

COVID-19 LESSONS LEARNED: A GLOBAL PERSPECTIVE

Health Watch USA
Massachusetts Nurses Association

June 15, 2021

Dr. Carolyn Clancy
Acting Deputy Secretary
US Department of Veterans Affairs

Dr. Beth Taylor
Assistant Under Secretary for Health for Patient Care Services
Chief Nursing Officer
Veterans Health Administration



Dr. Carolyn Clancy

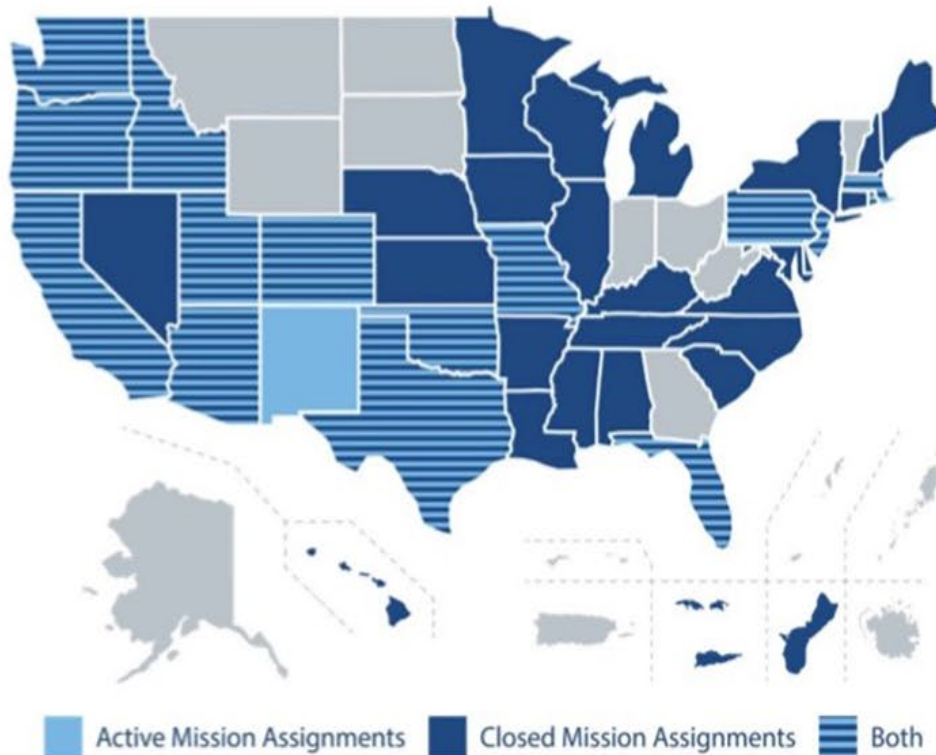
Acting Deputy Secretary, US Department of Veterans Affairs

Dr. Carolyn Clancy has served as Acting Deputy Secretary of Veterans Affairs since January 20, 2021. Previously she served as the Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks. She has also served as the Veterans Health Administration (VHA) Executive in Charge. Dr. Clancy also served as the Deputy Under Secretary for Health for Organizational Excellence as well as ten years as the Director, Agency for Healthcare Research and Quality.

- Leveraging VHA's Unique Assets in Responding to COVID-19
- VHA Nurse Education and Training
- Nursing: The First and Last Line of Defense

VA's Fourth Mission

Supporting state & local health care systems



1,736 Veterans admitted to care from State Veterans Homes (as of May 17, 2021)



18 mission assignments

129 completed missions

Provided **933,684** total pieces of personal protective equipment, including:
(as of May 18, 2021)

223,375 masks



573,580 gloves



All figures are as of May 21, 2021, unless otherwise noted.



