

2011 Military Health System Conference

Putting it All Together: The DoD/VA Integrated Mental Health Strategy (IMHS)

The Quadruple Aim: Working Together, Achieving Success

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1/25/2011



Department of Defense and Department of Veterans Affairs

Report Documentation Page

Form Approved
OMB No. 0704-0188

Public reporting burden for the collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to a penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

1. REPORT DATE 25 JAN 2011	2. REPORT TYPE	3. DATES COVERED 00-00-2011 to 00-00-2011			
4. TITLE AND SUBTITLE Putting it All Together: The DoD/VA Integrated Mental Health Strategy (IMHS)		5a. CONTRACT NUMBER			
		5b. GRANT NUMBER			
		5c. PROGRAM ELEMENT NUMBER			
6. AUTHOR(S)		5d. PROJECT NUMBER			
		5e. TASK NUMBER			
		5f. WORK UNIT NUMBER			
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Department of Defense ,1000 Defense Pentagon, Washington, DC, 20301-1000		8. PERFORMING ORGANIZATION REPORT NUMBER			
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)		10. SPONSOR/MONITOR'S ACRONYM(S)			
		11. SPONSOR/MONITOR'S REPORT NUMBER(S)			
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES presented at the 2011 Military Health System Conference, January 24-27, National Harbor, Maryland					
14. ABSTRACT					
15. SUBJECT TERMS					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT	18. NUMBER OF PAGES	19a. NAME OF RESPONSIBLE PERSON
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified	Same as Report (SAR)	16	

Recommendations and Mandates



- To improve the care and services offered to Service members and Veterans, over 400 recommendations and mandates were created by:

<p style="text-align: center;">Commission</p> <ul style="list-style-type: none"> • Veterans' Disability Benefits Commission (VDBC), August 2007 • Presidential Commission on Care for America's Returning Wounded Warriors (PCCWW), July 2007 	<p style="text-align: center;">Congress</p> <ul style="list-style-type: none"> • National Defense Authorization Act (NDAA) for years 2007 - 2011
<p style="text-align: center;">Task Force</p> <ul style="list-style-type: none"> • Task Force on Returning Global War on Terror Heroes (GWOT), April 2007 • Mental Health Task Force (MHTF), June 2007 	<p style="text-align: center;">Review Group</p> <ul style="list-style-type: none"> • Independent Review Group (IRG), April 2007



Joint Executive Council (JEC)



- Mandated by Congress to oversee joint DoD/VA initiatives in February 2002
- JEC created the Health Executive Council (HEC) to manage all health related DoD/VA initiatives including PH/TBI recommendations and mandates



Senior Oversight Committee (SOC)



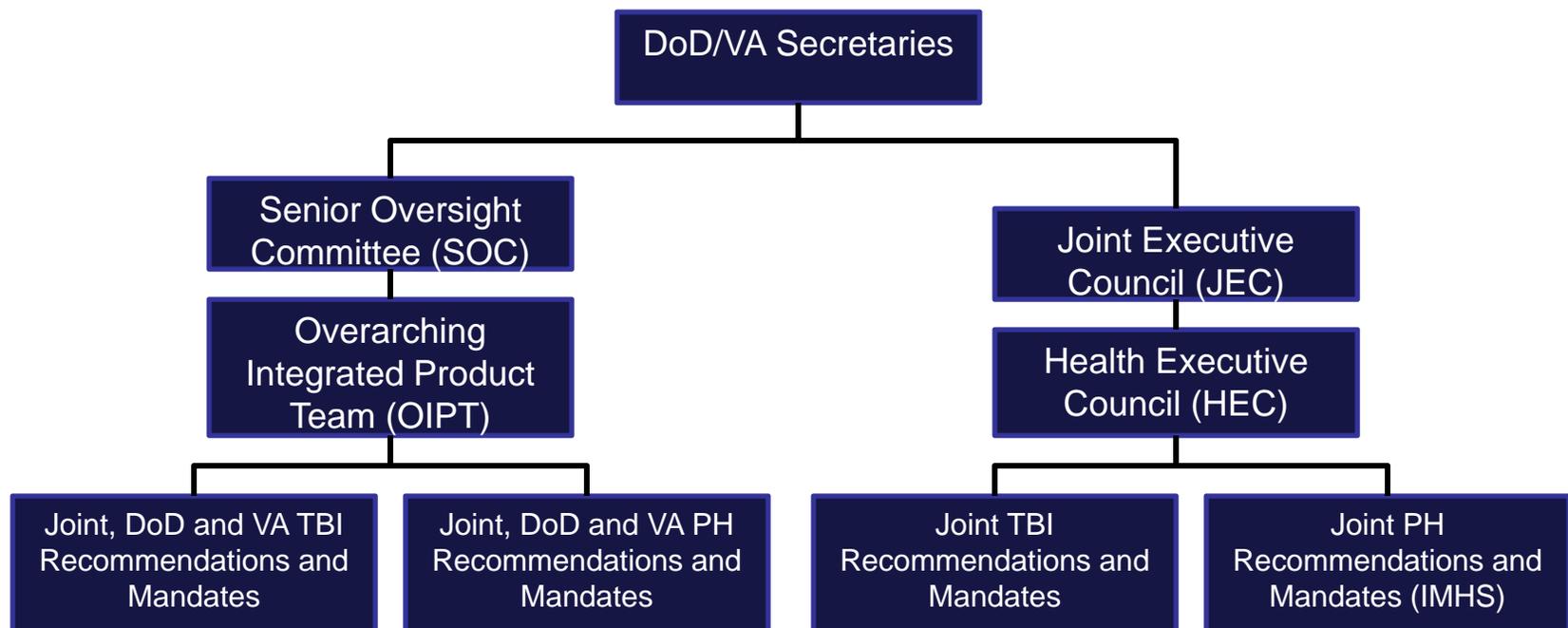
- Established by the DoD and VA Secretaries in May 2007 to address the care and services provided wounded, ill and injured Service members
- Consists of 8 Lines of Action
- Co-chaired by DoD/VA Deputy Secretaries, and includes:
 - Service Secretaries
 - Chairman or Vice Chairman of the Joint Chiefs of Staff
 - Others



