

Reaching Out Model Programs Fact Sheet

Community-Based Outpatient Clinic (CBOC) Program

Description: The purpose of the Community-Based Outpatient Clinic (CBOC) Program is to increase Veterans' access to hospice and palliative care services, with a special emphasis on those who are homeless and living in rural areas. The program will collaborate with the local VA CBOC to develop protocols for referring, enrolling, transitioning, and providing services for eligible Veterans; create a coalition of VA and community healthcare providers, homeless shelters, government and non-government organizations, Veterans groups and others to address issues faced by area Veterans and returning soldiers; and conduct outreach activities to inform the community about Veterans and the benefits to which they may be entitled.

Suggested objectives: (1) establish protocols for healthcare and hospice referrals and admissions, transitions across care settings, enrolling eligible Veterans in VA, and reimbursement for VA-paid community services; (2) inform and engage hospice staff about the special needs of Veterans, especially those who have experienced combat, dangerous duty assignments or traumatic events; (3) create a coalition of VA and community organizations, including agencies that serve homeless and rural areas, to address issues area Veterans and returning soldiers; (4) disseminate educational materials that can be used by VA and community agencies to help resolve challenges facing area Veterans and their families.

Target population: Veterans living in the service area with an emphasis on those who are homeless and living in rural areas

VA partners: Community-Based Outpatient Clinic (CBOC) staff, VA staff from the Palliative Care program and others working in a VA facility; Veterans Integrated Service Network (VISN) palliative care leaders; Vet Centers and Mobile Vet Centers

Community partners: Community healthcare providers and service organizations, government agencies, County Veteran Service Officers; Veterans Service Organizations; State Veterans Homes

Potential outcomes/measure of success:

- Protocols will be established, tested, and refined for the following processes: referrals to and from VA and the hospice agency; transitions between VA and community settings, particularly for respite and General Inpatient levels of care; expedited enrollment in VA; expedited approval of VA-paid hospice services; billing procedures for reimbursement of VA-paid hospice services; procedures for providing concurrent community hospice and VA-provided services.
- [Specify number] education/outreach presentations that include some information about Veterans' end-of-life benefits will be conducted
- [Specify number] Veteran-specific presentations for hospice staff will be conducted
- Process in place to identify Veterans upon admission and include Veteran-specific interventions in individualized care plan
- A minimum of 1 staff member will be appointed as a Veteran liaison

Reaching Out Replicable Model:

- Hospice of Chattanooga

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Community Partnership Program

Description: The purpose of the Community Partnership program is to increase community and hospice staff awareness of Veterans and establish educational and outreach programs to address their specific end-of-life needs. This comprehensive program uses a community partnership model to educate Veterans about the VA hospice benefit and community resources, advocate for local hospices to implement the military history checklist to identify their Veteran patients, assist first responders and homeless shelter staff identify Veterans in need of hospice and palliative care services, help healthcare and community groups identify at-risk Veterans and teach them how to connect Veterans to needed services, and publicize community resources.

Suggested objectives: (1) raise awareness of community healthcare and service providers, first responders, and other community organizations about Veterans living in a defined geographic area, the unique end-of-life needs they may have and the benefits to which they may be entitled; (2) disseminate educational materials that can be used by VA and community agencies to help Veterans access services and benefits; (3) inform and engage hospice staff about the special needs of veterans, especially those who have experienced combat, dangerous duty assignments or traumatic events; (4) develop mechanisms to facilitate the transition of Veterans across community and VA settings; and (5) address reimbursement of VA-paid community services

Target population: Veterans living in the service area with an emphasis on those who are homeless and living in rural areas

VA partners: VA staff from the Palliative Care program and others working in a VA facility; Community-Based Outpatient Clinics; Vet Centers

Community partners: Emergency Medical Services; fire departments; police departments; government agencies; community hospitals/emergency departments; County Veteran Service Officers; Veterans Service Organizations; State Veterans Homes; other community organizations and healthcare providers

