ACCESS CORE:
VETERANS ACCESS RESEARCH CONSORTIUM (VARC)
FEBRUARY 19,2020

PIs:

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AccessResearch@VA.GOV

PACT Cyber Seminar Series

ARC NETWORK

HSR&D VETERANS ACCESS RESEARCH CONSORTIUM

POLLING QUESTION: PRIMARY VA ROLE

What is your primary role in VA?

- ☐ Clinical
- ☐ Operations
- ☐ Research
- ☐ Other (Please specify in comments)
- ☐ I am not part of the VA

POLLING QUESTION: RESEARCH ROLE

If you are currently involved in access-related research/evaluation work, what is your primary role? (select one reply)

- ❑ Principal Investigator / Project Lead
- ❑ Co-Investigator
- ❑ Research staff (e.g., project coordinator, data analyst)
- ❑ Student / Trainee / Fellow
- ❑ Operational liaison to research/evaluation team

ACCESS TO HEALTHCARE

- Refers to the ease with which an individual can obtain needed medical services

- Having "the timely use of personal health services to achieve the best health outcomes"

  - Access to health care consists of four components: coverage, services, timeliness, workforce

- Fit between an individual and the healthcare system

  - Dimensions of access: geographic, temporal, financial, cultural, digital

RAND. https://www.rand.org/topics/health-care-access.html
Elements of Access to Health Care. Content last reviewed June 2018. Agency for Healthcare Research and Quality, Rockville, MD.
https://www.ahrq.gov/research/findings/nhqrdr/chartbooks/access/elements.html
Fortney, et al. J Gen Intern Med. 2011 Nov; 26(Suppl 2): 639–647.
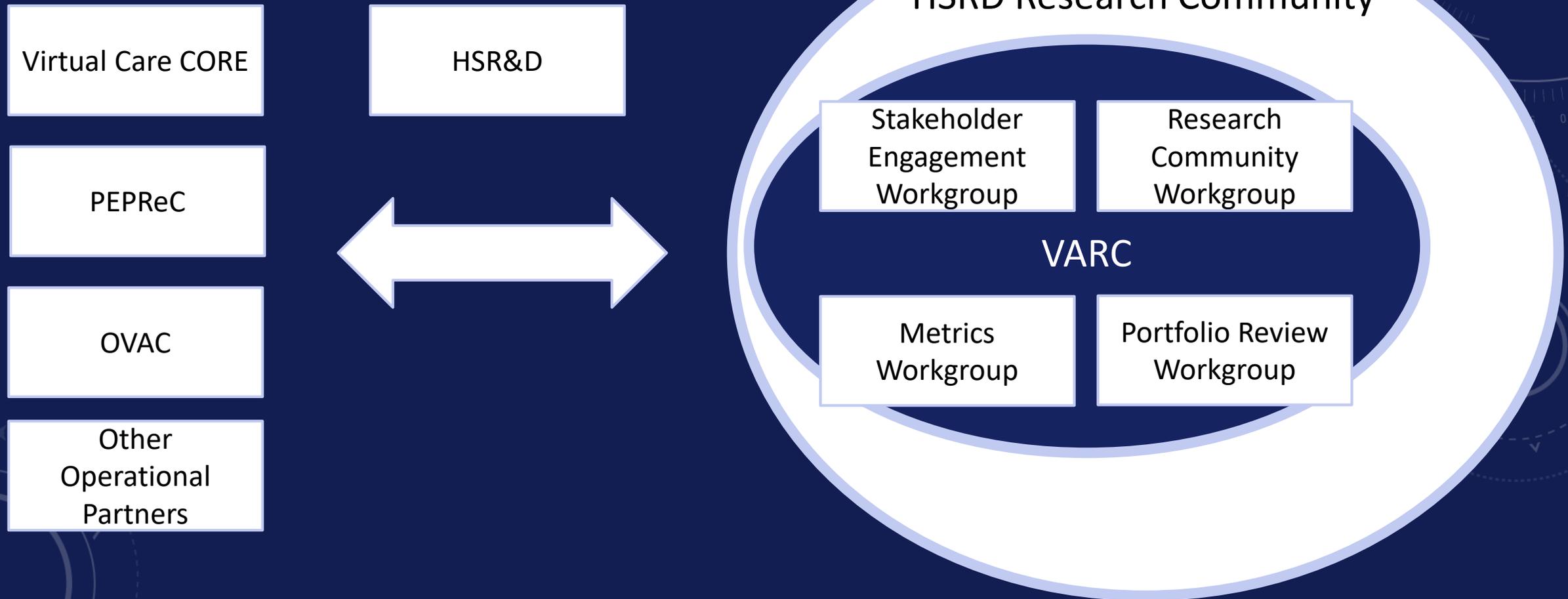
VARC OPERATIONAL PARTNERS

