

New QUERI Dedicated to Polytrauma and Blast-Related Injuries

VA's Health Services Research & Development Service (HSR&D) and Rehabilitation Research & Development Service (RR&D) are co-sponsoring a new QUERI Coordinating Center for Implementation of Practices in Polytrauma and Blast-Related Injuries. The Polytrauma QUERI is being established to identify and implement evidence-based practices for the challenges to health and health care presented by modern warfare practices. This initiative also will focus on managing the transition of health care from the Department of Defense (DoD) to VA, and from facility-based to community-based care.

Dealing with the changing nature of warfare

As a result of the changing nature of modern warfare that includes new causes of injury (e.g., improvised explosive devices), as well as improvements in body armor and surgical stabilization at the front-line

of combat, more war-wounded are returning with complex, multiple injuries such as amputations, brain injuries, and psychological adjustment problems. Moreover, improvised explosive devices, blasts (high pressure waves), landmines, and explosive fragments now account for the majority of combat injuries. Blast-related injuries are often "polytraumatic," meaning they result in injury and/or impairment to more than one body system or organ. Thus, individuals who sustain polytraumatic injuries have complex rehabilitation needs.

The Quality Enhancement Research Initiative (QUERI) promotes the use of evidence as a basis for clinical decision-making and uses a data-driven, outcomes-based approach to enhance system-wide quality and effectiveness. However, polytrauma represents a new type of entity for QUERI investigations because:

- The evidence base for treatment is rapidly evolving and is less systematically defined than prior QUERI conditions;
- Polytrauma patients seen in VA include both veterans and active-duty military, so coordination across multiple organizational boundaries is imperative; and
- The focus is on multiple morbidities rather than a single disease or condition.

New Polytrauma and Blast-Related Injuries QUERI

The new Polytrauma and Blast-Related Injuries (PT/BRI) QUERI will be a collaborative endeavor involving the four Polytrauma Lead Centers located in Minneapolis, MN, Tampa, FL, Palo Alto, CA and Richmond, VA. The Research Coordinator for PT/BRI-QUERI

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will be *Nina Sayer, PhD*, a core investigator with HSR&D's Center for Chronic Disease Outcomes Research, whose research has focused on post-traumatic stress disorder (PTSD), mental disorders, and disability. The co-Clinical Coordinators will be *Barbara Sigford, MD, PhD*, Director of the Traumatic Brain Injury Program and National Program Director of Physical Medicine and Rehabilitation (PM&R) at the VAMC in Minneapolis, and *Steven Scott, DO*, Director of the Polytrauma Rehabilitation Center at the James

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The Evolving QUERI Model – a Progress Report

Earlier this year, Dr. Stephan Fihn, former Acting CRADO and ongoing Director of the Northwest Center for Outcomes Research in Older Adults, and Dr. Joe Francis, Associate Director, HSR&D/QUERI, laid out a vision for the transformation of QUERI that would:

- Create a durable partnership between researchers and system leaders,
- Apply evidence-based approaches to a broader spectrum of conditions affecting veterans,
- Expand opportunities for researchers to participate in national initiatives, and
- Continually assess the VA research pipeline and its effects on the care of veterans.

This vision, incorporating many lessons learned since QUERI's inception in 1998, has led to a number of impacts in the past year that we highlight in this column.

Enhancing the research-operations partnership

QUERI created a community of researchers committed to improving quality and efficiency in the country's largest integrated healthcare organization. These goals require shared effort among researchers, clinicians, and managers. On the front-line, researchers need to become coaches and facilitators for "bottom-up" change. At the same time, large system change requires "top-down" strategic input. On the national level, we have established a regular dialogue between VA's Office of Research and Development (ORD), the Office of Quality and Performance, the Office of Patient Care Services, and VA Operations and Management. Leaders from each of these offices meet to discuss ongoing QUERI and ORD projects, identify emerging issues and performance trends within VA, and set priorities for new projects. These sessions have already resulted in a number of national initiatives that involve HSR&D investigators, such as a cancer care quality improvement initiative, and new projects to identify and disseminate best practices for acute coronary care, pneumonia care, and surgical infection prophylaxis.

Broadening the scope of QUERI projects

QUERI centers were initially developed with a disease focus, which was appropriate initially but, over time, began to limit the scope of QUERI work. The most challenging conditions facing VA, such as the aging veteran population or the surge in polytrauma and blast-related injuries, involve complex co-morbidities and an evidence-base that is still evolving. To address these more effectively, we have begun planning new QUERI centers by inviting VA researchers and national leaders to identify what's needed to address performance gaps and to define "best available" evidence and practices that require system-wide spread. This approach was used to develop our new Polytrauma and Blast-Related Injury QUERI (see article on page 1 in this issue), and is currently underway for VA's acute inpatient needs.

Moving forward

QUERI's success in evolving to meet the needs of VHA has been recognized by national leadership, including our new Chief Research and Development Officer, Joel Kupersmith, MD. Additional signs of confidence include formal recognition in VHA's Strategic Plan (Initiative 6.2 reads "increase collaboration between research and operations to use health services research and the QUERI model to improve care delivery"), and the continued growth of resources allocated for implementation research. Thus, the expectations for QUERI performance and contributions are higher than ever. Responding to the needs of VHA will require increasing the numbers of implementation researchers (a challenge when Career Development funding is constrained), as well as developing new structures and relationships to support the work of existing QUERI groups.

