

VHA Office of Mental Health and Suicide Prevention (11MHSP)

Presentation to the VA Psychology Leadership Conference (VAPLC) May 2024



U.S. Department
of Veterans Affairs

OMHSP Mission & Vision

MISSION

- Our mission is to promote, protect and restore Veterans' mental health and overall well-being, to empower and equip them to achieve their life goals, and to provide quality, state-of-the-art care in a timely manner.
- Our Nation's Veterans are strong, capable and valuable members of society. It is imperative that we support their transition back into civilian life and provide continued support, as needed, over their lifetime.

VISION

- OMHSP strives to create a culture of excellence and innovation, so that every Veteran receives timely, state-of-the-art, Veteran-centered and recovery-oriented mental health and suicide prevention services.
- OMHSP is committed to developing and preserving a culture of diversity, equity, inclusion and acceptance for staff, creating a climate of respect, inclusivity, engagement and empowerment.



State of the Office

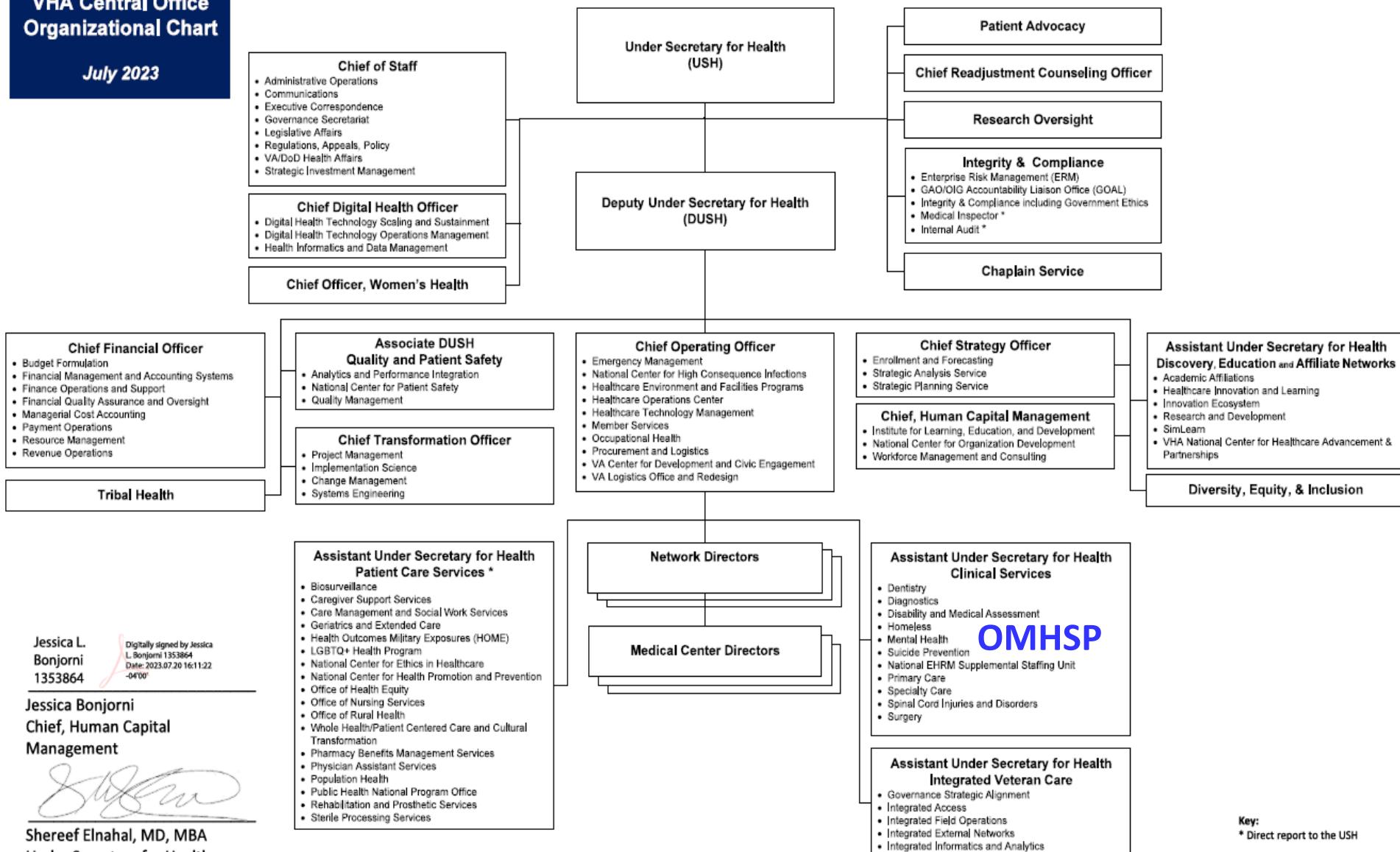
Goals for Today's Presentation:

