



Health of the Force Overview and Innovative Health Strategies to Improve Medical Readiness

Amelia Duran-Stanton, LTC, PhD, DSc, MPAS, PA-C

Amy L. Jackson, COL, DMSc (c), MPAS, PA-C

Mary “Janet” Coy, LTC, MSHS, PA-C

Breanne Kormendy, Maj, MPAS, PA-C

Disclaimer

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Purpose

Provide military physician assistants (PAs) and other healthcare providers awareness and education on the importance of knowing the status of the health of their patients and share innovative health strategies to continue to ensure a medically ready force.



Photo courtesy of COL James Jones, IPAP Army PA Director

Outline

- Introduction
- Background: Importance of Health Readiness
- Health of the Force Overview
- Prevention
- Medical Readiness Classification Rates
- Innovative Strategies for Physician Assistants
- Military Health System (MHS) and Defense Health Agency (DHA) Initiatives
- Conclusion
- References
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Introduction

- Readiness is an important factor in taking care of our people
- Each visit should be dealt with as a readiness visit. Additionally, health care providers must implement innovative health strategies to continue to ensure a medically ready force
- Understanding the health of the force gives PAs and healthcare providers an idea of what they can expect to see

Learning Objectives

- Describe the importance of medical readiness and military PAs' role
- Describe the health metrics and their importance in addressing them during all visits
- Describe resources and tools available in addressing the health metrics
- Provide innovative health strategies to ensure a medically ready force

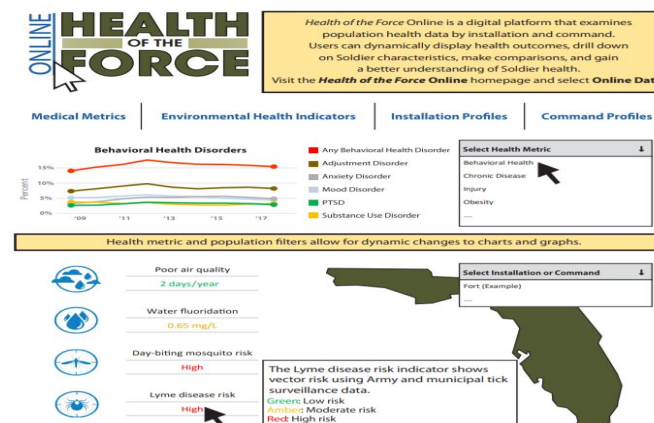
Background

- There are key indicators that impact readiness
- Healthcare providers must have awareness and understanding of the status of the health of their patients
- The Health of the Force (HOF) publication provides statistical information and examples on the Department of Defense's overall health
- Physician Assistants must be medically ready and ready to provide medical care (Medically Ready Force... Ready Medical Force)
- There are also several innovative health strategies they need to be aware of

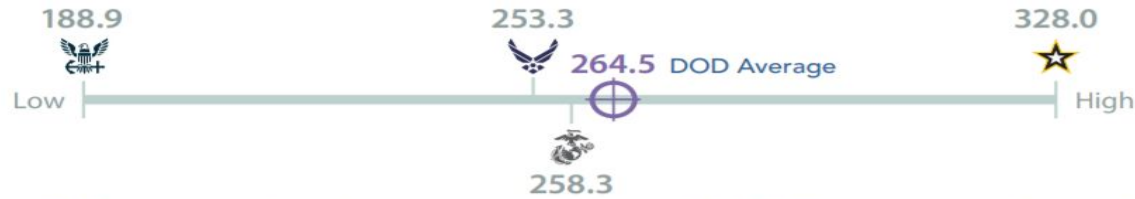
Health of the Force

- Department of Defense, Army and Army National Guard annual report
- Purpose: Empower senior leaders with knowledge and context to improve health and readiness
- Army's Health of the Force (HOF) presents Army-wide and installation-level demographics and actionable data for more than 20 health, wellness, and environmental indicators at 40 installations / 54 States and Territories
- Army's HOF provides a snapshot of the health of Soldiers used to improve key Performance Triad measures (sleep, activity and nutrition) and directly impact Soldier medical readiness
- HOF Online/Dashboard: <https://carepoint.health.mil/sites/HOF/Pages/Home.aspx>

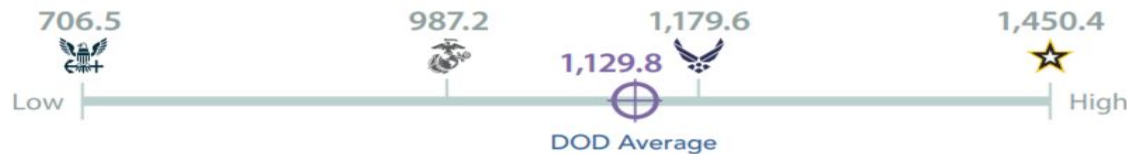
HEALTH OF THE FORCE



Health of the Force - Injury



Overall, there were 264.5 acute injuries per 1,000 AC Service members in 2019.
Rates by service ranged from 189 to 328 per 1,000 AC Service members.



Overall, there were 1,129.8 cumulative traumatic injuries per 1,000 AC Service members in 2019.
Rates by service ranged from 707 to 1,450 per 1,000 AC Service members.

