Reaching Out: Quality Hospice and Palliative Care for Rural and Homeless Veterans

Option Year One: September 19, 2009 - September 18, 2010

Executive Summary
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Reaching Out: Quality Hospice and Palliative Care for Rural and Homeless Veterans
Option Year One Executive Summary
by the
National Hospice and Palliative Care Organization (NHPCO).
Introduction: Base Year and Option Year One

Base Year Highlights

In September of 2008, the National Hospice and Palliative Care Organization (NHPCO) executed a contract with the Department of Veterans Affairs (VA), launching an initiative to provide homeless Veterans and Veterans in rural areas with access to quality end-of-life care. The initiative, entitled “Reaching Out: Quality Hospice and Palliative Care for Rural and Homeless Veterans,” aimed to gain insight about the end-of-life care needs of these specific populations and then to implement community-based programs to address those needs.

The contract was designed to:

1. Solicit proposals for innovative programs that foster VA collaboration with Hospice-Veteran Partnerships, state hospice organizations, State Veterans Homes, hospices and other providers of care and services for Veterans.

2. Provide recommendations to the VA Hospice and Palliative Care Program to improve outreach to Veterans and utilization of quality end-of-life care for rural and homeless Veterans at the close of each grant period, over three years.

In November of 2008, NHPCO released the request for proposals (RFP) for the “Reaching Out” grants. The programs who were awarded grants were to develop projects that could be sustainable and lend themselves to replication. In February of 2009, eighteen grants were awarded to end-of-life care programs in fifteen states.

Base Year Outcomes

Project outcomes, reported by all eighteen grantees, highlighted increased awareness of Veterans’ needs, due to the establishment of partnerships between hospices and VA. The increased awareness, along with VA and hospice leaders’ increased knowledge about end-of-life concerns of rural and homeless Veterans, are the valuable common outcomes among “Reaching Out” programs that laid the foundation for access to end-of-life care for more Veterans.

As a result of the eighteen grantee communities’ heightened awareness of their local Veterans, Veterans’ needs, and the benefits to which Veterans are entitled, project staff from each grantee program made efforts to implement practices resulting in positive programmatic changes, including:
Increased utilization of the Military History Checklist by hospice providers
Improved coordination of care among community providers and VA
Better identification and tracking of homeless Veterans
Increased use of technology to communicate with Veterans

This proactive approach and accommodation among partners did not come easily to grantees; most struggled to develop relationships between hospice providers, VA personnel and homeless shelter staff. Continued involvement and dedication to a common goal, however, fostered strong relationships that have become sustainable partnerships in the initiative to care for homeless and rural Veterans at the end of life.

Option Year One Highlights

The second year of the contract, Option Year One, focused on the development and launch of the following:

- **A National Awareness Campaign**, named **We Honor Veterans (WHV)**, to engage and support hospice providers in better understanding and addressing Veterans’ needs as they near the end of life.

  In collaboration with NHPCO staff, NHPCO’s Veterans Advisory Council and VA staff, **Free Range Studios** (selected through an RFP process) developed the Campaign strategy and messaging. Free Range staff conducted audience research in the form of a provider survey, focus groups, one-to-one interviews and online testing. Feedback from VA staff was requested throughout the process and integrated into the final product.

  The “**WHV brand story**” encapsulates the key messages, intentions and sentiments of the campaign. Results of the online survey and other research are described in the **National Campaign Audience Research** section below.

  A key component of the campaign was the development of **We Honor Veterans** “Partners”. **Partners** are hospice providers that demonstrate a systematic commitment to improving care for Veterans. These organizations assess their ability to serve Veterans and, using **resources** provided as part of the program, integrate best practices for providing end-of-life care to Veterans into their organization.

- **A Veteran-centric Website**, [www.WeHonorVeterans.org](http://www.WeHonorVeterans.org), that:
  1. Motivates hospice providers to declare their commitment to honoring Veterans
  2. Educates hospice providers on the needs of Veterans at the end of life
3. Provides resources and tools to hospice providers so they can deliver the best support and care to Veterans at the end of life
4. Increases the number of hospice providers that can demonstrate their commitment to providing care to Veterans at the end of life

- **Best Practices in providing care to Veterans** were added to NHPCO’s 2010 revisions of the *Standards of Practice for Hospice Programs*. The Standards are organized around the ten components of quality in hospice care, which provide a framework for developing and implementing Quality Assessment and Performance Improvement (QAPI) requirements under the Medicare Conditions of Participation (COPs). The Standards were revised and published in January, 2010. The Veteran-related Standards are available on the WHV website.

- **Reaching Out Model Programs** developed by Option Year One grantees. These models, begun in the first year of the Reaching Out contract, were further developed and refined over the course of the year by six agencies. The purpose of the models was to provide real-life examples of ways to enhance Veteran-centric education and partnerships between community providers and VA staff and facilities, and to increase Veterans’ access to hospice and palliative care services, with a special emphasis on those who are homeless and/or living in rural areas. A description of the models is available on the WHV website.