- Provide an overview of our office's role and the scope of what we oversee.
- Share some data about the great work the field is doing.
- Provide insights into the competing demands of various congressional requirements and how we aim to support them as these are implemented.
- Share our strategic vision for what mental health care should be moving toward in the next 5-7 years (team-based care, stepped care, measurement-based care, self directed care, innovations).
- Share Psychology specific data



VHA Central Office Organizational Chart

July 2023



Key:



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FY24-27 Overarching Strategic Priorities

Each priority connects with the VA Health Care Priorities and the VHA Long Range Framework

1. Actively supports USH top priorities including promoting mental health, wellbeing and whole health; reducing overdoses; and preventing Veteran suicide.
2. Contributes to ensuring legislative obligations are executed within the scope of OMH functions across the Enterprise.
3. Expands stepped, team-based and integrated care across the continuum, with a focus on national Behavioral Health Interdisciplinary Program (BHIP) implementation and integration of mental health into medical settings.
4. Promotes implementation of evidence-informed innovative services, treatments, and technologies to advance mental health care.
5. Maximizes the full potential of the OMH team by fostering a culture of inclusion and supporting employee whole health and professional development.
6. Supports the field to balance initial and episode-of-care access and build mental health business operations and teams consistent with the quintuple aim of access, quality, patient & staff experience, cost, and health equity.



OMHSP Legislation & Responsibilities

OMHSP is responsible for coordinating and implementing Congressional legislation for Veterans mental health and suicide prevention services, programs, and research.