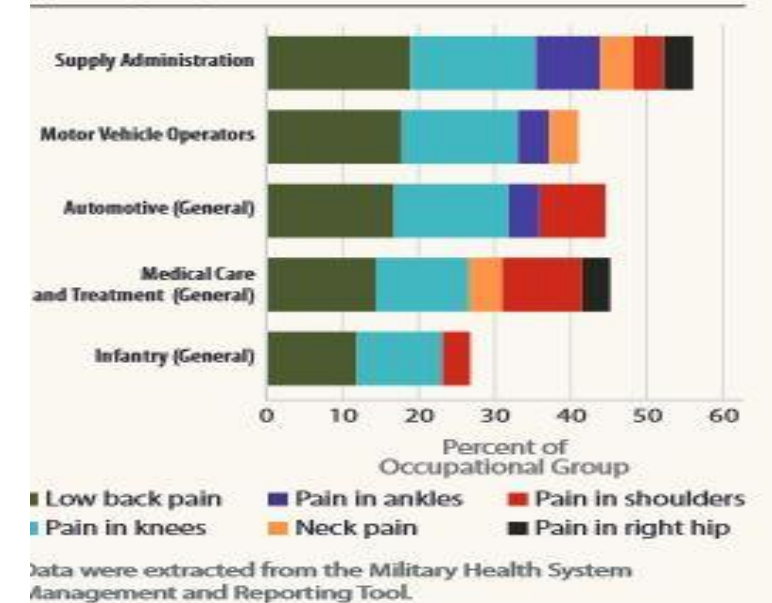


- Paradoxically, the very physical training activities required to improve soldier performance also result in injury
- Effective interventions: reduced running mileage, leadership oversight of training, mouth guards in high-risk activities, use of rigid ankle braces during high risk activities and incorporation of balance, agility, and proprioceptive warmups, ergonomic assessments, equipment/job redesign

Health of the Force - Back Injury

- In 2018, 37% of musculoskeletal (MSK) condition encounters are related to low back pain
- Back injuries:
 - High incidence
 - High associated costs
 - Frequently linked to exposure to occupational hazards
- Even physically fit Soldiers may face undue risk of MSK discomfort and injury in physically demanding jobs
- 78% helicopter pilots reported back pain in the previous calendar year; median flight time to back pain onset was 60 minutes
- Ergonomic changes to designs or equipment may reduce some injury burden

Percent of Occupational Group with Encounters by Body Part, 2018

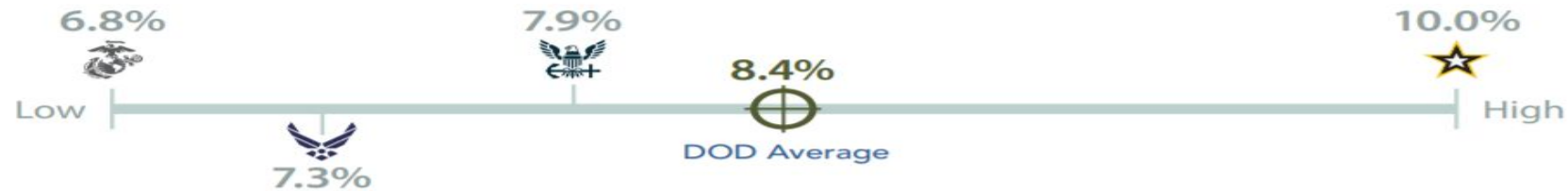


Percent of MSK Condition Encounters Related to Low Back Pain, 2016–2018

2016 → **21%**
2017 → **20%**
2018 → **37%**

From 2016 to 2018, 16% of the full cost (i.e., encounters, treatment, etc.) of MSK conditions was related to low back pain.

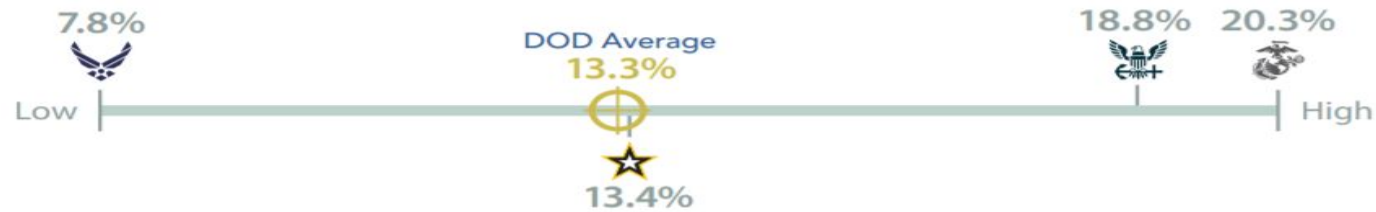
Health of the Force - Behavioral Health



Overall, 8.4% of AC Service members had a BH disorder in 2019.
Rates ranged from 6.8% to 10.0% across Services.

- Women > Men; <25 years old
- Top Diagnoses: Adjustment Disorder, Anxiety Disorder, Mood Disorder
- Primary barriers to not seeking help (40-60%)
 - Professional concerns
 - Privacy and confidentiality concerns
 - Lack of confidence in resources
 - Preference for self-reliance
- Increased access
 - Behavioral Health Officers/Provider ratios
 - Civilian training and referrals
 - Virtual visits

Health of the Force - Substance Use



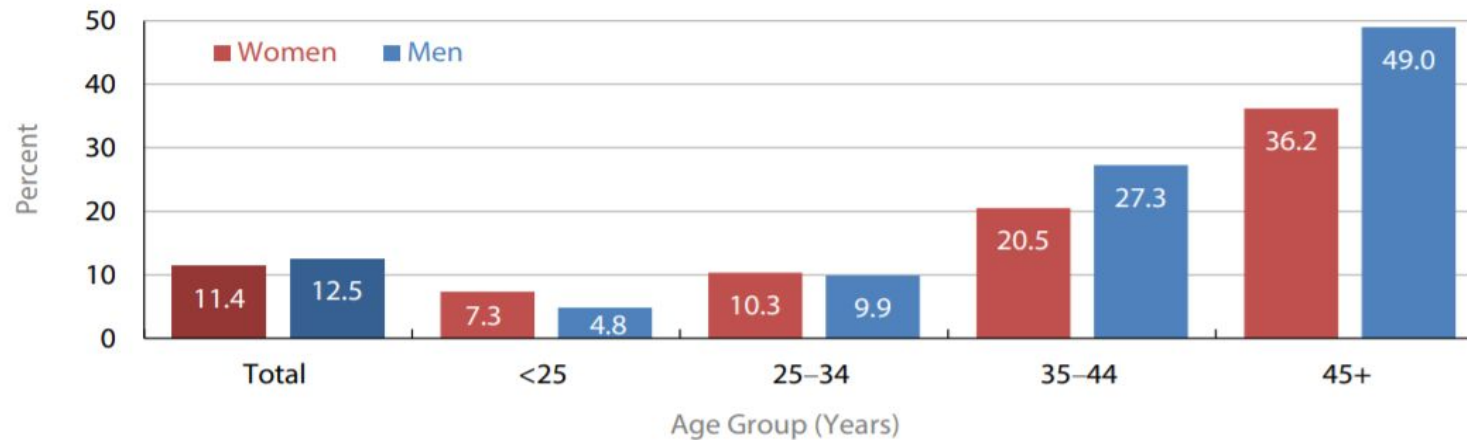
Overall, 13.3% of AC Service members had a positive AUDIT-C screen in 2019.
Rates ranged from 7.8% to 20.3% across Services.