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Leveraging VHA's Unique Assets in Responding to COVID-19

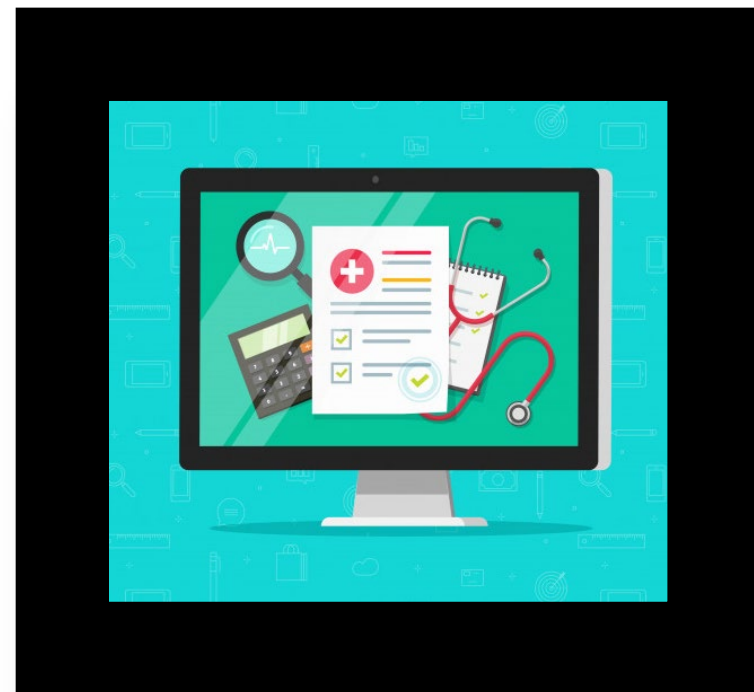
- Nation's largest single integrated health care system
- Nation's largest health care education and training effort for health professionals
 - Nearly 70% of physicians in the US-trained at the VA
 - 58% of VA staff hold a faculty appointment at an academic affiliate

Leveraging VHA's Unique Assets

- Ninety-five-year-old research program focused on all aspects of Veterans' health
 - More than 60% of researchers are also clinicians providing direct patient care
 - VA Research can rapidly self-fund multisite clinical studies to answer important and urgent clinical questions
- Service-oriented patient population who partner in their own care and volunteer for research
- Strong leadership support for Patient Aligned Care Teams (PACT) approach

Leveraging VHA's Unique Assets: VHA Electronic Health Record System

Because of its state-of-the-art electronic health record system, VHA could contact women Veterans ages 18-48 who had received the Johnson & Johnson COVID-19 vaccine.



Leveraging VHA's Unique Assets: Telehealth

- VHA has provided telehealth nationally since 2003
- Between May 9, 2020, and March 15, 2021, VHA saw a 1,690% increase in telehealth visits
- During the week of May 9, 2021, VHA held 200,339 telehealth visits
- VHA has expanded virtual telehealth services to include remote monitoring (e.g., Podometrics, LINK-HF)

Responding to COVID-19: VA Research (Sample Studies)

- **Epidemiology, Immunology and Clinical Characteristics of COVID-19” (EPIC3)** is a collaboration with DOD on an observational, natural history study being coordinated by VA’s Cooperative Studies Program
- Four VA sites are part of an NIH-sponsored adaptive trial of the **antiviral drug remdesivir** plus the **anti-inflammatory drug baricitinib** for hospitalized patients with COVID-19
- The wide-reaching **“VA CURES” master protocol** will enable a series of clinical trials across VA. The first, now underway, is examining the effects of convalescent plasma.

Responding to COVID-19: Education and Training

- Continued to provide training during COVID-19, reaching nearly 118,000 health professions trainees in 2020 (compared with 124,000 in 2019)
- Changed supervision guidelines to allow trainees--with a supervisor connected remotely--to provide virtual care

**Trainees can now provide
virtual care to Veterans –
*anywhere***



VHA Nurse Education & Training: Workforce Capacity

- In recent years, the Office of Academic Affiliations (OAA) has pioneered multiple Registered Nurse (RN) and Nurse Practitioner (NP) residency programs within the VHA
- Today, OAA manages 108 Nurse residency programs (49 RN and 59 NP)
- In 2019, more than 25,000 nursing students completed all or part of their clinical training at VA facilities



Dr. Beth Taylor
Assistant Under Secretary for Health for Patient Care Services
Chief Nursing Officer

Dr. Beth Taylor assumed the role of Assistant Under Secretary for Health for Patient Care Services and Chief Nursing Office in March 2020. In this role she serves in as principal executive for oversight of Nursing, Social Work, Caregiver Support, Connected Care, Pharmacy, Sterile Processing, Geriatrics and Extended Care, Population Health, Patient Centered Care and Cultural Transformation, Physician Assistants, and Rehabilitation and Prosthetics.

