The Non-Veteran Experience at Veterans Affairs Medical Centers During the COVID-19 Pandemic: a Survey-Based Study



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INTRODUCTION

In April 2020, the VA Ann Arbor Healthcare System (AAVA) and the VA Detroit Medical Center (DVA) began caring for non-Veteran patients in the midst of the COVID-19 pandemic, 1,2 subsequently caring for the second and third most non-Veteran patients in the nation, respectively. In a first-of-its-kind study, we sought to understand non-Veteran perceptions of the quality of care provided at VA medical centers.

METHODS

Patients were transferred to the AAVA or DVA from southeast Michigan hospitals that had no additional bed capacity, without differentiation for patient acuity or COVID status. These patients were contacted by a trained nurse within 2 weeks of hospital discharge via telephone to complete a 13-question survey about their experiences. Exclusion criteria were death during the hospitalization, discharge to hospice, diagnosis of dementia, rehospitalization within the follow-up period, or non-response to follow-up calls. We called patients three times prior to exclusion.

Patient data were aggregated to identify opportunities for improvement across both VA hospitals. Descriptive statistics (means, percentages) and standard deviation (SD) were used to tabulate survey responses. Bivariate comparisons were assessed using Fisher's exact and logistic regression, as appropriate. For bivariate data analyses, the proportion of participants who were satisfied ("very" or "somewhat" satisfied) were compared with those who were dissatisfied ("very" dissatisfied, "somewhat" dissatisfied, or "neither satisfied nor dissatisfied"). When comparing hospitalizations, responses reporting similar or superior care at VA medical centers were summed and compared to responses reporting inferior care at VA medical centers. A two-sided p value of ≤ 0.05 was considered statistically significant.

Received October 1, 2020 Accepted January 26, 2021 Published online February 23, 2021 This work meets the criteria for non-research operations activities as outlined by the Department of Veterans Affairs Office of Research and Development³; thus, IRB approval was deemed unnecessary.

RESULTS

A total of 55 non-Veteran patients were transferred to VA facilities in Michigan (33 AAVA, 22 DVA). Thirteen patients died while hospitalized (7 at AAVA, 6 at DVA) and 4 were excluded (1 discharged to hospice, 2 with dementia, 1 rehospitalized). Of the remaining 38 eligible patients, 15 were unreachable by telephone, yielding a response rate of 60.5%.

Baseline characteristics of the 23 included non-Veteran patients are illustrated in Table 1. No differences in outcomes were noted when analyzed by patient sex or VA medical center. Overall, 20 (87.0%) participants were satisfied with VA care and 18 (78.3%) responded that they were somewhat or very likely to recommend VA care to others (Table 2).

Compared to care received at the transferring facility, 21 (91.3%) felt that overall VA care was the same or better. Most participants felt that care delivered by VA physicians (n = 22, 95.6%) and VA nursing (n = 21, 91.3%) was the same as or

Table 1 Baseline Characteristics of Participants

	Total (N = 23)
Gender, N (%)	
Male	15 (65.2%)
Female	8 (34.8%)
Age in years, mean (SD*)	55.0 (13.4)
Length of stay in days, mean (SD*)	5.6 (4.4)
COVID status on admission, $N(\%)$	
Positive	18 (78.3%)
Negative	3 (13.0%)
Person under investigation	2 (8.7%)
Mechanical ventilation, $N(\%)$	
No	21 (91.3%)
Yes	2 (8.7%)
Intensive care unit, N (%)	
No	18 (78.3%)
Yes	5 (21.7%)
Days spent at previous facility, $N(\%)$	
Less than 1 day	14 (60.9%)
1 day or more	9 (39.1%)
Discharge destination, N (%)	
Home	21 (91.3%)
Hospital	1 (4.3%)
Skilled nursing facility	1 (4.3%)