- 22% of Soldiers reported problematic alcohol use on the Post-Deployment Health Reassessment but <2% were enrolled in treatment mostly due to previous policies and practices discouraged Soldiers from self-referring for alcohol abuse clinical care
- Encourage Soldiers to see help
 - Create voluntary pathway if meets specific criteria
 - Substance Use Disorder Clinical Care (SUDCC)
 - Army Directive 2019-12, Policy for Voluntary Alcohol-Related Behavioral Healthcare
 - >5,800 voluntarily received care
 - 34% reduction in the deployment ineligibility of Soldiers who are receiving behavioral health treatment

Health of the Force - Sleep Disorders

Prevalence of Sleep Disorders by Sex and Age Group, AC Service Members, 2019

The prevalence of sleep disorders was similar for males (12.5%) and females (11.4%) and increased with increasing age group for both sexes.



- Sleep is vital for health, performance and well-being
- Routinely getting 5-6 hours of sleep, individuals perform much like a person with a blood alcohol content of 0.08
- Effective sleep strategies
 - Set a bedtime
 - Prepare your sleep area
 - Relax and wind down

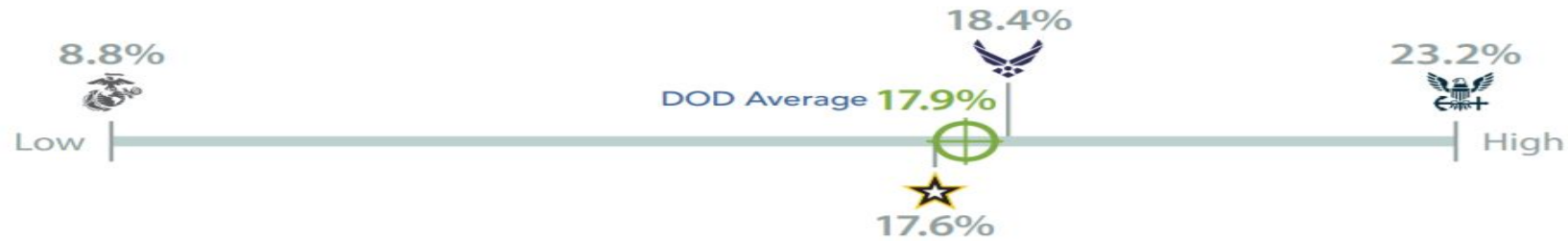
SLEEP DISORDERS

14% of Soldiers had a diagnosed sleep disorder in 2018.

Sleep apnea and insomnia diagnoses made up more than **50%** of the diagnosed sleep disorders.

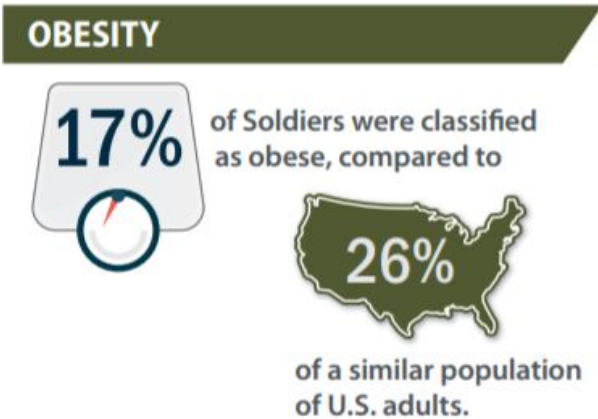


Health of the Force - Obesity



Overall, 17.9% of AC Service members were classified as obese in 2019.
Rates ranged from 8.8% to 23.2% across Services.

- Overall prevalence of obesity has increased steadily since 2015
- Body Mass Index (BMI) is used to characterize body fat in adults - different from body fat percentage
 - Normal weight: >18.5 but <25
 - Overweight: ≥ 25 but < 30
 - Obese: ≥ 30

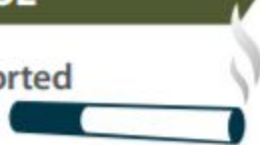


Health of the Force - Tobacco Use

- Using tobacco products negatively impacts Soldier readiness by impairing physical fitness and by increasing illness and absenteeism
- Military prevalence estimate: 23%
- National prevalence estimate: 19%

TOBACCO PRODUCT USE

26% of Soldiers reported tobacco use
(not including electronic cigarettes).



