The Hero Care Survey



Elizabeth Dole Center of Excellence for Veteran and Caregiver Research

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Miami GRECC
GRECC Connect Seminar Series
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Presentation



BACK GROUND



SURVEY OVERVIEW



VETERAN SURVEY RESULTS



CAREGIVER SURVEY RESULTS



CLINICAL IMPLICATIONS

Learning Objectives:

At the conclusion of this learning activity, participants will be able to:

- 1. Describe the needs of High Need High Risk Veterans
- 2. Identify some ongoing efforts in to understand these needs
- 3. List some steps to address these needs

Background

- Empowering Veterans to age in place is a VA priority.
- Informal caregivers play a crucial role in supporting Veterans with functional and cognitive impairments by direct care provision and/or home and community-based services (HCBS).
- Veterans and their caregivers often do not receive the help they need with daily living activities.
- Allowing people to age in place requires that we identify and support each Veteran's needs.
- Identifying the needs and unmet needs is important to be able to provide adequate timely support to prevent or delay long term institutionalization (LTI).

Survey 1

- We developed a survey selecting validated questions and components from screening tools, regarding chronic conditions, physical and mental function, frailty status, mobility, access to healthcare, healthcare utilization, social support, and technology use.
- Target population: 1300 HNHR Veterans in Miami VA
- We combined these survey data with the GECDAC generated Jen frailty index (JFI), care assessments needs (CAN) score, Selection score and NOSOS score to predict frailty, ADL dependency, likelihood of hospitalization or death, and healthcare cost and utilization.

Needs of the **HNHR** veterans often extend beyond medical needs to social and behavioral services

- 3/4 have mobility challenges
- 2/3 had fallen in the previous year
- >1/3 (40%) are frail
- >1/3 likely to be socially isolated
- 1/3 have ≥3 ADL deficits
- 1/3 screen positive for depression
- The sicker ones less likely to enroll for outpatient programs
- Lack of caregivers in a significant majority

Elizabeth Dole Center of Excellence funded by VA HSR&D



Expand VA capacity to deliver integrated, Veteran and caregiver-partnered, data-driven approaches to care

Multi-site collaboration of a virtual group of interdisciplinary researchers Interconnected set of national research projects





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Hero Care Survey

Understanding Unmet Needs of Veterans and their Caregivers Using a Prospective Survey

Rationale for survey

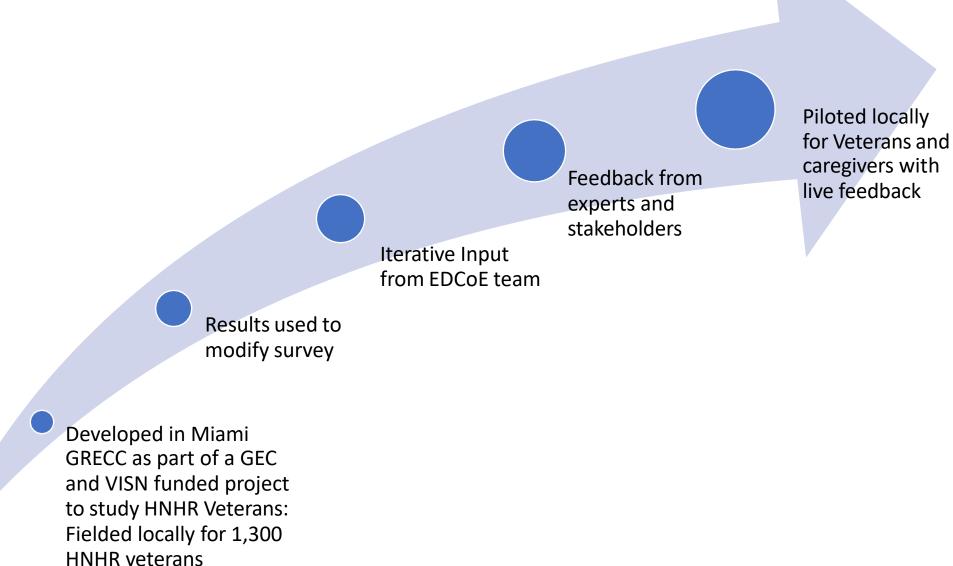
- Prospective longitudinal survey augmented with historical/retrospective data
- Explore the nature of unmet needs
- Measure the prevalence of unmet need
- Identify factors which predict development of unmet need
- Explore the links between unmet need and wellbeing of both Veterans and caregivers
- Approved by Office of Management and Budget

Dole Survey Aims

Cross-sectional Aims for Round 1

- Aim 1.1: Describe the needs and unmet needs of Veterans and caregivers
- **Aim 1.2**: Identify determinants of unmet need stratified by predicted risk of institutionalization.
- Aim 1.3: Are the needs and unmet needs reported by Veterans in congruence with those reported by caregivers?
 - Is caregiver burden and other caregiver characteristics (i.e., frailty, disease burden) associated with Veteran unmet needs?

