Overview

The Triple AIM QUERI Program will leverage healthcare data to identify actionable care gaps, and to implement innovative healthcare delivery interventions to improve the patient care experience, improve the health of populations, and/or reduce per capita costs of care. The Practical, Robust Implementation and Sustainability Model (PRISM) framework will serve as an overarching implementation model across projects. Projects will address clinical issues or scenarios that are prevalent (e.g., chronic pain and medication non-adherence) or high cost (e.g., percutaneous coronary intervention, Veterans with hospitalizations outside of VA). Across projects in this QUERI program, investigators will apply the same methodology of leveraging data to identify actionable care gaps—and will work with their operational partners to implement interventions to address these care gaps.

The main objectives of Triple Aim QUERI include:

- Leverage data to identify actionable care gaps and test an implementation strategy of audit and feedback only versus audit and feedback plus facilitation to improve healthcare gaps.
- Evaluate the impact of the implementation strategies across projects and identify overarching lessons using PRISM, which includes both contextual characteristics specific to each implementation site and the RE-AIM domains of Reach, Adoption, Effectiveness, Implementation, and Maintenance.
- Create toolkits, guidelines for adaptations, and dissemination and implementation strategies of audit and feedback and facilitation strategies. These will provide guidance for broader scale-out and scale-up.

Implementation Strategy

Investigators are testing two implementation strategies: audit and feedback, and facilitation. For the Triple Aim QUERI Program, audit and feedback is broadly defined as an effort of collecting and summarizing data relevant for patient care and providing these data to providers, operational personnel, or patients to influence provider and patient behavior. Facilitation is defined as a process of interactive problem-solving that occurs in "the context of a recognized need for improvement and a supportive interpersonal relationship." It is a multi-faceted approach that involves skilled individuals who enable others to address the challenges in implementing evidence-based care guidelines through a range of intervention components and approaches. The Triple Aim QUERI Program uses the term facilitation broadly, and includes activities such as peer mentoring, e-consults, and patient consultations by clinicians.

Each project under this QUERI Program will compare an intervention based on audit and feedback alone to an intervention based on audit and feedback plus facilitation. The exact manner in which audit and feedback or facilitation is provided will vary by project. Comparing the success of different approaches to audit and feedback and facilitation will be an important component of the implementation evaluation.

In addition to defining project-specific audit and feedback and facilitation strategies, investigators have incorporated the PRISM domains (i.e., intervention, recipients, external environment, implementation, and sustainability infrastructure) into the planning and designing of each intervention.

Furthermore, adaptations made during the lifetime of each project will be documented using a multi-method approach.

(over)
## Project Summaries

- **Leveraging Data to Improve Multi-Modal Pain Care through Targeted Use of SCAN-ECHO.** Investigators in this study will use data to define multi-modal pain care and identify gaps in care at VA community-based outpatient clinics and medical centers; then will implement provider audit and feedback (of the quality of multi-modal pain care) versus provider audit and feedback plus provider enrollment in the Pain ECHO program to improve chronic pain care.

- **Implementation of Extensible Methods to Capture, Report, and Improve Patient Health Status.** This study will use longitudinal, disease-specific health status measures to identify VA patients with significant declines in health status following elective percutaneous coronary intervention (PCI). Investigators will implement provider audit and feedback (of declines in health status) versus provider audit and feedback plus cardiology facilitation via E-Consults of further evaluation (e.g., increasing medications) to improve patient health status.

- **Improving Veterans Transition Back to VA Primary Care Following Non-VA Hospitalizations.** The goal of this quality improvement project is to improve both the Veterans’ and providers’ experience during the post-discharge transition of care period. Investigators will identify gaps in care for Veterans who were hospitalized at a non-VA hospital and return to VA primary care for follow-up through the use of value-stream mapping (Lean Six Sigma). Once investigators have mapped the transition of care process for Veterans at urban and rural hospitals, they will implement audit and feedback (of the gaps in transition of care) versus audit and feedback plus nurse facilitation to improve continuity of care and care coordination for Veterans in VISN 19.

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- Management National Cardiology Program and CART  
- Office of Analytics and Business Intelligence  
- Quality, Safety and Value  
- Office of Rural Health  
- Pharmacy Benefits Management Services

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