Primary partner:
- Susan Kirsh, MD and Mike Davies, MD (Office of Veterans Access to Care (OVAC))

Other operational partners (working with OVAC to identify)
- Kameron Matthews, MD (Office of Community Care)
- Leonie Heyworth, MD (Office of Connected Care)

VARC STRUCTURE

Virtual Care CORE

PEPReC

OVAC

Other Operational Partners

HSR&D

HSRD Research Community

Stakeholder Engagement Workgroup

Research Community Workgroup

VARC

Metrics Workgroup

Portfolio Review Workgroup

DELIVERABLES

FORMATION OF ACCESS RESEARCH CONSORTIUM (ARC) NETWORK

NEEDS ASSESSMENT OF ARC NETWORK

DATABASE OF CURRENT ACCESS RESEARCH/EVALUATION PROJECTS

3-5 HIGH PRIORITY ACCESS RESEARCH QUESTIONS/FOCUS AREAS

REPORT OF ACCESS METRIC COMPENDIUM

REPORT OF ACCESS MEASUREMENT GUIDE

3-5 HIGH PRIORITY ACCESS METRIC RESEARCH QUESTIONS/FOCUS AREAS

ACCESS RESEARCH ROADMAP

MILESTONES YEAR 1

All 2 years: Regular communications with ARC Network

Month 6: Report of ARC Network needs assessment

Month 9: Database of current access research/evaluation projects

Month 12: Identification of 3-5 high priority access research questions/focus areas through expert panel process

Month 12: Report of access metric compendium

MILESTONES YEAR 2

Month 15: Report of access measurement guide

Month 21: Identification of 3-5 high priority access metric research questions/focus areas through expert panel process

Month 24: Report of access research roadmap

VARC PARTICIPATION OPPORTUNITIES

- Expert panel member
- Workgroup participation
- Access research resource
- Fans of VARC

STAKEHOLDER ENGAGEMENT WORKGROUP

MICHAEL HO, MD (LEAD)

KAREN ALBRIGHT, PHD, DEMETRIA MCNEAL, PHD, JOE SIMONETTI, MD, EVAN CAREY, PHD, KELTY FEHLING, MPH

SCOPE OF WORK

- Provide overall organization and management of CORE

- Engage regularly with OVAC and other stakeholders

- Identify 3-5 high priority access research questions/focus areas through expert panel delphi review process

- In collaboration with other workgroups, develop Access Research Roadmap Report

TIMELINE FOR EXPERT PANEL DELPHI REVIEW PROCESS

June: Reviews ARC survey and portfolio review results and compile final list of 20-30 research questions

August: Analyze ratings, synthesize comments, and provide summary findings to panelists

July: Panelists independently review and rate each domain on specified criteria

September: In-person expert panel meeting
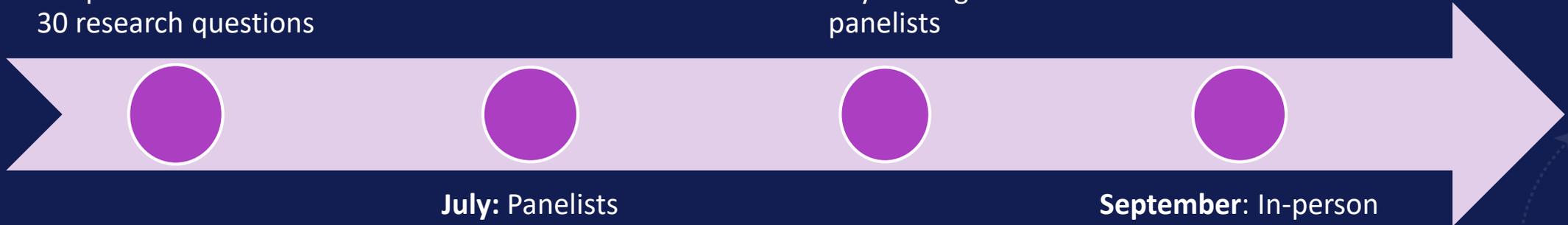
PROPOSED CRITERIA FOR EVALUATION BY PANELISTS

- **Goodness of Fit:** The research question/focus of interest captures a concept relevant and useful to understanding and improving access