Potential outcomes/measure of success:

- [Specify number] education/outreach presentations that include some information about Veterans' end-of-life benefits will be conducted
- [Specify number] Veteran-specific presentations for hospice staff will be conducted
- Relationships with first responders will be established to facilitate identification of Veterans who are homeless or in need of assistance from VA and to provide information about available resources
- Protocols with a VA facility will be established to expedite enrollment for eligible Veterans and facilitate approval of hospice services, transitions across care settings, and billing procedures for VA-paid community services.
- Processes will be established to identify Veterans upon admission and include Veteran-specific interventions in individualized care plans
- A minimum of 1 staff member will be appointed as a Veteran liaison

Reaching Out Replicable Models:

- Delaware Hospice: Hospice Initiative for Rural and Homeless Veterans
- Hospice of the Bluegrass

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Community Foster Home Hospice Program

Description: The purpose of the Community Foster Home Hospice program is to provide a home environment where terminally ill Veterans can live with the support of a committed family, community and VA medical professionals, friends and volunteers. This project recruits and utilizes private homes in the community that meet the needs of terminally ill Veterans. A support team that includes the home host, hospice professionals, family, friends and volunteers works together to meet Veterans needs and care for them through the end of life. The Veteran pays room and board to the host based on the amount of his/her income. This project requires close collaboration with the local VA palliative care program and other staff as designated by VA.

Suggested objectives: (1) establish comprehensive policies and procedures for the Community Foster Home Hospice program; (2) establish processes for collaborating with the local VA facility or Community Based Outpatient Clinic; (3) Recruit, screen and train host families; (4) develop outreach activities to market the program to potential referral sources, including community organizations, healthcare providers, government entities and Veterans organizations; (5) inform and engage hospice staff about the special needs of veterans, especially those who have experienced combat, dangerous duty assignments or traumatic events; (6) develop mechanisms to facilitate the transition of Veterans across community and VA settings; and (7) address reimbursement of VA-paid community services

Target population: Veterans living in the service area with an emphasis on those who are homeless and living in rural areas

VA partners: VA staff from the Palliative Care program and others working in a VA facility; Community-Based Outpatient Clinics; Vet Centers

Community partners: Community healthcare providers and service organizations, government agencies, County Veteran Service Officers; Veterans Service Organizations; State Veterans Homes Emergency Medical Services; fire departments; police departments; government agencies; and community hospitals/emergency departments

Potential outcomes/measure of success

- Program policies and procedures are in place and staff trained to implement them consistently;
- [Specify number] of host families are recruited, screened and trained
- Hospice services are provided to [specify number] homeless and/or rural veterans who are eligible for hospice care;
- 100% hospice staff participating in the program receive Veteran-specific clinical training
- Quality control measures are in place to monitor and address patient safety and emergency procedures
- Quality improvement processes are in place to monitor and address patient and host family satisfaction, VA staff satisfaction, and hospice staff satisfaction
- A minimum of 1 staff member will be appointed as a Veteran liaison

Reaching Out Replicable Model:

- LINK of Hampton Roads, Inc.: Palliative and End-of-Life Care for Rural and Homeless Veterans

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Vet-To-Vet Program

Description: The purpose of the Vet-to-Vet program is to recruit and train Veterans to be hospice volunteers for fellow Veterans as well as participate in community outreach activities targeting fellow Veterans; increase community awareness of hospice and home care palliative care services available to Veterans in the community and VA; and improve coordination of services between these settings. The program will recruit Veterans for both patient care and outreach activities. Veterans will receive Veteran-specific volunteer training, be placed with Veterans enrolled in the hospice program, and offered appropriate, ongoing support. Veterans choosing to participate in outreach activities will receive training in presenting information to Veterans' groups about palliative care, hospice services and VA benefits. Finally, the program will form a community/VA workgroup to improve coordination of services across venues of care, identify gaps in both patient care and business practices, and develop policies and procedures to address the issues.

