RIVET QUERI Program

Improving Care for Complex, High-Risk Veterans in Primary Care

Overall Goal: High-**RI**sk **VET**erans **(RIVET)** QUERI Program aims to advance VHA primary care ability to provide comprehensive, evidence-based care for complex, high-risk patients. RIVET will support VHA as a learning organization through data-driven priority-setting, leveraging virtual care to enhance mental and whole health, and standardizing care to reduce inefficiency and variations in care quality for high-risk patients

Approaches to Improving Health Outcomes for High-Risk Veterans

Problem: The **top 5% of Veterans** at the highest risk for hospitalizations account for almost **50% of VHA healthcare costs, have significant multimorbidity, and are at high risk for poor health outcomes.** Evidence-based practices (EBPs) are available to address the most common needs among high-risk Veterans, such as assessing for functional, behavioral, and social needs and developing a cohesive treatment plan. Increasing use of these practices in primary care can greatly impact health and quality of care for these high-risk Veterans.

Evidence Based Practice 1 (EBP1): Comprehensive Assessment and Care Planning (CACP).

Healthcare staff assess for *modifiable* risk factors, such as functional, behavioral, and social needs, and create a comprehensive care plan that addresses their needs.

Evidence Based Practice 2 (EBP2): Phone-Based Health Coaching for Medication Adherence (HCMA).

Phone-based health coaching allows staff to *virtually* identify and address patient goals, preferences and barriers around taking medications.

Primary care delivery of Evidence Based Practices for high-risk Veterans will:

- Increase shared-decision making and whole health approach to care

- Address barriers to medication adherence

- Avoid hospitalizations for ambulatory care-sensitive conditions

Implementation Strategies

Evidence-Based Quality Improvement (EBQI) is a bundle of implementation strategies that engages national-, VISN-, and facility-level leadership and front-line clinical staff to identify challenges and develop agendas based on data.

EBQI-Individual Consultation (EBQI-IC), which includes tailored individual consultation with each participating site
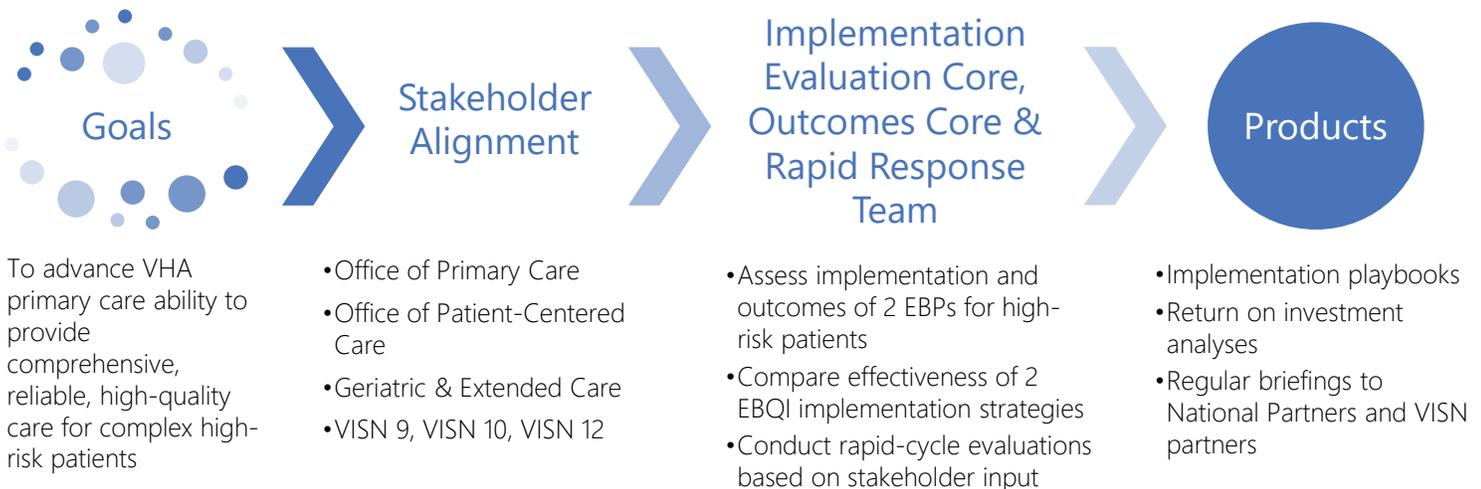
VS

EBQI-Learning Collaborative (EBQI-LC), which includes a learning collaborative with multiple sites

Mentoring Core

The RIVET Mentoring Core will develop future leaders in the implementation of evidence-based practices for high-risk veterans

- Four VA early career investigators with proven track records at Greater Los Angeles, Pittsburgh, and Puget Sound have been identified for the first mentee cohort

- Mentors will collaborate to develop mentees' knowledge and experience around implementation and evaluation of quality improvement initiatives for complex, high-risk Veterans

- Skills will include: continuous quality improvement, stakeholder engagement, implementation study design and evaluation, and advanced qualitative and quantitative evaluation techniques

Program Overview

Goals > **Stakeholder Alignment** > **Implementation Evaluation Core, Outcomes Core & Rapid Response Team** > **Products**

Goals

To advance VHA primary care ability to provide comprehensive, reliable, high-quality care for complex high-risk patients

Stakeholder Alignment

- Office of Primary Care
- Office of Patient-Centered Care
- Geriatric & Extended Care
- VISN 9, VISN 10, VISN 12

Implementation Evaluation Core, Outcomes Core & Rapid Response Team

- Assess implementation and outcomes of 2 EBPs for high-risk patients
- Compare effectiveness of 2 EBQI implementation strategies
- Conduct rapid-cycle evaluations based on stakeholder input

Products

- Implementation playbooks
- Return on investment analyses
- Regular briefings to National Partners and VISN partners

If you would like to learn more or partner with us, please contact Elvira Jimenez, PhD at Elvira.Jimenez@va.gov

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