Survey Development



Veteran Survey Domains

VETERAN DESCRIPTION

- Marital status
- Education
- Health literacy
- Gender
- Sexual orientation
- Employment

PHYSICAL

- General health and wellbeing
- Symptom burden
- Mobility, falls, assistive device, homebound status
- Frailty
- ADL/IADL unmet needs
- Healthcare utilization
- Health care needs

PSYCHOLOGICAL

- Quality of life
- Depression
- Anxiety
- Resilience
- Substance use

SOCIAL

- Social integration, socialization and social support needs
- Financial stability, medication and food insecurity
- Housing /density/neighb orhood safety
- Legal concerns
- Transportation

CAREGIVER DESCRIPTION

- Caregiver age and relationship
- Caregiving hours, formal/ informal care
- Other caregivers

OTHER

- Covid-19 impact
- Technology access and use
- Advance directives

Caregiver Survey Domains

CAREGIVER DESCRIPTION

- Age
- Gender
- Race/ethnicity
- Language
- Marital status
- Sexual orientation
- Health Literacy
- Caregiver relationship
- Caregiver Frailty
- Employment status
- Chronic disease burden
- Financial security

CARE PROVISION

- Caregiver Status (primary, secondary)
- Length of time caring for Veteran
- Caregiving hours, formal/informal care
- Veteran ADL/IADL/other unmet needs
- Provides help to Veteran for chronic conditions

IMPACT OF CAREGIVING

- Quality of life
- Caregiver burden
- Caregiver stress
- Caregiver leisure
- Employment change due to caregiving
- Caregiver burden from Veteran disease
- Caregiver health decline
- Caregiver vigilance
- Additional care recipients

CAREGIVER SUPPORT & RESOURCE USE

- Use of resources and satisfaction
- Caregiver satisfaction with VA
- Caregiver preparedness
- VA caregiver assistance improvements