- **Impact:** Potential to improve care to and/or experience of key stakeholders (e.g., patients, clinicians, administrators)

PORTFOLIO REVIEW WORKGROUP

SAMEER SAINI, MD (LEAD)

MEGAN ADAMS, MD, JD, MSC, TANNER CAVERLY, MD, MPH, CHRISTINA CHAPMAN MD, MS, TED SKOLARUS, MD, MPH, BRADLEY YOULES, MPA

SCOPE OF WORK

Goals

1. Create a searchable database of access projects

2. Identify opportunities for access research and partnerships in VHA

Process:

- Identify recent and ongoing VA access-related projects ("access portfolio")

- Develop a rubric to categorize access portfolio grants / projects

- Apply this rubric to the portfolio and extract key findings

- Analyze the data to describe the access portfolio, and to identify potential opportunities in **research** and **implementation / partnerships**

RESEARCH STUDIES/GRANTS

- SEARCH:
  - VA HSR&D, QUERI, Clinicaltrials.gov websites using a "webscraping" methodology to extract abstracts and project details
  - NIH ExPORTER dataset to identify access-relevant projects from other programs within the VA (i.e., CSR&D, RR&D, CSP, operational projects, etc.)

- REVIEW extracted abstracts by 2 independent reviewers to assess relevance to access.

- CATEGORIZE into access rubric by team members:
  - Initial training period to ensure that reviewers understand and agree on definitions of rubric categories
  - Independent duplicate extraction of key fields with resolution of disagreement by consensus

OPERATIONAL PROGRAMS/INITIATIVES

- Develop a structured interview guide to identify access-related operational projects and their relevant features.

- Identify **stakeholders** who may be working on these projects:

  - Operational partners

  - Researchers

  - Others?

- Conduct telephone interviews with these stakeholders to assess details of each potentially-relevant project or initiative.
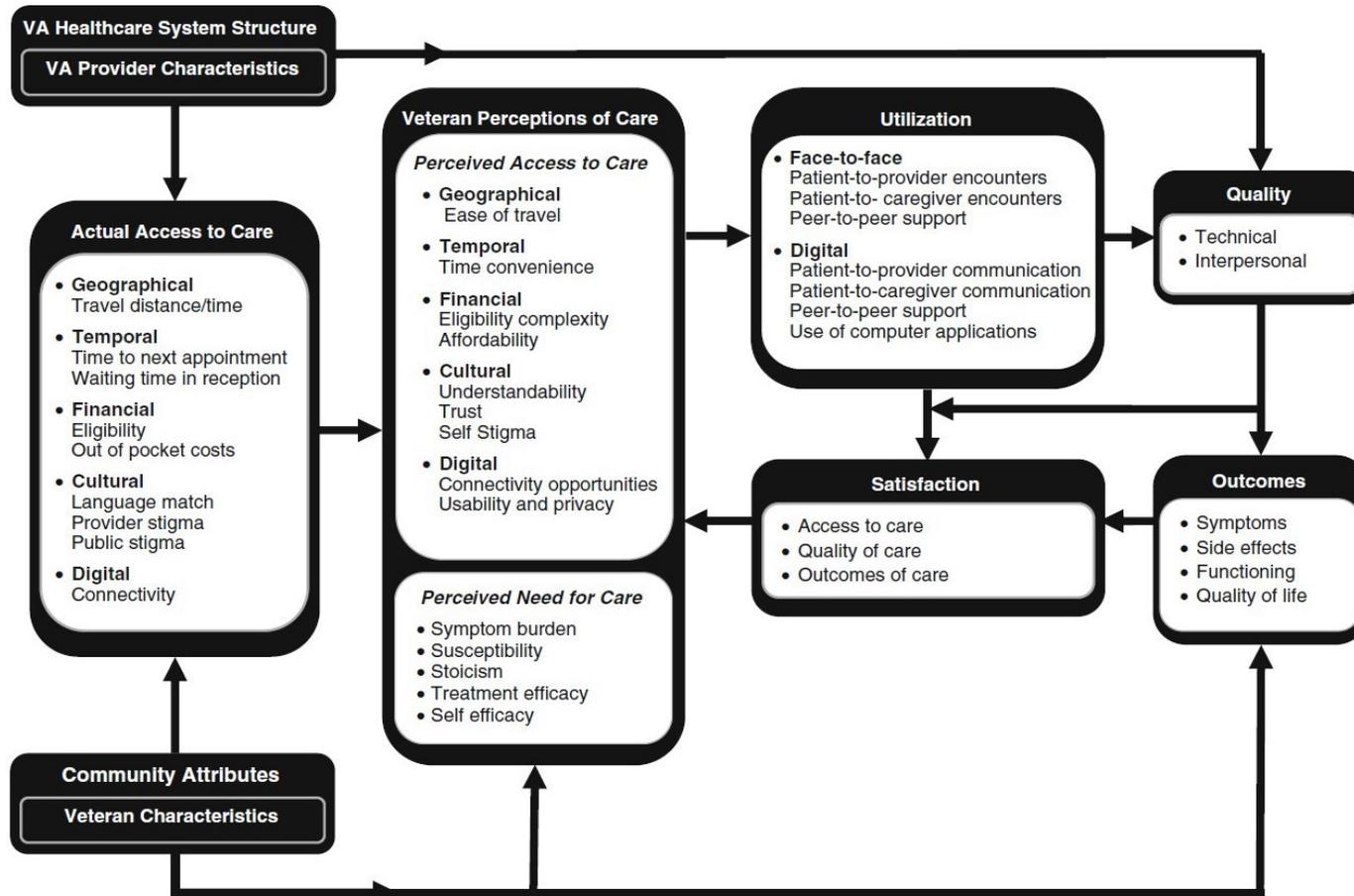
FORTNEY MODEL OVERVIEW