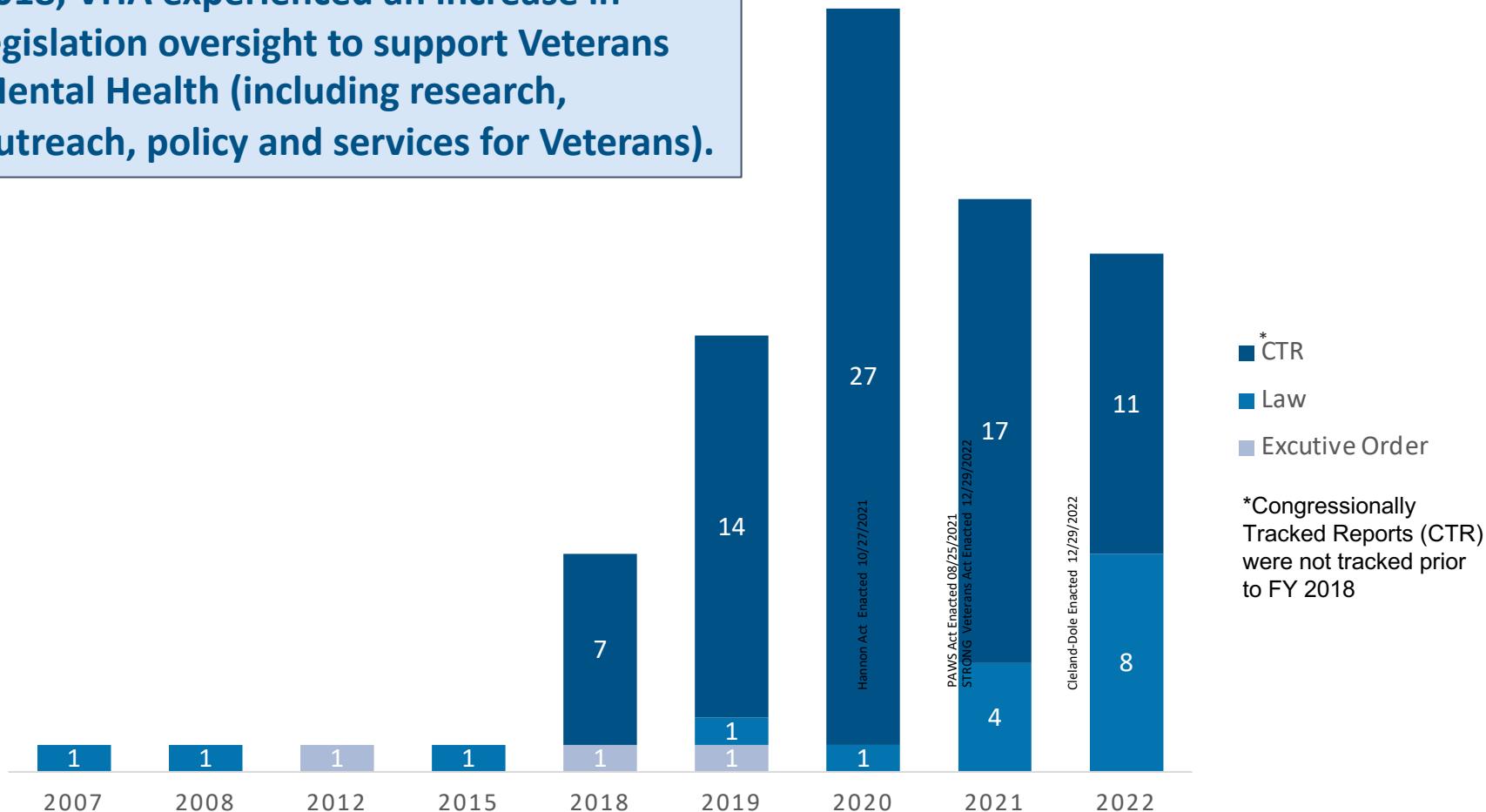
Subject matter experts within OMSHP provide consultation and support for the OMHSP Executive Leadership Team and other OMHSP leaders to maximize use of VHA policy, Congressional legislation and public/private partnerships to meet the ever-expanding needs of staff and Veterans.

Key functions include:

- Implementing all assigned Congressional Laws
- Serving as subject matter experts for Congressional hearings
- Preparing mandatory Congressional briefings and all supporting materials
- Providing written technical assistance for proposed Congressional bills and Executive Orders
- Responding to rapid Congressional actions related to OMHSP efforts
- Drafting legislative proposals for consideration by the Secretary of the VA
- Coordinating with multiple program offices across the VA to coordinate, collaborate and efficiently implement new laws
- Draft regulatory and policy documents for new laws, including all training and communications materials



Since 2007, Congress has emphasized the value of VHA's Mental Health program. In 2018, VHA experienced an increase in legislation oversight to support Veterans Mental Health (including research, outreach, policy and services for Veterans).



OMHSP: Legislative Impacts and Opportunities

Promote, protect and restore the well-being of Veterans by proactively connecting them to timely, state-of-the-art mental health care and suicide prevention services.

