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Effectiveness of the Implementation of Multidisciplinary Telehealth Services to Decrease Wait Times at the San Francisco VA Medical Center – CA

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Effectiveness of the Implementation of Multidisciplinary Telehealth Services to Decrease Wait Times at the San Francisco VA Medical Center – CA

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October 28, 2024

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Abstract

This study evaluates the effectiveness of implementing multidisciplinary telehealth services within the largest administration of the Department of Veterans Affairs (VA), the Veterans Health Administration (VHA), to decrease patient wait times. Wait times for healthcare services, particularly for mental health and specialized care, have been a persistent challenge affecting veterans' health outcomes, and the introduction of telehealth has been proposed as a strategic solution. This research employs a mixed-methods approach, combining quantitative data analysis of wait time records with qualitative interviews/surveys with healthcare providers and patients. The research focuses on key aspects of reducing wait times for post-telehealth implementation, patient satisfaction, and accessibility of telehealth technologies across multiple disciplines. The quantitative analysis involves a comparative assessment of wait times before and after telehealth integration, using statistical methods to ascertain significant differences. Qualitatively, the study captures feedback from both providers and veterans regarding their experiences and the perceived impact of telehealth on accessibility and quality of care.

This study provides critical insights into the scalability of telehealth services within the VHA and offers recommendations for optimizing telehealth practices to enhance healthcare delivery to veterans of the San Francisco VA Health Care System. The findings are expected to contribute to policy adjustments and operational strategies to improve the overall efficacy of the VA healthcare system in the San Francisco area.

Chapter 1: Introduction

Background

The Department of Veterans Affairs (VA) has long faced challenges in providing veterans with timely and efficient healthcare services. One of the most persistent issues is the long wait times for appointments and treatments and how an effective multidisciplinary telehealth program will address this shortcoming. This approach leverages modern technology to provide comprehensive care remotely, reducing wait times and improving access to healthcare services for veterans.

The United States Department of Veterans Affairs (VA), which encompasses the Veterans Health Administration, was created by Executive Order 5398, signed by President Herbert Hoover on July 21, 1930. At that time, there were 54 hospitals, 4.7 million living Veterans, and 31,600 employees (VA, 2024). While the VA has expanded significantly over the last 90 years, significant gaps remain in meeting our veterans' physical and emotional needs.

Veteran Affairs (VA) provides services in more than 170 medical centers and community-based outpatient clinics (CBOCs) nationwide. It remains in the news for its extensive wait times and short staffing (VA, 2024). Telehealth services is the new cutting-edge approach to meeting the needs of veterans nationwide.

The San Francisco VA Medical Center (VAMC) is no different from other VA medical systems that continue to experience significant staffing deficiencies, particularly in direct patient care roles. Concerns have been raised by employees, veteran patients, and union representatives about the impact of these shortages on the quality of care and the work environment. Challenges include high job stress, burnout, and difficulties in maintaining a sufficient number of qualified nursing staff. These issues have been exacerbated by competitive local job markets offering better salaries and working conditions, which makes it difficult for the VA to attract and retain staff. The situation has led to protests and calls for better management practices to address

staffing crises effectively.

Veterans with mental health ailments need timely health care access and the treatment necessary to help prevent long-lasting injury, displacement, or death by suicide. Approximately 22 veterans end their lives every day, making up over 20% of all suicides in the U.S. (SPRC, 2024). Providers in the San Francisco VA Health Care System are working to save lives through innovative approaches to suicide prevention. The San Francisco VA Health Care System must align with a multidisciplinary telehealth system that is fully staffed and operational to mitigate any health crisis, whether it be large or small.

The San Francisco VA Health Care system is considering implementing multidisciplinary telehealth services to significantly improve veterans' access to healthcare, especially those living in rural or underserved areas, and allow for a more integrated approach to healthcare. By bringing together professionals from various disciplines—such as primary care, mental health, and specialty services—veterans can receive comprehensive care that addresses multiple aspects of their health in a coordinated manner. This can lead to better health outcomes and a more personalized care experience. Additionally, telehealth can help reduce wait times and alleviate the burden on VA facilities by allowing healthcare providers to manage their caseloads more efficiently, leading to increased patient satisfaction.

From a public administration perspective, adopting telehealth services can serve as a model for other public health systems, showcasing how technology can improve service delivery and accessibility. It also provides a rich area for research and scholarship, offering insights into the effectiveness, challenges, and best practices of implementing telehealth in an extensive, complex healthcare system like the VA.

Problem Statement

The Department of Veterans Affairs (VA) has long been criticized for its inefficiencies in providing timely healthcare services to veterans. Historical issues such as underfunding, administrative bottlenecks, and a growing veteran population have exacerbated wait times for medical appointments. Veterans seeking healthcare often face significant delays, leading to adverse health outcomes and diminished trust in the VA system. This problem has garnered public and political attention, leading to calls for systemic reforms and improvements in service delivery. The San Francisco VAMC's utilization of a multidisciplinary telehealth system has struggled to gain traction since the COVID-19 pandemic. Currently, physicians, psychologists, and psychiatrists at the San Francisco VAMC are in a constant struggle to meet and speak with veterans in need of emergency services (mental health, specialist services, and regular appointments). Typically, veterans who need an appointment at the San Francisco VAMC are scheduled for an appointment with an average wait time of 29.7 or more days, which is entirely too long.

Problem Statement:

P1: The wait time for veterans using the San Francisco VA Health Care System is too long.

P2: Veterans' confidence in the healthcare system is low.

P3: The geographical reach of the San Francisco VA Health Care System does not serve the needs of more needy veterans.

Purpose of the Study

The primary problem this study addresses is the prolonged wait times experienced by veterans seeking medical care from the VA. This study aims to analyze the underlying causes of these delays, evaluate the effectiveness of current VA policies, and propose actionable solutions to reduce wait times. By identifying and addressing the root causes of inefficiencies, the study

aims to enhance the overall healthcare experience for veterans. The study will benefit not only the veterans who rely on timely medical care but also the VA administrators and policymakers tasked with improving service delivery. The need for a multidisciplinary telehealth system with 24-hour access will help to resolve many conflicts with scheduling, plus help to mitigate veteran drug use, suicide, and homelessness. The lack of available appointments and specialists to meet the needs of San Francisco VAMC veterans exacerbates many other integrated problems.