- **Veterans module of NHPCO’s Family Evaluation of Hospice Care**. The *Family Evaluation of Hospice Care (FEHC)* is a post-death survey designed to yield actionable information that reflects the quality of hospice care delivery from the perspective of family caregivers. Hospices submitting FEHC data to NHPCO receive quarterly reports that include individual hospice results plus state and national results for comparison.

  Initial planning and work on this module was begun by NHPCO’s Research Department during Option Year One. The deliverable date has been extended to March, 2011, when an enhanced version of the FEHC will be released, including the new Veterans Module.

**Option Year One Outcomes**

This report describes the Option Year One accomplishments in detail. Insights for Option Year Two and Recommendations to the Department of Veterans Affairs (VA) round out the report, followed by an overview of Resource Materials developed during the course of the year.

Option Year One was essential to establishing baselines for comparison with outcomes at the conclusion of the Reaching Out contract. A few of these include:
**We Honor Veterans** website was launched at the end of October 2010. From November 1 - 17, 2010, the top ten webpage views were:

<table>
<thead>
<tr>
<th>Webpage</th>
<th>Total Page Views</th>
<th>Webpage</th>
<th>Total Page Views</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enroll Your Hospice</td>
<td>3006</td>
<td>WHV Partner Resources</td>
<td>1247</td>
</tr>
<tr>
<td>Home page</td>
<td>2775</td>
<td>Honoring Veterans</td>
<td>1158</td>
</tr>
<tr>
<td>Get Practical Resources</td>
<td>2135</td>
<td>Veterans and Their Needs</td>
<td>1064</td>
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<tr>
<td>Intake/Admission</td>
<td>1629</td>
<td>WHV Partner Levels</td>
<td>1049</td>
</tr>
<tr>
<td>Volunteer Programs</td>
<td>1297</td>
<td>Partner Level One</td>
<td>1006</td>
</tr>
</tbody>
</table>

Other statistics of interest include:

**We Honor Veterans Partners** (as of November 29, 2010)
- Email Contacts: 370 individuals in 46 states and DC
- Recruits: 175 agencies in 42 states
- Level One: 4 agencies (Arizona, Iowa, Tennessee, West Virginia)

**Technical assistance** provided to the grantees by NHPCO staff:
- Monthly conference calls
- One in-person meeting (May 10-11, 2010)
- Numerous telephone and email exchanges

**NHPCO’s Veterans Advisory Council reconvened** after several years of inactivity, with membership composed of:
- 4 VA staff
- 6 NHPCO staff
- Representatives from 10 community organizations

**Partnerships between hospices, VA/Veteran Service Organizations and Community Agencies**
- Community Hospices/State Hospice Organizations: 40
- VA/VSO: 46
- Community Agencies: 56

**Participants in educational sessions and meetings throughout the year**
- Hospice staff and volunteers: 1064
- Community members, including Veterans: 15,635
- VA staff: 149

*It is important to note there are gaps and inconsistencies in reports from which this information was gathered. NHPCO, in collaboration with VA staff, will refine reporting requirements to enable more detailed, relevant statistics and outcome measurement in the future.*
National Campaign

This overall goal of this deliverable was to develop a Veteran awareness campaign to engage hospice providers in better understanding and addressing the needs of Veterans as they near the end of life.

Audience Research

NHPCO retained Free Range Studios to develop the creative components for the We Honor Veterans campaign (messaging, a new website, and printed collateral materials) and was also tasked with conducting an initial phase of audience research to better understand how hospice providers were currently caring for Veterans.

Two online surveys were distributed via email to 33,000 NHPCO members and 87 representatives from state hospice organizations. The surveys, which were administered through the online tool Survey Monkey (from 2/26/10 to 3/4/10), covered issues including:

- The extent to which hospices and state organizations are aware of Veterans receiving care
- The Veteran-specific programs and procedures hospices already use
- Use of Veteran-specific resources on the NHPCO website
- What training materials hospice care providers desire
- The online and information-seeking behaviors of hospice staff

A total of 1,296 individuals completed the online survey. Highlights from the results include:

- 94% provide care to Veterans
- 43% have Veteran-specific programs/procedures in place and “treat Veterans just like all patients”
- 81% have coordinated Veteran benefits through VA
- 41% experienced coordination of Veteran care as difficult

Specific key findings from the online survey were as follows:

1. There is confusion around the words “Veteran” and “programs and procedures for Veterans.”
2. Hospices are not necessarily motivated to care for Veterans because it is good for business or because of outside pressure from state organizations; rather, they feel it is the right thing to do.
3. Most hospices are determining whether patients are Veterans at intake; virtually no providers are using the Military History Checklist.
4. Everyone wants more training and they want to complete their training online when it’s convenient for them.
5. Most respondents do not know that NHPCO offers programs or resources on end-of-life care for Veterans.
6. Virtually all respondents regularly communicate via email and want NHPCO to contact them through this channel.
7. Feelings about VA are both positive and negative.
8. A perk of the “Reaching Out” grant program (Base Year) is the higher level of awareness it gave to Veteran end-of-life care issues.

