

PEPReC

Partnered Evidence-Based Policy Resource Center

Informing VA priorities with rigorous data analysis

The Partnered Evidence-Based Policy Resource Center (PEPReC) was established in 2017 and is a QUERI resource center designed to provide timely, rigorous data analysis to support the development of high-priority policy, planning, management initiatives and quantitative program evaluations.



PEPReC Overview



ACCESS TO CARE

Collaborate with VA operations partners to enhance planning and improve access to and efficiency/quality of care



PROGRAM EVALUATION

Engage with operations partners and investigators to design and implement randomized program evaluations



RESEARCH FACILITATION

Facilitate consortia to expedite operations-relevant evaluation

PEPReC Services and Activities



Technical assistance on randomized evaluation design, metrics, and analytic plans



Partnering in learning agenda development, in compliance with the Foundations for Evidence-based Policymaking Act



Facilitation of communication between evaluators and operations partners



Programming support, including programmer to programmer technical assistance during evaluations

Availability of resources depends on health system priorities and is greatest for areas of high priority to the Veterans Health Administration. These include issues identified by HSR&D/QUERI with established consortia of investigators — current health system priorities include access to care, MISSION Act, community care, opioid risk mitigation, and suicide risk mitigation.

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Quality Enhancement Research Initiative

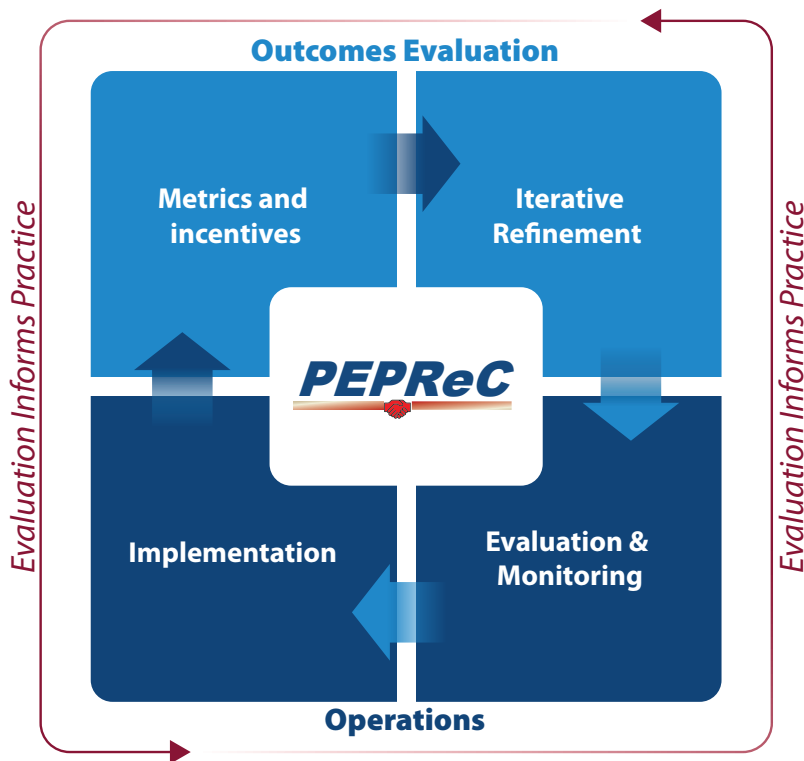
PEPReC Process

PEPReC's goal is to be an engine for VA's learning health system, where research informs practice and practice informs research.

- Designing metrics and incentives, informed by existing research
- Collaborating with operations partners to implement those metrics and incentives
- Evaluating results with randomized, quasi-experimental, or strong observational designs
- Suggesting and making refinements to evaluation and operations plans, reflecting results and operational constraints and objectives

Medical Scribes, Productivity, and Satisfaction – This policy brief describes increases in provider productivity and satisfaction associated with private sector scribe use, offering guidance to VHA policymakers. The MISSION Act mandated a two-year pilot program to study the impact of medical scribe use in VHA emergency departments and specialty care clinics. In partnership with the Office of Veterans Access to Care, PEPReC is evaluating the impact of medical scribes on VHA provider productivity and patient satisfaction during the pilot.

Priority access to health care: Evidence from an exogenous policy shock – PEPReC investigators evaluated the effects of changes in appointment scheduling policies on patients' access to primary care. Recommendations for optimal allocation of resources include recognizing and explicitly accounting for differences in access between established and new patients.



Working with PEPReC

PEPReC's services are particularly relevant during the Pre-implementation and Sustainment phases by helping develop rigorous program evaluation plans to help policy makers with strategic decisions regarding the adoption or continuation of clinical practices, programs, and policies.

The QUERI Roadmap provides a systematic, three-phased approach to help practitioners overcome barriers to implementing effective practice, Pre-Implementation, Implementation and Sustainment. For more details, visit the [QUERI Roadmap](#).