Significance of the Study

Implementing multidisciplinary telehealth services at the San Francisco Veterans Affairs Medical Center (VAMC) can significantly decrease veteran wait times and offer numerous benefits to stakeholders and the field of public administration scholarship by allowing veterans medical access to healthcare professionals from various disciplines without the need for in-person visits. This reduces the bottleneck of scheduling and travel, allowing for more timely consultations and follow-ups and facilitating quicker triage and prioritization of cases. Telehealth services can reach veterans in remote or underserved areas, leading to better health outcomes and increased satisfaction among veterans. Telehealth can reduce the costs associated with travel, facility use, and administrative overhead, plus offer more flexible working conditions and the ability to reach a broader patient base. Lastly, multidisciplinary telehealth services can provide a model for efficient healthcare delivery that can be scaled and adapted to other regions or populations.

Main Research Question and Sub-Questions

Main Question: The central question of the research study is:

How can implementing a multidisciplinary telehealth program decrease wait times, leveraging timely support at the San Francisco VA Health Care System?

Sub-Questions: The sub-questions of this quantitative research study are derived from the main question that follows:

Q 1: How can implementing a multidisciplinary telehealth program increase the quality of life for veterans?

Q 2: How can implementing a multidisciplinary telehealth program increase a veteran's faith in the healthcare system?

Q 3: How can implementing a multidisciplinary telehealth program increase veterans' deteriorating mental health conditions?

Theory of Change & Assumptions

The theory of change of this study applies the one-to-three formula, which represents one independent variable and three dependent variables, to prove or disprove the results of this study: IF, the San Francisco VA Health Care System implements a multidisciplinary telehealth program:

Assumption 1: The wait time for timely appointments will decrease by 75%, allowing vets timely care.

Assumption 2: The provided timely care will increase veterans' confidence and faith in the healthcare system.

Assumption 3: Telehealth services will be available to more needy veterans (homeless and displaced), increasing their geographical reach.

Limitations

The findings of this study are limited to the San Francisco VAMC. The other limitation of this study is dependent upon veterans' willingness to believe in higher quality care, along with accepting changes in how that care will be delivered (video calls, internet, software, handheld devices, etc.). Since all areas of the United States are unique by demographics, not all processes will work the same way or have the same outcome. The interviewer's presence or behavior can negatively impact the responses of the veterans and employees. Surveys often

suffer from low response rates, which can skew data, and MS TEAMS could cause technical difficulties for the interviewer and the interviewees/respondents.

Just like other humans, most veterans are resistant to change and being open to a multidisciplinary telehealth program will require buy-in and a commitment on the part of the veterans seeking health care. The San Francisco VAMC hovers in the lower percentile rankings for veteran wait times and changes must be made to reverse that trajectory.

Definition of Terms

San Francisco VAMC or VA Health Care System: is defined as the San Francisco Veterans Affairs Medical Center, where veterans are provided with necessary medical, physical, mental, and emotional health services.

Increase veterans' confidence and faith in the healthcare system: involves enhancing veterans' trust and belief in the quality, reliability, and accessibility of the healthcare services provided to them.

Telehealth: refers to the Department of Veterans Affairs' use of communication technologies to deliver healthcare service, facilitate communication, and support operations across the healthcare network.

Veteran: a man or woman who honorably served in the military in support of the country.

Multidisciplinary: Bring together a group of healthcare professionals from different fields to determine patients' treatment plans.

VA Wait Times: Average time it takes for a veteran to receive medical treatment from their primary care provider or a specialty physician.

Suicide: an act in which a veteran takes their own life or an act of killing oneself.

Mental Health Crisis: when a veteran is experiencing at that moment, such as depression, anxiety, trauma, and suicidal/homicidal ideology.

VAMC: Acronym for VA Medical Center

CBOCs: Community-Based Outpatient Clinics

Homelessness: A veteran does not have living arrangements but lives on someone's couch, on the street, or in a public shelter.

Substance Abuse: is the term used when a veteran is heavily dependent on drugs, alcohol, or both and will do almost anything to obtain the substance.

Chapter 2: Literature Review

Introduction

This research paper centers on existing literature on the history of long wait times with VA facilities around the country and how delayed treatment harms veterans. This literature review is expanded using three themes: a) Multidisciplinary telehealth programs impact on timeliness of care, b) Multidisciplinary telehealth programs impact on veteran's confidence in the healthcare system, and c) Multidisciplinary telehealth programs impact on broad reach to the most needy. Below is a summary of the research found to support the key themes of this study.

Theme 1: Multidisciplinary telehealth programs impact on timeliness of care

The first theme analyses how the San Francisco VA Health Care System's implementation of a multidisciplinary telehealth program could decrease wait times in obtaining timely appointments. This theme corresponds with the first assumption.

The United States Veteran's Health Administration (VHA) is the "most extensive integrated healthcare system, providing care at 1240 facilities, including 170 medical centers and 1061 outpatient sites of care of varying complexity (VHA outpatient clinics), serving nine million enrolled veterans each year (Fulton, 2018). The United States of America has constantly been at