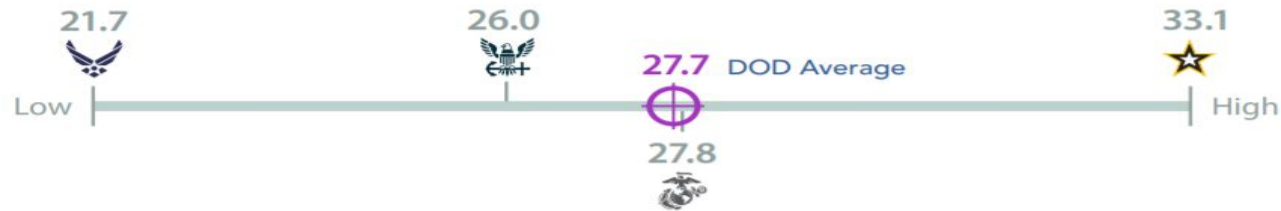
7.2% of Soldiers reported the use of electronic cigarettes.



The majority of tobacco product users are 34 years of age or younger.



Health of the Force - Sexually Transmitted Infections



Overall, there were 27.7 cases of chlamydia, gonorrhea, or trichomoniasis per 1,000 AC Service members in 2019.

Rates ranged from 21.7 per 1,000 to 33.1 per 1,000 across Services.

- Annual incidence rates of chlamydia and gonorrhea among AC Service members increased during 2015-2019
- Chlamydia was most common (23.5 per 1,000)
- Annual screening recommended
 - Sexually active female under 25 years of age
 - Increased risk (e.g., individuals with multiple partners, MSM)
- Continued behavioral risk reduction interventions are needed

Prevention

- Risk communication
- Accession standards
- Retention standards
- Doctrine
- Training
- Vaccines
- Combat stress reaction and control
- Reintegration
- Medical Assessment and management after deployments (especially those with medically unexplained symptoms)
- Educate



https://gvcps.ca/wp-content/uploads/2019/12/Need-Foreclosure-Prevention-Assistance-1024x551_edited.jpg

Holistic Health and Fitness

- Army's primary investment in Soldier readiness and lethality, optimal physical and non-physical performance, reduced injury rates, improved rehabilitation after injury, and increased overall effectiveness of the Total Army
- Empowers and equips Soldiers to take charge of their health, fitness, and well-being in order to optimize performance while preventing injury and disease
- Consolidates the tenets of Performance Triad, Go For Green, Soldier Fueling Initiative, Fit for Performance, Ready and Resilient Campaign, Global Assessment Tool
- Human Performance Team (for a brigade-sized element)
 - Physical Therapist
 - Registered Dietitian
 - Occupational Therapist
 - Cognitive Performance Expert
 - H2F Trainer
 - Athletic Trainer Certified
 - Strength and Conditioning Specialist



Innovative Strategies for Physician Assistants

1. Participate in a multi-disciplinary team
2. Motivational Interviewing
3. Change Intervention
4. Maximize available health promotion professionals and resources (base, community, virtual)
5. Keep current with preventive care guidelines
6. Optimize HEDIS
7. Utilize technological resources (Medical Informatics/Research)
8. Engagement in unit, community and local opportunities beyond clinical work
9. Government, Policy and Organizational Leadership
10. Create or promote healthier work and training environments for medical professionals

Innovative Strategies:

Participate in a multi-disciplinary team

1. Participate in a multi-disciplinary team

- Various specialty areas with complementary skills and experience
- Develops optimal care plans
- Delivers higher quality, patient-centered care, improves patient safety, lowers costs, and improves health outcomes
- Communication and teamwork failures are the root cause of many preventable adverse events
- Patients' rating of nurse-provider coordination correlates with their perception of the quality of care received

Innovative Strategies: Motivational Interviewing

2. Motivational Interviewing

- Collaborative style communication
- Strengthens personal motivation and commitment to change
- Explore own reasons for change
- Atmosphere of acceptance and compassion
- Best for those unmotivated or unprepared for change
- Central Concept
 - Identification of ambivalence
 - Examination of readiness to change
 - Resolution of ambivalence

Innovative Strategies: Change Intervention

3. Change Intervention - Integrated Theory of Health Behavior Change

- Healthcare providers overestimate the extent to which people change
 - Assume behavior change is due to the compelling evidence
 - Factual information alone \neq maintenance of long-term behavior change
- Patient self-reports are extensively used
 - Accessible but limited picture
- Engagement in self management behaviors is the initial outcome that influences the long-term outcome of improved health status
- Fostering knowledge and beliefs, increasing self-regulation skills and abilities, and enhancing social facilitation
- Competing goals result in stress

Innovative Strategies: Change Intervention (cont)

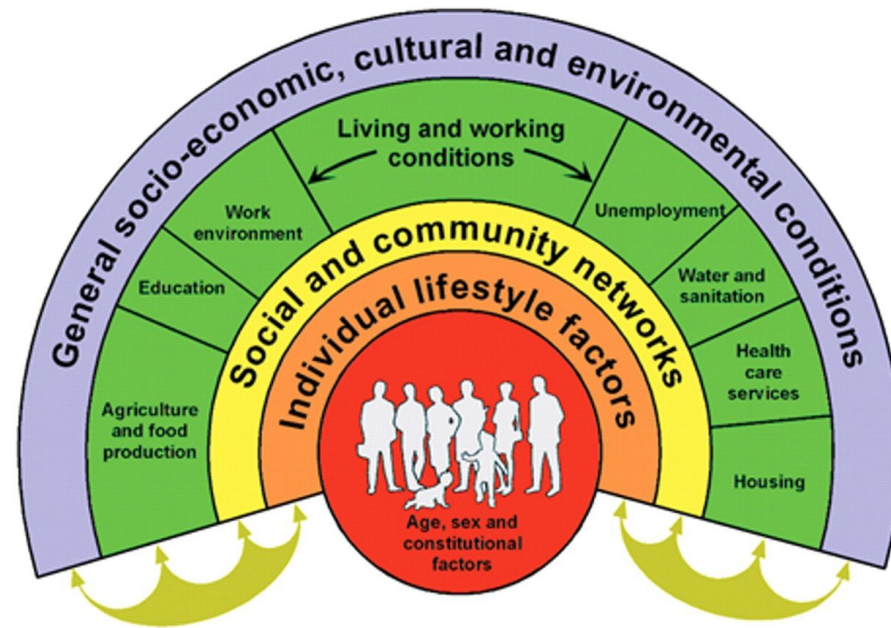
3. Change Intervention: Evidence-Based Strategies