OTHER

- COVID-19 impact
- Desire to institutionalize

Survey Sites

Miami

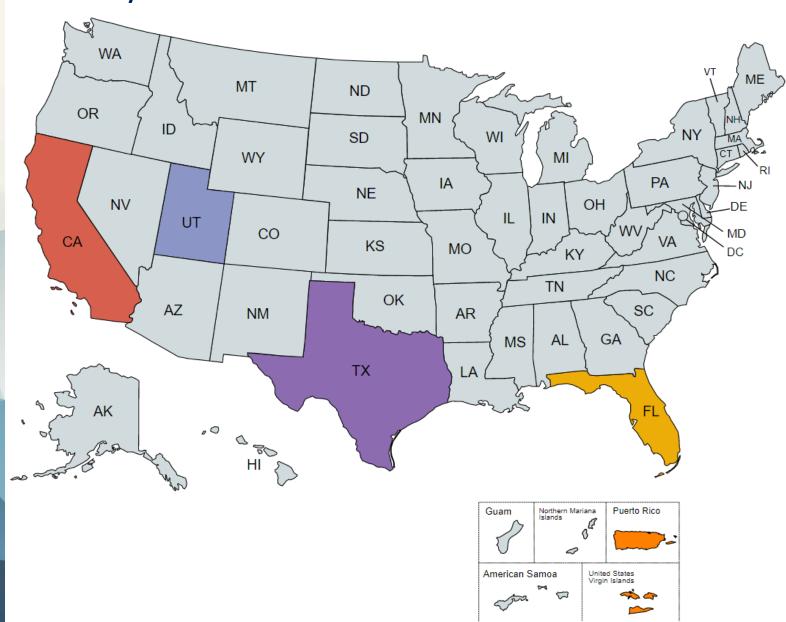
Palo Alto

Salt Lake City

San Antonio

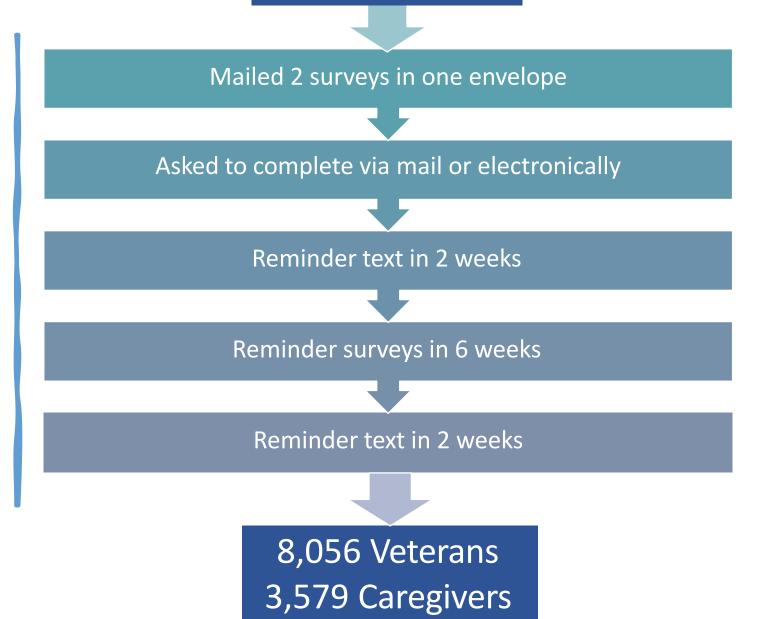
VISN 8

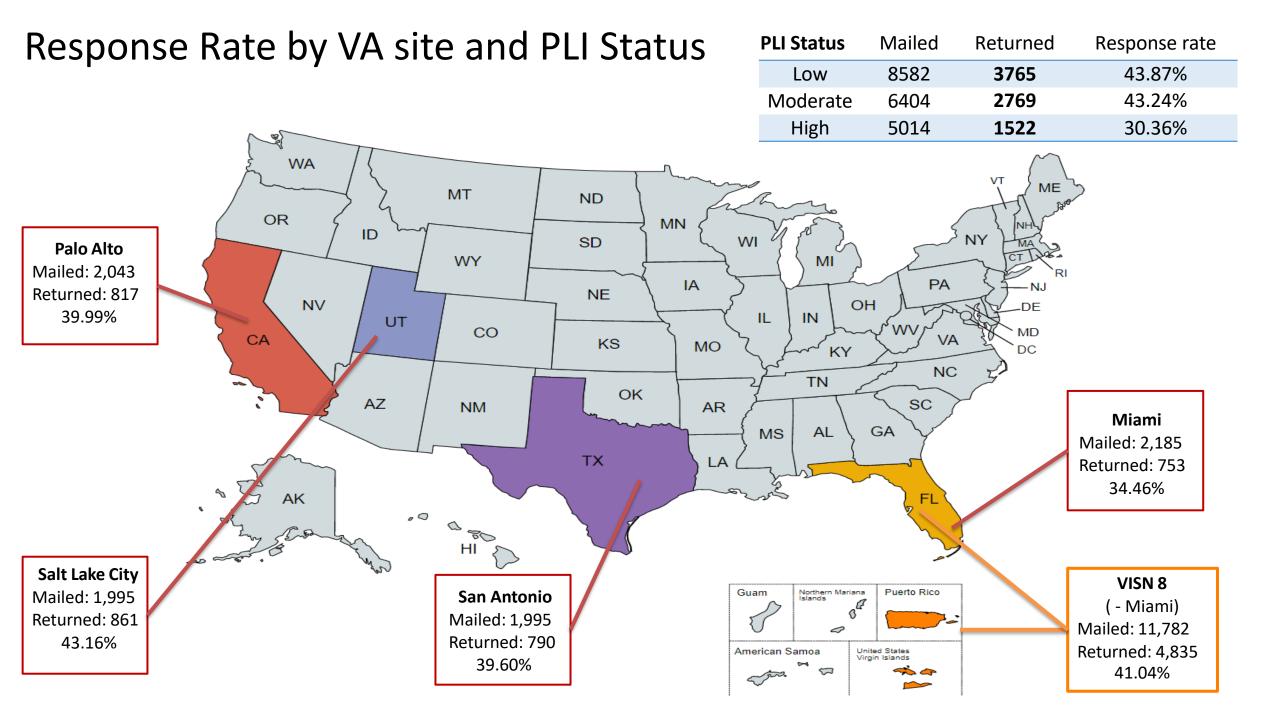
Four EDCoE sites \simeq 2,000 Veterans each + VISN 8 \simeq 12,000 Veterans based on 2-year risk of institutionalization



20,000 Veterans

Survey Methods





Respondents by Age

	Survey	% Survey
	Returned	Response
Age group:		
20-24	0	0.00%
25-34	10	0.12%
35-44	25	0.31%
45-54	61	0.76%
55-64	322	4.00%
65-74	1670	20.73%
75-84	2864	35.55%
85-94	2403	29.83%
95+	446	5.54%
Blanks	255	3.17%
Totals	8056	100.00%

Veteran Survey Results



U.S. Department of Veterans Affai

Veterans Health Administration Elizabeth Dole Center of Excellence for Veteran and Caregiver Research

Veteran Survey supporting HERO CARE

Survey Instructions

Please select the responses that best describe you, your healthcare needs, and your experience with the U.S. Department of Veterans Health Affairs.