VHA Nurse Education & Training: Continuing Education through SimLEARN

- Nurse-taught courses (e.g., Fundamental Critical Care Support, Trauma Nursing Core)
- Resuscitation Education and Innovation (REdI) program
 - This nationwide, nurse-led program, which provides Basic Life Support and Advanced Cardiac Life Support training, tracking, and monitoring, assumed even greater prominence during the pandemic, with SimLEARN making several courses publicly available on its website.

VA's Four Statutory Missions

President Lincoln's promise "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's veterans.

VHA has four statutory missions:

Veterans Health Care: VA's Veterans Health Administration is the largest integrated health care network in the United States, with 1,255 health care facilities serving 9 million enrolled Veterans each year.

Training: The next generation of clinicians for the nation.

Research: Contribute significantly to the science of healthcare.

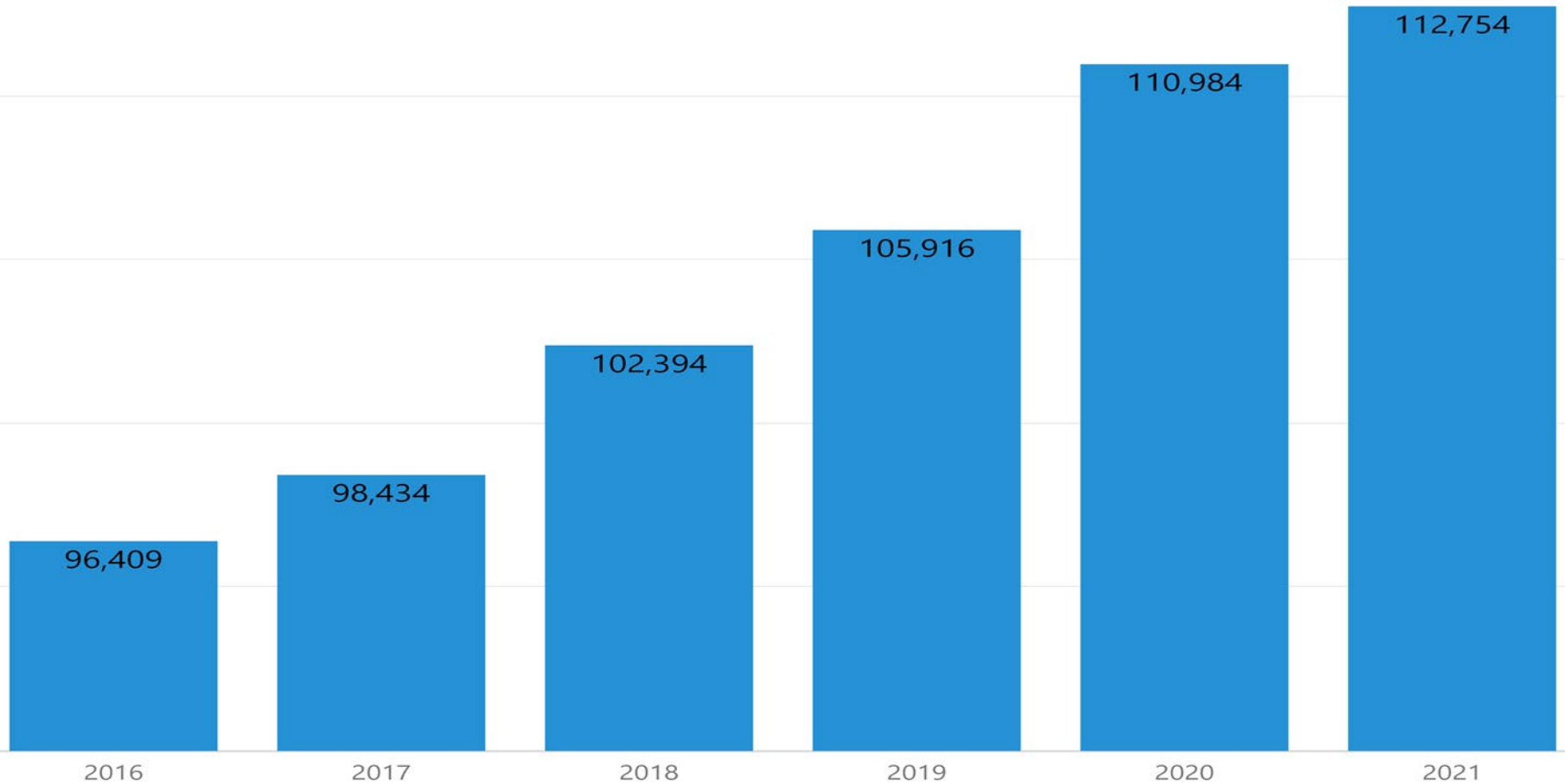
Emergency Preparedness: VA's "Fourth Mission" is to improve the Nation's preparedness for response to war, terrorism, national emergencies, and natural disasters by developing plans and taking actions to ensure continued service to veterans, as well as to support national, state, and local emergency