war or involved in overseas conflicts, which has resulted in a crisis for those who have served in the armed forces. It is imperative to increase the availability of timely crisis intervention and mental health services for veterans who have served this nation (Hooper, 2023). The Department of Veterans Affairs (VA), and in particular, the San Francisco VA Health Care System, has faced significant backlash over long wait times and access to care for veteran servicemembers. One notable incident that has impacted the San Francisco VAMC and others involved the Phoenix VA Medical Center. Veterans at this facility were experiencing excessively long wait times for medical appointments, which resulted in numerous veteran deaths. Subsequent investigations revealed that Phoenix VA Medical Center employees had falsified appointment records and created secret wait lists to meet personal work performance metrics to receive annual bonuses. Investigations conducted by the VA Office of Inspector General (OIG) and Government Accountability Office revealed that the issues within the Phoenix VA Health Care System indicated broader systemic long wait time problems throughout the VA healthcare system. These issues have garnered widespread media attention, prompted investigations, and led to public outrage and calls for reform (Lopez, 2014). In response to this dilemma, the VA implemented a multidisciplinary telehealth program within the VA, which proved to be a comprehensive healthcare delivery model that utilizes telecommunication technologies to provide remote, coordinated care involving multiple healthcare specialties. This program aims to enhance the quality, accessibility, and efficiency of healthcare services for veterans by leveraging the expertise of various healthcare professionals who collaborate to address the diverse medical needs of patients. Furthermore, the San Francisco VAMC was placed in the middle of the storm, as their wait times were some of the lowest in the Pacific time zone. One of the biggest problems for a veteran is enduring the long wait times before being seen by their providers, which is a massive problem for those dealing with critical life-ending scenarios and the very preventable health problem of suicide. There has been a spike in suicides and substance abuse among veterans aged 18 to 34 (Hooper, 2023). The VA has boosted its technological

infrastructure after the COVID-19 pandemic to address expanding telehealth access for all VA patients. This telehealth expansion has created lasting telehealth solutions to improve access to care beyond the pandemic (Der-Martirosian, et al., 2021). This transition is paramount as the Department of Veterans Affairs Home Based Primary Care (HBPC) program continues to increase the in-home care to chronically ill geriatric veterans, who were marginalized during the COVID-19 pandemic because they could not be seen in person (Cheng, et al., 2020).

Implementing the home-based care delivery model has closed the gap in access to care by leaps and bounds.

Theme 2: Multidisciplinary telehealth programs impact on veteran's confidence in the healthcare system

The second theme looks at whether the implementation of a multidisciplinary telehealth program will provide the needed care that will benefit emotionally disturbed veterans.

This theme corresponds with the second assumption.

Prior to the COVID-19 pandemic, less than 5% of Americans received any health care through telehealth despite, in many cases, the technology being readily available (Shelton, et al., 2020). Since then, telehealth within the VA has become the default mode for providing health care for the body and mind of the veteran. In order to meet the needs and provide the intended access to care for emotionally disturbed veterans, the VA will have to continually improve its technology infrastructure (internet, telehealth platform, upgrade hardware, training, and education for staff, patient training, and support requirements for the VA Telehealth Program). The use of telehealth video visits during the COVID-19 pandemic reduced missed appointments, exhibited cost savings in VA travel reimbursement, and led to positive patient and provider satisfaction. By addressing these key areas, the VA will build a robust and effective telehealth program that has the unique ability to reduce wait times, improve access to care, and enhance the overall healthcare experience for veterans. It is important to note that when chronic pain is untreated or

undertreated, deleterious effects, such as functional limitation, physical disability, and psychological distress, can occur (Matthews, et al., 2022). This scenario will only exacerbate the emotional distress of veterans, which may lead to more severe health and mental disaster.

Within the Veterans Health Administration (VHA), mental health ED (emergency department) visits are the sixth most common reason for ED visits and the most common reason for interfacility transfers, comprising 41% of all VHA ED transfers. More than 11% of VHA ED transfers for mental health conditions are considered potentially avoidable and represent a preventable source of cost and psychological burden for patients and their families (Ward, et al., 2022). Many veterans have reported that the stigma of mental health assistance is minimized with the advent of telehealth phone and video services, which allows veterans to come forward for assistance rather than self-soothe or medicate. When even minor health concerns are avoided or not treated, they have the ability to grow and become problematic. For example, battle veterans who suffer from tinnitus must deal with obstacles in their daily functions, like communication, sleep, the ability to focus or concentrate, and varied mood swings (Clark, et al., 2024). This can lead veterans to develop severe depression and psychosis. The VA plans to expand telehealth to cover more specialties and services, increasing the range of care options available to veterans, including reimbursement for telehealth services. New technologies and innovations, such as artificial intelligence and advanced remote monitoring devices, are being incorporated. The VA's move towards a multidisciplinary telehealth program represents a significant shift in how healthcare is delivered to and accessed by veterans. The VA aims to improve access to care, reduce veteran wait times, and enhance the overall healthcare experience for veterans, ensuring they receive timely and high-quality services. Overall, VA healthcare providers, researchers, and the multidisciplinary telehealth teams who specialize in helping Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (Afghanistan) veterans will need to work together to gain a broader understanding of how the experience of war-related injury has affected our returning soldiers (Lew, et al., 2009).

Theme 3: Multidisciplinary telehealth programs impact on broad reach to the most needy

The third theme explains how to increase the geographical reach to veterans by implementing a multidisciplinary telehealth system.

This theme corresponds to the third assumption.

Telehealth has the potential to significantly enhance the geographical reach of healthcare services for the veteran population by overcoming distance barriers and providing in-home care. Veterans who reported receiving encouragement from their VHA care team members had nearly three times higher odds of using VHA apps than veterans who did not report receiving such encouragement. Evidence suggests that the endorsement of apps by a healthcare system or healthcare team will positively impact patient uptake and use (Hogan, et al., 2022). Veterans will receive medical consultations, follow-up appointments, and mental health support from the comfort of their homes, thus reducing travel time and associated costs. This will significantly reduce appointment wait times, permit veterans to receive care unavailable locally, and obtain consultation from multidisciplinary telehealth teams regardless of their physical location. Telehealth offers a regularly scheduled session that is a discrete and confidential way for veterans to seek mental health services, which will be especially important for those who may be hesitant to seek help in person. By leveraging telehealth, the VA will extend its reach to a broader geographical area, ensuring that all veterans, regardless of their location, have access to high-quality healthcare services. This approach not only improves accessibility but also enhances the overall efficiency and effectiveness of the VA healthcare system. In a study examining travel distances to healthcare for Veterans in the United States, over half of the enrollees in the Veterans Health Administration (VHA) traveled more than 25 miles; a majority of Veteran enrollees (58%) reside in rural areas. For rural Veterans with disabilities who may face physical, cognitive, or emotional obstacles to access needed rehabilitation, geographic barriers and the multiple visits frequently required further magnify the challenge. (Hale-