Based on the audience research findings, Free Range provided the following recommendations for the **We Honor Veterans** campaign:

1. Messaging will need to distinguish between someone having needs related to wartime (specifically combat) service versus someone eligible for benefits as a “Veteran.” Suggestions include:
   - Talk about Veterans as “combat Veterans” or “Veterans of war”
   - Talk about “meeting the special needs” of combat Veterans, not “programs and procedures” for Veterans
2. Messages about Veterans as part of the community and the importance of honoring and providing a dignified end-of-life experience to these men and women are more likely to resonate. Suggestions include:
   - Recognizing and addressing the special needs of Veterans is not a way to improve business; it’s another way to deliver high quality care.
   (This type of messaging, of course, fulfills the hospice mission.)
3. Develop a smart, effective promotional strategy for the e-learning modules and the training resources on the new **We Honor Veterans** website.
4. Leveraging email effectively to communicate around the **We Honor Veterans** campaign will be key.
5. Make the new **We Honor Veterans** website accessible from the main NHPCO site.
6. Keep a grant program in place for hospices as the side-benefit is the public awareness opportunity it generates.
7. Coordinate the integration of the Military History Checklist to intake forms with software providers.
8. Establishing relationships between hospice providers and VA facilities is key for the **We Honor Veterans** campaign to be successful.

To review the specific findings of the provider survey, refer to the **We Honor Veterans Campaign Audience Research Report**.

**Campaign Assessment**

In the beginning months of the campaign development, due to the uncertainty of healthcare reform legislation and the resulting controversy over “death panels,” NHPCO formulated the following benefits and risks of moving forward with wide dissemination of information related to palliative care and hospice for Veterans.
**Benefits**

The Campaign:
- Demonstrates that NHPCO and VA are committed to caring for dying Veterans.
- Is not a media campaign; it is an effort to engage palliative care and hospice providers in activities to learn about and provide optimal care for Veterans.
- Is a good opportunity for VA to work with community providers to educate and extend the awareness of and competency to caring for Veterans.
- Expands quality Veteran-centric end-of-life care to non-enrolled Veterans and an already-strained VA healthcare system.
- Increases the visibility of Veterans in their own communities.

Additionally:
- Veterans are dying every day and deserve the best possible care.
- The primary focus is to increase the competency and ability of staff to provide Veteran-centric care.
- The new website, while available to the public, will not initially be publicized outside of the end-of-life provider community.
- Caring for dying Veterans doesn’t have the stigma that promoting advance care planning can have.
- 50% of hospices are part of larger healthcare systems, so the impact of the campaign can go beyond hospices.
- The needs-assessment survey conducted to inform the campaign and website was completed by 1,296 individual hospice and palliative care providers, and 23 state hospice organizations, with 500 volunteering to participate in one-to-one interviews. This level of response demonstrates the great interest in and need for quality care focused on specific Veteran needs.
- There has been no negative PR in the media about VA working with hospices; hospices were never linked to the death panel debates.
- As many Veterans don’t live near a VA facility, through the Campaign, care may be extended to the communities where they live.
- “Death panel” discussions created the scare about advance directives; reputable media have discredited the information that was spread.

**Risks**

The apparent risks were fewer in number:
- The potential for “dredging up” the death panel media debate and the related VA advance care planning discussion.
- If VA doesn’t take on palliative care and hospice as something good for Veterans, it could be seen as not ensuring good care for Veterans.
- If the campaign is postponed or stopped, hospices will continue to provide care for Veterans without a clear understanding of their unique needs.

Work on elements of the Campaign and website content continued, and by early May, 2010, the Campaign was approved to move ahead.
We Honor Veterans Brand Story

To ensure all elements of the Campaign and website were clearly understood by Free Range and NHPCO staff, and that every creative deliverable was true to the findings of the audience research, the **We Honor Veterans** brand story was developed.

Feedback on the initial graphics and text was obtained from VA employees at their Hospice and Palliative Care conference in May, with additional review and input by the Reaching Out grantees and NHPCO’s Veterans Advisory Council. After revisions by Free Range, final testing was conducted with several hospice provider focus groups.

The brand story, as approved by NHPCO and VA Central office staff:

**A Mission to Serve**

“It is your mission that drives you. Hospice professionals across the country focus on a single purpose: to provide comfort and support at the end of life.

While our mission is straightforward, fulfilling it is anything but, as each patient has a unique life story and a unique set of needs. And when it comes to the needs of America’s Veterans, if we are unprepared, our mission can be challenged or even made impossible.

How can we provide comfort to a medic who served in Vietnam and is now reliving a tragic battlefield moment, suppressed for 40 years? How can we connect with a Gulf War Veteran whose experiences have caused her to isolate herself even from her own family? How can we best serve a World War II soldier who sacrificed so much of himself in service to our country?

Today, one in four dying Americans is a Veteran. That’s why America’s hospice professionals are on a mission to learn how to serve them through all of the challenges these Veterans may now be facing from illness, isolation or traumatic life experience. It may begin with a simple thank you and a small token to acknowledge a Veteran’s service. With the right skills, you may open a doorway that leads a Veteran to a sense of dignity, recognition, and perhaps, forgiveness.