VHA Nursing Demographics

Nursing Workforce Increases

Onboard Employee by FY (Non-Med Resident, Nursing Staff, Non-Trainees, VHA)



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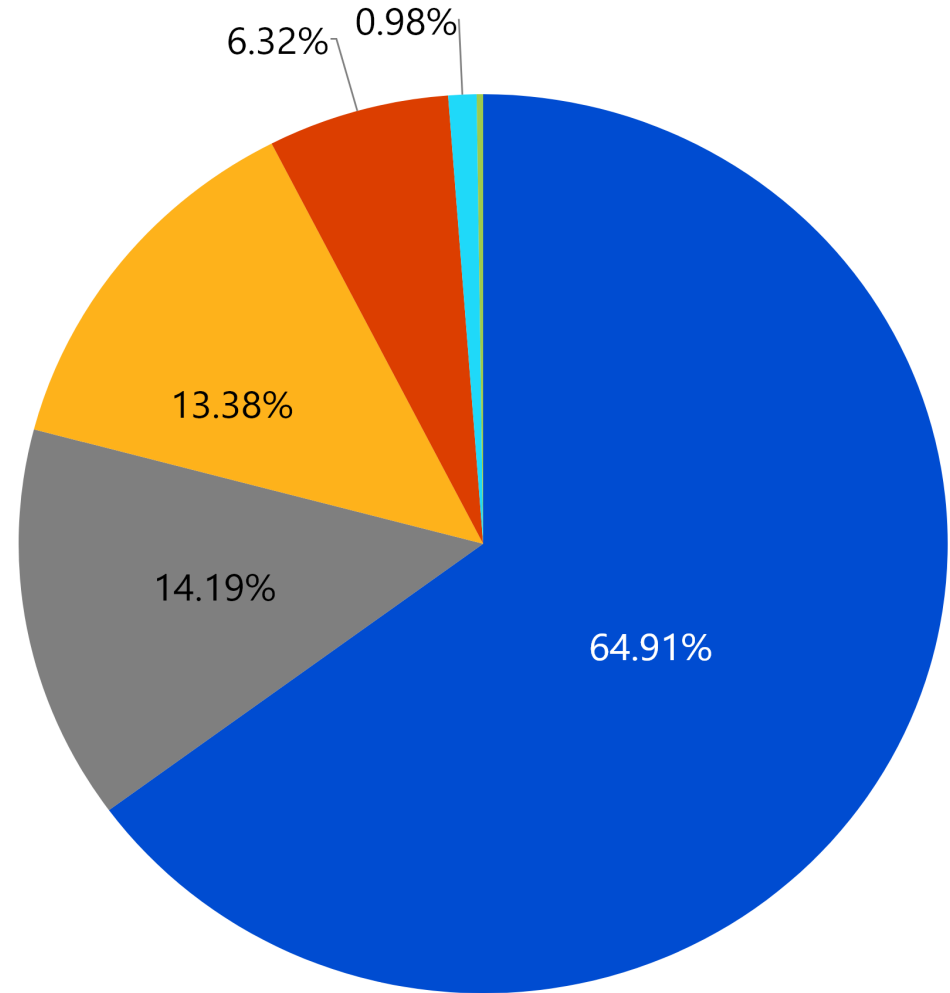
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VHA Nursing Demographics 2021 YTD