Gallardo, et al., 2020). The VA has expanded its telehealth to ensure telerehabilitation, allowing veterans to obtain face-to-face rehab and removing the time and pain of traveling long distances for health care. It has been noted that VA-issued tablets have dramatically expanded video visits from older veterans and unstably housed who would not have access without distributing such devices (Dhanani, et al., 2023). During and post the COVID-19 pandemic, it was discovered that most veterans (81.5%) own smartphones, and those veterans with higher education, a more significant number of adverse childhood experiences, higher extraversion, and greater severity of pandemic-related posttraumatic stress disorder symptoms were more likely to download COVID Coach. COVID Coach is a tool to track one's mental health, manage stress, and obtain support when necessary (Jaworski, et al., 2022). Although older veterans might have more difficulty navigating smartphones and other devices than younger veterans, they are open to integrating technology into their mental health care through improved training and simplified app designs (Connolly, et al., 2018).

Chapter III: Research Methods

Introduction

This research explores the effects of the San Francisco VAMC's challenges in implementing a multidisciplinary telehealth program to reduce veteran wait times for healthcare appointments. This study applies the mixed-methods research (MMR) approach to data collection, as the quantitative data will be collected through short surveys of 100 staff members, physicians, and veterans attending their primary appointments within the San Francisco VAMC. The qualitative data will be gathered through six in-depth interviews after the short survey to obtain first-hand experiences and determine if this implementation would help benefit area veterans. Utilizing both research methods will provide a more in-depth description of how to best meet the needs of the area veterans.

Research Questions

1. Can a multidisciplinary telehealth program reduce wait times for veterans seeking care?
2. Will a multidisciplinary telehealth program increase veteran's confidence in the healthcare system?
3. Will a multidisciplinary telehealth program increase the geographical reach of the San Francisco VA Health Care System increasing availability to more needy veterans?

Theory of Change

Decreasing wait times by providing timely care to local veterans will allow all affected parties to focus on their healthcare and recovery, which will enhance the overall effectiveness of the San Francisco VA Health Care System. The research assumption is: IF, the San Francisco VA Health Care System implements expanded multidisciplinary telehealth services:

Assumption 1: The wait time for timely appointments will decrease by 75%, allowing vets timely care.

Assumption 2: The provided timely care will increase veterans' confidence and faith in the healthcare system.

Assumption 3: Telehealth services will be available to more needy veterans (homeless and displaced), increasing their geographical reach

Operational Definitions

The Department of Veteran Affairs utilizes numerous acronyms and abbreviations to identify their programs, benefits, and facilities.

A veteran service provider – refers to an employee who is currently undergoing training to provide service to veterans (i.e., Mental health professionals)

Mental health issues/disorders – Mental health issues and disorders encompass a range of conditions that affect a person's emotional and psychological well-being.

Population Sampling Strategy and Procedures

This research study will employ a purposive sampling strategy. This strategy was selected to identify individuals or groups that are exceptionally knowledgeable about or experienced with dealing with the San Francisco VA Health Care System's medical services. The purpose is to obtain understanding and insight into the issue rather than seek out feedback from a larger and more uniform demographic. This method has proven useful when studying specific concerns or circumstances where random sampling might not be feasible or practical. The population targeted for the surveys will be comprised of military veterans and current VA healthcare employees. Interviews will be conducted with healthcare service providers currently working at or have worked at the San Francisco VA Health Care System. The interviewees will be picked based on their ability to provide their unique perspectives and individual experiences to the research study. Obtaining survey and interview feedback from these veterans will allow the study to be more complete and contribute the wait time resolution. This approach will significantly help to validate the aggregate data and provide a solid foundation for the research study and conclusion.

Procedures

The research procedures for this study will require a multi-step approach to gather the necessary quantitative and qualitative aggregate data. An efficient literature review ensured that the interview questions aligned with current data. A purposive sampling strategy was implemented to select the best veterans and subject matter experts for the one-to-one interview. If necessary, specific actions were taken to ensure the data-gathering process could be replicated: Face-to-face interviews were conducted with a target of 10 veterans, with six veteran healthcare service providers on TEAMS having accepted the interview. Each interview utilized structured questions for better consistency. A survey targeting 150 veterans was deployed online via social media (Facebook), Microsoft Outlook, and Microsoft TEAMS, with 100 veterans/VA healthcare workers accepting the interview/survey.

Data Processing and Analysis

The questionnaires and survey tools will be utilized to poll and draw out feedback from area veterans and employees of the San Francisco VAMC. All of the data will be analyzed and processed to ensure the main research question regarding the implementation of a multidisciplinary telehealth program and whether it will significantly reduce veteran wait times will be validated. Survey Monkey will allow data analysis to be retrieved via graphs and charts and provide percentages. The one-to-one interviews will assist with deriving meaningful insights that will be infused along with the statistics.

Internal and External Validity

The research study's validity will be assessed utilizing the assumptions within the theory of change. Should most participants agree that multidisciplinary telehealth programs reduce their wait times and improve their quality of care, that study will be considered high. However, in retrospect, if the feedback is the opposite, the internal study will be considered low.

Summary

In conclusion, as stated previously, this study highlighted the seriousness of VA wait times and their impact on veterans at the San Francisco VA Health Care System. Through the expansion of multidisciplinary telehealth services, local veterans will be able to have their medical needs met promptly and live much better lives.