Suggested objectives: (1) establish a Vet-to-Vet volunteer training program for patient care and outreach activities; (2) implement a Veteran-specific support program for the Vet-to-Vet volunteers; (3) recruit and train Veteran volunteers in patient care and outreach activities; (4) inform and engage hospice staff about the special needs of veterans, especially those who have experienced combat, dangerous duty assignments or traumatic events; (5) develop mechanisms to facilitate the transition of Veterans across community and VA settings; and (6) address reimbursement of VA-paid community services

Target population: Veterans living in the service area with an emphasis on those who are homeless and living in rural areas

VA partners: VA staff from the Palliative Care program and others working in a VA facility; Community-Based Outpatient Clinics; Vet Centers

Community partners: Veterans, government agencies; community hospices, community organizations and healthcare providers, doctors' office staff, clinic and emergency room staff, civic/social/church members, hospitals/emergency departments; County Veterans Service Officers; Veterans Service Organizations; State Veterans Homes

Potential outcomes/measure of success:

- Recruit and train [specify number] of Veterans to volunteer for patient care and outreach activities;
- Provide Vet-to-Vet volunteer services for [specify #] per cent of Veterans enrolled in hospice program
- Give [specify #] community outreach presentations to Veteran groups
- Quality improvement processes are in place to monitor and address patient and family satisfaction and hospice staff satisfaction
- A minimum of 1 staff member will be appointed as a Veteran liaison

Reaching Out Replicable Models:

- Arkansas Hospice: Vet-to-Vet Program
- Connecticut Association of Home Care and Hospice: The Connecticut Rural Veterans Partnership

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Hospice-Veteran Partnership (HVP) Program

Description: The purpose of the Hospice-Veteran Partnership (HVP) program is to increase Veterans' access to high quality hospice and palliative care that spans multiple providers and healthcare systems. Essential to the success of this program is the existence of an established HVP with the active participation of VA and community leaders at all levels. The HVP will conduct local, regional and statewide educational programs for community and VA healthcare providers using available Veteran-specific clinical curricula as well as materials developed by the HVP that address coordination of services and business practices such as healthcare and hospice referrals and admissions, transitions across care settings, enrolling eligible Veterans in VA, and reimbursement for VA-paid community services. The HVP will also develop and disseminate a Veteran-specific quality improvement program and facilitate communication and coordination between community and VA providers.

Suggested objectives: (1) develop educational programs that include clinical and business content; (2) develop standard protocols that recognize regional differences for healthcare and hospice referrals and admissions, transitions across care settings, enrolling eligible Veterans in VA, and reimbursement for VA-paid community services; (3) implement a dissemination plan for conducting educational seminars across the state or region; (4) increase the number of hospice agencies using the Military History Checklist or equivalent; (5) develop a process to track and report to the HVP the number of Veterans being served by hospice agencies in the state; (6) disseminate contact information that facilitates access to VA hospice and palliative care services; and (7) design a Veteran-specific quality improvement program that can be disseminated to community hospices.

Target population: Veterans living in the region or state with an emphasis on those who are homeless and living in rural areas

VA partners: VA staff from the Palliative Care program and others working in a VA facility; Community-Based Outpatient Clinics; Vet Centers

Community partners: Community healthcare providers and service organizations, government agencies, County Veteran Service Officers; Veterans Service Organizations; State Veterans Homes

Potential outcomes/measure of success:

- Standard agendas that include both clinical and business content developed
- [Specify number] regional HVP educational programs in the state or region conducted
- Standard protocols that address VA/community clinical and business relationships and recognize regional differences developed
- Process to track and report number of Veterans served in the community established
- Veteran-specific quality improvement program developed and disseminated to community hospices in the state

Reaching Out Replicable Model:

- California Hospice Foundation: Reaching Out