

QUERI FLOW3

VA



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

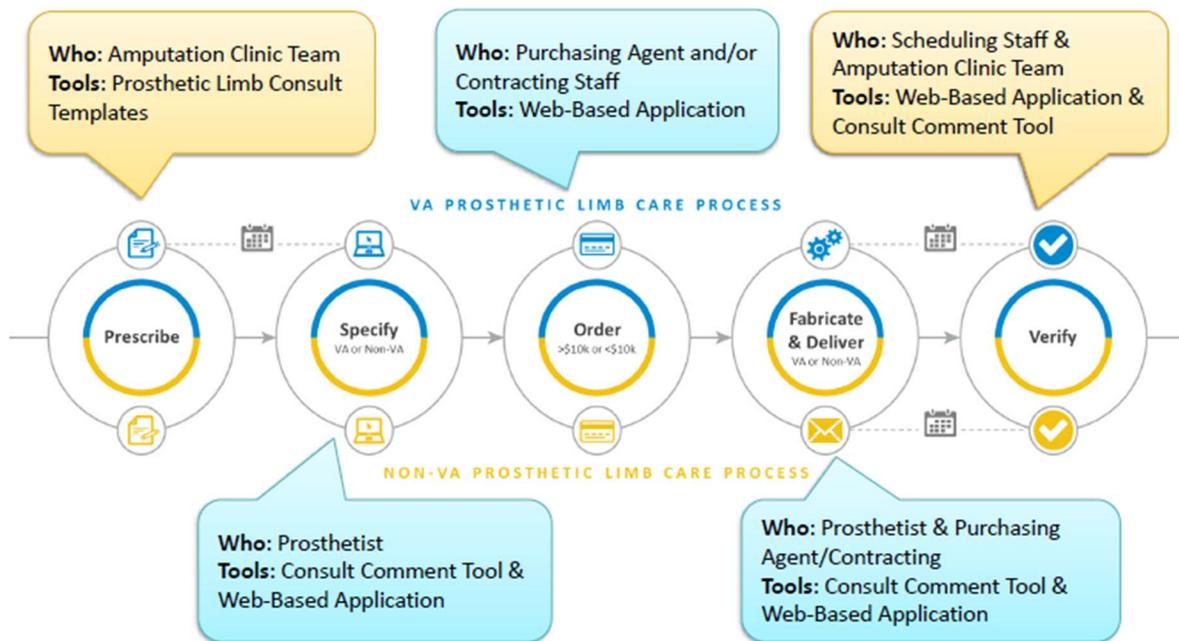
Evaluation

Streamlining the prosthetic limb procurement process in the VA

FLOW3, a Diffusion of Excellence Gold Status Practice, standardizes the acquisition of prosthetic limbs within the VA. The VA Collaborative Evaluation Center partnered with **two National VA Program Offices** and **one VA Medical Center** to evaluate FLOW3 expansion and provide data to the program team to support successful implementation enterprise wide. Over 800 employees are trained in FLOW3, and it has affected 6,682 Veterans.

Connecting personnel across 3 apps

The FLOW3 Evaluation is a partnership between **QUERI, Diffusion of Excellence, and VHA Rehabilitation and Prosthetic Services**. FLOW3 is currently in use at 89 VA Medical Centers and will soon be deployed enterprise wide.



Frontline users report that **FLOW3 has improved documentation, limb tracking, and efficiency** in the prosthetic limb procurement process.

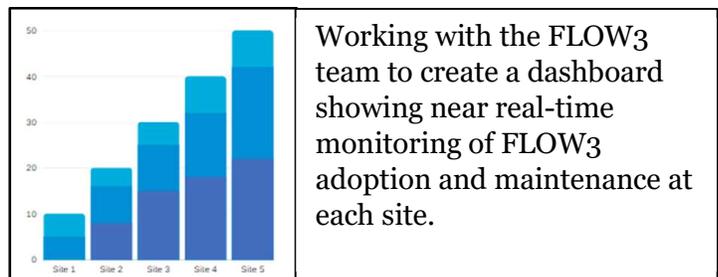
Evaluating national rollout of FLOW3

FLOW3 is in use at 89 facilities and is on track to be used at all VA facilities with an Amputation Clinic Team by Quarter 2 of Fiscal Year 2021. We are working closely with the FLOW3 team to:

- Understand the effects of FLOW3 on timeliness of the prosthetic limb process, assess Veteran satisfaction, and monitor adoption and continued use of FLOW3
- Calculate the return on investment associated with FLOW3
- Evaluate nationwide rollout of FLOW3 and understand the experience of frontline staff prior to and after implementation

Using evidence to improve implementation

We collected data from the first cohorts of VAMCs to implement FLOW3 to assist the FLOW3 team improve implementation at future VAMCs. Two examples are:



Sites in cohort 2 (VISN 9) received an in-person training following feedback from cohort 1 that in-person training was preferable to virtual training. Given the challenges around 1) the cost and logistics of orchestrating in-person trainings enterprise wide and 2) the COVID-19 pandemic, all training has been moved to TMS because:

- It allows for improved reporting capability on staff who have completed training modules
- It is the best avenue for scaling due to the established platform and associated support

The remaining sites that implement FLOW3 will be randomized to one of two implementation strategy groups in order to understand how different implementation strategies impact adoption and maintenance of FLOW3.

For more information, check out:
<https://www.queri.research.va.gov>

If you would like to learn more or partner with us, please contact our Program Coordinator, Ariel Briggs, at Ariel.Briggs@va.gov.

Principal Investigators:
Chelsea Leonard, PhD
Michael Ho, MD, PhD
Rocky Mountain Regional VA Medical Center

Jeffrey Heckman, DO
VA Puget Sound Health Care System