Chapter IV Results and Findings

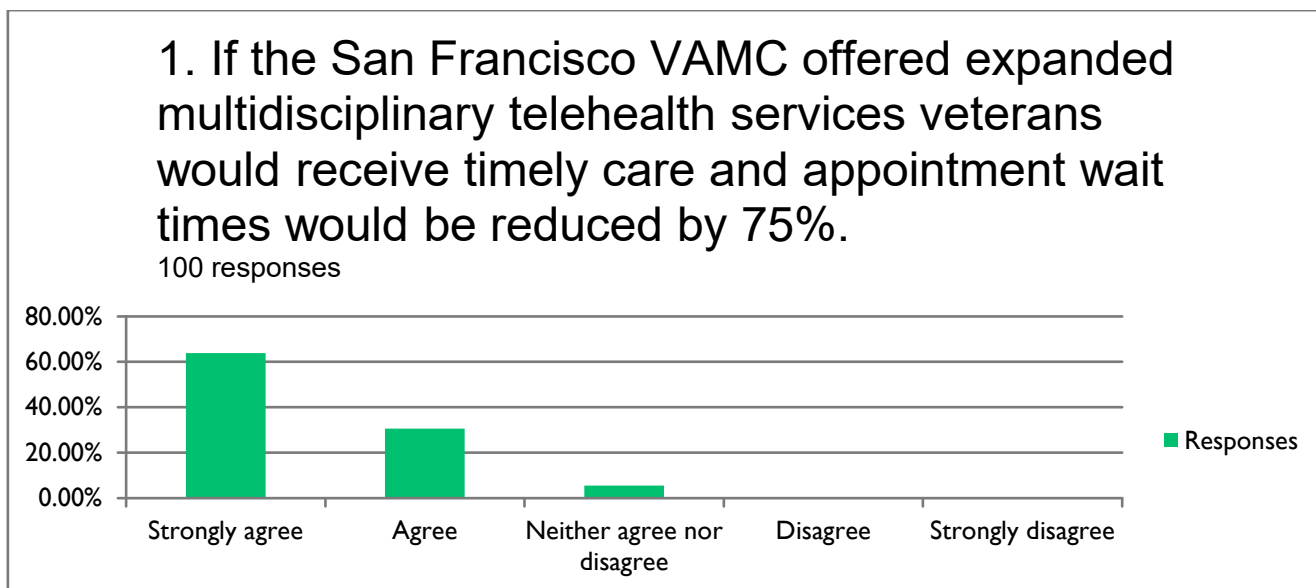
This is an analysis of the surveys and interviews to test the research hypothesis. 100 veterans and subject matter experts (health service providers/professionals) completed the online survey, and six subject matter experts with military experience completed the one-on-one interviews. The interview questions and responses, along with the survey questions and responses, provide a detailed analysis of the aggregate collected data.

Assumption 1 (A1)

If the San Francisco VAMC offered multidisciplinary telehealth services, veterans would receive

timely care, and appointment wait times would be reduced by 75%.

Quantitative Results from Survey Question #1



The Survey Monkey results show that most of the respondents, 94.45 %, strongly agreed or agreed that adding multidisciplinary telehealth services to veterans' appointments would significantly reduce wait times. While only 5.56% of the respondents neither agreed nor disagreed.

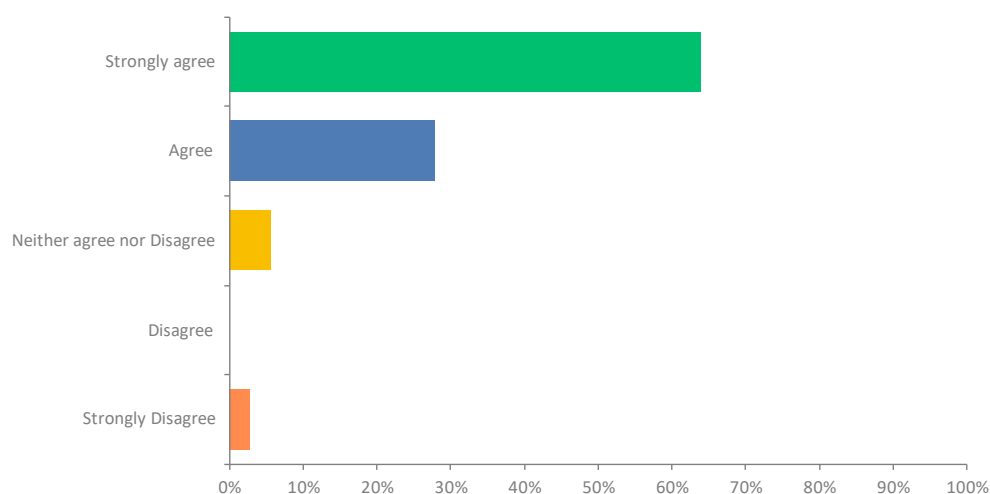
Qualitative Results From Interview Question #1

Would adding expanded multidisciplinary telehealth services to veterans reduce veteran wait times significantly at the San Francisco VA Health Care System?

6 responses

Q1: Would adding expanded multidisciplinary telehealth services to veterans reduce veteran wait times significantly at the San Francisco VA Health Care System?

Answered: 6 Skipped: 0



Powered by  SurveyMonkey

The interview results supported the impact of implementing expanded multidisciplinary telehealth services to veterans to reduce wait times. A noteworthy remark such as "Obtaining timely appointments with my medical provider will reduce my stresses and allow my sometimes-turbulent life to land softly." (Richard Hodge, VA Health professional and veteran)