SUSTAINED TREATMENT

- Ketchum Act – RANGE – 3 Sites
- National Defense Authorization Act
- VA Peer Support Enhancement for Military Sexual Trauma Survivors Act
- Military Sexual Trauma Claims Coordination Act
- Dignity for Military Sexual Trauma Survivors Act
- PACT Act

RAPID ENGAGEMENT

- COMPACT Act 202 – Family Education
- Hannon Act Title 6 – Women Veterans
- Megabus Act – Coordinated Military Sexual Trauma Care
- National Defense Authorization Act of 2021 – Reserve Component
- Hannon Act Title 1 – Transition to VA Services
- Hannon Act Title 2 – Suicide Prevention



- Executive Order 13861 – National Roadmap To Empower Veterans and End Suicide
- Hannon Act Title 3 – Mental Health Programs, Studies, and Guidelines
- Hannon Act Title 7 – Other Matters

- Executive Order 13822 – Supporting Our Veterans During Their Transition From Uniformed Service to Civilian Life
- MISSION Act – Peers in PACTs
- PAWS Act

CRISIS SUPPORT

- Answer the Call (Veterans Crisis Line)
- 988 Expansion
- COMPACT Act 201 – Emergent Care
- COMPACT Act 204 – Comprehensive Assessment
- Support The Resiliency of Our Nation's Great Veterans Act of 2022

VHA ACCESS EXPECTATIONS

- **Crisis Access:** Immediate access for emergent/urgent mental health needs (i.e., needing immediate care)
- **Rapid Engagement Access:** Access to quickly initiate non-emergent mental health care (i.e., initiating care at the earliest possible date)
- **Sustained Access:** Access to provide the timely, full course of mental health treatment (i.e., scheduling weekly follow up for the duration of the treatment protocol)

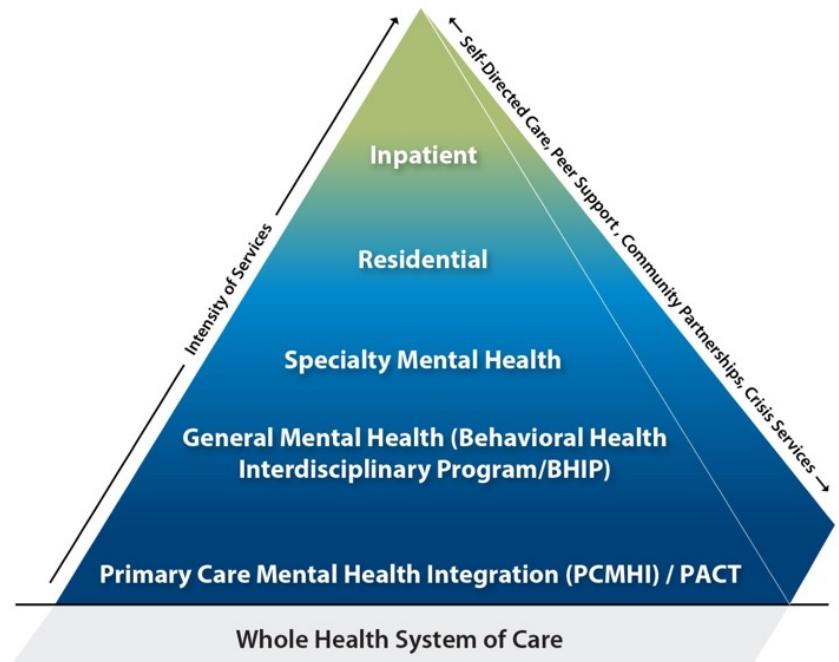
[Mental Health and Suicide Prevention Legislation \(sharepoint.com\)](https://sharepoint.com)



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Mental Health Continuum of Care

- Full range of inpatient, residential and outpatient specialty and general mental health services available in VA and community
- VHA services delivered across a continuum of care, ranging from self-help apps, to outpatient care, residential treatment, and acute inpatient programs
- Stepped-care model promotes mental health treatment at the least intensive level of care appropriate
- Transition between levels of care according to their Veteran needs
- Mental health integration into primary care
- Self-directed options such as mobile apps and online programming