All questions are about the Veteran.

If someone other than the Veteran is completing the survey, please answer each question as it applies to the Veteran.

Who is filling out this survey:	4. How many times within the last				
Self (Veteran)	12 months have you missed an				
Someone else with help from Veteran	appointment or have been unable to				
Someone else without help from Veteran	obtain needed health care because of				
Someone eise without help from veteran	problems with your transportation to the VA?				
. Is English your preferred language?	None				
☐ Yes	Times Fill in the blank				
□ No, I prefer to communicate in another language (Specify which language):	Questions # 5-8 are about leaving your home or building to go outside.				
	5. In the last month, how often did you leave your home to go outside?				
Miles the second of the second of	Every day (7 days a week)				
. What is your preferred way to be contacted from the VA? Mark all that apply.	☐ Most days (5-6 days a week)				
☐ By home phone	 Some days (2-4 days a week) 				
☐ By cell phone	 Rarely (once a week or less) 				
☐ By internet (My HealtheVet secure message)	Never				
☐ By mail	In the last month, did anyone ever help you leave your home to go outside?				
. Has lack of transportation kept you from	Yes				
medical appointments, meetings, work, or from getting things needed for daily living?	□ No				
Mark all that apply.	7. In the last month, when you left your				
□ No	home to go outside, how often did you				
Yes, it has kept me from medical	do this by yourself?				
appointments or from getting my medications	Most times				
Yes, it has kept me from non-medical	Sometimes				
meetings, appointments, work, or from getting things that I need	Rarely				
gg umgo umr i nood	☐ Never				

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SOME FACTS ABOUT THE VETERAN RESPONDENTS

TOTAL RESPONDENTS = 8,056

15% Homebound 33% Semi Homebound







Age: 80.2+/-9.7y

Range: 25-107



Gender: 97% Men

Race: 80.1% NH White



35% ≤high school

Health Literacy Score ≥3: 45%



55% Married



57% reported having a caregiver





16% Food Insecure **5% Medication Insecure**

PHQ ≥3: 22%

GAD ≥3: 15%



48% had fallen in the past 12 months



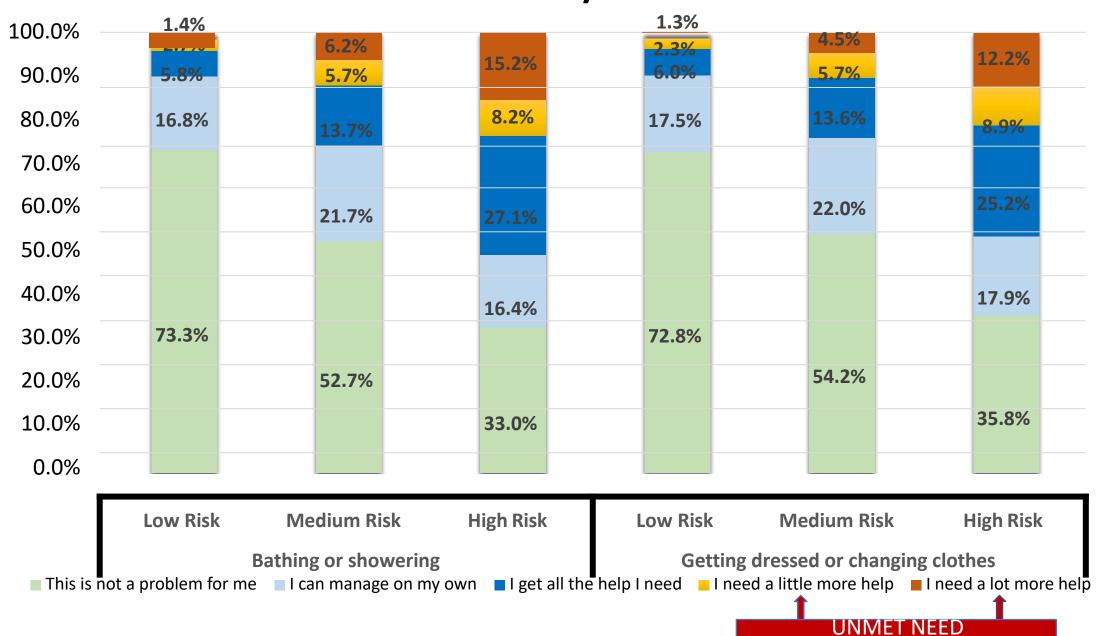
81% Urban, 20% Rural, 22% Highly disadvantaged