Occupation	2021
RN	73,185
LPN/LVN	15,996
NA	15,088
NP	7,128
CRNA	1,105
CNS	252
Grand Totals	112,754



Operation Warp Speed



Pandemic and Impact of Nurses

2020-2021 DEMPS Nurse Deployment

Deployment Location	Number of Nurses
Community Nursing Home	980
Indian Health Service	230
Non-VA Hospital	90
State Veterans Home	2174
VA Medical Centers	987
Grand Total*	4,461



COVID 19 Response-Training

- Office of Nursing Services (ONS) created multiple modules for training nurses from areas where demand decreased during COVID (clinics and OR) to areas where demand increased (ICU)
- Local sites implemented the training modules based on adult learning principles to prepare for site-specific response to the pandemic
- Additional work was done in providing educational resources for the management of Veterans within the VHA Community Living Centers and State Veterans Homes. Six crisis skills acquisition lesson plans have been developed and executed at 20 different training programs that reached over 1600 field-based educators and staff.

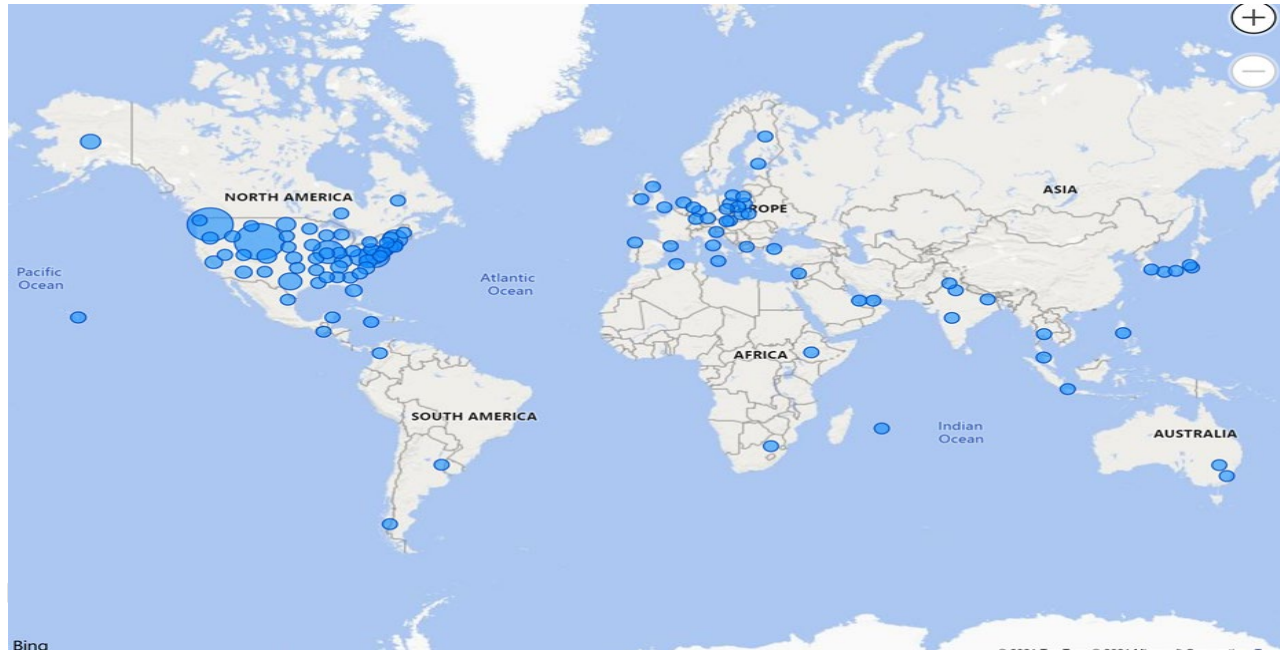
