - V04_INPT_PM08 (from VSSC)
  - Dbo_DMPATIENT_2 (loaded from VistA Patient #2 file)
  - DBO.DMSTATE_5 (loaded from VistA State #5 file)

3. Pass-through queries are created (for the INPT and EXT files) which pull deaths (discharge type: 6-DEATH WITH AUTOPSY and 7-DEATH WITHOUT AUTOPSY) from the desired discharging bedsection:

- Z-08 Acute Inpatient Deaths (discharging bedsections: 12-Medical ICU, 15-General (Acute Medicine), 50-General Surgery, 63-Surgical ICU) SQL Code below is listed below.
- Z-08 Long Term Care Inpatient Deaths (discharging bedsections: 80-NHCU, 81-NH GEM NURSING HOME CARE,96-NH HOSPICE, 64-NH SHORT STAY REHABILITATION,95-NH SHORT STAY SKILLED NURSING, 66-NH SHORT STAY RESTORATIVE ,67-NH SHORT STAY MAINTENANCE, 68-NH SHORT STAY DEMENTIA CARE, 69-NH SHORT STAY DEMENTIA CARE, 47-NH RESPITE CARE (NHCU), 42-NH LONG STAY DEMENTIA CARE, 43-NH LONG STAY SKILLED NURSING, 44-NH LONG STAY MAINTENANCE CARE, 45-NH LONG STAY PSYCHIATRIC CARE,46-NH LONG STAY SPINAL CORD INJ)

SQL CODE – Acute Inpatient Deaths:

```
SELECT  STA3N AS STATION, DOD AS DATE_OF_DEATH,   name_#01
as VETERAN_NAME,  REALSSN, SEX AS GENDER, AGE, BORNDAY
AS DATE_OF_BIRTH, DBEDSECT AS
TREATING_SPECIALTY_AT_DISCHARGE
        K_NAME_OF_PRIMARY_NOK_#211 AS NEXT_OF_KIN,
K_PHONE_NUMBER_#219 AS NEXT_OF_KIN_PHONE,
        K_STREET_ADDRESS_LINE_1_#213 AS
NEXT_OF_KIN_ADDRESS, K_CITY_#216 AS NEXT_OF_KIN_CITY,
```

```
        ABBREVIATION AS NEXT_OF_KIN_STATE, K_ZIP_CODE_#218
AS NEXT_OF_KIN_ZIP
FROM    vharendingms.V04_INPT_PM08 left  join
        v4dm.dbo.DMPATIENT_2 on sta3n=key_site and
realssn=social_security_number_#09
        left join V4DM.DBO.DMSTATE_5FROMWB on
K_STATE_#217_IEN=NUMBER
WHERE    DISTYPE IN (6, 7) AND DBEDSECT IN (12,15,50,63)
order by sta3n, dod
```

SQL CODE – Long Term Care Inpatient Deaths:

```
SELECT  STA3N AS STATION, DOD AS DATE_OF_DEATH, name_#01
as VETERAN_NAME,
        SEX AS GENDER, AGE, BORNDAY AS DATE_OF_BIRTH,
DBEDSECT AS TREATING_SPECIALTY_AT_DISCHARGE,
        K_NAME_OF_PRIMARY_NOK_#211 AS NEXT_OF_KIN,
K_PHONE_NUMBER_#219 AS NEXT_OF_KIN_PHONE,
        K_STREET_ADDRESS_LINE_1_#213 AS
NEXT_OF_KIN_ADDRESS, K_CITY_#216 AS NEXT_OF_KIN_CITY,
        ABBREVIATION AS NEXT_OF_KIN_STATE, K_ZIP_CODE_#218
AS NEXT_OF_KIN_ZIP
FROM    vhaaacsqlserver.V04_EXT_XM06 join
        v4dm.dbo.DMPATIENT_2 on sta3n=key_site and
realssn=social_security_number_#09
        join V4DM.DBO.DMSTATE_5FROMWB on
K_STATE_#217_IEN=NUMBER
WHERE    DISTYPE IN (6, 7) AND DBEDSECT IN
(80,81,96,64,95,66,67,68,69,47,42,43,44,45,46)
order by sta3n, dod
```