- Smart goal setting
- Problem solving barriers
- Self-monitoring
- Physical activity prescriptions
- Healthy eating goals
- Brief behavioral therapy for insomnia
- Patient education to prevent medication nonadherence
- 5 Rs to quitting smoking (relevance, risks, reward, roadblock and repeat)

Innovative Strategies: Change Intervention (cont)

3. Change Intervention: Health Behavior Models

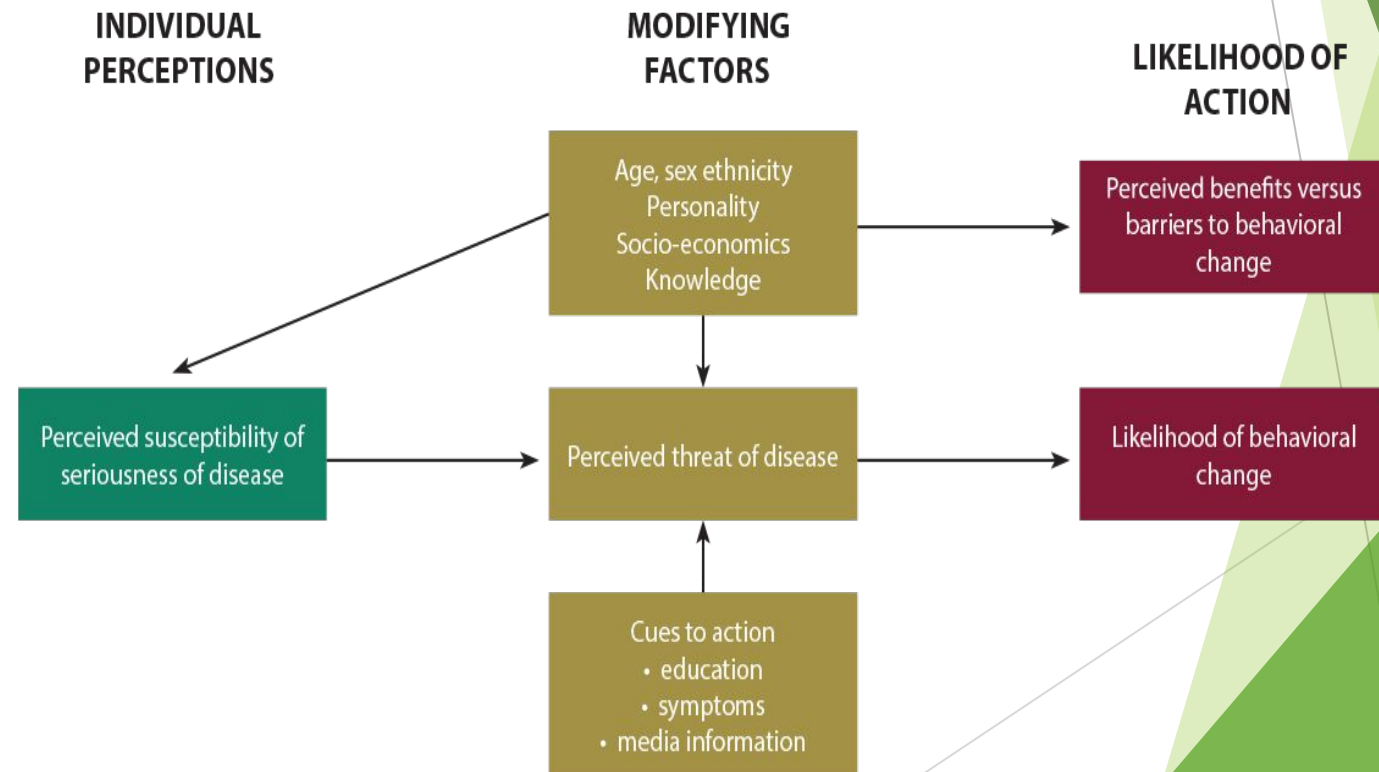
- Actions taken (sleeping, working out, coping mechanisms)
- Positive health behaviors: prevention of disease/chronic illnesses



Innovative Strategies: Change Intervention (cont)

3. Change Intervention: Health Behavior Models

- Individual perceptions
- Modifying factors
- Likelihood of action



Innovative Strategies: Maximize Resources

4. Maximize available health promotion professionals and resources

- [APHC Health Promotion and Wellness](#)
- [Human Performance Resources](#)
- [CDC Health Promotion Activities](#)
 - Helping Smokers Quit
 - Tips From Former Smokers campaign
 - 1-800-QUIT-NOW
 - National Tobacco Control Program
- [Performance Triad](#) (Sleep, Activity, Nutrition)
- [Military One Source](#)



Innovative Strategies: Maximize Resources (cont)

4. Maximize available health promotion professionals and resources

- Nutrition - Predominantly whole food plant based diet
- Exercise - Moving body daily (walking, gardening, etc)
- Stress Management - recognizing stress and assisting with coping mechanisms
- Relationships - Avoiding isolation
- Sleep - Identify dietary, environmental, and coping behaviors to improve
- Substance Abuse - Smoking cessation and limitations on alcohol

AMERICAN COLLEGE OF Lifestyle Medicine

6 WAYS TO TAKE CONTROL OF YOUR HEALTH

NUTRITION Food is Medicine. Choose predominantly whole, plant-based foods that are rich in fiber and nutrient dense. Vegetables, fruit, beans, lentils, whole grains, nuts and seeds.

