Oregon March 2012

Demographic Int	formation
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Demographic information															
What is your organization's current enro	llment status in the	We I	Honor V	Veteran's ca	mpai	gn?									
# %			#	%				#	%					#	%
I'm not familiar with the We Honor 2 7%	Level 1 Pa	artner	5	19%			Level 3 Partner	7	26%	Ιo	lon't k	now wl	nat level we are	11	41%
Recruit 0 0%	Level 2 P	artner	. 0	0%			Level 4 Partner	0	0%		Not	-	hope to ify soon	2	7%
What type of organization are you?					#	%						•	•	#	%
what type of organization are you:		Fro	o_stand	ing hospice	16	59%				Homo	hoalth.	hasad	hospice	π 1	4%
				sed hospice	8	30%				Other hea			-	2	4% 7%
		Hosp	yuui-vu	зеи позрисе	o					Other neu	uncur	e organ	идинон	2	7 %
Is your organization urban, rural, mixed					#	%								#	%
or highly rural?				Urban	1	4%							Mixed	17	63%
				Rural	8	30%						Highl	y Rural	1	4%
Does your organization serve Veterans in		#	%		#	%									
rural areas?	Yes	27	100%	No	0	0%									
Turar arcas.	103	_,	10070	110	Ü	070									
Indicate VISN identified in service area		#	%												
indicate visiv identified in service area	VISN20	13	100%												
		.,	0.1		.,			.,			.,				
Driving distance (miles) from your		#	%		#	%		#	%		#	%			
organization to nearest VA Medical Ctr	0 - 10	3	12%	11 - 20	9	36%	21 - 40	2	8%	>40	11	44%			
Driving distance (miles) to nearest VA		#	%		#	%		#	%		#	%			
outpatient clinic	0 - 10	10	40%	11 - 20	8	32%	21 - 40	4	16%	>40	3	12%			
outputient enime	0 10	10	1070	11 20	O	3270	21 70	•	1070	710	3	12/0			
Type of formal relationship, if any, you		#	%		#	%		#	%		#	%			
have with your local VA Medical Center	Contract	2	8%	PA	4	16%	None	15	60%	Other:	4	16%			
		,,	0./		,,	0./									
Does your organization participate in a		#	%		#	%									_
Hospice-Veteran Partnership?	Yes	15	68%	No	7	32%		1		2	3		4		5
	MEAN						# of Resp	None		Little	Some		Fair amount		Great deal
How much emphasis do you feel your sta							25	None 1		4	4		12		4
organization places on end-of-life care for							2.5	4%		16%	16%		48%		16%
Veterans?								→ /0		1070	10/0		70/0		10/0
	Vegative (1+2)	Nei	ıtral (3)	p	Ositiv	ve (4+5)									
MLI.		1,00	(3)		JUILIV	. 5 (115)									

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Veteran Emphasis									
Within the last two years, which, if any, of the fol	lowing has taken place v	th your organization?	1	2	3	4	5		
	MEAN	# of		* 1	G.	Fair	Great		
	MEAN	Resp 24	None 4	Little 3	Some 10	amount 6	deal 1		
Have increased our Veteran caseload	2.88	24	17%	13%	42%	25%	4%		
24/0 2222 24/2040 24/2 / 2002 44/2 24/2 2			1770	1370	.270	2570	170		
	2.76	25	5	3	11	5	1		
Have received referrals from VA staff	2.70		20%	12%	44%	20%	4%		
		26	1	2	2	5	16		
Have experienced increased awareness of the unique needs of Veterans	4.27		4%	8%	8%	19%	62%		
		23	4	4	6	3	6		
Have found it easier to work with our local VA Medical Center or outpatient clinic	3.13		17%	17%	26%	13%	26%		
VA/Community Interface									
How do you rate your organization's understandi	ng in the following area	•	1	2	3	4	5		
		# of	Very				Very		
	MEAN	Resp 25	Poor 0	Poor O	Fair 8	Good 9	Good 8		
Benefits to which Veterans are entitled	4.00	23	0%	0%	8 32%	36%	32%		
chemis to which veterans are entitled			070	070	3270	3070	3270		
How to assist Veterans access their	2.06	25	0	0	8	10	7		
now to assist veterans access their penefits	3.96		0%	0%	32%	40%	28%		
	4.00	25	0	1	5	12	7		
How to assist Veterans enroll in VA	4.00		0%	4%	20%	48%	28%		

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VA/Community Interface (cont.)			# of Resp	1 Very Poor	2 Poor	3 Fair	4 Good	5 Very Good
How to assist terminally ill Veterans with expedited enrollment in VA	3.64		25	1 4%	2 8%	8 32%	8 32%	6 24%
The needs of Veterans by war, trauma, or population	3.80		25	0 0%	1 4%	9 36%	9 36%	6 24%
Practical use of the Military History Checklist	3.78		23	1 4%	4 17%	2 9%	8 35%	8 35%
Key aspects of the VA's national hospice and palliative care program	3.71		24	1 4%	4 17%	3 13%	9 38%	7 29%
Key aspects of the hospice and palliative care program(s) of the VA Medical Center(s) closest to you	3.56		25	1 4%	5 20%	4 16%	9 36%	6 24%
Benefits of community organizations partnering with VA to better serve Veterans	3.72		25	1 4%	2 8%	7 28%	8 32%	7 28%
Business Relationship How do you rate each of the following?				1	2	3	4	5
Your organization's ability to help Veterans access needed resources	MEAN 3.79		# of Resp 24	Very Poor 0 0%	Poor 2 8%	Fair 7 29%	Good 9 38%	Very Good 6 25%
Availability of information outlining tools and processes hospices need to know to do business with VA	3.60		25	0 0%	4 16%	7 28%	9 36%	5 20%