**We Honor Veterans**, a project of NHPCO and VA, invites you to join a pioneering program focused on respectful inquiry, compassionate listening and grateful acknowledgment. By recognizing their unique needs, you can learn how to accompany and guide America’s Veterans and their families through their life stories toward a more peaceful ending.

America’s Veterans have done everything asked of them in their mission to serve our country and we believe it is never too late to give them a hero’s welcome home. Now it is time that we step up, acquire the necessary skills and fulfill our mission to serve these men and women with the dignity they deserve.”

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Campaign Development and Launch

After months of research and collaboration between Free Range Studios, NHPCO, the Veterans Advisory Council and VA, We Honor Veterans was launched on September 12, 2010, during NHPCO’s Clinical Team Conference in Atlanta, GA. As part of the launch, NHPCO conducted a full-day seminar to promote the goals and resources for the new initiative.

The seminar, attended by almost 300 community and state hospice leaders along with leaders from Veterans Integrated Service Networks (VISNs) and VA facilities across the country, provided participants with a first-hand review of the program goals, objectives, website, resources, “traveling” exhibit and promotional items.

Using a modified appreciative inquiry approach, attendees explored how to enhance the relationships between hospices and VA facilities across the United States.

Throughout the day, presentations by NHPCO and VA staff focused on the benefits of the program. Scott Shreve, DO, National Director, Hospice and Palliative Care for VA, summed up the core of We Honor Veterans in these four topics:

1. Asking “Are you a Veteran?” and having staff prepared to deal with the answer
2. Partnering to improve care for Veterans and their families
3. Extending organizational “reach” to improve care and access
4. Measuring the impact of interventions

Participants left the training with a completed, detailed action plan to improve care provided to Veterans in their hospice, state or VISN.

Planning and strategy development for the campaign was based on information gathered from an online survey of hospice providers and state hospice organizations, one-on-one interviews, focus groups and online testing, all to understand the unique needs of the hospice provider target audience and how the campaign might support providers in delivering enhanced care to Veterans and their families.

Additional supporting materials and resources developed for the campaign included:

- The design of a new WHV logo
- A tagline reflecting the campaign mission: Hospice Professionals on a Mission to Serve
- A campaign welcome poster and informational brochure

We Honor Veterans is a pioneering program that provides hospices, state hospice organizations, and Hospice Veteran Partnerships with tools and resources that encourage them to:
Learn more about caring for Veterans
• Declare a commitment to honoring Veterans at the end of life
• Partner with VA at the local, regional and national level
• Assess their current ability to serve Veterans
• Provide education for hospice staff and volunteers
• Measure quality and outcomes for continued improvement

With its “Partners” program, the **We Honor Veterans** campaign provides tiered recognition to organizations that demonstrate a systematic commitment to improving care for Veterans. Throughout **four Partner Levels**, organizations assess their ability to serve Veterans and, using resources provided as part of the campaign, integrate best practices for providing end-of-life care to Veterans into their organization. Reports (**Level One example**) for each level enable the organization to document their activities leading to increasing levels of commitment. Each report has three major components:

1. Education: Staff, volunteers, Veterans, community, other healthcare providers
2. Organizational Policies and Procedures: fully integrating Veteran-centric care into the organization’s policies, procedures and systems
3. Hospice-Veteran Partnerships: collaboration with other community providers, state hospice organizations, VA facilities and VA staff

By becoming a **We Honor Veterans** Partner, hospices will be better prepared to:

1. Build professional and organizational capacity to provide quality care for Veterans
2. Develop and/or strengthen partnerships with VA and other Veteran organizations
3. Increase access to hospice and palliative care for Veterans in their community
4. Network with other hospices across the country to learn about best practice models

**Veteran-centric Website**

To support the goals of the **We Honor Veterans** campaign, NHPCO staff and Free Range media experts designed a new website, [www.WeHonorVeterans.org](http://www.WeHonorVeterans.org), to:

• Motivate hospice providers to declare their commitment to honoring Veterans
• Educate hospice providers on the needs of Veterans at the end of life
• Provide resources and tools to hospice providers so they can provide the best support and care to Veterans at the end of life
• Increase the number of hospice providers that can demonstrate their commitment to providing care to Veterans at the end of life
A major focus of the content development and design for the website was providing downloadable practical information, resources, and tools for hospice staff (clinical and administrative) about Veteran-centric care.

Lessons Learned, Best Practices, Tips, Presentations and educational materials from Reaching Out grantees were also utilized to develop web content. Additionally, a key element of the website prominently features the We Honor Veterans Partner levels, Resources and Directory to engage hospice providers with the campaign.

We Honor Veterans website was launched at the end of October 2010.

An overview of the website content can be reviewed on the Reaching Out Reports and Resources webpage.

Since the website launch, the top webpage viewed has been Enroll Your Hospice, with the most time spent on WHV Partner Resources. These statistics indicate early success in directing users to the information that will enable them to progress in their awareness and response to Veterans' care needs.

