

The background of the cover is a dark blue gradient with a pattern of thin, light blue lines that create a perspective effect, resembling a grid or a series of parallel lines receding into the distance. The text is centered in the upper half of the page.

# VHA Innovation Program eBook Quarterly Portfolio

## VHA Innovation Program Recent Highlights

### VHA 2016 Employee Innovation Competition

The 2016 Employee Innovation Competition (EIC) launched June 29<sup>th</sup> and closed July 20<sup>th</sup>. The EIC focused on two general topics and eight program-specific topics:

#### **General Topics**

1. Innovative ideas to reduce or eliminate barriers to access to care for Veterans.
2. Innovative ideas for the identification, socialization, and/or diffusion of best practices and innovation across the organization.

#### **Program-Specific Topics**

1. Identify ways to reduce preventable harm to Veterans (patient safety).
2. Identify innovative ways to better utilize pharmacists in primary care to increase access to care for Veterans.
3. Identify innovative ways to better utilize pharmacists to improve medication continuation for Veterans transitioning from the DoD Health Care System to the VA Health Care System.
4. Identify how best to provide care beyond VA Medical Center (VAMC) walls (kiosk, telehealth, smart phone, etc.) or bring care to rural Veterans.
5. Innovative approaches to successfully recruit medical providers (physicians, nurses, physical therapists/occupational therapists (PT/OT), radiation technicians, etc.) to rural areas.
6. Identify peer support group models for women Veterans.
7. Identify gender-tailored treatment modalities for women Veterans.
8. Identify innovative approaches to the practice of “whole health.” “Whole health” is defined as a combination of physical and psychosocial care focused on the Veteran’s personal health and life goals – personalized, proactive, patient-driven care.

Ideas will be narrowed down to 100; those will be developed into proposals and then narrowed down to a top 25. This selection process is currently underway. Next quarter’s eBook will be dedicated to the 2016 EIC selected projects.

*Looking for previous eBooks? [Click here](#)*

## Featured Innovator



**Dr. Laurie  
Zephyrin**

This quarter, the VHA Innovation Program is proud to feature Dr. Laurie C. Zephyrin. Laurie is the lead subject matter expert for the Maternity Tracker project featured in last month's eBook.

Dr. Laurie C. Zephyrin is the first national Director of Reproductive Health in the Office of Women's Health Services, Department of Veterans Affairs. Dr. Zephyrin is a board certified Obstetrician and Gynecologist with extensive leadership experience in health policy, public health and health systems domestically and internationally. She is on faculty at New York University School of Medicine in Obstetrics and Gynecology; served as a White House Fellow, a Robert Wood Johnson Clinical Scholar and is a current Aspen Institute Health Innovator Fellow. Her work in health systems and health care delivery has focused on translating evidence based research into effective policy and practice, with the overall mission of ensuring quality health care for all populations, especially vulnerable populations. She completed her training at Harvard's Integrated Residency Program in Obstetrics and Gynecology and holds a BS in Biomedical Sciences from the City College of New York, an MD from the New York University School of Medicine, and an MPH and MBA from Johns Hopkins University.

The Maternity Tracker project addresses the gaps in VistA for maternity tracking and monitoring through a combination of field tested enhancements for better screening, tracking, monitoring, and sharing of maternity data, as well as improving women Veteran's access to earlier pre-natal care, complete post-partum care, and education information with an emphasis on care coordination in and outside of VA. Currently being tested in Salt Lake City, Maternity Tracker is set to expand pilot testing to four VAMCs this fall. The success of the project is due to a number of dedicated women's health professionals, including Laurie. The Maternity Tracker Innovation Coordinator, Allison Amrhein, says of Laurie; *"She is one of the brightest people I've worked with and without her guidance and support, this project wouldn't be as successful as it is and as it has the potential to be."* Revisit Maternity Tracker by [clicking here](#). Maternity Tracker can be found in the FY16 Quarter 2 eBook.