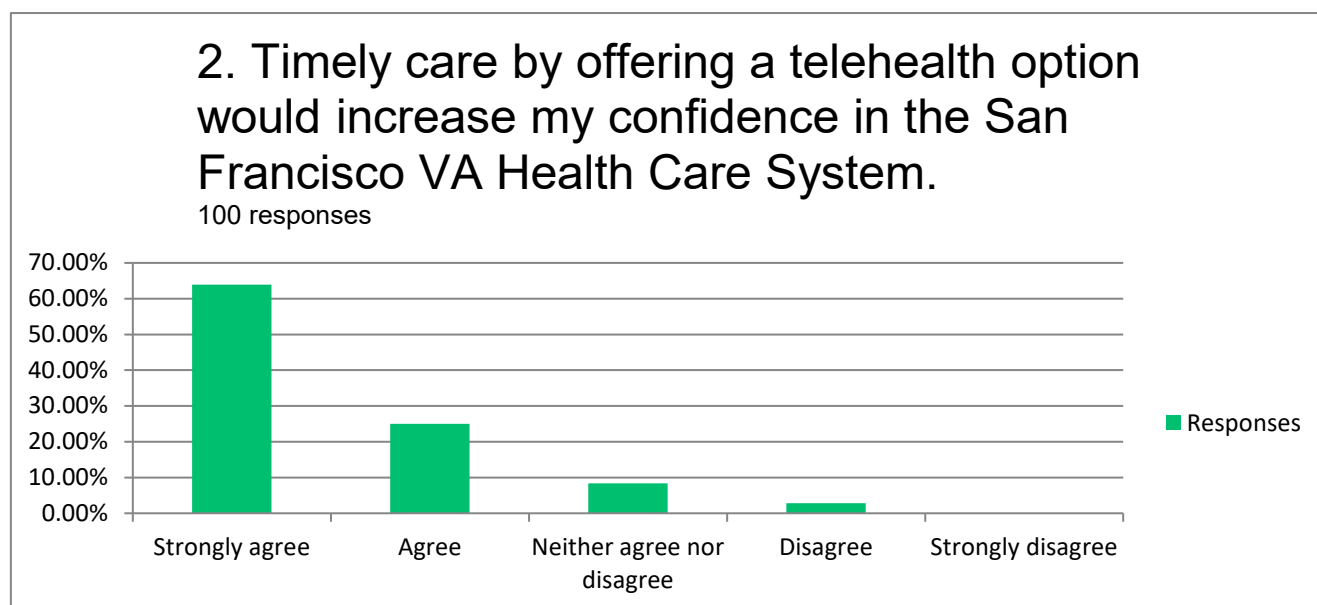
Over 90% of the interviewees strongly agree or agree that expanding telehealth services for San Francisco VA Health Care veterans will reduce veteran wait times. Only 5% neither agreed nor disagreed, and 3% disagreed. Several respondents strongly supported implementing multidisciplinary telehealth services for local veterans during one-to-one interviews. For example, Brittany remarked, "The pandemic, although a terrible time for the country, forced everyone to shift the paradigm on how we meet the needs of our maligned veterans." We have real-time data that proves providers have the tools, software, and outreach support to meet the needs of veterans wherever they reside.

The interviews revealed a firm conviction that multidisciplinary telehealth services would significantly reduce veteran wait times and ensure veterans in need obtain care before their affliction worsens. These findings align with existing literature because public and veteran outcry has long been

in the media, with little headway toward resolution until recently. The quantitative and qualitative data indicate that implementing multidisciplinary telehealth services at the San Francisco VAMC would substantially decrease veteran appointment wait times.

Assumption 2 (A2)

Timely care by offering a telehealth option would increase my confidence in the San Francisco VA Health Care System.



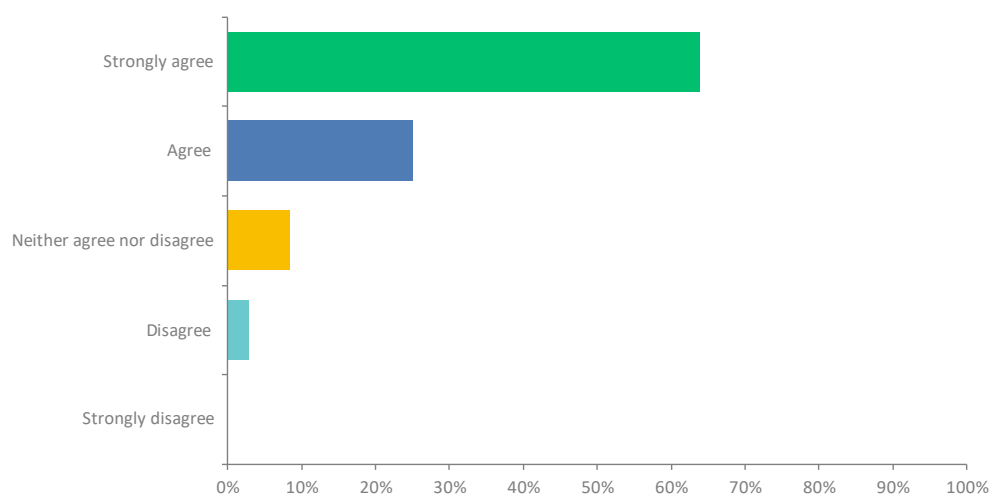
The Survey Monkey results reflect that 88.89% of respondents strongly agree or agree that timely care for local veterans would increase their confidence in utilizing the San Francisco VA Health Care System for their medical needs. While 8.33% of respondents neither agree, disagree, or strongly disagree, most agree that having telehealth as a medical option would benefit them and increase their confidence in their local VA Medical Center.

Qualitative Results From Interview Question #2

Timely care by offering a telehealth option would increase my confidence in the San Francisco VA Health Care System.

Q2: Timely care by offering a telehealth option would increase my confidence in the San Francisco VA Health Care System.

Answered: 6 Skipped: 0



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Over 90% of the interviewees strongly agree or agree that timely health care would increase their confidence in the San Francisco VA Health Care System. Only 6% neither agreed nor disagreed, and 3% disagreed. The interview results supported the impact of providing timely care to veterans by offering telehealth services, which would increase their confidence in the San Francisco VA Health Care System. A noteworthy remark such as "Treyvon admitted that "Telehealth eliminates some obstacles by providing a convenient and flexible option for consultations, follow-ups, and therapy sessions, allowing Veterans to receive timely and appropriate care from the comfort of their homes." Larry remarked that he could trust the VA more because he sees the effort in meeting the medical needs of veterans like him when they require timely care."

