Health Systems Research in VA

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Acting Director, HSR&D
Health Systems Research Overall Goals

• Improve Veteran outcomes through cutting-edge health systems research

• Research goals based on VA Strategic Plan, Agency Priority Goals, VHA Performance Plan

• How we measure success: are Veterans getting better? (NAM’s Quintuple Aim)
  • Increase Access          Ensure Equity          Support Workforce
  • Improve Outcomes        Improve Value

• Where HSR is uniquely positioned to contribute to the science:
  o Implementation Science
  o Data Science
  o Science of End-User Engagement
  o Systems Science
  o Policy
HSR Outcomes: Quintuple Aim Framework

Quintuple Aim outcomes involve inter-disciplinary assessment of Veteran and VA outcomes, including organizational, provider, and patient care processes (e.g., access, quality), value (cost), equity, and lived experiences of end-users (e.g., Veterans, providers, communities).

Updated HSR Priorities (Areas of Scientific Inquiry)

1. **Implementation science**: Discover and optimize strategies to get effective treatments to Veterans faster and sustain their use in real-world practice.

2. **Data science**: Design, validate, and apply data science and knowledge management tools that improve Veteran care.

3. **Engagement science**: Create and test novel approaches for engaging end-users, e.g., Veterans, providers, communities, etc. that support improved outcomes.

4. **Systems science**: Design and apply new systems science methods to improve Veteran provider workforce effectiveness, satisfaction, diversity, and retention.

5. **Policy analysis/evaluation**: Develop, assess, and improve VA and national policies to improve Veteran outcomes, with a focus on underserved populations.
# HSR Priorities Align with Veteran Health, VA Goals

<table>
<thead>
<tr>
<th>Area of Scientific Inquiry</th>
<th>Benefit to Veterans</th>
<th>Key VA Priority Alignment</th>
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<tbody>
<tr>
<td>Implementation Science</td>
<td>Ensures “what we know is what we do” on a routine basis and that effective innovations get to Veterans more quickly</td>
<td>ORD Goal: Real-world Impact</td>
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<td>Congressional priority</td>
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<td>Data Science</td>
<td>VA has extensive data that can be better leveraged to help improve Veteran care, outcomes, and experience in a way that ensures Veterans’ privacy and equity</td>
<td>ORD Goal: Making VA Data work for Veterans</td>
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<td>Evidence Act (US PL 115-435)</td>
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<tr>
<td>Science of Engagement</td>
<td>Involving Veterans, providers, and other partners ensures treatments, programs, and policies work for Veterans, and that their lived experiences are considered</td>
<td>VA Strategic Plan: Support Underserved, At-Risk, Marginalized Veteran Populations</td>
</tr>
<tr>
<td>Systems Science</td>
<td>Health care and health go beyond condition and disease labels; it takes a wider lens to understand the moving parts of the enterprise to improve them to ensure safe and effective care</td>
<td>VHA Long-Range Goals (e.g., Connect Veterans to the Soonest and Best Care; Workforce, High-reliability)</td>
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<tr>
<td>Policy Analysis</td>
<td>Many health problems have determinants outside the clinic walls, need to improve alignment and effectiveness of programs, benefits, and policies to ensure optimal Veteran outcomes</td>
<td>VA Legislative Mandates, e.g., Evidence Act MISSION Act</td>
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<td>PACT Act, Hannon Act, STRONG Act</td>
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The Learning Cycle

Priority Goals

Health Problem of Interest

Policy

D2K: Data to Knowledge

Implementation Science (Hybrid Type 2/3)

System Science

QUERI

Data Science

P2D: Performance to Data

Formation of Learning Community

Engagement

Infrastructure (People, Process, Policy, Technology)

Evidence generation (from ORD effectiveness trials)
HSR Applies ORD’s Learning Health System Core Components

1. Systems of leadership
   A set of methods to encourage a network to perform as a system (Learning Community)

2. Governance and management
   The way policies, processes, norms, and actions of a network are structured, sustained, regulated, and held accountable.

3. Quality improvement
   Systematic, continuous actions that lead to measurable improvement in outcomes of health care services and the health status of the network’s targeted patient groups (e.g., QUERI).

4. Community-building and engagement
   Governance, structures and processes that enable all stakeholders to act on their inherent motivations and become involved in the network.