## This Quarter in Innovation

This quarter, the Innovation Program is featuring the following three projects:

- Seamless Ordering of Tests for Transplants
- Laboratory Auto Verification
- VACI/FitCause Move for Good.

### Seamless Ordering of Tests for Transplants

This product provides a way for VA Care teams at VAMC transplant hubs to order and view results of lab and radiology tests conducted at VAMC tertiary facilities .

### Laboratory Auto Verification

This process relies on rule sets and algorithms to automatically validate laboratory results before uploading those results into an electronic health record (EHR) for clinicians. The purpose of the innovation project is to determine whether it is possible to use auto-verification to replace manual review of laboratory results in the VA.

### VACI/FitCause Move for Good

VACI and FitCause launched a four month program to improve Veterans overall health, including mental health, in collaboration with Team Red, White, and Blue (RWB). As part of this program, FitCause altered their current website dashboard to include evidence-based mental health surveys for Veterans to fill out monthly. Veterans also wear a Jawbone UPMove device to track their physical activity and sleep.



*Team RWB and FitCause Move for Good Participants*

## Seamless Ordering of Tests for Transplants

### Description:

In order for some Veterans to complete necessary laboratory and radiology testing nearest their home, providers at the spoke facilities must contact the patient's primary care provider, often by email, to enter orders at an outlying facility. This can result in decreased provider productivity, miscommunication, missed testing or tests that are not completed on time, or inconvenience to patients. Patients also often have had to drive long distances to get testing that could have been done closer to their home. This project alters VA's electronic health record to enable VA care team members at one VA site to order a lab test or radiology exam for a Veteran at another VA site.

### Goals:

The purpose of this effort is to provide a way for VA care teams to order lab and radiology tests between one VAMC and another VAMC or Community Based Outpatient Clinic (CBOC). VA requires that Computer Patient Record System (CPRS)/VistA provide clinicians with the ability to order patient radiology and laboratory testing to be done at another VA facility including those outside the umbrella of the ordering facility or its nearby local clinics.

### Outcome/Result:

Development in CPRS/VistA has been ongoing for the past year. Currently the product is being tested by users in the Future Technology Laboratory (FTL). It will be tested in a production environment at Durham, Salisbury, and Fayetteville VAMCs starting in early September 2016.

### WANT MORE INFORMATION?

### [CONTACT THE INNOVATION COORDINATOR](#)

### QUICK LOOK

*Do you know how many transplants VA does annually?*

*VHA employee, **Sue Benware**, submitted this idea as part of the 2014 EIC.*

*This is a **grassroots** portfolio innovation.*

### FAST FACTS

**BUSINESS OFFICE CONNECTION:** NATIONAL SURGERY OFFICE

**INNOVATION COORDINATOR:** ALLISON AMRHEIN

**MULTIMEDIA LINK:** Know how many transplants VA does annually? [Submit your guess!](#)

## Laboratory Auto Verification

### Description:

Auto-verification of laboratory results is a process that relies on rule sets and algorithms to automatically validate laboratory results before uploading those results into an EHR for clinicians. Auto-verification rule sets evaluate the analytical validity of the results returned from the laboratory machine and monitor for errors that would return an inaccurate result such as instrument error flags or results suggestive of compromised specimen. The process obviates the need for a laboratory technician to manually review and upload the results to the EHR.

### Goals:

The purpose of the innovation project is to determine whether it is possible to use auto-verification to replace manual review of laboratory results in the VA. Medical laboratories have multiple machines that each handle different types of tests. For the purposes of this pilot, the team only evaluated whether auto-verification can be achieved on the chemistry instrument. Our hypothesis is the prototype will be able to auto-verify at least 70% of lab results, leading to fewer errors, improved turnaround time and reduced costs associated with review of laboratory results, both labor and material.