Unmet Needs for ADLs

				This	is a probl	em for me	but
			This is	I can	I get		I could
			NOT a	mana	all	I need	use
			proble	ge on	the	a little	a lot
			m for	my	help I	more	more
		N	me	own	need	help	help
Bathing or showering	High Risk	1423	33.0%	16.4%	27.1%	8.2%	15.2%
				MET	NEED	UNME	T NEED

ADL Needs by PLI Tier

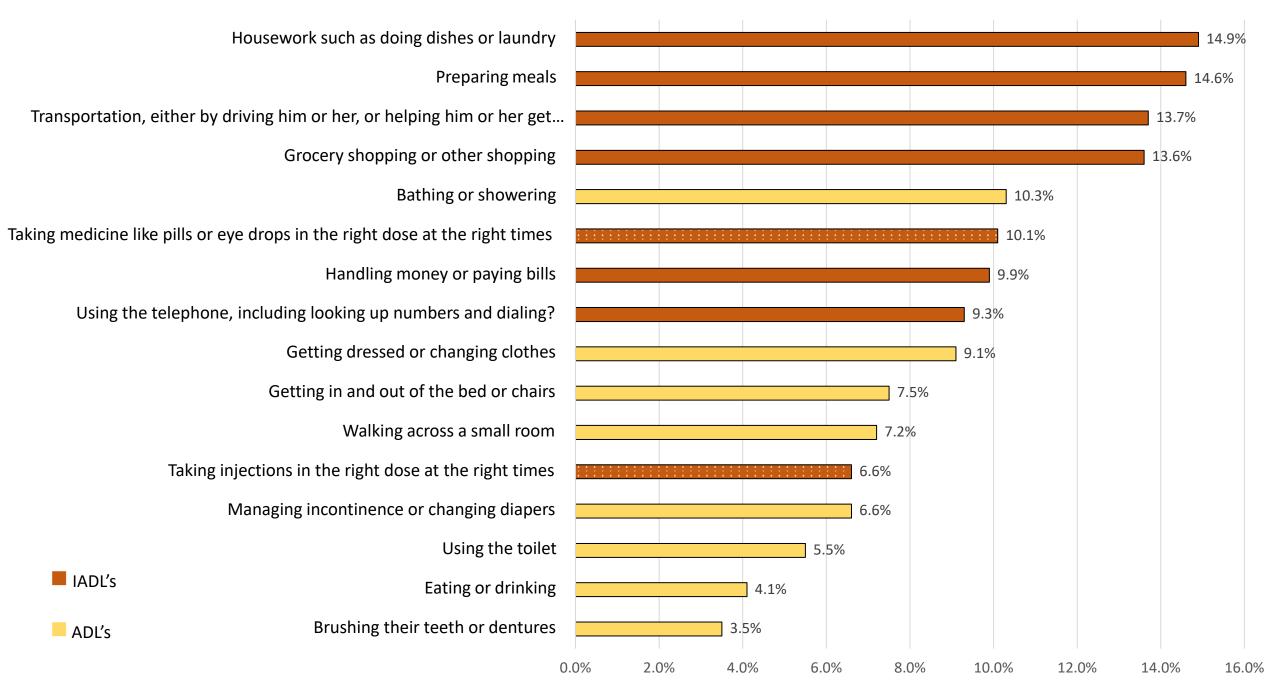


Veteran ADL and IADL Needs

		No Need	Have Needs	
ADL Needs	N=	3646	4217	
	7863	(46.4%)	(53.6%)	
Mean ADL Count (SD)	Range 1-8	0	5.2 (2.6)	
IADL	N=	2835	5034	
Needs	7869	(36.0%)	(64.0%)	
Mean IADL Count (SD)		0	5.0 (2.5)	

Among those with reported needs	Unmet Need		
ADL Unmet Needs	1238 (29.4%) 16% of total		
Mean Unmet ADL Count (SD)	3.3 (2.4)		
IADL Unmet Needs	2044 (40.6%) 26% of total		
Mean Unmet IADL Count (SD)	3.4 (2.4)		

Unmet Needs for ADL's and IADL's (avg. N = 7618)