5. Data and analytics
   Activities (SOPs) to collect, validate, organize, and standardize data relevant to a network’s mission and making these data available to all network stakeholders for clinical care, improvement, research and learning.

6. Research
   Drive the generation of new knowledge related to the network’s clinical focus and knowledge related to improvement of the network itself (e.g., HSR, ORD)

Lannon et al - A maturity grid assessment tool for learning networks
- Learning Health Systems - June 2020;
Updated: R. Ramoni, 2023
Evidence Act is Law (US PL 115-435)

- Influences agency budgets
- Requires annual evaluation plans on top priorities that inform policies and resource allocations
- Evaluation plans made public
- Leverage other legislative mandates

Braganza, Kilbourne et al., HSR 2022

Priorities will inform HSR and QUERI Projects:

- **Evidence Act**
  - Evaluation Plans (1 yr)

- **Rapid Response Team**
  - Time-sensitive projects (3-6 mon)

- **Advancing Diversity in Implementation Leadership (ADIL)**
  - Fellows (2 yrs)

- **HSR Merit and QUERI Partnered Evaluation Centers**
  - E.g., evaluations of programs and policies (3+ yrs)

HSR/QUERI Systematic Priority-Setting Process in VA Strategic Plan: Identifying Priorities, Funding Initiatives to Address Priorities, Communicating Results and Impacts
HSR Areas Foundational to Responding to Agency-wide Priorities
(Source: QUERI 2024 Priority Survey Results)

1. **Hire faster and more competitively**: improve workforce recruitment, onboarding, and retention of VA employees and trainees

2. **Connect Veterans to the soonest and best care**: reduce direct care wait times and community care appointment scheduling times by improving clinical availability and scheduling

3. **Promote a culture of safety, learning, and knowledge translation**: implement and evaluate programs focused on innovation, psychological safety, zero harm, and manager/leader training

4. **Prevent Veteran suicide**: prevent Veteran suicide using a public health approach (e.g., outside the clinic walls, partnerships with community service organizations)

5. **Serve Veterans with military and environmental exposures**: improve quality of care, including the identification and management of symptoms among Veterans with military and environmental exposures

6. **Reduce Veteran homelessness**: ensure more at-risk and underserved Veterans receive early interventions, partnerships and supportive services to avoid homelessness
HSR Priorities- Key Reference Documents

- Patient-Centered Outcomes Research Institute (PCORI) Methodology Standards
- Agency for Healthcare Research and Quality (AHRQ) Learning Health System Core Competencies
- VA Quality Enhancement Research Initiative (QUERI) Roadmap
- National Academy of Medicine’s Future of Health Services Research report
- VA Strategic Plan (including Appendix D, highlighting HSR Priority-Setting)
- VA Agency Priority Goals
- VHA Medical Center and Network Director Performance Plan
HSR Priorities: Bottom Line

• HSR prioritizes research that addresses at least one of the areas of scientific inquiry
  • Implementation Science
  • Data Science
  • Science of Engagement
  • Systems Science
  • Policy Analysis

• For other priority topics, research should address impacts on Quintuple Aim goals
  • Improve outcomes (including quality and safety)
  • Increase access
  • Ensure equity
  • Decrease cost (improve value)
  • Support workforce
HSR Team

- Liza Catucci
- Eric Enone
- Bonnie BootsMiller
- Mary Walsh
- Melissa Braganza (QUERI)
- Kara Beck (QUERI)
- Stefanie Gidmark (QUERI)
- Christine Nguyen
- Veronica Gittens
- Judy McMaster
- Diane Murphy
- Amelia Schlak (AAAS)
- Maren Loe (AAAS)
- Alex Meredith (AAAS)
- Tiffin Ross-Shepard
- Cathie Plouzek
- Crystal Henderson
- Amanda Borsky
- Robert O'Brien
- Robert Small
- Amy Kilbourne
Logistics and Next Steps

Amelia Schlak, PhD, RN
SOTA Co-Chair
AAAS Science and Technology Policy Fellow
Health Services Research and Development
Immediate Next Steps

• Planning committee members will reconvene for the debrief from 12:30 to 2:30

• If you are not part of the planning committee, thank you for joining us!
Long Term Next Steps

- Research agenda > Service directed RFA
  - Developed by ORD, based on findings of work groups of information gaps
- Journal supplement
- Briefing to leadership
- Cyberseminars
THANK YOU!