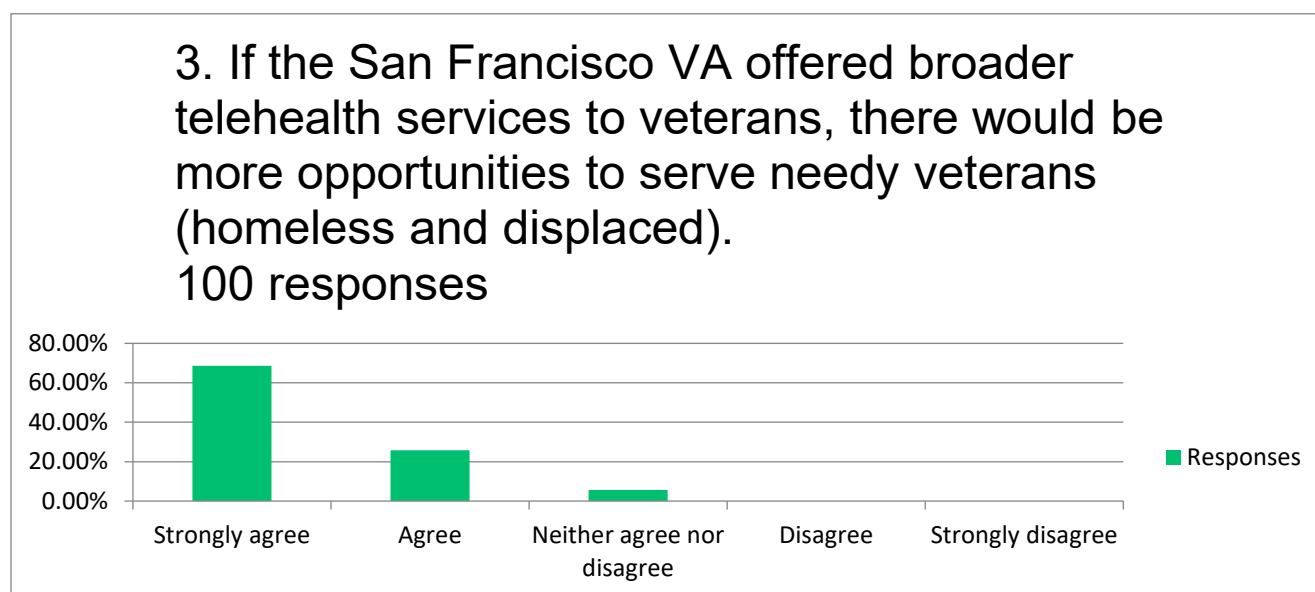
These responses highlight the qualitative findings in the literature, which reflect the sentiment that there are no excuses for veterans to suffer due to not receiving timely care at the VA. Since the pandemic started, technology has been created, mindsets have been changed, and more veterans are open to alternative options for timely medical care, thus reducing wait times.

The interviews revealed a firm conviction that timely medical care through telehealth would increase veterans' confidence in the San Francisco VA Health Care System.

Assumption 3 (A3)

If the San Francisco VA offered broader telehealth services to veterans, there would be more opportunities to serve needy veterans (homeless and displaced).

Quantitative Results from Survey Question #3



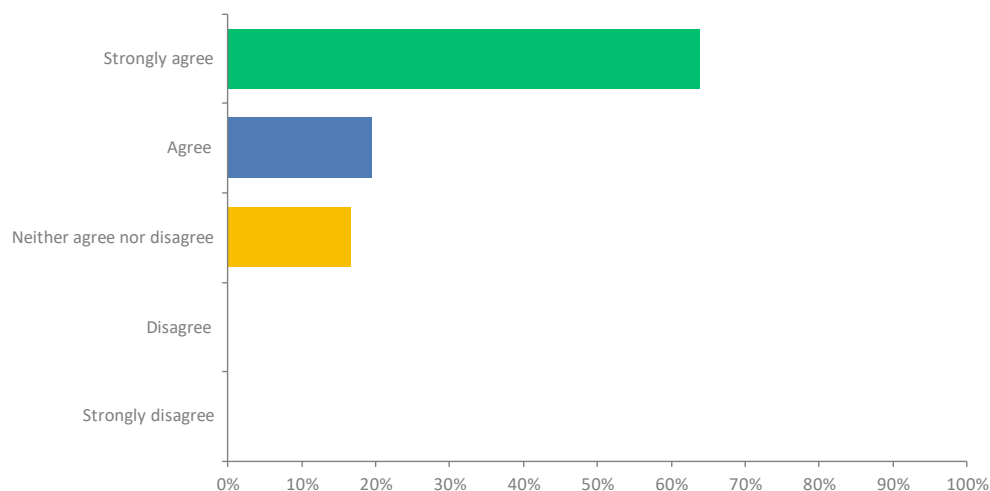
The Survey Monkey results reflect that 94.28% of respondents agreed that the San Francisco VA's telehealth services to remote or displaced veterans would offer them more access to services regardless of where they live or if they have transportation. A small portion of respondents (5.7%) remained neutral, reflecting that they may not have any connections with not having transportation, being displaced, or living in a remote area from the medical facility.

Qualitative Results From Interview Question #3

If the San Francisco VA offered broader telehealth services to veterans, there would be more opportunities to serve needy veterans (homeless and displaced).

Q3: If the San Francisco VA offered broader telehealth services to veterans, there would be more opportunities to serve needy veterans (homeless and displaced).

Answered: 100 Skipped: 0



Powered by  SurveyMonkey

Almost 81% of the interviewees strongly agree or agree that with broader telehealth services to local veterans, there would be more opportunities to serve the displaced, remote, or homeless area veterans. 19% neither agreed nor disagreed. The interview results supported the impact of the San Francisco VA Health Care System broadening its outreach to veterans in need to bring about positive changes in their medical care.

The interview results supported the impact that if the San Francisco VA Health Care System provided broader telehealth services to local veterans, there would be a more significant increase in care for those veterans who are homeless, displaced, or reside in rural areas.

These responses highlight the qualitative findings in the literature, which clearly show that efforts to reach those veterans who do not reside close to the medical facility or are displaced or homeless will significantly benefit from telehealth services.

The interviews revealed a direct connection between the San Francisco VA Health Care System's commitment to broader outreach and the positive impact on all veterans in which they serve.