Description of Veteran-reported Needs and Unmet Needs by Domain

		No Need	Met Need		Unmet Need		
	n=	This is <u>not</u> a problem for me	I can manage on my own	I get all the help I need	I need a little more help	I could use a lot more help	Mean number of needs (SD)
ADL Needs	7863	3646 (46.4%)	2979 (3	37.89%)	1238 (15.7%)	2.76 (3.2)
IADL Need	7869	2835 (36.0%)	2990 (38.0%)	2044 (26.0%)	2.86 (2.8)
Managing pain	7543	3569 (47.3%)	2834 (37.7%)	1140 ((15.1%)	
Nursing or medical tasks in the home	7288	5068 (69.5%)	1644 (22.6%)	576 (7.9%)	
Healthcare Communication and information Needs	7801	3510 (45.0%)	2874 ((36.8%)	1417 (18.2%)	
Social Needs	7747	4997 (64.5%)	1810 (23.4%)	940 (2	12.1%)	

Veteran-reported characteristics of helpers

	1st helper	2nd helper	3rd helper	4th helper
Overall N = 8,056	n = 4575 (56.8%)	n = 2039 (25.3%)	n = 913 (11.3%)	n = 587 (7.3%)
Age Categories (n (%))				
Adult (35-49)	372 (8.1)	405 (19.9)	155 (17.0)	67 (11.4)
Adult (50-64)	1050 (23.0)	632 (31.0)	216 (23.7)	98 (16.7)
Adult (65 or older)	2409 (52.7)	435 (21.3)	173 (19.0)	112 (19.1)
Relationship (n (%))				
Spouse	2636 (57.6)	282 (13.8)	169 (18.5)	164 (27.9)
Ex-spouse	43 (0.9)	16 (0.8)	4 (0.4)	5 (0.9)
Son/daughter	871 (19.0)	830 (40.7)	261 (28.6)	102 (17.4)
Healthcare worker	417 (9.1)	483 (23.7)	227 (24.9)	116 (19.8)
Hours per day (mean (SD))	10.3 ± 9.4	6.2 ± 7.3	5.6 ± 7.4	5.9 ± 8.2
Days per week (mean (SD))	5.4 ± 2.6	3.8 ± 2.6	3.1 ± 2.7	2.9 ± 2.9
Paid Care (n (%))				
No	3392 (74.1)	1215 (59.6)	579 (63.4)	414 (70.5)
Yes, by Veteran or family	360 (7.9)	244 (12.0)	104 (11.4)	60 (10.2)
Yes, by VA	377 (8.2)	289 (14.2)	136 (14.9)	71 (12.1)
Yes, by other	179 (3.9)	138 (6.8)	70 (7.8)	42 (7.2)
Total Paid	916 (21.3)	671 (35.6)	310 (34.9)	173 (29.5)

Caregiver Survey Results (N=3579)



U.S. Department of Veteran

Veterans Health Administration Elizabeth Dole Center of Excellence for Veteran and Caregiver Research

Caregiver Survey supporting HERO CARE

	Thank you for agreeing to participate in	this s	urvey.				
	First, we would like to confirm that you are a caregiver is someone who may provide regular care or assistant long-term health problem, illness, or disability.						
During the past month, did you provide regular care or assistance to a <u>Veteran</u> because long-term health problem, illness, or disability?							
	NO → Please hand this survey to the person who I to the Veteran.	nelps pro	ovide regular care or assistance				
	YES → Please continue with the survey.						
	Who is filling out this survey? Self (Caregiver)	☐ Ca	aregiver with help from someone else				
Tŀ	ne first set of questions ask about you.	6.	What is your current marital status? Mark one box.				
1.	How old are you? years		Married, in a civil union or domestic partnership, or living with a partner				
2.	Are you a Veteran?		Separated				
	☐ Yes ☐ No		☐ Divorced				
			☐ Widowed				
3.	Are you of Hispanic, Latino, or Spanish origin?		☐ Single, never married				
			☐ Prefer not to answer				
	☐ Yes ☐ No						
4.	What is your race? Please select all that	7.	What is the highest level of education that you completed?				
	apply.		Less than high school				
	White		☐ Some high school				
	☐ Black or African American		☐ High school graduate or GED				
	Asian or Asian American		☐ Some college credit, no degree				
	Native Hawaiian or Other Pacific Islander		☐ Associate degree				
	American Indian or Alaska Native		☐ Bachelor's degree				
			☐ Master's degree				
	☐ Some other race or origin ☐ Don't know		 Professional/Doctorate degree 				
	Prefer not to answer		☐ Prefer not to answer				
	Freier not to answer	8	How confident are you filling medical				
5.	Is English your preferred language?		forms by yourself?				
	☐ Yes, I prefer to communicate in English		☐ Extremely				
	☐ No, I prefer to communicate in another		Quite a bit				
	language (specify language below):		Somewhat				
			A little				
			☐ Not at all				