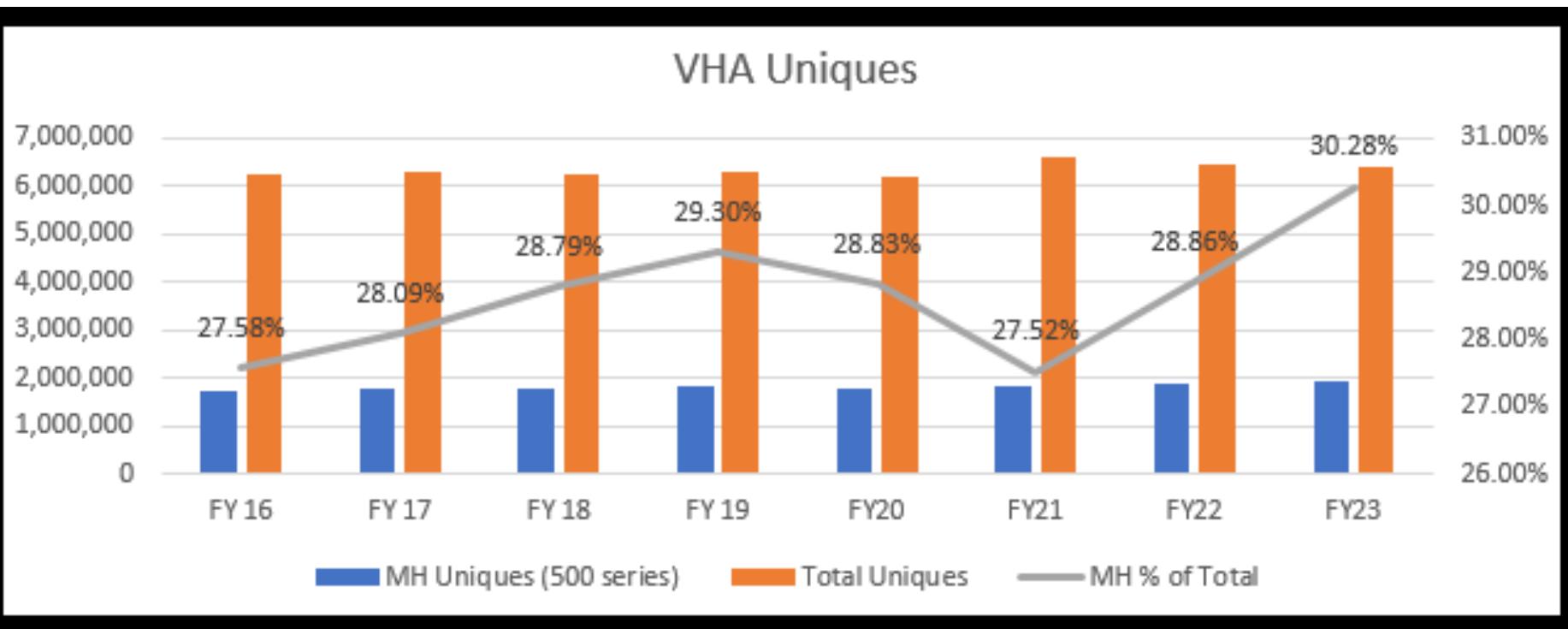
Mental Health System of Care

- Veterans seen by mental health have doubled since 2006, more than 3x the rate of overall VHA care (approx. 8% growth since FY16).
- Around 30% of enrolled Veterans engaged in VHA care receive some mental healthcare.
- No wrong door – make an appointment online, through app, by phone or walk-in

→ **Takeaway – Build systems under the assumption that 1 out of every 3 Veterans who enroll in VA care will require some mental health services in a given year.**



Growth in Demand for Mental Health Services



How Are We Doing? – Transparency Report Takeaways

- Demand for VHA mental health services is growing faster than patients using VHA.
- In FY 2023 1.967 million Veterans used mental health services.
- In FY 2023, more than 30% of all Veterans served by VHA received mental health services.
- Overall total staffing has increased, but has not kept pace with the growth in patients. This is reflected in a decline in the average encounters per patient.
- There is still variation in staffing at facilities: The average ratio of mental health outpatient clinical staff FTEs per 1,000 mental health patients seen in FY 2023 varied from a low of about five (5) staff FTEs to a high of about sixteen (16 FTE) per 1,000 patients.
- Data indicates that average wait times for new and established patients are trending up since 2017. Rates of access to psychotherapy have been declining on internal quality measures.
- Respondents to the Veterans Satisfaction Survey ($n = 27,949$ Veterans) in FY 2023 indicate they were generally satisfied with access to care.
- Respondents to the Mental Health Provider Survey (more than 13,000 providers) indicate challenges scheduling patients as frequently as indicated, especially for psychotherapy.