4. Select queries are created that pull from the pass through queries and prompt the user for a beginning and ending date range from the "date of death" field:

```
SELECT [Z-08 Acute Inpatient Deaths].STATION, [Z-08 Acute Inpatient
Deaths].DATE_OF_DEATH, [Z-08 Acute Inpatient Deaths].VETERAN_NAME,
[Z-08 Acute Inpatient Deaths].REALSSN, [Z-08 Acute Inpatient
Deaths].GENDER, [Z-08 Acute Inpatient Deaths].AGE, [Z-08 Acute Inpatient
Deaths].DATE_OF_BIRTH, [TREATING SPECIALTYS].NAME AS [TREATING
SPECIALTY AT DISCHARGE], [Z-08 Acute Inpatient Deaths].NEXT_OF_KIN,
[Z-08 Acute Inpatient Deaths].NEXT_OF_KIN_PHONE, [Z-08 Acute Inpatient
Deaths].NEXT_OF_KIN_ADDRESS, [Z-08 Acute Inpatient
Deaths].NEXT_OF_KIN_CITY, [Z-08 Acute Inpatient
Deaths].NEXT_OF_KIN_STATE, [Z-08 Acute Inpatient
Deaths].NEXT_OF_KIN_ZIP
```

```
FROM [TREATING SPECIALTYS] INNER JOIN [Z-08 Acute Inpatient Deaths]
ON [TREATING SPECIALTYS].[PTF CODE] = [Z-08 Acute Inpatient
Deaths].TREATING_SPECIALTY_AT_DISCHARGE
WHERE ((([Z-08 Acute Inpatient Deaths].DATE_OF_DEATH) Between [Start
date] And [End date]));
```

5. Results are then copied and pasted into an excel file (sample below). This excel file is then used as the source file to generate letters to each of the bereaved family members to inform them of an upcoming phone interview.

6. Introductory letters are sent to family members of deceased veterans approximately 2-8 weeks following the death. Two weeks after the letters are sent, initial attempts at phone contact are made with the family member to complete the bereaved family member quality survey. Upon completion of the phone survey or after three unsuccessful attempts at contact, the results are finalized and tabulated for analysis.

Comprehensive End-of-Life Care Initiative

What is the purpose of the Comprehensive End-of-Life Care Program (CELC)? The purpose of this multi-pronged initiative is to ensure that hospice and palliative care services are reliably accessible at all VA facilities and to build an infrastructure for long-term sustainability of high quality end-of-life care.

What are the major components of the initiative?

- Build infrastructure through competitive applications to fund:
  - Staffing for new Hospice and Palliative Care Units: Promote the expansion of dedicated hospice or palliative care beds by funding unit staff positions for three years in facilities that commit to using their own Medical Facilities funds to establish 54 new hospice or palliative care units. One half of annual funding initiated in February 2009
  - Enhancing existing Palliative Care Programs: Funded facility activities to build on the strengths of 37 established palliative care programs (e.g., those with an HPC unit) and provided funding to 63 remaining facilities to enhance programs through a "Template for Success" process.
- Access
  - Fund Palliative Care Consult Teams at every facility (1.5 FTEE/Facility) and provide for palliative care program management across VISNs (1.5 FTEE/VISN)
  - Collaborate with community partners to reach special populations such as homeless and rural veterans. 18 grants have been awarded to identify innovative practices
- Quality
  - Measure the quality of services delivered through implementation of bereaved family member quality surveys and other measures. Expanded to 13 VISNs in FY09 with infrastructure in place to expand nationally in FY10.
  - Establish Evaluation, Implementation and Resource Centers to provide for dissemination of successful practices through collaboration with VA field experts to provide ongoing mentoring
- Expertise Dissemination
  - Provide VA palliative care leadership training for program development, instruction on proven quality interventions, and ongoing structured mentoring to facility palliative care teams
  - Improve clinical expertise of VA clinician staff by creating and disseminating the "EPEC for Veterans" curriculum through a network of VA staff experts and champions
  - Provide nursing assistant training through train-the-trainer programs with nurse educators working with staff in hospice and palliative care units, Community Living Centers, and State Veterans Homes. Five regional training programs are planned for FY09.
  - Adapt and disseminate nationally recognized nursing end of life care curriculum
- Palliative Care Program Evaluation and Support
  - Track and report measures of success analogous to the "Inpatient Flow Initiative"
  - Update the congressional assessment from 1998 for the hospice and palliative care program through the Health Care Financing & Economics group to determine the impact of the CELC initiative and to provide recommendations for future initiatives

Who are the community partners working with the CELC Initiative?

- Center to Advance Palliative Care (CAPC)- palliative care leadership training
- The EPEC (Education in Palliative and End-of-life Care) Project – EPEC for Veterans
- Hospice and Palliative Nurses Association – Palliative Care Nursing Assistant Training Program
- National Hospice and Palliative Care Organization – Reaching Out: Quality Hospice and Palliative Care for Rural and Homeless Veterans

STATION	DATE_OF_DEAT	VETERAN_NAME	realssn	GENDER	AGE	DATE_OF_BIRTH	TREATING SPECIALTY AT DISCHARGE	NEXT_OF_KIN
503	05-Apr-08	John Doe Veteran	123456789	M	80	28-Apr-58	GENERAL(ACUTE MEDICINE)	MyDear, Mom

NEXT_OF_KIN_PHONE	NEXT_OF_KIN_ADDRESS	NEXT_OF_KIN_CITY	NEXT_OF_KIN_STATE	NEXT_OF_KIN_ZIP
111-222-3333	GENERAL DELIVERY	Somewhere	PA	17088