^{*}SD, standard deviation

Table 2 Participant Survey Responses

Overall experience with VA medical centers	Total (N = 23) N (%)
How satisfied were you with the overall care you received at the VA?	
Very Satisfied	17 (73.9%)
Somewhat Satisfied Neither Satisfied nor Dissatisfied	3 (13.0%) 0
Somewhat Dissatisfied	2 (8.7%)
Very Dissatisfied If grant and part inst Veterans, sould some to the VA how likely would you be	1 (4.3%)
If everyone – not just Veterans - could come to the VA, how likely would you be to recommend the VA as a facility to others?	
Very Likely	17 (73.9%)
Somewhat Likely Neither Unlikely nor Likely	1 (4.3%)
Somewhat Unlikely	1 (4.3%) 1 (4.3%)
Very Unlikely	3 (13.0%)
Comparing the VA Medical Centers to Transferring Hospital	Total $(N=23)$
Comparing your recent experience at the VA to the hospital you were transferred from, where did you feel that you received better overall care ?	N (%)
VA	11 (47.8%)
The care was about the same Other facility	10 (43.5%) 2 (8.7%)
How would you rate care provided to you by physicians at the VA compared	= (******)
to the hospital you were transferred to the VA from?	11 (47.96)
Better About the same	11 (47.8%) 11 (47.8%)
Worse	1 (4.3%)
Not sure	0
How would you rate care provided to you by nurses at the VA compared to the hospital you were transferred to the VA from?	
Better	15 (65.2%)
About the same	6 (26.1%)
Worse Not sure	2 (8.7%) 0
How would you rate how doctors, nurses, and other staff communicated	v
with you and your family at the VA compared to the hospital you were	
transferred to the VA from? Better	10 (43.5%)
About the same	12 (52.2%)
Worse Not sure	0 1 (4.3%)
Comparing VA Medical Centers to Previous Hospitalizations	Total $(N = 11)$
•	N (%)
Thinking back to all your hospitalizations at other healthcare facilities, in comparison to your experience at the VA, where did you feel that you received better care ?	
VA	4 (36.4%)
They were about the same	5 (45.4%)
Other facility Not sure	2 (18.2%) 0
How would you rate physician care at the VA compared to other hospitals	U
you have experienced in the past?	
Better About the same	7 (63.6%) 4 (36.4%)
Worse	0
Not sure	0
How would you rate nursing care at the VA compared to other hospitals you have experienced in the past?	
Better	7 (63.6%)
About the same	3 (27.3%)
Worse Not sure	1 (9.1%) 0
How would you rate how doctors, nurses, and other staff communicated with	· ·
you and your family at the VA compared to other hospitals you have	
experienced in the past? Better	6 (54.5%)
About the same	5 (45.4%)
Worse	0
Not sure How would you rate discharge instructions you were given at the VA compared	0
to discharge instructions you have received from other hospitals in the past?	
Better	3 (27.3%)
About the same Worse	7 (63.6%) 1 (9.1%)
Not sure	0

better than care at the transferring facility. Similarly, 22 participants (95.6%) felt that communication from VA physicians, nurses, and staff was the same as or better than at the transferring facility.

A total of 11 (47.8%) participants reported hospitalizations any time before their most recent episode of illness. Of those, nine (81.8%) reported that overall VA care was the same as or better than care at the other hospital. Eleven (100%) and 10 (90.9%) participants reported that VA physician and VA nursing care was the same as or better than care at other facilities, respectively. All participants reported that communication at VA was the same as or better than communication during prior hospitalizations; 10 (90.9%) participants reported that the quality of VA discharge documentation was the same as or better than that received at discharge from prior hospitalizations.

DISCUSSION

In our direct examination of non-Veterans' experiences at VA medical centers, non-Veterans perceived the VA favorably in terms of overall care, physician care, nursing care, and communication when compared to transferring facilities and other hospitals. In general, non-Veterans were highly satisfied with the care received at the VA and often preferred VA care over non-VA care. Other published studies have demonstrated that the quality of care delivered by VA is similar to, if not better than, non-VA hospitals.^{4–7} Limitations of our study include the small sample size, potential bias created by our exclusion criteria, and the possible propensity to report satisfaction with care during a pandemic. Our study, however, adds to the literature through the novel lens of the non-Veteran patient experience.

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Declarations:

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