Overall Mental Health Staffing

	FY 2022	FY 2023	FY 2024 (March)	Net Change
	Onboard	Onboard	Onboard	
Clinical Pharmacist	24	27	27	0
LPN	690	827	869	42
LPN	1,288	1,287	1,255	-32
MFT	193	213	222	9
MSA	776	875	899	24
Peer Support	1,238	1,402	1,429	27
Physician Assistant	191	196	200	4
Psych Tech	414	372	372	0
Psychiatrist	3,398	3,490	3,515	25
Psychologist	6,567	6,920	7,157	237
Rec/Creative Arts Therapist	106	110	112	2
Registered Nurse	7,737	8,554	8,934	380
Social Worker	7,269	8,161	8,444	283
Total	29,891	32,434	33,435	1,001



May is Mental Health Month: Connecting Veterans With Care

OMHSP leads several mental health education and awareness efforts focused on three overarching goals:

- Reducing the stigma associated with mental health conditions.
- Increasing mental health literacy.
- Connecting Veterans with VA mental health care, including crisis intervention care.

These complementary, resource-driven campaigns aim to reach Veterans and their loved ones — wherever they are on their mental health journey.



MentalHealth.va.gov



Don't wait. Reach out.



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Mental Health and Psychology Staffing- What do the Numbers Tell Us?



FY24 VHA Shortage Occupation Report

FY2024 VHA Shortage Occupations Approved for Waiver of Veterans' Preference:

- a. Biomedical Engineer, 0858
- b. Diagnostic Radiologic Technologist, 0647
- c. General Engineering (Healthcare Engineer), 0801
- d. Medical Instrument Technician, 0649
- e. Medical Supply Aide and Technician (Sterile Processing), 0622
- f. Medical Support Assistant, 0679
- g. Medical Technician (Medical Laboratory Technician), 0645* (NOTE: Veterans' preference cannot be waived prior to the hybrid title 38 qualification standard for this occupation being published on October 6, 2023.)
- h. Medical Technologist, 0644
- i. Nursing Assistant, 0621
- j. Pharmacist, 0660
- k. Pharmacy Technician, 06
- l. Practical Nurse, 0620
- m. **Psychologist, 0180**
- n. Social Worker, 01