Tiffanee (an Air Force veteran who served during Desert Storm) stated that she resided over two

hours away from the medical facility and welcomed the offering of telehealth services for veterans like her. She declared, “Telehealth services represent a transformative opportunity for remote or displaced Veterans, significantly enhancing their access to essential healthcare.” For many of these local veterans, like Ashley (Air Force veteran), geographical barriers and the lack of available transportation can hinder their ability to attend in-person appointments. This limitation can result in delayed treatments or a complete lack of access to necessary medical care, leading to deteriorating health conditions. By offering telehealth services, Veterans can engage with healthcare providers from the comfort of their homes, allowing them to receive timely consultations, follow-ups, and therapies without travel constraints. Additionally, telehealth can bridge the gap between Veterans and specialized care that may be far from their residence. Ashley stated, “Many veterans like her may require specialized mental health services or physical rehabilitation, which could involve lengthy trips and significant time commitments under traditional healthcare models.” With telehealth, they can easily connect with specialists who understand their unique needs and experiences while alleviating the stress and burden associated with travel. This access encourages more consistent and proactive healthcare management and fosters community and support among veterans who might otherwise feel isolated. Integrating telehealth services into the care model for displaced and remote Veterans can revolutionize their healthcare experience. It empowers them to prioritize their health without the added strain of logistics while promoting a more equitable system where all Veterans receive the comprehensive care they deserve regardless of location. These two respondents both recognize the importance of telehealth services to veterans and how they are vital in the long road to recovery.

Summary

The research and aggregate data from the one-on-one interviews and Survey Monkey surveys highlight the importance of decreasing veteran wait times at the San Francisco VA Health Care System. Even

though this issue has been well-known for decades, we have only seen minimal advances in implementing telehealth service care for local veterans. While processes are improving, personnel are being hired at a significantly higher rate, and more veterans are taking advantage of the multidisciplinary telehealth programs, more advancements and efforts are needed.

Chapter 5 Conclusions and Recommendations

The survey, which included 100 subject matter experts, VA healthcare professionals/providers, and veterans, strongly supported the hypothesis that decreasing VA wait times at the San Francisco VA Health Care System will hugely positively impact local veterans' welfare. Expressly, over 90.% of respondents agreed that implementing multidisciplinary telehealth services would significantly reduce wait times and deter veterans who may need to self-medicate or self-harm to deal with their issues. Over 90% believed receiving timely telehealth care would increase their confidence in the San Francisco VA Health Care System, which, in some cases, directly correlates to earning potential, employment opportunities, housing options, and relationships. Furthermore, 81% of respondents felt that if the San Francisco VA Health Care System committed to broader telehealth outreach, the veterans who need care the most will significantly benefit from short-term and long-term health stability.

Interviews with six subject matter experts fortified these survey findings, emphasizing the significance of implementing multidisciplinary telehealth services to decrease veteran wait times. A significant majority (90%) of interviewees agreed that multidisciplinary telehealth services provide options for all veterans to be seen and diagnosed faster in order to receive care. Additionally, over 90% of experts recognized the benefits of timely care and how being seen by the medical provider increases a veteran's confidence in the medical process and the San Francisco VA Health Care System.

These findings validate the theory of change and suggest that Medical Center leadership, subject matter experts, and healthcare professionals at the San Francisco VA Health Care System should prioritize expanding multidisciplinary telehealth services for their veteran constituents. The

collected data significantly reflects that by doing so, the benefits outweigh any risk, and the expansion of telehealth services is what their customers desire.

Recommendations

Based on the findings of this research, the following recommendations are proposed for policymakers at the San Francisco VA Health Care System to implement the most sustainable, effective, and impactful changes:

Recommendations

The San Francisco VA Health Care System should:

Establish a policy to ensure veterans are provided extensive access to telehealth services, processes, and updated technology. Implement concentrated outreach efforts to displaced, remote, rural, and homeless veterans. Establish a policy to ensure veterans (new enrollees or returning patients) are seen within 20 days.

The San Francisco VA Health Care System should:

Hire more healthcare professionals to help manage the patient load. Implement advanced scheduling systems and telehealth services. Conduct workflow analyses to identify bottlenecks and inefficiencies. Allowing veterans to access community-provider care when VA facilities are overburdened. Establish secure systems for veterans to provide honest feedback/experiences.

Future Research Suggestions

Future research should focus on several key areas to address veteran wait times more effectively by implementing multidisciplinary telehealth services. Investigate the effectiveness and efficiency of telehealth services in reducing wait times, especially for veterans in rural or underserved areas. Study the impact of reallocating resources, such as staff and funding, to high-demand or rural areas or services to see if it reduces wait times. Examine the potential benefits of implementing more advanced scheduling systems or algorithms that optimize appointments. Research the effectiveness of integrated care models that combine physical, mental, and social health services in one location to streamline care and reduce wait times.

Explore the development of real-time feedback systems from veterans to promptly identify and address wait time issues. These areas are vital for developing comprehensive strategies to combat veteran wait times at the San Francisco VA Health Care System.

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Appendix A: Quantitative Data Collection Instrument

Survey Questions

1. If the San Francisco VAMC offered multidisciplinary telehealth services veteran's would receive timely care and appointment wait times would be reduced by 75%.

- **Strongly disagree**
- **Disagree**
- **Neutral**
- **Agree**
- **Strongly agree**

2. Timely care by offering a telehealth option would increase my confidence in the San Francisco VA Health Care System.

- **Strongly disagree**
- **Disagree**
- **Neutral**
- **Agree**
- **Strongly agree**

3. If the San Francisco VA offered broader telehealth services to veterans, there would be more opportunities to serve needy veterans (homeless and displaced).

- **Strongly disagree**
- **Disagree**
- **Neutral**
- **Agree**
- **Strongly agree**

Appendix B: Qualitative Data Collection Instrument

Would adding expanded multidisciplinary telehealth services to veterans reduce veteran wait times significantly at the San Francisco VA Health Care System?

Please explain in detail...

Based on your observation or experience, would timely care by offering a telehealth option increase your confidence in the San Francisco VA Health Care System?

If the San Francisco VA offered multidisciplinary telehealth services to veterans, appointment wait times would be reduced.

Please explain in detail...