COVID Training External Site Statistics

91,935

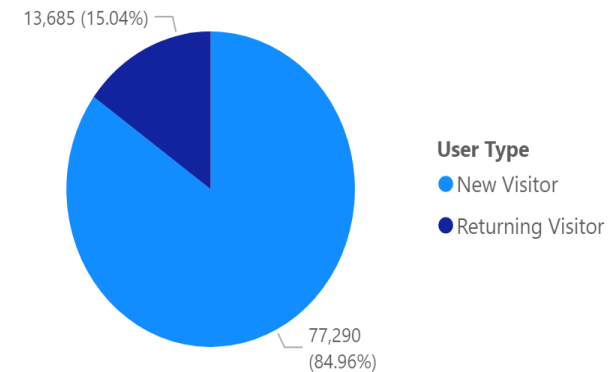
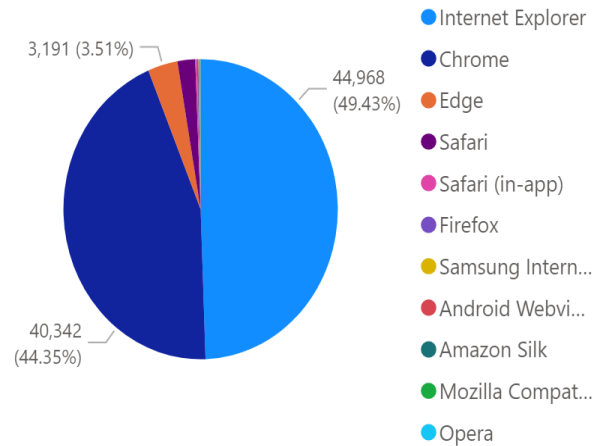
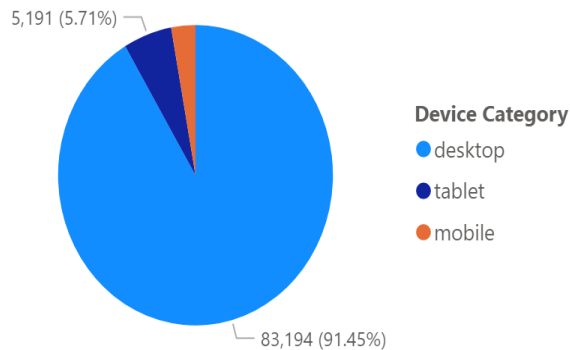
Pageviews

80,519

Unique Pageviews



Pageviews by Device Category



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Listening Sessions Overview

Background

- VHA partnered with federal, state, and local organizations to help SVHs and CNHs in support of VA's 4th Mission.
- After deploying more than 450 staff, VHA gathered feedback to enhance future readiness.

Approach

- 20 Listening Sessions, including more than 120 deployed staff, 8 Senior Leaders, 9 SVH/CNH Leaders.
- Questions structured around 4 elements: Conditions, Training, Deployment, and Culture.
- Feedback synthesized to develop lessons learned and recommendations for future improvement.

Outcomes

- Lessons learned for Conditions, Training, Deployment, and Culture.
- Recommendations developed to address identified needs.
- Development of a 3-tiered approach to managing 4th Mission support.