### Outcome/Result:

The initial pilot began in 10/2014 and ran through 08/2015. The pilot was performed at the Kansas City VAMC on the chemistry instrument, the laboratory device that runs the most tests, has the biggest workload and the most complicated rule sets of all the laboratory instruments. The pilot exceeded the target for three of the metrics: auto-verification rate, the error rate and the material savings. The turnaround time on one critical laboratory test commonly ordered by the emergency room, BNP, decreased by 8% or 2.7 minutes. While the labor savings were lower than the initial target, there will still significant representing approximately 20% of a medical technologist FTE. Taken together, the pilot results that auto-verification can work in the VA environment and demonstrate that the innovation can reduce errors, improve turnaround time and reduce the costs associated with verification of laboratory tests.

Based on the success of the pilot, the business sponsor, Pathology, has decided to move forward with beta testing of this innovation at five sites in 2016. The five pilot sites will include Tampa, Iowa City, Tucson, Fresno, and Salt Lake City. The beta testing will last for a period of 18 months and enable each site to enable auto-verification on four (4) laboratory instruments of their choice.

### WANT MORE INFORMATION?

### [CONTACT THE INNOVATION COORDINATOR](#)

### QUICK LOOK

*Auto-verification is in use in many private healthcare systems and most adopters can achieve auto-verification of **80% to 90%** of all laboratory results.*

*To date, the VA has not been able to utilize commercially available rules-based algorithms to perform auto-verification because there is no mechanism to upload auto-verified results from the middleware to the patient chart in VistA.*

### FAST FACTS

#### **BUSINESS OFFICE**

**CONNECTION:** PATHOLOGY, OFFICE OF PATIENT CARE SERVICES

#### **INNOVATION**

**COORDINATOR:** HEATH FORNEY, SR.

## VACI/FitCause Move for Good

### Description:

VA has undergone a recent shift in focus to the need to provide coordinated care for the whole person. VA health care providers coordinate with each other to provide safe and effective treatment for the whole person—head to toe. Having a healthy body, satisfying work, and supportive family and friends, along with getting appropriate nutrition and exercising regularly, are just as important to mental health as to physical health. Numerous studies have been conducted which prove this correlation - that physical exercise increases mental well-being. Leveraging FitCause's platform, with adjustments specific for the VA population, and the use of health and fitness trackers, this project aims to support the mental health of thousands of Veterans through social support, gamification, and community involvement.

### Goals:

VACI and FitCause launched a four month program to improve Veterans overall health, including mental health, in collaboration with Veteran Service Organization, Team Red, White, and Blue (RWB). As part of this program, FitCause altered their current website dashboard to include evidence-based mental health surveys for Veterans to fill out monthly. Veterans also wear a Jawbone UPMove device to track their physical activity and sleep.

Veterans from seven Team RWB chapters and corresponding geographical VAMCs will participate in the pilot. The hypothesis is that increased physical activity, improves mental health. In addition, the aspects of gamifying the pilot between the geographic teams and encouraging teams with social physical activities, will increase their participation, ergo their physical and mental health. FitCause will analyze and report the survey and quantitative data results at the end of the pilot period.

### Outcome/Result:

The pilot kicked off at the seven locations at the beginning of June. The locations are San Diego, Los Angeles, Dallas, New York, Washington DC, Boston and Denver. Over 400 Veterans are participating in the program. Once the pilot is over and the survey reports are analyzed, the eBook will publish an update on the results.

### WANT MORE INFORMATION?

### [CONTACT THE INNOVATION COORDINATOR](#)

### QUICK LOOK

*Move for Good is from the **strategic** innovation portfolio.*

*Anyone can utilize FitCause and give back:*

<https://www.fitcause.com/>

*Keep up with the competition!*

*Follow the National*

*Leaderboard:*

<https://www.vetsmoveforgood.com/missions/move-for-good/leaderboard>

### FAST FACTS

#### **BUSINESS OFFICE**

**CONNECTION:** HEALTH PROMOTION AND DISEASE PREVENTION AND OFFICES OF MENTAL HEALTH

#### **INNOVATION**

**COORDINATOR:** ALLISON AMRHEIN

**MULTIMEDIA LINK:** [Move for Good orientation pictures](#)