Psychologist Onboard

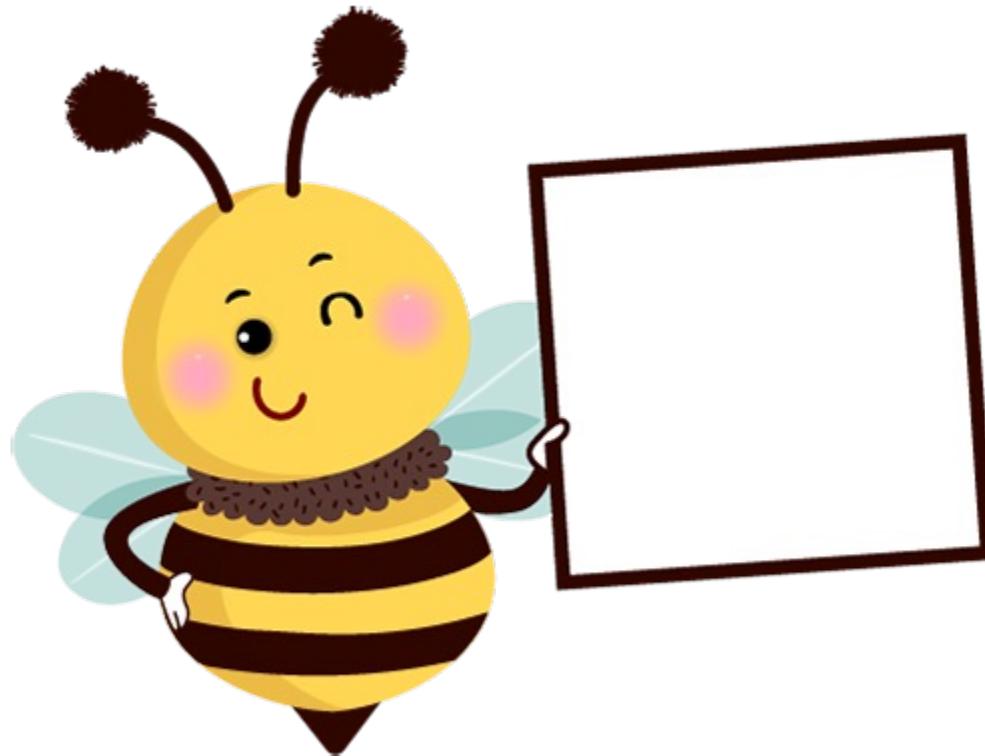


PSYCHOLOGISTS ON BOARD

Onboard Employee, Non-Trainees, 0180 Psychology													
Fiscal Year	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024 (Mar)	
Grade	GS-11	GS-11											
	139	97	97	91	88	100	129	142	125	164	192	187	
	GS-12	GS-12											
	281	272	334	345	315	342	393	454	436	425	450	447	
	GS-13	GS-13											
	3,802	4,004	4,230	4,398	4,474	4,582	4,647	4,721	4,761	4,787	4,933	5,090	
	GS-14	GS-14											
	282	333	367	386	478	552	682	765	867	971	1096	1168	
	GS-15	GS-15											
	97	97	103	103	106	121	140	170	189	213	243	259	
Total (GS11-15)	4,601	4,803	5,131	5,323	5,461	5,697	5,991	6,252	6,378	6,560	6,914	7,151	



OMHSP Psychology Initiatives



OMHSP Communication with Psychologists

- National Psychology Mailgroup
 - VHA OMHSP National Psychologists (mailgroup of mailgroups)
- Monthly Psychology Calls
 - Open to all psychologists in VA (including trainees)
 - Diversifying diversity presentations – Ariel Reid
 - OAA
 - VA Psychology Training Council (VAPTC) – Dr. Zoe Proctor-Weber
 - External Presentations
 - American Board of Professional Psychology (ABPP) – Natalie Heidelberg
 - American Psychological Association (APA) – Division 18 – Edgar Villareal
 - Association of VA Psychology Leaders (AVAPL) – Megan McCarthy
 - VA Psychology Leadership Conference (VAPLC) Chair – Kaily Clark



Psychology Training



OMHSP and Psychology Training

- VAPTC
 - Monthly calls (2nd Friday of the month at 2pm EST)
 - Welcome to new Trainees call (July and September)
- Internal Partnerships
 - Office of Academic Affiliations (OAA)
 - Workforce Management and Consulting
 - Health Professional Scholarship Program
- External Partnerships
 - Regular meetings with the Association of Psychology Postdoctoral and Internship Centers (APPIC), Association of State and Provincial Psychology Boards (ASPPB), and American Psychological Association (APA)



Compensation



Education Debt Reduction Program (EDRP) Psychology Recruitment and Retention

Data as of 3/31/2024

1,765 Active EDRP Participants are Psychologists. Of those, **264** were Newly Awarded EDRP as of Q2 FY 24. Average Award Amount is **\$135,063**

264 FY 24 Newly Awarded Psychologists as of 3/31/2024

1,765 FY 24 Q2 EDRP Active Psychologists as of 3/31/2024

■ Active Participants ■ Total Award



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QUESTIONS?