Grantee Projects

For Option Year One, in response to NHPCO's RFP to continue the work that began in 2009, 12 proposals were received from the original 18 Base Year grantees. Through the proposal review and selection process, six grants were awarded in six states, with a stated focus on developing and documenting replicable models that could be implemented in communities across the United States.

The selected organizations and their proposed program models were:
- Arkansas Hospice, Inc. (AR): Vet-To-Vet
- California Hospice Foundation (CA): Hospice-Veteran Partnership (HVP)
- Delaware Hospice, Inc. (DE): Community Partnership
- Hospice of the Bluegrass (KY): Community Partnership
- Hospice of Chattanooga (TN): Community-Based Outpatient Clinic (CBOC)
- LINK of Hampton Roads, Inc. (VA): Community Foster Home Hospice

The following topics are arranged by general themes identified by NHPCO and reproduced here from the grantee final reports.

Successes

- Partnered with VISN 22 at a meeting on June 16, 2010 with California Hospice and Palliative Care Association providers in Region 6 (Los Angeles, Orange, Santa Barbara and Ventura Counties) and key VA staff at the VA Long Beach Medical Center. This meeting gave hospice providers an opportunity to meet key VA personnel and begin the process of developing good working relationships
• Hardest to quantify, but probably most important, were the state and local relationships developed between hospice and VA. Even with personnel changes at VA, there is evidence of a strong commitment to continue these relationships
• Recurring feedback about access to quality care, transportation to VA medical centers and the need for clarification on VA benefits. Participant comments reiterated the importance of the work of this initiative. One Veteran said “I’m getting to that age where you begin paying attention to how you’re going to die. It sure would be important to have someone taking care of you if you get sick. I’m definitely glad to know about hospice”
• Completion of Pocket Guide and Talking Points Handout for First Responders and homeless shelter employees
• Surveyed and educated Delaware hospices on the importance of asking military status and using the Military Checklist – 100% of hospice providers are now participating
• Hospice/VA Liaison has helped with specific Veteran issues. We will continue to staff this position
• Established Veteran outreach and hotline number
• The value of working closely with our partners: Each of us has access to other members’ personnel resources and relationships within our own organizations/groups
• Heartfelt comments such as “This was such important information. Thank you for bringing it to us.” “Excellent personal examples, thank you for sharing them.” “I never knew how important it is to consider a patient’s experience as a Veteran in his end of life care.” “Our agency asks if someone is a Veteran, but I never understood what that meant”
• Hospice of the Bluegrass has an improved relationship with VA at the VISN level, with VA medical centers in Lexington, with VA Veteran homes and with the CBOCs in our service area. These improved relationships translate into higher quality and better coordinated and managed care
• Developed and distributed a Community Foster Home Hospice Replication Manual

Unique Applications

• The Richmond (VA) replication project set a target of July, 2010 for placing the first Veteran in a home hospice. Through frequent meetings and discussions, one of the partners had legal questions. The partners agreed to recruit an attorney willing to become a partner or who would provide pro-bono counsel before moving forward. Two attorneys have agreed to attend the next meeting to offer guidance and address the concerns.
• In Nicholas County (KY), the elementary students wrote notes of appreciation to the Veterans. The middle school students took time during class to write thank you notes to Veterans for their service and courage. The students’ activity creates an intergenerational connectedness and enhances young people’s understanding of the service and needs of Veterans.
Arkansas Hospice, in its goal to “educate an army of citizens”, included those who work in doctors’ offices, clinics and emergency rooms, as well as church members – groups not specifically mentioned by the other grantees.

Bereavement Counselors with Hospice of Chattanooga have agreed to be available to provide needed support for Veterans with unique end-of-life issues such as PTSD. They have spent time this grant year learning from the Chattanooga CBOC (Mental Health Team), the Chattanooga Vet Center and from Deborah Grassman’s educational materials (video and reading).

The Director and Counselors of the Vet Center in Chattanooga have been instrumental in educating hospice staff about combat and PTSD. They have also collaborated with us in rural outreach, using the Mobile Vet Center for “Outreach Days” in outlying counties.

Challenges/Solutions

Though not mentioned below, California Hospice Foundation, Delaware Hospice and Hospice of the Bluegrass all had turnover in their Project Director positions during the year, creating unexpected challenges for their staff.

In the course of the year, grantees identified challenges to the success of their projects. Some of these are listed below, with solutions as applicable. Their final reports in the Appendix of this document may be reviewed for complete descriptions.

