Evaluation of the National Implementation of the VA Diffusion of Excellence Initiative (DEI) on Advance Care Planning (ACP) via Group Visits (ACP-GV)

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

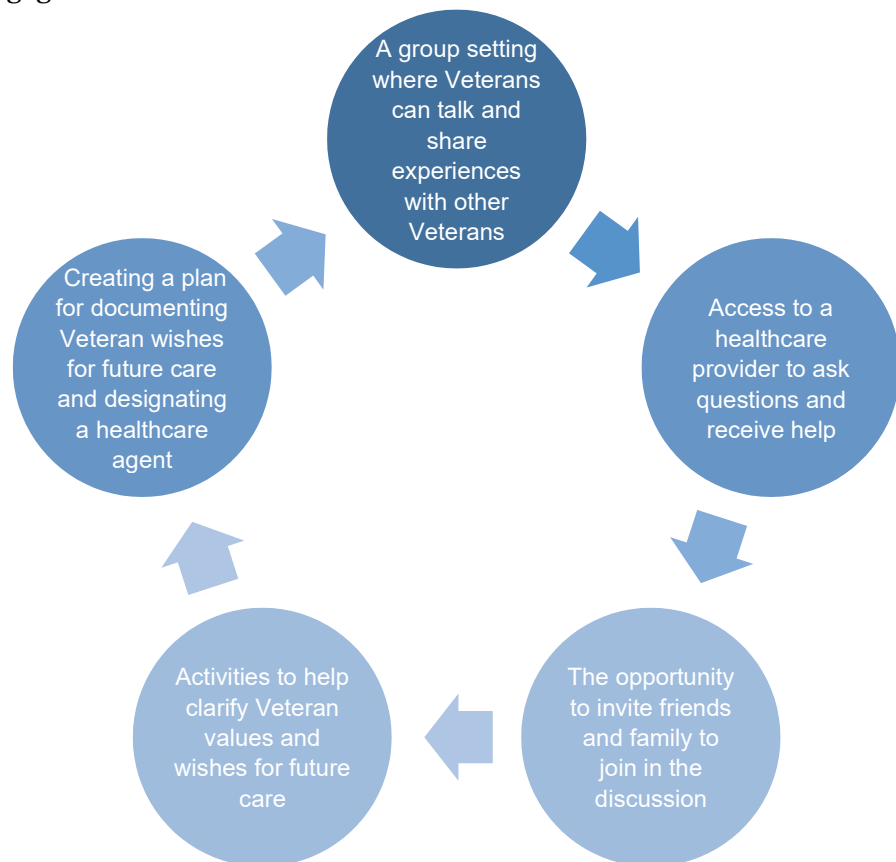## Now more than ever, helping honor Veteran preferences

This evaluation enhances VA's capacity to adopt and sustain evidence-based practices that allows Veterans to identify who they trust for ACP by partnering with **2 National VA Program Offices, 18 VISNs, and 49 facilities** to develop evidence- based tools and strategies to promote national dissemination efforts across VA. We support **852 employees** in delivering ACP-GV, a Diffusion of Excellence Gold Status practice, to over **32, 000 Veterans.**

What is ACP-GV?