Figure 1. Conceptualization of access.

Dimensions, Determinants, Characteristics

5 Dimensions of Access
Geographical, temporal, financial, cultural, and digital

4 Determinants of Access
Patient, provider, community, health system (i.e., VA and non-VA)

4 Characteristics of Access
Utilization, quality, outcomes, and satisfaction

Draft Rubric for Portfolio Categorization

Code 1: Tags

Tag(s)	Definition
Geographical	Represents the ease of traveling to healthcare provider locations
Temporal	The time required to receive services and the opportunity cost of that time
Cultural	Represents the acceptability of health services. Actual cultural access includes whether services are offered in a language in which the patient is comfortable communicating (e.g., native language).
Digital	The connectivity that enables synchronous or asynchronous digital communications with formal providers, informal caregivers, peers, and computerized health applications
Financial	The healthcare system eligibility issues and the cost of utilizing healthcare services

Code 3: Project Type

Type	Examples
Observational	Secondary data analysis, mixed methods, qualitative methods, modeling
Program Evaluation	Evaluation of a programmatic initiative designed to improve access
Interventional	Prospective evaluation of an intervention designed to improve access

Code 5: Supply and Demand

Type	Examples
Supply (Clinical Capacity)	(1) Workforce retention, burnout; (2) Productivity (e.g., no-show reduction, clinic flow improvement); (3) System redesign (PACT integration, clinical delegation, MISSION)
Demand (Clinical Need)	(1) Overuse/low-value care; (2) Perceived need; (3) Efficiency/Appropriateness

Code 6: MISSION and Telehealth Focus

Type	Definition
MISSION	Is a MISSION focus incorporated into the study's objectives?
Telehealth	Does the study involve the use or evaluation of teleheath?

Code 2: Access Distinction

Access Distinction	Definition
Actual Access	The literal measurement of access, usually measured hard data that are not self-reported (i.e., EHR, GIS, etc.)
Perceived Access	A measurement of perceived access, typically reported by a group or population via some form of self-reported means

Code 4: OVAC priorities

Priority
Reduce scheduler turnover and increase effectiveness
Improve patient satisfaction scores
Achieve smooth clinic flow
Increase access to telehealth and identify barriers/facilities to implementation
Improve access through better clinic practice management
Identify "best practices" for primary care access and customer satisfaction
Identify "best practices" for specialty provider productivity
Reduce no show rates and increase productivity
Increase fidelity of wait time measures associated with patient experience
Reduce provider turnover

Code 7: Implementation Status

[IF Code 3: Project Type = Interventional] At what stage is implementation?

Code 8: Non-VA data

What non-VA data were considered and/or utilized?

