The mission of the VA Quality Enhancement Research Initiative (QUERI) is to improve the health of all Veterans by more rapidly implementing scientific evidence into routine practice.

What QUERI Does
QUERI funds VA-employed scientists from across the U.S. to conduct national implementation and evaluation initiatives that address major health care priorities identified by VA providers, leaders, and Veterans. QUERI also trains the VA and healthcare workforce in implementation, quality improvement, and evaluation best practices, leading to improved Veteran access to state-of-the-art treatments. In doing so, QUERI's definition of success is having more frontline providers implementing effective treatments using quality improvement methods and rigorously evaluating their impacts to ensure continuous improvement of Veteran care.

Why QUERI’s Work Matters
It can take years to translate scientifically supported treatments into the hands of patients who need them the most; even so, only a fraction of treatments get fully implemented. The reasons for this research-to-practice gap are complex and involve barriers, such as competing demands across providers and clinics as well as limited opportunities to involve Veterans, their caregivers, and families in the treatment implementation and dissemination process.

QUERI promotes VA as a national leader in applying high-reliability, learning organization and evidence-based policy methods to improve health care, especially for underserved and marginalized populations.

QUERI, through its 22-plus year history of designing rigorous implementation of best practices, can help overcome these barriers via the deployment of tools and methods that providers and organizations can use to speed the uptake of effective treatments to reach Veterans more readily.

Since 2019, QUERI has been a national leader in advancing how evidence-based policy is done in VA, promoting the generation and use of evidence to inform national programs and policies. QUERI is supporting VA’s fulfillment of the Foundations for Evidence-based Policymaking Act (“Evidence Act”; US Public Law 115-435), which requires that Cabinet-level agencies use evidence and evaluation to justify their budgets and shape policies. QUERI currently funds more than 35 national evaluations, of which at least 7 are featured in the FY23 VA Annual Evaluation Plan.

QUERI Research Impacts
QUERI has supported National Program Offices, VISNs, and VA facilities/sites in the:

- National integration of mental health treatment into primary care to improve access and quality of Veteran care for depression, PTSD, and substance use disorders, including fewer hospitalizations.
- Expansion of high-quality neurological care through the Protocol-guided Rapid Evaluation of Veterans Experiencing New Transient Neurological Symptoms (PREVENT) program across 85 sites.
- National dissemination of the Caring Letters campaign, reaching over 200,000 Veterans at risk of suicide.
- Deployment of virtual care for major conditions, including stroke, geriatric services, diabetes, sleep disorders, and pain and opioid use disorders.
- Utilization of the Decision Precision Lung Cancer Screening Tool by primary care providers and lung cancer screening coordinators.
- Innovative use of the STORM electronic decision support to improve opioid medication management, resulting in >20% reduction in mortality from opioid use disorder.
- Expanded access to evidence-based physical activity programs (e.g., STRIDE, Group PT) for Veterans at risk of developing a disability and support for caregivers (e.g., Caregivers FIRST).
- Integration of Whole Health patient-centered care across VA medical centers nationally.

QUERI, with an annual budget of $26.2 million and in partnership with more than 70 VISN and VA national program office leaders, has disseminated over 200 research-informed strategies and products, supporting over 26,000 VA employees across the U.S. in delivering evidence-based care to Veterans and their families.
New Initiatives and Centers
In 2022, QUERI partnered with health system leaders, managers, providers and other frontline staff, and Veterans to:

- Established the first-ever VHA Evidence-based Policy Subcommittee to help drive the use of high-impact evidence and evaluation across the enterprise and ensure Veterans and their families and caregivers, VHA employees, and sites benefit from effective programs, policies, and practices.
- Launched six QUERI Evidence-based Policy Evaluation Centers to expand evaluation capacity and support VHA’s six national goals and Tiger Team activities.
- Developed VHA Evidence Act deliverables (e.g., evaluation plans included in the FY2023 Annual Evaluation Plan) to fulfill core requirements of the Foundations for Evidence-Based Policymaking Act of 2018 (Evidence Act; PL 115-435);
- Identified multi-level priorities using a systematic, enterprise-wide process (featured in the VA FY2022-2028 Strategic Plan) and launch six cross-cutting evaluations to address these priorities (e.g., PACT Act);
- Funded three new partnered initiatives on high-priority topics (lung cancer screening, addiction and pain treatment, Homeless Programs Office’s Legal Services for Veterans initiative).
- Created a new implementation science center—the Evidence, Policy, and Implementation Center (EPIC)—to provide expertise, training, and evaluation on applying implementation science across the translation spectrum. This will enhance the real-world impact of research and ensure Veterans benefit from research discoveries.
- Leveraged QUERI Rapid Response Teams to address emerging legislative priorities (e.g., Hannon Act, Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020) and support NCP’s efforts on the White House Pandemic Innovation Task Force.
- Supported 7 new Advancing Diversity in Implementation Leadership (ADIL) fellows to get hands-on experience in applying implementation and evaluation methods to address key VA priorities (e.g., workforce wellbeing).

Developing an Enterprise-Wide Approach to Evidence Development and Evaluation
The passage of the Evidence Act has led to exciting opportunities to advance how evidence-based policy is done in VHA. Since 2019, QUERI has been working with the VHA Chief Strategy and Finance Offices to create an enterprise-wide approach to evidence development and evaluation. The success of these efforts led to the establishment of the VHA Evidence-based Policy Subcommittee in 2022 to serve as VHA’s principal hub for aligning and focusing evaluation efforts and resources to inform evidence-based policy, the expansion of QUERI’s national systematic process to identify priorities for Evidence Act evaluations, and the launch of QUERI-funded Evidence-based Policy Evaluation Centers to tackle complex policy questions.