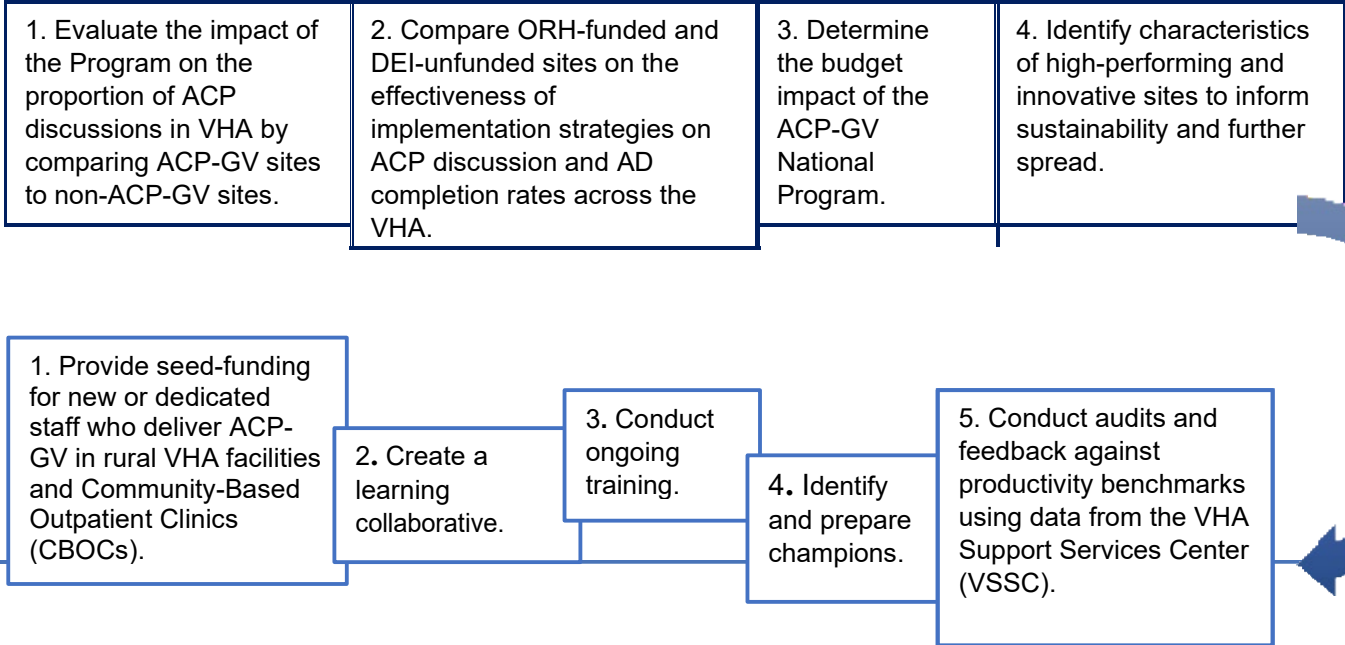An estimated 6.7 of 9.05 million Veterans enrolled in VHA do not have an advance directive (AD).

Named a VA Diffusion of Excellence Initiative and Gold Status Practice, ACP-GV is **more efficient** in that six to twelve Veterans can be served in a group by a clinical provider in the same length of time as one Veteran. ACP-GV seeks to engage and enable Veterans to make informed decisions and offers improved choice and timeliness to ACP discussions in medically underserved rural areas. With an up-to-date AD, Veterans experience **improved quality of life** and communication with trusted others and healthcare professionals.

This QUERI Partnered Evaluation Initiative seeks to evaluate and determine best practices to facilitate a nationwide spread of one of the VA Diffusion of Excellence Initiatives, ACP-GV, which includes the cost saving- and process-oriented approach of hosting discussions regarding the topic of ACP and AD among groups of Veterans.

A group setting where Veterans can talk and share experiences with other Veterans

Access to a healthcare provider to ask questions and receive help

The opportunity to invite friends and family to join in the discussion

Activities to help clarify Veteran values and wishes for future care

Creating a plan for documenting Veteran wishes for future care and designating a healthcare agent

Implementation/Evaluation Strategies

]The ACP-GV National Program is responsible for the implementation, evaluation, and spread of ACP-GV across the VHA healthcare system guided by four specific aims using five implementation strategies in this national evaluation:

1. Evaluate the impact of the Program on the proportion of ACP discussions in VHA by comparing ACP-GV sites to non-ACP-GV sites.	2. Compare ORH-funded and DEI-unfunded sites on the effectiveness of implementation strategies on ACP discussion and AD completion rates across the VHA.	3. Determine the budget impact of the ACP-GV National Program.	4. Identify characteristics of high-performing and innovative sites to inform sustainability and further spread.

1. Provide seed-funding for new or dedicated staff who deliver ACP-GV in rural VHA facilities and Community-Based Outpatient Clinics (CBOCs).

2. Create a learning collaborative.

3. Conduct ongoing training.

4. Identify and prepare champions.

5. Conduct audits and feedback against productivity benchmarks using data from the VHA Support Services Center (VSSC).

National ACP-GV Sites

52 VHA sites have implemented ACP-GV, delivering it to over 32,000 Veterans with 32% creating a new AD