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CAREGIVER RESPONDENT FACTS

TOTAL RESPONDENTS = 3,579



71.1+/-12.9 y

Range: 18-104



77% Women 71% NH White



58% Spouses



33% ≤High school Health Literacy >3: 17%



53% are Retired



CGS by Veteran's PLI Risk Tier 28% High 39% Medium Risk 33% Low Risk



81% Urban 19% Rural >1 Highly Rural



23% help Veterans in highly disadvantaged areas



CGs by Veteran ADI 76-100: 23%



CAREGIVING FACTS AMONG RESPONDENTS

TOTAL RESPONDENTS = 3,579



82% are primary CG



50% helped >5 years



11.2 ± 9.2 hours/day



34% have a 2nd helper 13% a 3rd helper 6% a 4th helper



57% help with IADLs



43% help with ADLs



47% help with medications

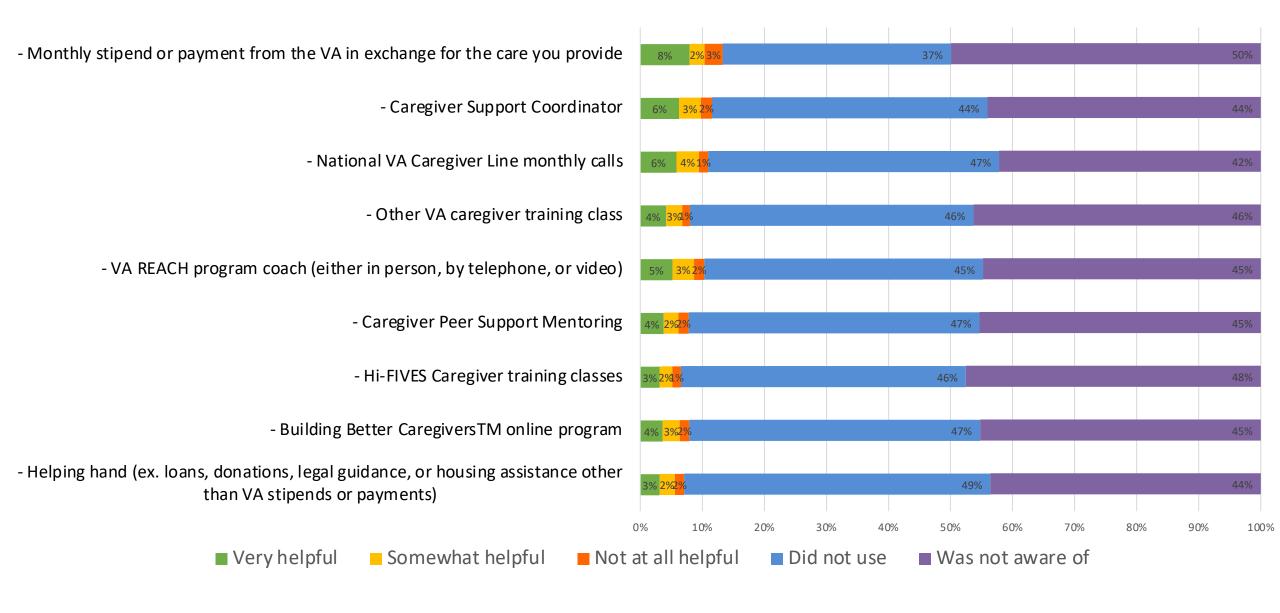


52% help in communicating with care team

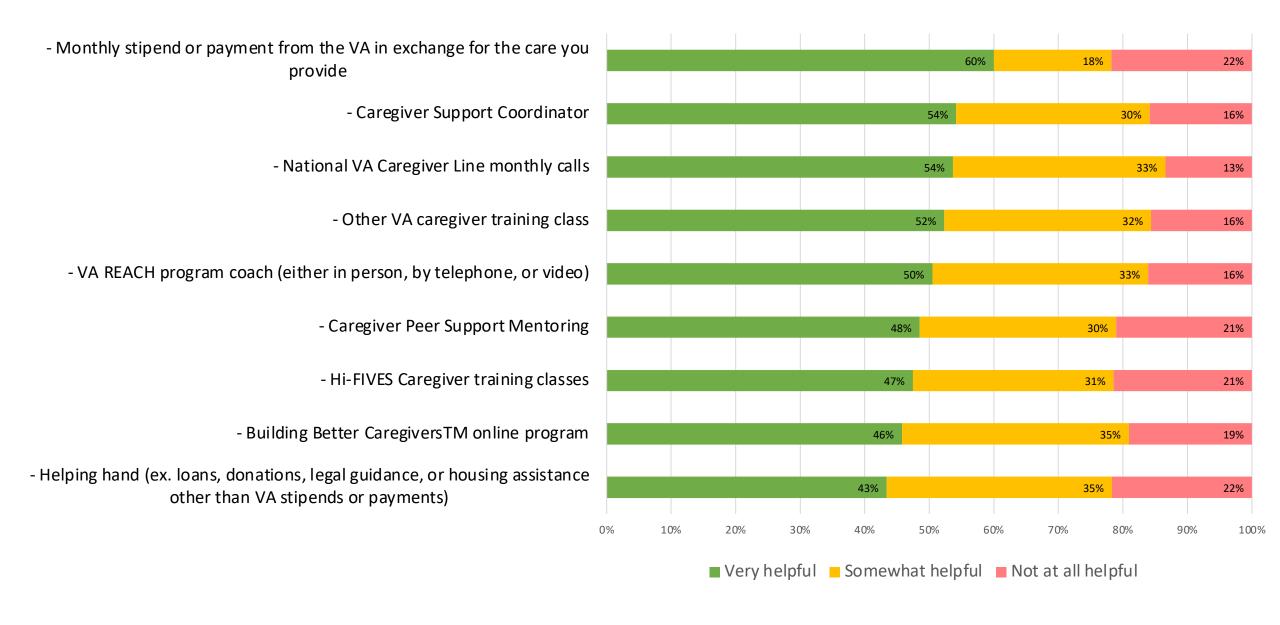


36% help with social needs

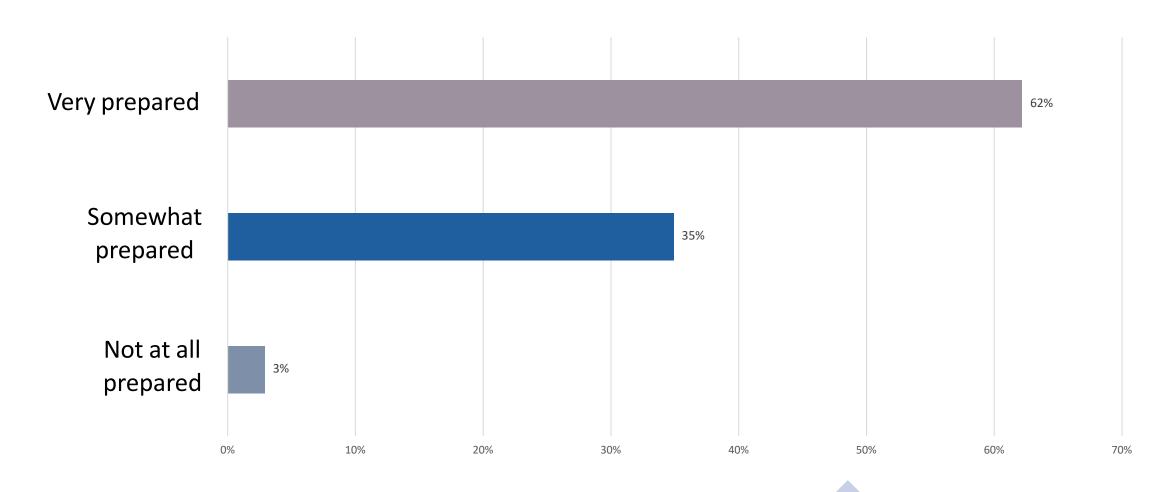
VA Caregiver Program Use



VA Caregiver Program Use and Satisfaction



Of all the tasks that YOU help the Veteran with, how prepared do you feel to do these tasks?



Consideration for HNHR Veteran management

Urgent need to devise viable strategies offering integrated interventions that incorporate mental health needs and reduce social isolation, with focus on mobility and function

Important to screen for social determinants of health

IADL needs

Screen caregivers as well for needs and burden

Link to resources and services

- Mobility challenges/falls → Gerofit, exercise, PT/OT, home safety, assistive devices, home modifications
- Frail → address modifiable risks (nutrition, exercise, isolation)
- Social isolation → ADHC, community agencies, transportation
- ADL deficits home maker home health aid
- Depression → mental health
- Sicker ones less likely to enroll for outpatient programs → HBPC, MFH

Conclusions

- Both Veterans and caregivers describe complex Veteran unmet needs that include medical, psychological, and social domains.
- More Veterans reported unmet IADL needs compared to ADL, communicating with the healthcare team, or social needs.
- Providers should intentionally screen for not just health needs, but also social determinants of health and caregiver needs.
- Barriers to accessing caregiver support programs may include lack of awareness of VA and non-VA programs.
- Link to VA programs and community resources to bridge gaps for HNHR Veterans and their caregivers, to allow aging Veterans' to age in place.

Thank you!!

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Thank You!!