EXERCISE Regular and consistent physical activity that can be maintained on a daily basis throughout life—walking, gardening, push ups and lunges—is an essential piece of the optimal health equation.

STRESS Stress can lead to improved health and productivity—or it can lead to anxiety, depression, obesity, immune dysfunction and more. Helping patients recognize negative stress responses, identify coping mechanisms and reduction techniques leads to improved wellbeing.

SUBSTANCE ABUSE The well-documented dangers of any addictive substance use can increase risk for many cancers and heart disease. Positive behaviors that improve health include cessation of tobacco use and limiting the intake of alcohol.

SLEEP Lack of, or poor-quality sleep can lead to a strained immune system. Identify dietary, environmental and coping behaviors to improve sleep health.

RELATIONSHIPS Social connectedness is essential to emotional resiliency. Studies show that isolation is associated with increased mortality. Considering a patient's home and community environment improves overall health.

Being mindful of your food choices, managing your stress, being physically active, avoiding risky substance use, getting plenty of sleep and having a strong emotional support system in your life — are "just what the doctor ordered" to powerfully prevent, treat, and, often, even reverse chronic disease and select autoimmune conditions.

LIFESTYLE MEDICINE'S UNIQUE VALUE PROPOSITION

- Allows the body to protect and heal itself by promoting healthful lifestyle choices
- Educates, guides and supports positive behavior changes
- Places a focus on evidence-based optimal nutrition, stress management, sleep and physical activity
- Encourages active patient participation
- Treats the underlying, lifestyle-related causes of disease
- Uses medications as a supplement to therapeutic lifestyle changes
- Considers the patient's home and community environment

The American College of Lifestyle Medicine (ACLM) is the nation's medical professional association for physicians, allied health professionals, healthcare executives, and those in professions devoted to transforming health and redefining healthcare through lifestyle medicine.

lifestylemedicine.org

Designed by Erich Creative.

Innovative Strategies: Maximize Resources (cont)

4. Maximize available health promotion professionals and resources

- Wellness Coach
 - Part of the wellness team, does not replace the healthcare team
 - Encourages positive behavior
 - Utilizes motivational interviewing
 - Focus on stress management, self-care and resilience training
 - Focuses on the here and now



Innovative Strategies: Maximize Resources (cont)

4. Maximize available health promotion professionals and resources

- Health Promotion as a global tool

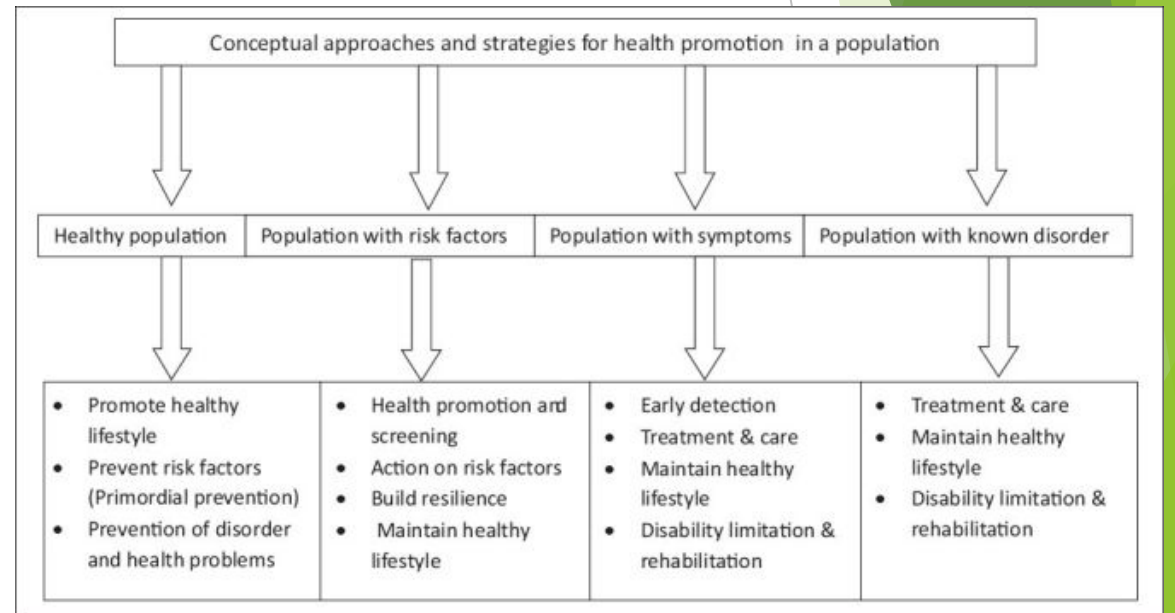
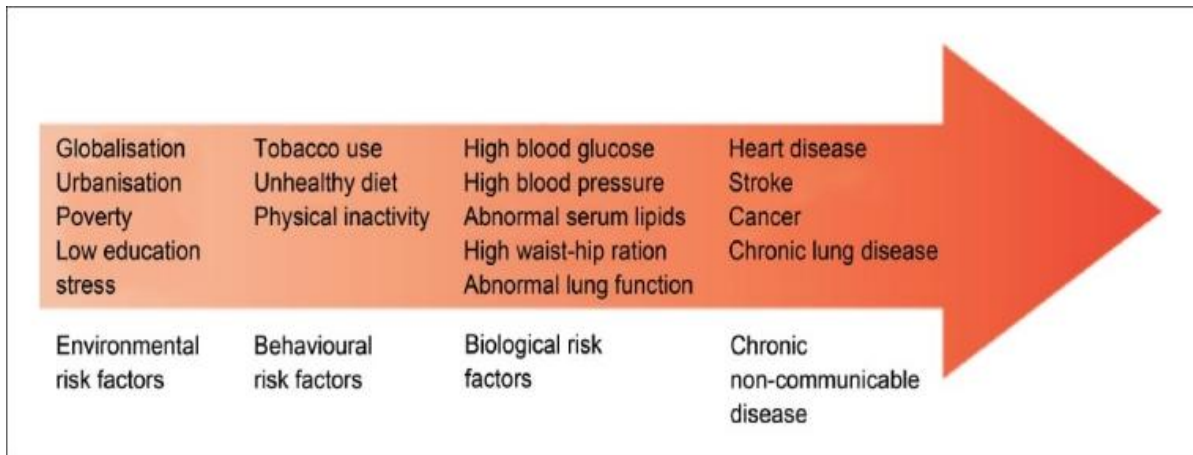