- Identifying the correct contact within the VA system and then getting VA input and participation was a precipitous barrier. The most important activity in overcoming this challenge was building the relationship with the VISN 9 Palliative Care Coordinator. In retrospect it would have been much more helpful to this project to have that contact earlier in the process.
- Initially, there was a lack of knowledge about VA. We identified key personnel at the Wilmington VA and the Veterans Home who provided information to all partners about end of life benefits and services provided by VA.
- Getting first responders and others to recognize the importance of identifying Veterans and connecting them with possible resources. Educational programs were provided in their facilities and pocket guides were developed to give to Veterans who were homeless or needed to connect with VA, giving first responders an easy to use tool was a way of encouraging their participation.
- There is a need to commit time and energy to work on relationship building. For hospice providers, it can be difficult to balance the need to assure their programs are financially stable with the time it takes to work on relationships and communication that may not have an immediate payoff. The workshop content was compelling enough to inspire providers to become involved.
- Some hospices have reported that they are not willing to devote time and energy to Veteran outreach unless it will increase their referrals.
Replication of Reaching Out Program Models

In planning and implementing a Veteran-centric program of education, care and services, grantees recommended that an organization carefully consider the following questions and their responses before proceeding:

- Does this initiative have the support of senior management/leadership and the board of directors?
- Does the organization have staff that are passionate about caring for Veterans and have the time to commit to the initiative?
- Does the organization have the resources to start an initiative? (Note that an organization does not necessarily need to invest large amounts of money into a program, but there must be staff committed to the project).
- Is the organization willing to invest staff, time and finances in education and relationship building without an immediate return on investment?
- What unique issues do Veterans face at the end of life, especially combat Veterans? How can our agency support them?
- Are we currently working with VA facilities? How might we improve our relationship with VA, VSOs and Vet Centers?
- What barriers to access exist in our area and how we can work with VA to resolve these?
- Do we check for Veteran status upon admission? Does our staff understand how to respond to Veterans’ needs?
- How much do our social workers and staff know about Veteran benefits and who to call to access benefits for Veterans and their families?

Engaging Veterans

Veterans were involved and, in fact, key to the success of grantee projects and activities. Using their unique perspectives, Veterans provided assistance in advisory and volunteer capacities, giving input and advice on project design and implementation, technical assistance in developing educational materials and resources. Some examples:

- “Teacher Vets” educated other Veterans and their spouses about hospice and end-of-life care.
- The Chattanooga Area Veterans Council which meets quarterly and consists of representatives of Veterans groups in the area (for example, the American Legion), promotes our outreach and provides information about VA benefits.
- The Vet Center provides counseling for combat Veterans. The Director and Counselors of the Vet Center are Veterans. They have been instrumental in educating us about combat and PTSD. They have also collaborated with us in rural outreach, using the Mobile Vet Center for “Outreach Days” in a few of our counties. The Director is a member of our Veterans Coalition.
- VA State and County Service Officers have been helpful with rural outreach, assisting Veterans with applying for and understanding their benefits. Many are Veterans themselves.
• A Navy Veteran social worker is coordinating our Vet-to-Vet effort. Volunteer Veterans are matched with Veteran patients with the goal of providing friendly visits and helping the Veteran share their story.
• A Veteran developed the logo used on all printed materials and a DVD tribute to fallen Veterans that is utilized at all training sessions.
• Veterans participated in education programs throughout the state.

Lessons Learned

As with successes and challenges, the six grantees learned a number of important lessons for the future, which they shared with NHPCO:

Relationship Development
• Recognize that each VA facility and its staff is different just like each hospice is different.
• Identify a champion from the local VA.
• Meet regularly to discuss planning, resources, programs and services provided by the agencies represented in the partnership.
• Be collaborative and plan to co-manage resources.
• Take suggestions seriously – someone on the outside may see something you don’t.
• Successful coalitions are formed when programs come together to solve common concerns.
• Build and nurture relationships with anyone who could ultimately help a Veteran.
• Respect people’s time by facilitating meetings that are timely and productive.
• Maintain ongoing communication.

Program Development
• Many hospice providers are willing to invest time, money, resources and staff without direct benefit to their bottom line because they are committed to improving end-of-life care for Veterans.
• Before initiating a new project or program, recognize that regional differences, learning styles, demographics and geography should be evaluated relevant to the project. What works for one organization or area of the country may not work in another.
• Foster Home Hospice hosts become involved in the program because they care greatly about Veterans and the sacrifices they have made for our freedom. They take Veterans into their homes and make them part of their families because they care deeply.
• The primary organizational investment for all project partners is staff time.

Education
• Educate members of churches, military organizations, civic and social clubs and the general public about Veterans and their needs. Many were shocked at how many Veterans live in their communities and also how many are homeless or living in poverty.
• Develop and distribute support material to increase awareness and assist in the education process.
• Plan, publicize and host an event for Veterans in the community, to engage and educate them about healthcare services that are available from community and VA providers.
• In collaboration with VA staff, provide education about Veteran benefits to hospice staff and other community agencies.
• Advocate for community hospices to adopt the use of the military history checklist to help identify Veteran patients and use the military checklist guide to identify benefits to which the Veterans may be entitled.
• Educate healthcare and community organizations to identify at-risk Veterans needing hospice and palliative care and how to connect them with Veteran services.

**Measurement and Evaluation**

• With our project, there should have been a more intentional effort to think about process and outcome evaluation. This project was massive in scope and as a consequence, the focus was more on implementing activities locally than monitoring effectiveness of the overall objectives.
• We will be using the Family Evaluation of Hospice Care (FEHC) survey to assess our care to Veteran patients. We will be able to evaluate the family satisfaction of all Veteran patients vis-à-vis their non-Veteran counterparts. Additionally, we’ll review care and services for Veteran patients as a whole and determine if our scores improve over time.