METRICS WORKGROUP

PETER KABOLI, MD, MS, ARIANA SHAHNAZI, PHD, AMY O'SHEA, PHD, BJARNI HARALDSSON, MS, MICHAEL OHL, MD, MARK VANDERWEG, PHD, MICHELLE MENGELING, PHD (IOWA CITY)

EVAN CAREY, PHD (DENVER/ST. LOUIS)

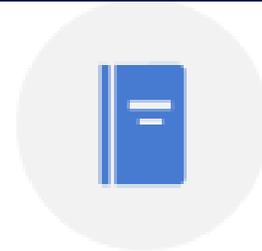MELISSA GARRIDO, PHD (BOSTON-PEPREC)

MATT AUGUSTINE, MD (BRONX)

OBJECTIVES OF ACCESS METRICS WORKGROUP

Overall: *Create an interactive and collaborative team of healthcare access researchers to support ongoing and future access-related research and innovation.*

- From the Proposal Milestones:

REPORT OF ACCESS
METRIC COMPENDIUM

REPORT OF ACCESS
MEASUREMENT GUIDE

REPORT OF ACCESS METRIC COMPENDIUM (MONTH 12)

- **Categorize** measures of access using the 5 dimensions of access, including actual and perceived metrics.

- **Create compendium** of metrics, including evidence to support validity, data sources, definitions, and practical considerations. Sources include:

  - *Published and unpublished work from ORH Access Evaluation group, PEPReC, ARC Network, and non-VA researchers.*

  - *Existing metrics used by OVAC and defined by VSSC.*

- **Novel metrics** will be proposed for future research and development to fill gaps by the 5 dimensions.

FORTNEY MODEL OVERVIEW

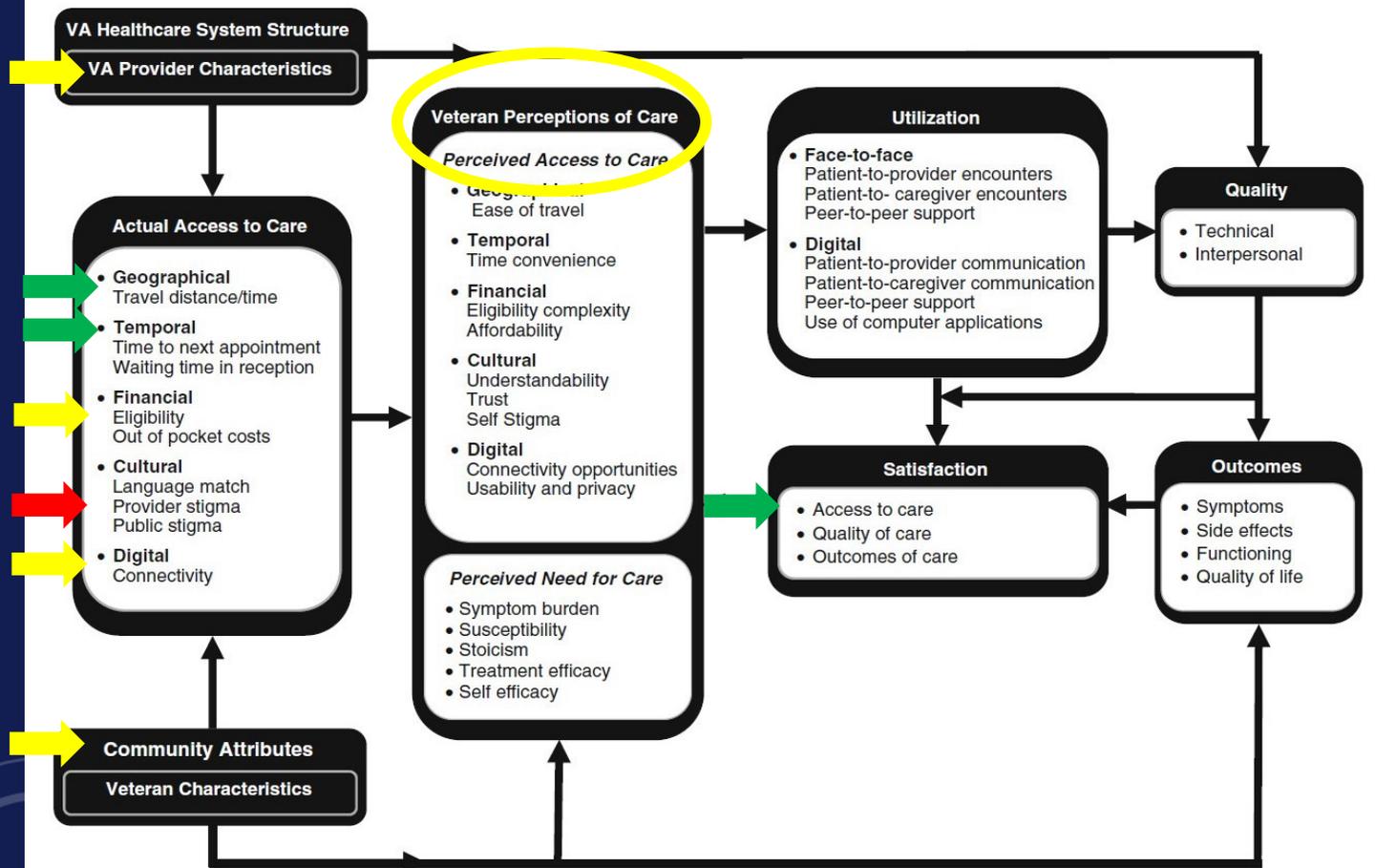
Fortney et al.: Healthcare Access for the 21st Century