Organizational Structure



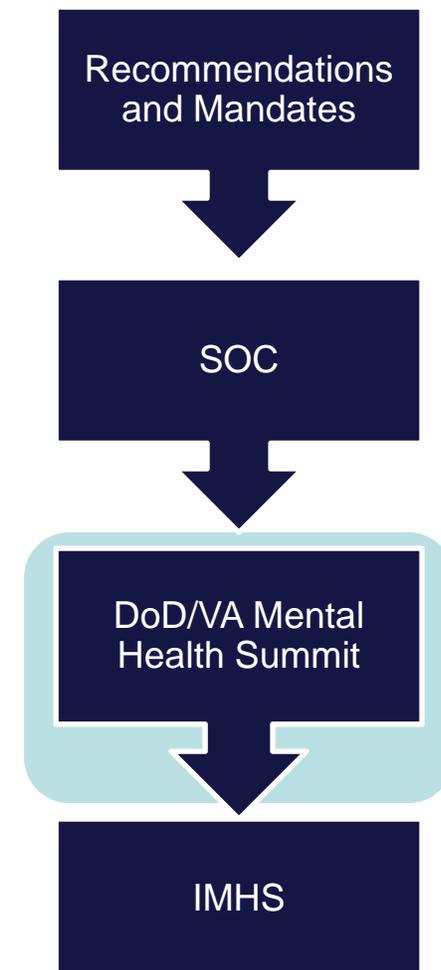
- All joint health related DoD/VA initiatives, including PH/TBI, are reported to the SOC and the JEC



DoD/VA Mental Health Summit



- In Oct 2009, DoD and VA held a Joint Mental Health (MH) Summit to address MH care needs of Military personnel, Veterans, and their families
- To address these and other recommendations the SOC asked for the development of joint DoD/VA mental health strategy in January 2010



Integrated Mental Health Strategy



- IMHS includes 28 Strategic Actions to promote:
 - Early recognition of mental health conditions
 - Delivery of effective, evidence-based treatments
 - Implementation and expansion of preventive services
 - Education, outreach, and partnerships with other providers, organizations, and agencies

Collaboration between the Departments is required to provide continuity and consistency of care



The MHS Quadruple Aim



- Experience of Care
 - Expanding access to quality MH care services
 - Striving towards seamless continuity of care
- Population Health
 - Advance care through community partnerships, education, and outreach
 - Expand services to include families, caregivers and communities



The MHS Quadruple Aim (cont.)



- Readiness
 - Implementation and expansion of preventive services
 - Improve early recognition of MH conditions to promote resilience and reintegration to the community
- Per Capita Cost
 - Enhance cost effectiveness of existing programs by identifying and reducing redundancies and leverage best practices



IMHS End States



- Expanding Access to Vet Centers
 - Extend access to VA's Readjustment Counseling Service to Active Duty Service members who have returned from OEF/OIF
 - Explore the feasibility and utility of adding additional Mobile Vet Centers to current fleet as needed



IMHS End States (cont.)



- Outcome and Quality Measures
 - Shared or coordinated use of outcome and quality measures of specific relevance to DoD and VA
 - Coordinated MH outcome and quality Measures across VA and DoD to allow for comparability of MH services



IMHS End States (cont.)



- Suicide Risk and Prevention
 - Coordinated training of VA and DoD staff to ensure utilization of best suicide prevention practices across the two Departments
 - Dissemination of materials to Service members and Veterans on suicide prevention resources, programs and tools
 - Crisis intervention services available to all Service members, Veterans, and families through coordination of DoD and VA hotlines

IMHS End States (cont.)



- *inTransition* Program
 - Enhanced continuity of care for Service members as they transition from DoD to VA systems
 - Increased awareness of *inTransition* program among MH providers, Service members and families
 - Increased number of enrolled Service members
 - Satisfactory ratings from enrolled members

IMHS End States (cont.)



- Sharing Mental Health Staff
 - Participating VA providers could be requested for detail to Military Treatment Facilities to meet surge needs
 - Utilize Telemental health networks to link mental health providers and individuals requiring evaluation or consultation

Takeaways



1. Educate yourself on PH/TBI related issues to understand the challenges we face
2. Share your knowledge with others to promote a culture of continuing education in your workplace
3. Identify potential areas for collaboration in your workplace to eliminate redundancies

Military Health System Conference



January 24 - 27, 2011

Gaylord National Resort & Convention Center
National Harbor, MD

TODAY

**Tuesday
25 Jan**

- **Keeping Tabs - DoD's Response to Psychological Risks: Lessons Learned from Health Assessments**
- **Putting it All Together: The DoD/VA Integrated Mental Health Strategy**
- **Coming Soon to an MTF Near You: Psychological Health Policy Initiatives**

- **Keeping Tabs** – Lessons learned from health assessment data collected to date; how to best address family readiness; how the new DoD mental health assessments will be incorporated into the deployment health assessment program; *The Way Ahead!*
- **Integrated Mental Health Strategy** – DoD and VA collaboration on 28 strategic actions in four strategic areas, and what it means to you
- **How New DoD Psychological Health Policy Initiatives Will Affect You** – Disaster Response Mental Health Teams: A new requirement at DoD installations; DoD, Service, and installation-level directors of psychological health policy