**NHPCO’s Business Plan for Program Sustainability**

NHPCO and the National Hospice Foundation (NHF) are fully committed to ensuring the ongoing viability of *We Honor Veterans*.

Business plans and sustainability activities for Option Year One focused on:

1. Producing and promoting Veteran-centric materials for purchase in NHPCO’s Marketplace
   a. Veteran-centric books were identified and available for purchase in the 2010 online catalog.
   b. WHV Marketplace Materials: a flyer of Veteran-centric books and *We Honor Veterans* promotional items was published in September, 2010. Total revenue from items sold through November was $3,326.00.

2. Developing strategic communications to promote *We Honor Veterans*
   a. Addition of *We Honor Veterans* to NHF’s donation page
b. **We Honor Veterans** Website launch [Press Release]

c. Link to [NHF’s donation page](#) from **We Honor Veterans** website

d. NHF “Call to Action” [Press Release](#)

e. NHPCO’s National Hospice Month Outreach materials with link to **We Honor Veterans** website

f. NHPCO’s [Veterans Day Op-Ed](#)

g. December 2010 issue of NHPCO’s Monthly News Journal, *NewsLine*, featuring a six-page article about **We Honor Veterans**, and a tour of the website homepage, description of Partner levels, and a link to NHF donation page.

3. Conducting preliminary research on potential corporate funders for **We Honor Veterans** resources
   a. Preliminary research by NHF staff on potential corporate funders is being completed as of the writing of this report.
   b. Plans for 2011 include direct outreach through:
      i. Mail
      ii. Phone
      iii. Face-to-face meetings
      iv. Social media programs

For Option Year Two, as outlined in the Project Management Plan, NHPCO and NHF team objectives in sustainability efforts include:

- Utilize existing infrastructure to raise funds in support of programs.
- Conduct a direct mail appeals to raise funds and awareness for Veteran programs.
- Establish a loyal and supportive constituency that will provide future funding.
- Attend NHPCO conferences, state-sponsored meetings and other relevant conferences to raise awareness of and support for the Veterans program.
- Provide basic kit of materials to all hospices committing as WHV Partners.
- Other measures as determined essential.

Intended outcomes include:

- Attract the attention of new philanthropic sources to Veterans issues.
- Increase NHF’s database of supporters of Veterans issues.
- Increase number of future grants in support of the Veterans program.
- Consistent integration of care for Veterans into hospice services.
Insights and Recommendations for Option Year Two

NHPCO offers the following insights and recommendations to the Department of Veterans Affairs (VA) Hospice and Palliative Care Program to improve outreach to Veterans and utilization of quality end-of-life care for rural and homeless Veterans.

To provide continuity in reporting, recommendations from Base Year have been carried forward, integrated and refined to reflect the experience and insights gained in Option Year One.

Insights: Guiding and Informing Veterans Program Activities

**NHPCO Internal Program Management**

- Develop a Proposal Scoring Tool to ensure high probability of success by organizations receiving grants. Evaluate carefully and keep expectations realistic.
- Provide ongoing communication and education to newly developed Veteran Awareness Regional Representatives (VARRs) ensuring the provision of best possible technical assistance to grantees, **We Honor Veterans** Partners and other hospice organizations.
- Closely monitor progress of grantees in meeting their goals and objectives for Reaching Out Model Program implementation. Provide additional guidance as deemed necessary by VARRs, NHPCO and VA staff.
- Promote the use of Reaching Out Model Programs with hospices that are interested, regardless of project funding.
- Continue to review and enhance the layout and contents of **We Honor Veterans** website.
- To be successful, partner with other organizations: no organization could accomplish this project in isolation.
- Develop process and outcome evaluation tools for programs and activities to demonstrate effectiveness.
- National meetings are a powerful venue for generating and maintaining the momentum among individuals working at the community, state, VISN and national levels. Ensure there are Veteran-centric presentations at NHPCO’s national meetings, and plan a “**We Honor Veterans** Summit” at the end of Option Year Two, inviting the participation of representatives of successful projects as a way to showcase and disseminate best practices.
- Through the VARRs and NHPCO’s Council of States, encourage state hospice organizations to place Veteran-related presentations on their meeting agendas, using the **We Honor Veterans** PowerPoints and other resources.
- Be sensitive to the fact that time to meet all the objectives was a challenge for some previous grantees.
- Sustainability is challenging for hospices to conceptualize, document and implement.
Messaging and “Philosophical” Discussions with NHPCO Members