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METRIC COMPENDIUM STEPS

1. Outline and role clarification

2. Engage research and operational experts

3. Manuscript draft

4. Metric Webinars for feedback

5. Manuscript submission

6. Final Compendium available on-line and as on-line appendix to manuscript
   - Work with HERC (or VIREC) for on-line location and format

REPORT OF ACCESS MEASUREMENT "HOW TO" GUIDE (MONTH 15)

- **Work with PEPReC** to integrate their work into Access CORE through formal (e.g., webinars, calls) and informal coordination

- **Identify on-line data guides** (VA/non-VA) to create access data guides that are user-friendly and meet needs of researchers and operations.

- **Attend NAS panel** (March 2020) on access measurement and incorporate findings and next steps into access measurement report.

- **Finalize on-line format** with appropriate VA resource center partner.

- **Write content** to complement the Access Metric Compendium.

NEED FROM THIS AUDIENCE

- Willingness and interest in participating in metric workgroup.

- Suggestions for "best practices" and examples of how to record and disseminate metric compendium.

- Sharing of novel metrics of access under development. (e.g., "timely care")

RESEARCH COMMUNITY WORKGROUP

STEPHANIE SHIMADA, PHD (LEAD)

CHRISTOPHER MILLER, PHD, CAROLYN PURINGTON, MPH, STEPHANIE ROBINSON, PHD

ACCESS RESEARCH CONSORTIUM (ARC) NETWORK

GOALS:

1. Develop network of interested researchers to facilitate collaborative projects across COINS and with non-COIN researchers on priority areas.

2. Create a "community of practice" for sharing recent research developments, funding opportunities, priorities documents, and partner communications.

ARC NETWORK ACTIVITIES

- Needs Assessment Survey
- Communications
- Support ARC Network Members

ARC NETWORK ACTIVITIES

- Needs Assessment Survey
  - Data / information needs to support access research
  - Preferences for connecting with other researchers/operations
  - Frequency and types of desired communication from VARC

Stay tuned for a link to the survey at the end of presentation!

ARC NETWORK ACTIVITIES

- Communications
  - Webinars
    - VARC Workgroup Presentations
    - Updates on OVAC Priorities
    - Works-in-progress from ARC Network members
  - E-news updates (new research, funding opportunities)
  - Others TBD based on needs assessment survey feedback

ARC NETWORK ACTIVITIES

- Support ARC Network Members
  - Mentorship matching for Junior Investigators (e.g., fellows/CDAs)
  - Expertise matching (e.g., PEPReC or within ARC Network)
  - Guidance for RFA applications
    - Implementation Methods
    - Data/Metrics
    - Research Roadmap

POLLING QUESTION: WORKGROUP INTEREST

Which of the VARC workgroups would you be interested in contributing to? (Select all that apply)

- ❑ Metrics (develops and evaluates metrics and data sources)
- ❑ Portfolio Review (reviews VA access-related projects)
- ❑ Research Community (share expertise with ARC Network)
- ❑ Research Roadmap (define VA access research priorities)

POLLING QUESTION: ENGAGEMENT WITH CORES

Which of the following COREs do you plan to engage with? *(Please check all that apply)*

❏ Pain / Opioid CORE

❏ SPRINT (Suicide Prevention Research Impacts NeTwork)

❏ VARC (Veterans Access Research Consortium)

❏ Virtual Care CORE (coming soon)

PLEASE GIVE US FEEDBACK ON WHAT YOU NEED FROM THE ARC NETWORK

Survey Link:
https://vhacdwweb05.vha.med.va.gov/surveys/?s=WE7X8KW7KJ

- The survey is only accessible within the VA firewall.

- Please contact AccessResearch@va.gov if a fillable-PDF version of the survey is required.

CONTACT US

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