Overview
Access to care remains a top priority for the VA healthcare system after widely publicized concerns about Veterans’ ability to efficiently access care peaked in 2014. In response, Congress passed the Veterans’ Access Choice and Accountability Act, which significantly reorganized the delivery of VA healthcare by allowing Veterans to go outside VA, as well as developing the clinic management training program. This program implements a team of clinicians, administrative leads, analysts, and schedulers to monitor and expand access to outpatient care. VA is now publicly reporting wait times for care and satisfaction with care for each VA facility—and is implementing a wide range of initiatives designed to further enhance access, such as increasing call centers and virtual care. However, a systematic and ongoing evaluation is necessary to determine whether these new policy initiatives lead to systematic improvements in access.

In collaboration with VA Clinical Operations, investigators in the Center for Access Policy, Evaluation, and Research (CAPER) QUERI National Partnered Evaluation Initiative will rigorously evaluate clinic operations with the goal of accurately measuring and expanding access to care. CAPER aims to:

- Define and validate access metrics based on Veteran-centric outcomes;
- Identify staffing capacity and variation between facilities across clinic operations; and
- Evaluate the impact of virtual access and staffing initiatives on reported access metrics.

Methodology
Investigators will validate access metrics that can be consistently obtained from the administrative scheduling system, with self-reported Veteran satisfaction from survey data and health outcomes obtained from medical record data. In consultation with VA clinical operations, CAPER will then evaluate the effect of proposed policy changes regarding staffing and workflow, as well as interventions aimed at increasing access to care virtually. Factors that impact variation between facilities in staffing, workflow, and the adoption of policy changes will be examined so that VA clinical operations can identify high- and low-performers—and allocate training and facilitation resources appropriately. The impact of policies and interventions on validated access metrics will be evaluated to assess effectiveness, resulting in a continuous loop of quality improvement.

Anticipated Impact

Operations Partner(s)
VA’s Office of Veterans Access to Care and the Office of Connected Care. VA Primary Care Services also provides input when needed.