Features of QUERI Evidence-based Policy Centers

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<th>Features</th>
<th>Description</th>
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<td>Interdisciplinary teams embedded in the VA health system</td>
<td>Academically affiliated centers with access to 170+ investigators</td>
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<td>Practical rigorous implementation, evaluation, and QI methods</td>
<td>Veteran-centered, commitment to health equity</td>
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<td>Expertise in key VHA clinical and policy priority areas</td>
<td>30+ national and regional partnerships</td>
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<td>Unique data access and expertise</td>
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<td>Training diverse investigators and staff in partnered evaluation work</td>
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<td>Innovative approaches to policy evaluation</td>
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Evidence-based Policy Evaluation Centers
Coordinated by QUERI’s Partnered Evidence-based Policy Resource Center (PEPReC), QUERI’s six Evidence-based Policy Evaluation Centers support VHA’s implementation of the Evidence Act—which requires that budgets are informed by evidence and evaluation—from conducting rigorous evaluations addressing legislative and VHA strategic priorities and enhancing enterprisewide approaches to evaluation. This includes the development of annual evaluation plans, learning agendas, and capacity assessments.

• Partnered Evidence-based Policy Resource Center (PEPReC) coordinates VHA’s response to the Evidence Act, reviews legislative and budget proposals, and provides rigorous data analysis to support the development and sustainment of policy, planning, and management initiatives.

• Center for Policy Evaluation (CPE) supports operational decision-making by providing unbiased estimates of the effects of implementing VA policies and programs.

• Charleston, Providence, and Iowa City Evidence-Based Policy Evaluation Center (CPIC) leverages content and methodological expertise across three VAMCs and universities to conduct rigorous program and policy evaluations that are responsive and scaled to the needs of VA leadership.

• Evidence to Policy Evaluation Center for Veterans (EPEC-Vet) conducts rigorous evaluations using a common set of metrics across evaluations and state-of-the-art knowledge translation methods.

• Houston Evidence-Based Rapid Measurement Evaluations Center (HERMES) specializes in rapid, big-data compilation and analysis focused on systems-level factors to inform VA policy.

• Leading Evaluations to Advance VA’s Response to National Priorities (LEARN) utilizes multi-disciplinary theories and mixed methods approaches in conducting partnered evaluations.

• Salt Lake Evidence-Based Evaluation Center for Policy (SALIENT) applies Lean Sprint/Six Sigma for rapid, efficient evaluation design and implementation and continuous process improvement.

National Impacts on Pain and Opioid Use Disorder Treatment
QUERI continues to engage in productive partnerships with VA regional and national leaders to address VA priorities and Veteran health care needs. For example, collaborations with the Office of Mental Health and Suicide Prevention, Pharmacy Benefits Management’s Academic Detailing, Pain Management/Opioid Safety/PDMP (PMOP), Office of Healthcare Innovation and Learning, Quality and Patient Safety, and 14 VISNs, resulted in the following impacts:

• Stepped Care for Opioid Use Disorder Treatment (SCOUTT) increased the number of patients with OUD receiving buprenorphine in SCOUTT clinics by 267%.

• Seven effective practices to expand access to pain and opioid use disorder treatments are being implemented across primary care, specialty care, emergency departments, and telehealth at 60 sites in 9 VISNs, supporting more than 1,900 providers.

• TelePain has reached more than 4,300 Veterans and is expanding to ten additional VISNs.

• Evaluation of the implementation of complementary and integrative health (CIH) therapies informed multiple Congressional briefings (e.g., House MILCON Committee VA Budget Briefing).

• Evaluation of Stratification Tool for Opioid Risk Mitigation (STORM) demonstrated that mandated case reviews on opioid analgesic-prescribed patients at high risk of overdose/suicide was associated with lower all-cause mortality.

• Homeless Overdose Prevention Expansion (HOPE) involves implementing opioid overdose education and naloxone distribution to reduce overdoses and deaths among homeless, unstably housed Veterans and has reached 448 Veterans.

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VA QUERI 2022 Program Impact

Seven New 2022 Advancing Diversity in Implementation Leadership Awardees

QUERI’s Advancing Diversity in Implementation Leadership (ADIL) initiative fosters implementation, quality improvement, and evaluation leadership opportunities for early career investigators and staff.

- Design and Implementation of an Informatics Tool Supporting Precision Population Health for Veterans Experiencing Chronic Pain led by Evan Carey, PhD
- Evaluating Clostridioides difficile Diagnostics Stewardship in the VA led by Geneva Wilson, PhD
- Evaluating the Post-Incarceration Engagement (PIE) Program to Advance Culturally Appropriate Peer Support for Re-entry Veterans of Color led by Maria Venegas, PhD
- Examining Workforce Wellbeing within VA Homeless Service Programs Engaged in a National Initiative to Implement Critical Time Intervention led by Taylor Harris, PhD
- Implementation and Evaluation of VA TREAT: Training to Recognize Early Alzheimer’s and Treat Cognitive Decline led by Joshua Hamer, PhD
- Investigating and Mitigating Racial Disparities in Health Outcomes for Hospitalized Older Adult Veterans led by Sarah Wilson, PhD
- LEveraging practice variaTionS to GROW HOME dialysis within VA (the LETS-GROW-HOME study) led by Yuvaram Reddy, MBBS, MPH

Accelerating Translation of Research Into Practice

QUERI accelerates translation of research into practice by:

1. Identifying top priorities among local, regional, and national VA leaders
2. Funding peer-reviewed initiatives led by the VA implementation and evaluation experts
3. Communicating results and impacts to VA leaders, Veterans, and other key groups

Examples of healthcare priorities identified by QUERI in 2022 and 2023 include:

- Workforce recruitment, onboarding, and retention
- Improving clinical care and organizational efficiency
- Optimizing in-person, virtual, and community care services

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