A SHARED DEFINITION OF HIGH-QUALITY CARE CAN HELP VETERANS COMBAT INVISIBLE WOUNDS
Sometimes referred to as “invisible wounds,” symptoms of posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI) can endure long after military service concludes and can have a significant negative impact on veterans and their families. Yet, many veterans have difficulty accessing high-quality care for these conditions.

The Veteran Wellness Alliance, an initiative of the George W. Bush Institute, is a coalition of seven veteran peer network organizations and nine clinical provider organizations that aims to improve access to high-quality care for post-9/11 veterans with PTSD and TBI. To be successful in this mission, and to better support the broader veteran-serving community, alliance partners require a shared definition of high-quality care for these conditions.

**Components of High-Quality Care for Veterans with PTSD and TBI**

A literature review and semi-structured interviews with Veteran Wellness Alliance partners highlighted standards that can serve as a foundation for efforts to develop a definition of high-quality care for veterans with PTSD and TBI.

Operationalizing this definition and improving care for veterans will require common metrics drawing on a variety of data sources to provide a comprehensive picture of veterans’ needs, experiences, treatment progress, and outcomes. Veteran Wellness Alliance partners already practice aspects of high-quality care, but a shared definition would help improve coordination and could serve as a model for the treatment of PTSD and TBI.

**VETERAN-CENTERED CARE**

Similar to the traditional health care model of patient-centered care, the goal of veteran-centered care is to provide effective and timely treatment that addresses the unique needs, values, and preferences of veterans. Providing veteran-centered care requires health care providers to be familiar with veteran culture and identity, the implications of military service, and the needs of diverse populations of veterans—a concept known as cultural competence.

Veteran-centered care requires ongoing assessment of veterans’ satisfaction with their care, their perceived ability to access care, their perceptions about provider communication, and other aspects of their care experience. Veterans should also be involved in treatment decisions. Ideally, there will be a protocol for shared decisionmaking. Finally, treatment decisions should include family members and caregivers, according to the veteran’s preferences.

**ACCESSIBILITY**

High-quality care is both accessible and timely. Veterans should not have to wait long to obtain the care they need. Furthermore, programs that provide high-quality care work to address and reduce or eliminate geographic, financial, sociocultural, and other barriers. Providing flexible payment options, transportation and lodging, and flexible scheduling can expand access to care for veterans.
EVIDENCE-BASED CARE

High-quality care is based on the best available research evidence and adheres to clinical practice guidelines. Best available research evidence refers to scientific findings related to interventions, assessments, clinical problems, and patient populations in both laboratory and field settings, as well as clinically relevant results from basic research.

Evidence-based care begins with a comprehensive assessment to inform treatment. The research evidence strongly supports trauma-focused psychotherapy for veterans with PTSD, such as prolonged exposure, cognitive processing therapy, eye movement desensitization and reprocessing, or cognitive behavioral therapy. Veterans with TBI symptoms should receive coordinated treatment from a multidisciplinary team that includes neurology, physical therapy, neuropsychiatry, and other specialties. Appropriate screenings should be administered as needed to assess risk factors, such as suicidality and substance use. Evidence-based care also involves coordination across a veteran’s health care providers to ensure treatment continuity.

OUTCOME MONITORING

High-quality care promotes the use of validated measurement tools, such as symptom rating scales, to assess and monitor clinical outcomes, guide treatment decisions, and facilitate coordination. It is also important to monitor the effects of treatment on veterans’ well-being, including day-to-day functioning, relationships, and life satisfaction.

Defining High-Quality Care for Invisible Wounds

Components of veteran-centered care
- Cultural competence: an understanding of military and veteran culture, as well as veterans’ experiences and identity
- Ongoing assessment of veterans’ care experiences
- Shared decisionmaking between the veteran and provider
- Family/caregiver involvement in care, according to the veteran’s preferences

Components of accessibility
- Timely access to care
- Reduced geographic, financial, sociocultural, and other barriers

Components of evidence-based care
- Treatments and practices that are backed by the best available research, adhere to clinical practice guidelines, and are modified and improved in response to new evidence
- Comprehensive clinical and diagnostic assessment
- Trauma-focused psychotherapy for PTSD
- Multidisciplinary team-based treatment for TBI
- Appropriate screenings for risk factors
- Care coordination and treatment planning across veteran’s health care providers

Components of outcome monitoring
- Use of validated instruments to assess clinical outcomes, guide treatment decisions, and facilitate care coordination
- Regular assessment of veteran well-being and functioning
Recommendations and Considerations for Operationalizing a Shared Definition of High-Quality Care

The Veterans Wellness Alliance has an opportunity to set the standard for high-quality care. Next steps should focus on developing measures to align with the high-quality care definition, determining the best path for collecting and sharing data on care quality, and disseminating the definition and measures across the veteran-serving community.

Assess data availability and reporting feasibility
• Identify potential measures of high-quality care.
• Determine whether programs can collect and report the necessary data.

Implement the definition and associated measures
• Determine how often programs should report on care quality, how new partners can demonstrate that they provide high-quality care, and whether reporting will be required or voluntary.
• Develop a plan to share quality data with partner organizations, veterans and their families, and the public.

Disseminate the definition, setting the standard for high-quality care for invisible wounds
• Work with peer network partners to engage with stakeholders and promote a shared definition of high-quality care among other veteran-serving organizations.
• Collaborate with clinical providers on quality improvement initiatives that could benefit veterans.