

QUERINational Program

October 2019

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Function QUERI

Optimizing Function and Independence
Durham, NC

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Overview

Health-related functional impairments often lead to disability, which is a significant driver of healthcare use and costs. Currently, 12.4 million Veterans are age 65 or older, the age group at highest risk for developing a disability. Function QUERI was designed to improve Veteran function and independence by promoting the rapid translation of research findings into practice through implementation strategies that promote flexibility of clinical programs, and that enhance the performance of healthcare teams. Specific aims address high-priority gaps in clinical care identified by national partners and include:

- Implementing and evaluating three distinct but related clinical programs:
 - STRIDE—a supervised, inpatient walking program;
 - iHI-FIVES—a caregiver skills training program; and
 - Group Physical Therapy (PT) for Knee Osteoarthritis (OA), which will expand access to a PT program using a group-based model.
- Adapting an innovative, team-based implementation intervention (CONNECT) to promote team readiness for use in a diverse mix of clinical settings and VA medical centers, and evaluating its impact across projects.

Methodology

Function QUERI is implementing STRIDE and iHI-FIVES at eight VA medical centers each (16 total). The core implementation strategy focuses on promoting flexibility of clinical programs to fit local environments (Replicating Effective Programs or REP). Half of the sites will be randomized to receive CONNECT as a “boost-er” implementation strategy. QUERI investigators will evaluate the effectiveness of implementation using REP alone versus REP + CONNECT.

Function QUERI Participating VAMC Sites



Using a cluster randomized, stepped-wedge trial design, investigators will evaluate the impact of STRIDE and iHI-FIVES on patient outcomes, and determine the conditions under which program implementation is most successful.

Findings and Anticipated Impacts

Patient and Service-Level Outcomes

STRIDE is expected to:

- Decrease length of hospital stay,
- Decrease discharges to nursing homes,
- Improve physical function and quality of life for Veterans in the program, and
- STRIDE supports VA as a learning healthcare system, reducing the risk of harm due to immobility in the hospital.

iHI-FIVES is expected to:

- Increase days in the community, facilitating Veterans to remain as independent as possible;
- Improve satisfaction with VA healthcare, decrease caregiver burden, and decrease caregiver depressive symptoms; and
- Expand access to VA and support MISSION Act expansion by filling gaps in caregiver skills training needs.

The Group PT for Knee OA program enhances access to PT through an efficient group-based delivery model. Results include:

- 17% improvement in knee physical function and pain measure, and
- 97% of patients satisfied with the program using REP and CONNECT strategies.

Tools and Toolkits

The STRIDE and iHI-FIVES programs have produced implementation toolkits for dissemination to interested facilities across VA. Function QUERI awaits findings from CONNECT effectiveness to inform future efforts in team building to enhance learning capacity in VA.

Operations Partners

VA Office of Geriatrics and Extended Care; VA Caregiver Support Program, VA Physical Medicine and Rehabilitation Services, Office of VA Voluntary Services, and the VA Mid-Atlantic Healthcare Network (VISN 6).



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Veterans Health Administration
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