Illustration of how lifestyle-related issues contribute to increase in noncommunicable diseases(4)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3326808/>

Innovative Strategies: Keep Current with Preventive Care Guidelines

5. Keep current with preventive care guidelines

- United States Preventive Services Task Force (USPSTF): 51 screening guidelines
 - Last 3 updates
 - Tobacco cessation
 - Non-pregnant patients (A)- ask, advise & intervene with behavioral therapy and pharmacotherapy
 - Pregnant (A) - Ask, advise and intervene with behavioral therapy
 - Hepatitis B screening
 - Cardiovascular Disease (CVD) risk counseling

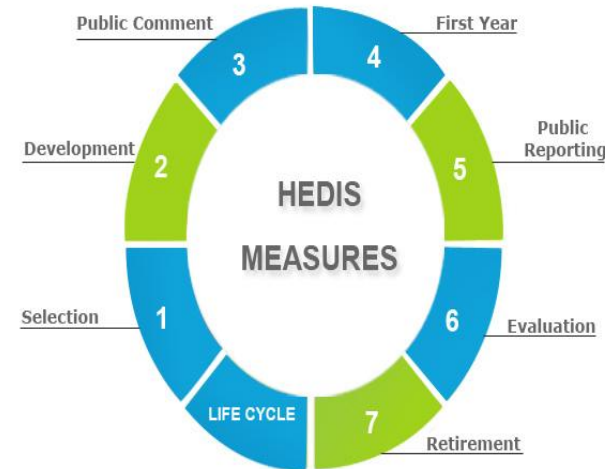
Innovative Strategies: Optimize HEDIS

6. Optimize HEDIS (Healthcare Effectiveness Data and Information Set)

- One of health care's most widely used performance improvement tools
- <https://www.ncqa.org/hedis/measures/>

More than 90 measure across 6 domains of care

1. Effectiveness of Care
2. Access/Availability of Care
3. Experience of Care
4. Utilization and Risk Adjusted Utilization
5. Health Plan Descriptive Information
6. Measures Collected Using Electronic Clinical Data Systems



Innovative Strategies: Optimize HEDIS (cont)

6. Optimize HEDIS (Healthcare Effectiveness Data and Information Set)

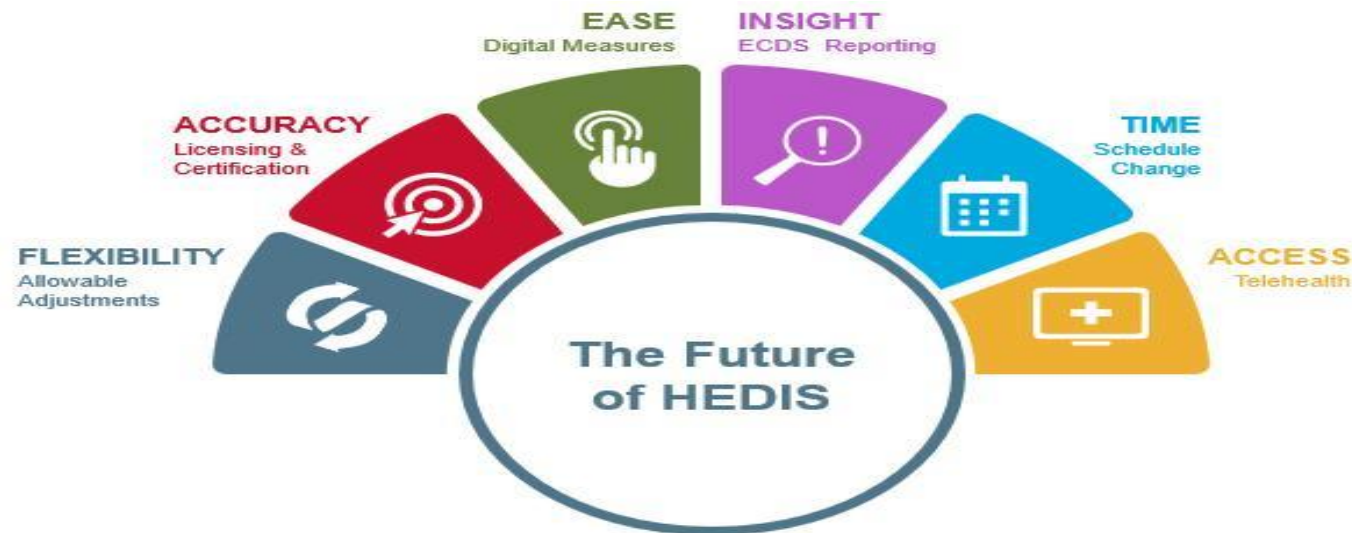
- Strategies to improve HEDIS metrics and outcomes
 - **Provider Level**
 - Have superior documentation
 - Focus on patient care
 - Focus on preventive screenings
 - Implement population health management
 - Incorporate patient engagement
 - **Executive/Leadership Level**
 - Help providers understand importance of HEDIS reporting
 - Ease reporting burden on providers (know what platforms are used in the organization)
 - Evaluate provider effectiveness routinely
 - Target high-value measures that increase ratings
 - Continue to monitor performance, provide feedback



Innovative Strategies: Optimize HEDIS (cont)