		We Honor Veterans State Sur	rvey					
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Business Relationship (cont.)		#	of	1 Very	2	3	4	5 Very
Reliability and accuracy of contact information for the VA staff your organization needs to work with	MEAN 3.68	Re	esp 25	Poor 0 0%	Poor 6 24%	Fair 4 16%	Good 7 28%	Good 8 32%
Approvals for VA-Paid hospice admissions to community hospice	3.64	2	22	0 0%	5 23%	5 23%	5 23%	7 32%
Approvals for VA-Paid hospice changes in levels of care	3.52	2	23	0 0%	7 30%	3 13%	7 30%	6 26%
Process for determining continued need for hospice services	3.83	2	23	0 0%	4 17%	3 13%	9 39%	7 30%
Reimbursement		#	of	1 Very	2	3	4	5 Very
Timeliness of VA reimbursement for VA- Paid hospice care	MEAN 2.94		esp 8	Poor 3 17%	Poor 3 17%	Fair 5 28%	Good 6 33%	Good 1 6%
Access to reimbursement for all four levels of VA-Paid hospice care	3.22	1	8	1 6%	5 28%	3 17%	7 39%	2 11%
Your organization's experience in billing your local VA Medical Center	3.53	1	.9	1 5%	2 11%	6 32%	6 32%	4 21%

		We Honor Veterans State Surve	y				
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Continuity of Care		# of	1 Very	2	3	4	5 Very
	MEAN	Resp	Poor	Poor	Fair	Good	Good
Process to coordinate the transition of	3.67	24	0	3	7	9	5
Veterans' care between your organization and your local VA Medical Center			0%	13%	29%	38%	21%
Process to coordinate VA-Paid admission		6	0	4	0	1	1
to your organization's hospice inpatient unit	2.83		0%	67%	0%	17%	17%
Process to coordinate admission from the			0	6	5	4	4
community to VA facility (inpatient HPC unit, acute care, long term care)	3.32		0%	32%	26%	21%	21%
Process to provide after-hour coverage for Veterans whose primary care is provided by a VA physician	3.05	21	2 10%	6 29%	5 24%	5 24%	3 14%

We Honor Veterans State Survey

Written Comments March 2012

Oregon

Veteran Emphasis

My position with Hospice & Palliative Care of Washington County is in the Development Dept. I know we have in-services frequently on the We Honor Veterans program. We have honored vets in our Light Up A Life service, at Memorial Day, in pinning ceremonies, and more. We do have some type of working relationship with the VA and gain referrals from them. I am not aware of the frequency, logistics, locations of the clinics, etc, in my position here. I hope my comments assist in your information gathering.

We still have difficulty getting call backs from MDs, RNs, social workers especially if the Veteran is going to two different VAs.

I heard a comment from a VA staffer, that they were concerned that local hospices would only be using the We Honor Veterans program as 'marketing tool'. We plan to walk the talk! Thanks

We did not track the number of veterans we served until we joined the NHPCO/VA partnership so can tell you what the differences are in the numbers we now serve. We have made it a focus to identify vets now and will be able to guage this in the future.

They have always been pretty easy to work with

We have always had an excellent relationship with our local VA medical center.

When we talked to our local VA, we found they had no idea what we were talking about regarding the VA and hospice having a focus on veterans needs; they appreciated the idea, but since their local leadership was unaware of the program they had a hard time understanding how we could be working together on this Once we were able to connect with leadership they verbalized appreciation for concept, but do not seem to have the time, interest or resources to provide joint education or planning.

We have found that the program has best been used to help US be more aware of veterans needs and seek out assistance for the veterans in their very complex, complicated system that they often find confusing and difficult to navigate.

I would have expected more VA referrals since we're taking the WHV program very seriously and advancing through the levels quickly, especially compared to most other hospices in the area. Not sure why that isn't recognized by discharge planners.

I think the pinning ceremony has given closure and a sense of pride to our pt. at end of life.

Working to complete level 3

VA / Community interface

We are doing much to coordinate with these organizations and get the word out to all of our staff via inservices, inter departmental news letter, etc. However, I think we still have room for improvement.

As i stated previously, there seems to be very little understanding of any va national hospice/palliative care program locally or in Portland....not with the people we deal with on a daily basis in finding care. Expedited enrollment in the VA? Haven't been able to find anyone who knows anything about that. We have several veterans programs in the area trying to get help for veterans and they are extremely exasperated at the difficulties they are facing......try to help us, but there are many barriers to gettting to the person who can help in a timely manner

We have experienced difficulty with communicating with the local VA

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Oregon (cont.)

Business Relationship

We have had to wait sometimes 1 or 2 weeks prior to getting approval for a veteran to be approved for hospice admission......

Reimbursement

I am not involved in this aspect

My position does not put me in a place to know the answers to these questions

Not aware of this part of the process.

We recently received payment for services for a Veteran that had been billed 10 months previously....each time we called to find the status, we received a different answer, from the same people......they had no idea what the status was and would leave our biller on hold for long periods of time trying to find a supervisor who might know an answer and most often she had no idea. Sometimes we'd get opposing answers from people who were supposedly reading information off the same piece of information.

We have not had any patients with VA-paid hospice care - although we take care of many veterans.

Continuity of Care

We do not have an inpatient unit and, to my knowledge, we have not placed a patient in a VA facility.

I think that one of our largest challenges is communicating with VA physicians when they are the primary care provider.

Most of the VA doctors in this area give permission for our medical director to respond to needs as they say they have so much paper work to go thru every day, they often cannot get to their phone calls or faxed requests for days.