

## Executive Summary

The SCI QUERI mission is: “to identify and address knowledge gaps and promote research to improve the medical care, health-related quality of life and community integration for persons with SCI&D.” Our goals include: address the QUERI steps as it relates to our focus areas of respiratory and cardiovascular impairments, pressure ulcers and pain; to implement and test the SCI Lifelong care model as the mechanism by which implementation/change can be accomplished in the SCI&D veteran population; and to continue to build research capacity in implementation research and SCI&D.

Our major implementation efforts to date have focused on improving influenza and pneumococcal pneumonia rates in veterans with SCI&D (VIP). Rates for SCI&D in FY98 were only 26% for influenza and 26% for PPV. Using multiple strategies including patient reminders and education, provider education, computerized clinical reminders and emphasizing use of standing orders, vaccination rates for influenza and PPV are significantly higher in the past two years ( FY02: 62% and 68%; FY03: 59% and 75%). As a result of our efforts, the computerized clinical reminder for influenza vaccination now targets all persons with SCI&D, regardless of age, and the VHA annual directive for influenza vaccination now identifies SCI&D as a high risk group for vaccination. One of the clinical practice products of our vaccine work has been the development of patient education materials tailored to persons with SCI&D. Two articles on our pilot work (Flu pilot) to support our vaccine efforts were published in the Journal of Spinal Cord Medicine this fall with two commentaries on SCI QUERI and our work (Evans et al., 2003; Weaver et al., 2003; Nelson, 2003; Goldstein and Hammond, 2003).

Other ongoing efforts include a multi-site trial of education and structured follow-up in prevention of recurrent pressure ulcers (Pressure Ulcer Prevention), several locally initiated projects including a review of the chronic care model work and how we can apply to VA SCI care (CCM), fielding a slightly modified version of the Behavioral Risk Factors Surveillance Survey to veterans with SCI&D (BRFSS), examination of prevalence of cardiovascular risk factors in veterans with SCI&D (Epi of CVD), and determining the incidence of nosocomial infections in veterans with SCI&D (Nosocomial Infections).

Key plans for the future include a study to determine the current prevalence and treatment, variation in practice and barriers to best practice in management of several high frequency/high

risk respiratory and cardiovascular conditions in veterans with SCI&D (smoking, sleep apnea, diabetes, high blood pressure, high lipid levels, obesity). This Service Directed Research project was reviewed in Jan. 2004 and will be revised and resubmitted for June 2004 (Gap). An implementation project to test the use of the chronic care model in SCI is being developed for submission as a service-directed project (SDP) for June 2004 (Lifelong Care Model). A third project to test and refine a standardized data collection tool for pressure ulcer assessment is being revised and will be resubmitted to the Nursing Research Initiative, also for June 2004 (PUSH Tool). Other projects in development in a cooperative study to test the benefits of bronchodilator use in veterans who are tetraplegic (Bronchodilators) and examination of the extent of antibiotic resistance occurring in veterans with SCI&D.

Our dissemination efforts for 2004 look extremely promising, including 2 articles in press on work we have been doing in the area of treatment and outcomes of community-acquired pneumonia in SCI&D; an article under review reporting on staff vaccinations in SCI&D providers, and an entire issue of the Journal of Spinal Cord Injury Nursing devoted to lessons learned in implementing findings in SCI.

The SCI QUERI continues to work closely with the Strategic Healthcare Group for SCI to prioritize research and implementation efforts. We have developed a strong relationship with the Office of Quality and Performance (OQP) to improve the care of veterans with SCI&D. Finally, the Paralyzed Veterans of America (PVA) and the United Spinal Association (USA) continue to be strong supporters of our efforts.