6. Optimize HEDIS (Healthcare Effectiveness Data and Information Set)

- HEDIS 2021 - data collection in new format
- <https://www.ncqa.org/hedis/the-future-of-hedis/>
 - Measures with different stratifications
 - Data groups based on age, gender and socio-economic status

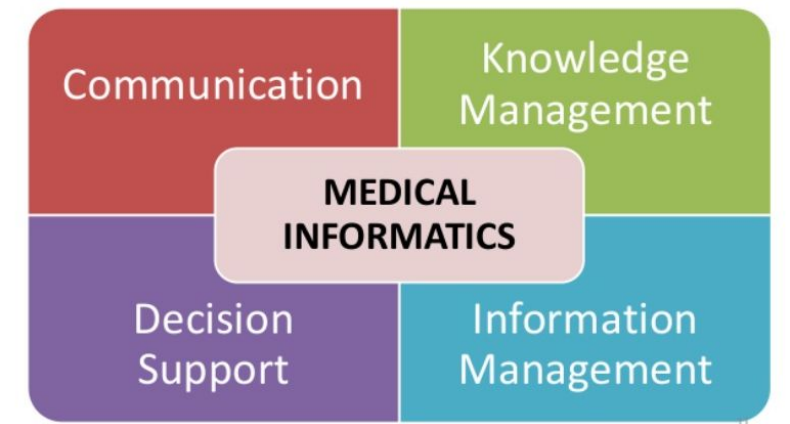


Innovative Strategies: Utilize Resources

7. Utilize Technological Resources: Medical Informatics

- Have the basic understanding of the power and utility of medical informatics
- Knowledge management
- Clinical information management
- Communication
 - Ability to communicate with a multidisciplinary team
 - Ability to communicate with patients
- Decision Support
 - Computer techniques as adjunct in medical decision making
 - Biometric monitoring, wearable health technology

INFORMATICS USE IN HEALTH CARE



Innovative Strategies: Utilize Resources (cont)

7. Utilize Resources: Research

- Investigation of different issues, using other methods than those traditionally used in biomedical research
- Traditional research methodologies/techniques are insufficient to indicate health promotion success in less countable areas
- Has to produce knowledge about effectiveness of interventions, but also about how and why health promotion programs work
- The mere fact that intersectoral action takes place can be considered as a success factor, as well as the intention to continue collaboration
- Single qualitative research techniques may give limited insight, but combinations give a rich picture of processes, achievements and conditions for improvement
- Functions as a tool to measure change and innovation, but also to facilitate these outcomes

Innovative Strategies: Engagement Beyond Clinical Work

8. Engagement in unit, community and local opportunities beyond clinical work
 - Commander's Ready and Resilient Council
 - Garrison MWR
 - Healthy Army Communities

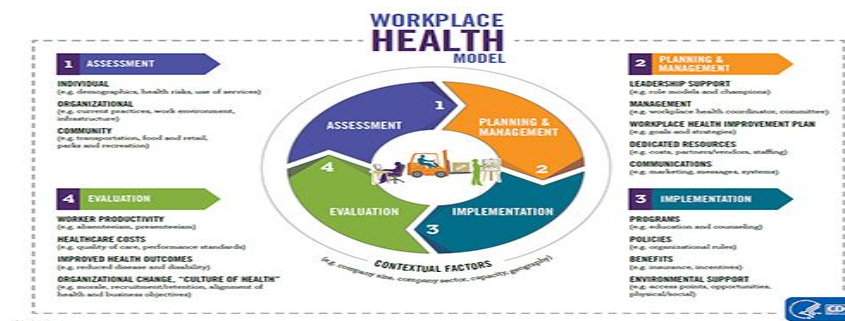


Innovative Strategies: Leadership

9. Leadership: Government, Policy and Organizational
 - The Governmental Public Health Infrastructure
 - RAND Developing Medical Healthcare Leaders
 - Civilian PA organizations that support Military PAs

Innovative Strategies: Promote Healthier Work and Training Environments

10. Create or promote healthier work and training environments for medical professionals
 - Health education classes
 - Access to local fitness facilities
 - Policies that promote healthy behaviors (tobacco-free campus)
 - Health insurance coverage for appropriate preventive screenings
 - Making healthy foods available and accessible (vending machines/cafeterias)
 - A work environment free of recognized health and safety threats and ability to identify new threats



Military Health System (MHS) Initiatives

- Department of Defense (DoD) and Military Health System (MHS) leaders have outlined several high-priority initiatives for 2018:
 - Department of Defense's Three Lines of Effort
 - Implementing TRICARE Reform
 - Continuing MHS GENESIS Rollout
 - Implementing MHS Transition
- MHS Areas of Impact
 - Trauma Care
 - Research and Development
 - Civilian Partnerships
 - Global Health Engagement



Defense Health Agency (DHA) Initiatives

- DHA Deployment Health Resources
 - Provides product development and deployment health execution guidance
 - Lead in IMR (Individual Medical Readiness), Reserve Health Program, Periodic Health Assessments (PHAs), and Deployment Related Health Assessments
- Consortium for Health and Military Performance (CHAMP)
 - Translates total fitness research to improve service member performance
 - Go-to source for evidence-based information on human performance optimization



CHAMP



Conclusion

Military PAs and healthcare providers must take every opportunity to take care of Service Members. Medical readiness is an important part of the health of the force. They must also be able to utilize innovative health strategies as part of these opportunities during every visit with the Service Members.



Photo courtesy of LTC Mike Davidson

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Contact Information

- LTC Amelia M. Duran-Stanton (amelia.m.duranstanton.mil@mail.mil)
- COL Amy L. Jackson (amy.l.jackson22.mil@mail.mil)
- LTC Mary “Janet” Coy (mary.j.coy2.mil@mail.mil)
- Maj Breanne Kormendy (breanne.m.kormendy.mil@mail.mil)