- Hospices are already providing care, so it’s not a lot more effort to extend outreach efforts to Veterans.
- All hospices are serving Veterans but often aren’t aware of that person’s specific service.
- Hospices and VA share a common goal: Providing the best possible care for Veterans in the best possible manner and setting. Hospices can use their expertise to reach Veterans and provide quality care. In doing this, they say to the Veteran, “you are safe with us”, and to VA staff, “we are committed to caring for Veterans as you would care for them.”
- Healthcare professionals other than hospice staff know how to care for people that are dying: we don’t have a corner on the market. We must focus on working together and build upon available services and skill sets.
- Incorporate Veteran acknowledgment at hospice-sponsored events.
- Many Veterans prefer providers and services from other Veterans. Provide hospice volunteers and staff with the opportunity to identify themselves as Veterans and work with Veteran patients and families.
- Invite VA staff to participate in local and regional meetings of community hospice providers.
- Open, honest, respectful communication is critical to successful partnerships with VA facilities and staff.
- There is a great variance in outreach to Veterans and quality of care they receive, across both community hospices and VA facilities.
- Many Veterans do not know about benefits available to them: community hospices can be part of solving this information gap.
- Many hospice providers are willing to invest time, money, resources and staff without direct benefit to their bottom line because they are committed to improving end-of-life care for Veterans. Conversely, some providers have reported that they are not willing to devote time and energy to Veteran outreach unless it will increase their referrals.
- **We Honor Veterans** is a great solution to locating needed information and resources for educating staff, volunteers, Veterans and other community members.

Recommendations to VA

**VA Information and Policies**

- Encourage VISN clinical champions and program directors to foster collaboration with community providers:
  - Develop new relationships or strengthen existing relationships with community hospice organizations in local service areas
  - When possible, participate in local and regional meetings of community hospice providers
  - Participate in **We Honor Veterans** informational calls to be presented during Option Year Two
• Work to develop a seamless delivery system for end-of-life care that supports both VAMCs and community hospice.
• Shorten the enrollment time for Veterans who are terminally ill or consider a way to expedite the enrollment.
• Continue to clarify guidelines for hospice and palliative care reimbursement and collaborate with NHPCO to disseminate this information.
• Develop guidelines for community inpatient hospice placement and reimbursement for Veterans in rural areas when the closest VAMC is too far for families to travel.
• Develop a resource explaining the guidelines for revising a terminally-ill Veterans’ discharge status in order to enroll the Veteran.

VA Communication and Education
• Enhance clinical education about Veterans and the specific medical, mental health and psycho-social issues that accompany each conflict/war era:
  o Develop Veteran-centric education about PTSD for community provider clinical staff
  o Provide educational sessions at local, state and national meetings of community hospice and other healthcare providers
• Focus more attention on women Veterans.
• Continue to develop clear communication pathways between VA staff and hospice staff.

Resources for Veterans
• Provide increased access to transportation for Veterans in rural areas.
• Provide Veterans with greater access to end-of-life care resources to enable better informed decisions about their care.
• Create “patient navigators” to assist Veterans who are entering the healthcare system and seeking end-of-life care and services. Patient navigators could be volunteers or other Veterans who know the system.

Resources for Community Providers
• Consider Veterans’ stories as a routine part of healthcare assessment.
• Create additional guidelines and Veteran-specific resources for community healthcare providers about how to advocate for Veterans.
• Enhance community education about Veterans’ issues.
• Develop national-level relationships with First Responder and Homeless agencies to provide top-down education in identifying Veterans in need of hospice and palliative care.
Website Resources

Numerous resources, some of which are highlighted below, were developed or updated during Option Year One and are arranged by topic on the We Honor Veterans (WHV) website at WHV Partner Resources. Each may be viewed and downloaded by the user as needed.

- **We Honor Veterans** Campaign Materials
- PowerPoint Presentations
- WHV Brochure
- WHV Overview and Partner Commitment
- WHV Campaign Fact Sheet
- Veteran-related Standards of Practice
- Military History Checklist and Guide
- Hospice-Veteran Partnership Toolkit
- WHV Marketplace Materials
- WHV Ad Slick/Flyer

Reaching Out Reports and Resources

The reports and resources listed below are posted on the WHV website at Reaching Out Reports and Resources.

- **Option Year One Grantees**
  - Final Reports
  - Reaching Out Model Programs
  - Grantee-developed Educational Materials
    - **Arkansas Hospice**
      - We Honor Veterans Presentation
      - Stand Down Proposal
      - Vet to Vet Gantt Chart
      - Vet to Vet PowerPoint Presentation Survey
    - **California Hospice & Palliative Care Association**
      - Workshop Evaluation Form
      - VA Workshop Pre-Test
      - VA Workshop Post-Test
      - Reaching Out Presentation
      - Participant Evaluation Summary
    - **Delaware Hospice**
      - Hospice Veteran Stories
      - Middendorf Veterans Day Story
    - **Hospice of the Bluegrass**
      - Veterans Resource Directory
      - Reaching Out Newsletter
      - Veterans Brochure
      - Legionnaire Ad
• Nicholas County Article
• Veteran Outreach Advertisement
  ▪ Hospice of Chattanooga
    • Soldiers and Sailors Memorial Auditorium Project
  ▪ LINK of Hampton Roads
    • Community Foster Home Hospice Replication Manual

• NHPCO
  o National Campaign Audience Research Report
  o WHV Clinical Team Preconference Seminar Evaluation
  o WHV Website Content Overview
  o We Honor Veterans NHPCO’s NewsLine article, December 2010