Overview

The overall goal of the Precision Monitoring to Transform Care (PRIS-M) QUERI national program is to use existing data from VA's electronic health records to implement actionable, personalized, and timely monitoring in order to transform the quality and outcomes of care for Veterans across multiple healthcare settings—and to promote a learning healthcare organization.

The PRIS-M QUERI National Program includes five projects:

**National Evaluation of the VHA TeleStroke Program.** The VHA “virtual” TeleStroke program has enormous potential for increasing access to stroke specialists and to thrombolysis for Veterans with acute stroke, as well as for fostering patient and employee satisfaction. Dr. Glenn Graham, Deputy Director of Neurology in VA Specialty Care Services, and his TeleStroke Program implementation team are serving as external facilitators to support the implementation of TeleStroke within VA. PRIS-M QUERI investigators are evaluating the implementation strategy and impact of TeleStroke on patients, providers, and the VA healthcare system. Moreover, Dr. Graham is interested in building both physician and nurse champions within the TeleStroke program, a key PRIS-M implementation strategy.

**Protocol-guided Rapid Evaluation of Veterans Experiencing New Transient Neurological Symptoms (PREVENT).** The objective of this PRIS-M QUERI project is to develop and evaluate an intervention program to improve the quality of care for Veterans with transient ischemic attack (TIA) and minor stroke that includes:

- A set of validated electronic clinical quality measures (eCQMs) to provide teams with actionable information about the quality of care for Veterans,
- Staff education program, and
- Virtual learning collaborative.

Six clinical teams from VA medical centers across the VA healthcare system are participating in PREVENT through a monthly virtual learning collaborative—and have access to their local quality performance data through an electronic data HUB. In addition, they receive external facilitation.

**De-Implementation of Low-Value Carotid Artery Exam Ordering at the Point of Care.** PRIS-M QUERI investigators are working with VHA vascular surgeons to understand messaging preferences for practice guidelines on carotid artery exam ordering at point-of-care. In addition, investigators plan to develop a report card as an audit and feedback strategy directed at both surgeons and local facility leadership that provides a local assessment of the quality of ordering indications for Veterans with carotid ultrasounds (e.g., appropriate, uncertain and inappropriate).

**Evaluation of VA Tele-Stroke Robotic Rehabilitation Program Implementation.** The VA Tele-Stroke Robotic Rehabilitation program provides rural Veterans who have had a stroke with an innovative, proven solution for physical rehabilitation that improves functional independence and access to care in a new way that mitigates transportation barriers for Veterans who live in rural areas far from VA medical centers. This project is funded by the VA Office of Rural Health.

**Indiana Tele-monitoring to Optimize Use of PAP at Home (IN-TOUCH).** PRIS-M QUERI implemented a local quality improvement program at the Richard L. Roudebush VA Medical Center in Indianapolis, Indiana that focused on remote positive airway pressure (PAP) monitoring to improve outcomes for Veterans with obstructive sleep apnea. The project used a set of validated eCQMs to provide the sleep medicine and telehealth services with information about the quality of care for Veterans specifically on PAP therapy and also two-tiered facilitation. This successful program was officially adopted by the local facility and sustained.
Methodology
Across these projects, PRIS-M QUERI utilizes several keys implementation strategies including:

- Audit and feedback,
- Activating quality improvement teams based on context,
- Activating champions and skill building on planning, goal setting, data reflection and feedback, and
- External facilitation.

Each project focuses on data acquisition and presentation to targeted data users including the use of electronic quality measures. Subsequently, implementation strategies facilitate best practices to activate local teams of frontline providers to utilize this data to transform and improve Veteran care.

Findings and Anticipated Impacts
The PREVENT hub is the platform that supports the PREVENT learning collaborative and is the forum for sharing process and outcome data, a library of quality improvement tools, and professional education materials. In addition, in collaboration with the Indianapolis VAMC Medical Media [SCOPE], PRIS-M QUERI has developed a video that demonstrates how an experienced, multidisciplinary stroke team functions to anticipate and respond to continuous audit and feedback. This video has been used in kick-off meetings, as well as learning collaborative meetings.

Operational Partner(s)
The VHA Office of Specialty Care Services - Neurology; The VHA Office of Rural Health Services and the Veterans Rural Health Resource Center-Salt Lake City; The VA Telehealth Services, VISN23 Chief Medical Officer and Chief Surgical Consultant of Vascular Surgery; VHA Office of Emergency Medicine; Chief of Sleep Service & Chief of Systems Redesign, Veteran Health Indiana; and the VHA Office of Strategic Integration/Veterans Engineering Resource Center (VERC).

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