Observations



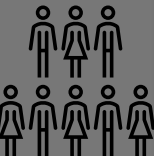
Conditions

- Limited knowledge of infection control
- Insufficient supplies (PPE and cleaning)
- Staffing shortages due to COVID-19 and working conditions



Training

- Inadequate planning and preparation for deployed staff.
- Staff needed training in infection control and cleaning



Deployment

- Poor communication w/ sites led to confusion about VHA staff roles. Receiving facilities lack understanding of how to get assistance
- Process to volunteer was unclear and deployed team lacked social support
- Post-deployment support was inconsistent



Culture

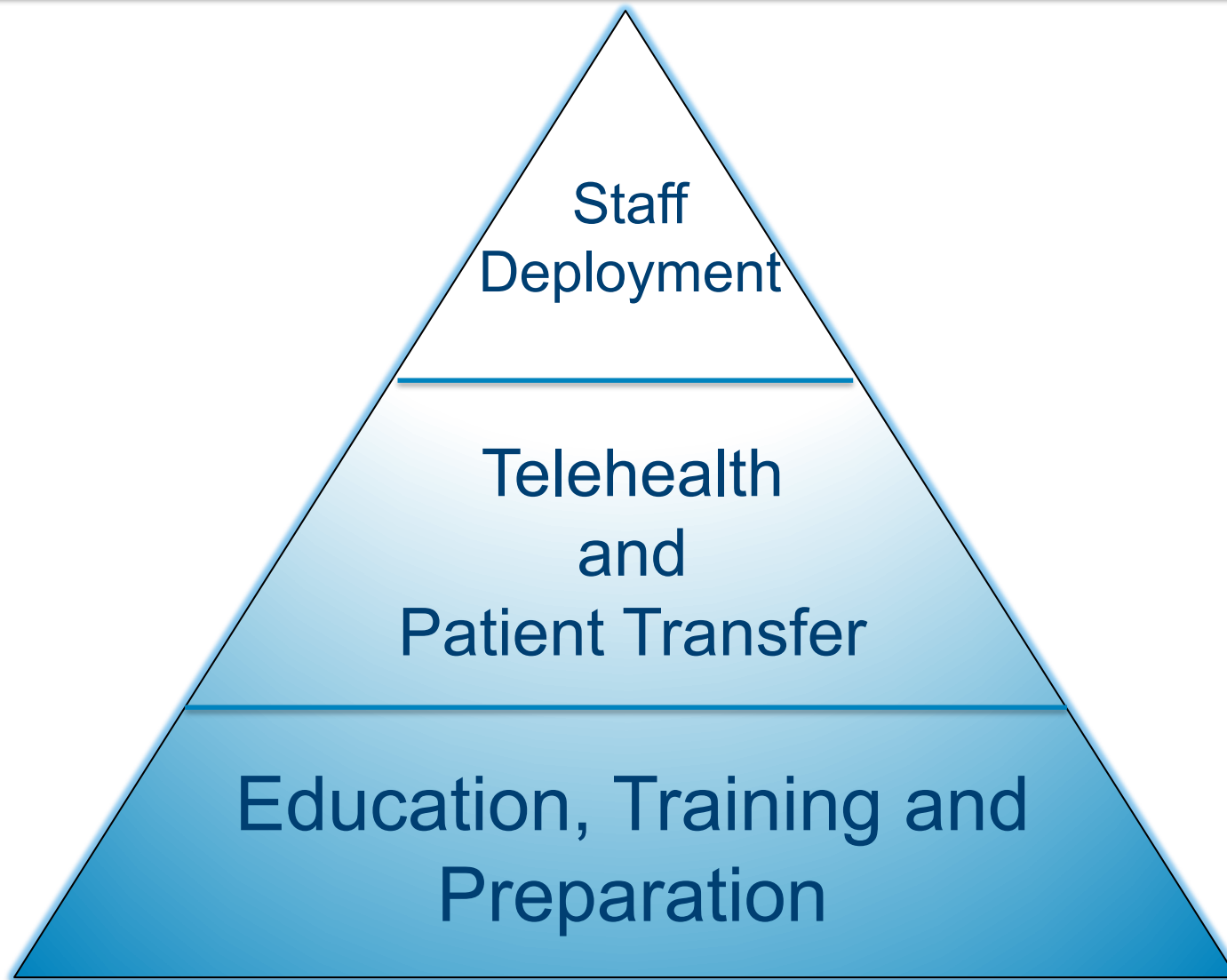
- Pre-existing relationships with receiving facilities was limited. Deployed staff perceived as regulators
- Limited collaboration at start of deployment interfered with the mission
- Staff and management reluctant to adopt critical infection control skills