Shirley Meehan, MBA, PhD

Acting Director, HSR&D

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Haley Veterans' Hospital in Tampa, and Program Director of PM&R at the University of South Florida Medical Center.

Establishing a database and outcomes tracking system for this population will be an important initial priority for the Polytrauma QUERI team. Although the main Polytrauma QUERI activities will begin

on October 1, 2005, preliminary meetings between QUERI researchers, VHA leadership, and representatives of the DoD will be held later this summer.

Joe Francis, MD, MPH

Associate Director, HSR&D/QUERI

SCI-QUERI Receives Grant from Christopher Reeve Paralysis Foundation

Respiratory function is often impaired following a spinal cord injury (SCI), and respiratory complications are the leading cause of morbidity and mortality in persons with SCI. Smoking adds to this problem and is a risk factor for cardiovascular disease, a leading cause of illness and death among those with chronic SCI. A survey showed that 24% of veterans using the VA as their usual source of health care are current cigarette smokers, and tobacco consumption is the single most preventable risk factor for disease. The percentage of smokers among veterans with spinal cord injury is higher at 32%, and for veterans with mental illness, it goes up to 47%.

Frances Weaver, PhD, Research Coordinator for HSR&D's Spinal Cord Injury Quality Enhancement Research Initiative (SCI-QUERI), is the principal investigator, and Bonnie Spring, PhD is the co-PI for a Quality of Life grant focusing on tobacco use in veterans with SCI. The \$24,960 grant supports a project

that will create a brief multimedia tobacco cessation message targeted to veterans who have SCI or disease and smoke, and who are at different stages of readiness to quit.

Smokers are likely to be in different stages of quit readiness and need to be cued to keep re-thinking the pros and cons of smoking vs. quitting, so that they can progress further along the stages of change.

These stages include:

- Pre-contemplation,
- Contemplation,
- Preparation,
- Action, and
- Maintenance.

Different "hooks" are thought to work better for smokers at different stages, so the message that is developed needs to be tailored to address the different stages of change. For example, a person in the pre-contemplation stage needs to hear a lot about the negative aspects of smoking, while those in the action stage need information about tools and supports, and maintainers need to

hear about staying vigilant for relapse triggers.

This project will develop a video message that incorporates several of these "hooks" to increase veterans'

Twenty-four percent of veterans using the VA as their usual source of health care are current cigarette smokers, and tobacco consumption is the single most preventable risk factor for disease.

understanding of the risks and negative consequences (both generic and specific to SCI) of smoking, and to move them further along the continuum of change toward actually quitting smoking. Investigators will survey several groups of veterans with SCI who are current or past smokers to identify their current smoking habits, reasons for smoking, quit attempts, and quit attempt strategies they have tried. Building upon education materials from the Surgeon General's office and the Centers for Disease Control, this consumer input will be used to develop the video message.

As supporters of the research, the Christopher Reeve Paralysis Foundation is committed to funding research that develops treatments and cures for paralysis caused by spinal cord injury and other central nervous system disorders. Quality of Life grants are given to programs or

QUERI Quarterly is a quarterly publication of the Office of Research and Development's Health Services Research and Development Service. This newsletter discusses important issues and findings regarding the Quality Enhancement Research Initiative. QUERI focuses on nine conditions due to their high volume and/or high risk among VA patients: chronic heart failure, colorectal cancer, diabetes, HIV/AIDS, ischemic heart failure, mental health, spinal cord injury, stroke, and substance use disorders. *QUERI Quarterly* is available on the web at www.hsr.d.research.va.gov/publications/queri_quarterly/.

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projects that improve the daily lives of people living with paralysis, particularly spinal cord injuries. To learn more, visit their website at www.christopherreeve.org. To learn more about SCI-QUERI and its efforts to identify and address knowledge gaps, promote research, and conduct activities that improve lifelong medical care, health-related quality of life, and community integration of individuals with SCI&D, visit our website at www.sci-queri.research.med.va.gov/.

Frances Weaver, PhD

Research Coordinator,
SCI-QUERI

Pilot Project Funded to Develop Evidence Syntheses for VA Policymakers

Two AHRQ funded Evidence Practice Centers (EPCs)—Southern California EPC and Portland, OR EPC, were recently funded by HSR&D on a pilot basis to develop evidence syntheses on requested topics. Each Center will generate three evidence syntheses for VA over the course of a year. The evidence syntheses will be used to inform VA clinical policy, such as the development of clinical practice guidelines, setting directions for future research to address gaps in knowledge, identifying the evidence to support VA performance measures, and rationalizing drug formulary decisions. Topics of the first two syntheses are: acute stroke treatment with thrombolytics, and management of benign prostatic hypertrophy. A planning committee with representation from HSR&D, Patient Care Services, Office of Quality and Performance, and the VISN Clinical Management Officers, has been established to identify future priority issues and to insure quality of the final products. For more information contact: Joe Francis at Joe.Francis@va.gov

QUERI Submission Deadline

QUERI Quarterly is glad to accept submissions for publication consideration. Please submit articles, updates or other information of interest to our readers by **Tuesday, November 1, 2005** for publication in our December issue. Submit to Diane Hanks at diane.hanks@med.va.gov.

VA Office of Research and Development, Health Services Research and Development Service

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