Empowering Veterans with Telehealth, Technology and Health Communication:

A Quality Improvement Pilot Project

AUTHOR Stacie M. Rivera, MPH, Office of Informatics & Analytics, Veterans Health Administration, U.S. Department of Veterans Affairs



BACKGROUND Personal Health Records (PHRs) provide patients with access

to comprehensive health records and trusted health education, encourage patient engagement and activation, enhance communication and strengthen patient and provider partnerships.

In health care, there is a PHR paradox. Consumer interest in PHR features is high, but adoption of PHRs is relatively low. And, overall, health care has lagged in leveraging technology.

SITUATION The Department of Veterans Affairs (VA) Veterans Health Administration (VHA) operates

the Nation's largest integrated health care system with more than 8.7 million enrolled Veterans and more than 1,700 facilities.

VA believes that knowledgeable patients are better able to make informed health care choices, stay healthy and seek services when they need them.

VA has developed a number of important health e-tools, including My HealtheVet, VA's PHR, offering Veterans a portal to access their self-entered personal health information and portions of their VA medical information, prescription refills and interactive tools to monitor their health.

A pilot to increase utilization of a new feature—Secure Messaging, a secure and convenient tool for Veterans to communicate with their health care team between visits—was set for the spring of 2012.

OBJECTIVE Find a cost-effective way to increase awareness and encourage existing users to **upgrade** to access Secure Messaging and **enroll** non-users in My HealtheVet and Secure Messaging at the same time.

CHALLENGES

Barriers to Communication

- VA operates the Nation's largest integrated health care system.
- The audience is geographically, socio-economically and ethnically diverse.
- The tool is relatively unknown to Veterans, and under-utilized.

Barriers to Adoption

- Consumer interest in the PHR features is high, but adoption of PHRs is relatively low (but growing).
- Health care has lagged in leveraging technology.
- Growth and demise of PHR models (e.g., Google Health).
- Meaningful use is crucial.

Enabling Clinicians

- Clinician endorsement, engagement with patient PHR use is crucial (and may be transformational).
- Health care organizations need to integrate PHR use into the fabric of health care (in meaningful ways).
- Facility leadership must pay close attention to structures and processes (can be facilitators or inhibitors).

RESEARCH

Research indicated that it would important to:

- Directly address the needs of the Veteran;
- Reach Veterans at the point of care; and
- Align the communications effort with existing systems.

The communication of the campaign was based on diffusion:

STRATEGY

Implement a three-phase campaign that centered on point of care engagement, purposefully defined unique value for the specific population being served (based on direct evidence), used research as a guide and utilized Diffusion Theory (i.e., knowledge, persuasion, decision, implementation and confirmation).

- Phase One Staff Outreach: Briefed clinic staff, provided educational offerings to improve the patient-provider interaction, including workbooks, video, PowerPoint and Intranet page, and toolkit items.
- Phase Two Veteran Outreach: Provided reminders and tools to Veterans with scheduled clinic appointments and built interest through direct marketing, including an invitation to sign up for My HealtheVet and opt in to Secure Messaging, postcard appointment reminder, email reminders and more.
- Phase Three Engagement: Supported previous phases through continued engagement with Veterans and providers with materials at the point of care, including traditional media outreach, social media outreach, multimedia outreach (e.g., video at facilities) and Spanish translation of existing materials.

RESULTS

At all 5 pilot sites, statistics showed steady increases in enrollment and upgrades during the month-long pilot program; the VA Roseburg Healthcare System saw an increase of over 380 opt-ins to Secure Messaging in that month alone and the VA Miami Healthcare System had the highest overall registrations and enrollments in the Nation during the month of the pilot project.

Over the course of only 1 month, the five pilot sites saw an average increase of 2% in Secure Messaging opt-ins.

The **success** of the pilot program **exceeded VHA expectations** and led to the **deployment of a** national campaign to promote Secure Messaging in the fall of 2012.

Post-campaign, My Health eVet enrollment was up 42% over Fiscal Year (FY) 2011 and upgrades to Secure Messaging increased 271% over FY 11.



Phase One: Clinic staff toolkit items



Phase Two: My HealtheVet toolkit



Phase Three: VHA social media