Lessons Learned

- Mission and mission leader are clearly identified
- Tactical planning and training occur prior to deployment, and resources are readily available
- Communicate specifics with receiving facilities
- Provide resilience support to deployed staff
- Standardize policies and processes
- Engage with community partners earlier to prevent the need for deployment

Three-Tiered Approach to Deployment



VHA Federal Supremacy

Authority of VA Professionals To Practice Health Care

A Rule by the [Veterans Affairs Department](#) on 11/12/2020



PUBLISHED DOCUMENT



13327



AGENCY:

Department of Veterans Affairs.

ACTION:

Interim final rule.

SUMMARY:

The Department of Veterans Affairs (VA) is issuing this interim final rule to confirm that its health care professionals may practice their health care

DOCUMENT DETAILS

Printed version:

[PDF](#)

Publication Date:

11/12/2020

Agency:

[Department of Veterans Affairs](#)

Dates:

Effective Date: This rule is effective on November 12, 2020.

Effective Date:

[Feedback](#)

<https://www.federalregister.gov/documents/2020/11/12/2020-24817/authority-of-va-professionals-to-practice-health-care>

VHA Federal Supremacy

VA recently affirmed its right, under the “Federal Supremacy” clause of the Constitution, to allow our health care professionals to operate in every State and to establish national standards of practice. This ensures:

VA Has the Ability to Move Resources Throughout Our Organization to Support our Mission.



VA Clinicians Will Be Able to Practice Across State Lines, While Performing Duties as a VA Employee, Without Fear of State Disciplinary Action.



VA can maximize implementation of a new EHR in partnership with DoD to facilitate care at joint DoD and VA facilities.



Practice and Business Operations Will Be Standardized at Our Medical Centers.



VA has the ability to provide support to the country in disaster and other times of national crises in furtherance of VA's 4th Mission.



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APRN Practice

APRN Full Practice Authority (FPA) Regulation:

- Published January 13, 2017

Federal Register :: Advanced Practice Registered Nurses

- Impacts three roles of APRN Practice-
 - Nurse Practitioner (NP)
 - Clinical Nurse Specialist (CNS)
 - Certified Nurse Midwife (CNM)
- September 30, 2020, 140/140 (100%) of VA Healthcare Systems have amended their bylaws



FEDERAL REGISTER

The Daily Journal of the United States Government



Advanced Practice Registered Nurses

BILLING CODE 9110-04-P

**DEPARTMENT OF VETERANS
AFFAIRS**

38 CFR Part 17

RIN 2900-AP44

Advanced Practice Registered Nurses

AGENCY: Department of Veterans Affairs.

ACTION: Final rule with comment period.

SUMMARY: The Department of Veterans Affairs (VA) is amending its medical regulations to permit full practice authority of three roles of VA advanced practice registered nurses (APRN) when they are acting within the scope of their VA employment. Certified Registered Nurse Anesthetists (CRNA) will not be included in VA's full practice authority



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Nursing Call to Action

- Prepare our profession and health systems for the next COVID event
- Evaluate the adequacy of the nursing workforce in terms of numbers, education, agility, and clinical readiness
- Develop sustainable approaches to supporting resilience
- Optimize compensation models to ensure the missions are met
- Develop a strong pipeline for the next generation of nursing workforce

Nursing Call to Action

- Enhance support for nursing research
- Health policy articulates nursing role, responsibility, and authority
- Governance structures for nursing and health system is clearly linked
- Prepare the workforce for the delivery models of the future
- Address standardization and portability of practice to support virtual care models
- Develop models for using technology to support non-institutional care
- Strengthen public health approach to health promotion/disease prevention



Questions & Comments