

PRIORITY SETTING FOR MEDICAL AND PROSTHETIC RESEARCH

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Directive provides the policy for the strategic planning and priority setting process for VHA Medical and Prosthetic Research.
- 2. SUMMARY OF CONTENTS:** This is a new VHA Directive that states the processes for input and oversight of the strategic planning and priority setting process in the Office of Research and Development (ORD).
- 3. RELATED ISSUES:** VHA Directive 1200, Veterans Health Administration Research and Development.
- 4. RESPONSIBLE OFFICE:** The VHA Office of Research and Development (10P9) is responsible for the contents of this Directive. Questions may be referred to ORD at 202-443-5600.
- 5. RESCISSIONS:** None.
- 6. RECERTIFICATION:** This VHA Directive is scheduled for recertification on or before the last working day of April 2018.

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1. PURPOSE: This Veterans Health Administration (VHA) Directive provides policy for the strategic planning process in the Office of Research and Development (ORD).

AUTHORITY: Title 38 United States Code (U.S.C.) 7301(b) and 7303.

2. BACKGROUND

a. Medical and Prosthetics Research and Development in VHA is an intramural program administered by the Department of Veterans Affairs (VA) ORD and is conducted at VA medical facilities nationwide under the authority of title 38 United States Code (U.S.C.) 7303. The Research and Development (R&D) program is an intramural program that spans the continuum from basic biomedical research through the translation of research into practice, emphasizing the health concerns of Veterans.

b. The mission of the R&D Medical and Prosthetics program is to discover knowledge and create innovations that advance health care for Veterans and the Nation. ORD accomplishes this mission through a number of mechanisms, which include, but are not limited to:

- (1) Setting policy;
- (2) Identifying ethical standards;
- (3) Developing and presenting educational programs;
- (4) Consulting with field research programs, their staff, and their investigators;
- (5) Supporting research through funding opportunities; and
- (6) Assisting facilities in complying with applicable requirements, guidance, and educational programs.

c. In support of this mission, ORD strives to:

- (1) Sustain a superior environment of inquiry conducive to the highest quality research, education, and patient care;
- (2) Effectively integrate fundamental, clinical, and applied research to best meet Veterans' health care needs;
- (3) Effectively translate research results to advance Veterans' health care;
- (4) Maximize VHA's value as a national research asset;
- (5) Lead and manage an effective and efficient research enterprise; and

(6) Increase awareness and understanding of the value of VHA's research contributions.

c. Effective budget execution of the R&D Medical and Prosthetics program requires that the general direction of VA research be informed by internal and external stakeholders, reviewed by a VA and VHA strategic advisory group, and overseen by VHA leadership including the National Leadership Council (NLC) and the Under Secretary for Health. The direction for VA research is in alignment with the VA and VHA strategic plans, guidance, and priorities communicated by the Secretary of Veterans Affairs through the Office of the Under Secretary for Health along with inclusion of a variety of other mechanisms, which include, but are not limited to; the Budget Guidance issued by the Office of Management and Budget; the annual Science and Technology Priorities memorandum issued conjointly by the Office of Management and Budget and the Office of Science and Technology Policy; statutory requirements; and Congressional Report language.

3. POLICY: It is VHA policy that the Medical and Prosthetics Research appropriation be managed using a deliberative strategic planning process that is reviewed by the VA and VHA Strategic Advisory Group and concurred upon by VHA leadership through the NLC and the Under Secretary for Health.

4. RESPONSIBILITIES

a. **Chief Research and Development Officer (CRADO).** The CRADO is responsible for ensuring a deliberative strategic planning process that includes analyzing trends in Veteran demographics, health care conditions, and R&D funding from other Federal and private sources, which, together with scientific opportunity, informs decisions and sets priorities for funding R&D activities within VHA.

b. **Research and Development (R&D) Program.** The R&D program is responsible for:

(1) Eliciting stakeholder input to identify the highest priority topics for research that VHA should support. Stakeholders include, but are not limited to, Veterans; Veterans Service Organizations; VHA leadership; Department of Defense (DoD) and National Institutes of Health (NIH) groups; VA researchers and clinicians; and research and academic societies.

(2) Reviewing the current ORD Portfolio to identify gaps between current funded projects and programs, comparing those VHA proposals with other major agencies that conduct research, and reviewing the priority topics identified by the stakeholders. This includes a review of internal data systems e.g., the NIH Impact II System and the ORD Portfolio Categorization Reporting Tool, as well as environmental scanning and review. This helps to ensure an accurate and comprehensive understanding of what research is already being conducted on a given topic and what types of studies are most needed to address Veterans' health issues.

(3) Reviewing recommendations regarding the VHA research program from advisory groups, both internal and external to VHA. Examples include, but are not limited to: the National Research Advisory Council; the Genomic Medicine Program Advisory Committee; and the Research Advisory Committee on Gulf War Veterans' Illnesses.

(4) Completing an environmental scan that considers scientific opportunities and programmatic needs, reviewing the trend analyses of Veteran demographics and health care conditions (i.e., evidence and trends on the utilization and cost of treatment by disease category, as well as morbidity and mortality by disease category), the findings from state of the art meetings and conferences on research, evidence synthesis results based upon both the VHA Evidence-Based Synthesis Program and other evidence syntheses, such as those provided by the Cochrane Collaboration and the Agency for Healthcare Research and Quality, and portfolio review of all medical research within ORD and other offices within VHA.

(5) Providing a synopsis of the findings stated in subparagraph 4b(2) of this Directive to the VHA scientific community using the ORD Web site, <http://www.research.va.gov>, together with an opportunity to propose strategic initiatives for incorporation into the strategic plan (Strategic Opportunity Initiative).

(6) Drafting a strategic plan that outlines a 5-year program that sets priorities that will aide in the advancement of Veterans' health care based on the findings from the reviews stated in subparagraph 4b(2) of this Directive, together with the input from the Strategic Opportunity Initiative. *NOTE: This 5-year plan must be reviewed and updated annually by ORD.*

(7) Submitting the draft strategic plan to the VA-VHA Strategic Advisory Group.

(8) Revising the strategic plan in accordance with the guidance of the VA-VHA Strategic Advisory Group.

(9) Submitting the revised strategic plan to the NLC, Research working group of the Health Executive Council.

(10) Revising the strategic plan in accordance with the guidance from the NLC and its subcommittees.

(11) Submitting the strategic plan to the Under Secretary for Health for concurrence.

(12) Submitting the strategic plan through the Under Secretary for Health to the Secretary of Veterans Affairs for concurrence.

(13) Publishing the strategic priorities on the ORD website and developing solicitations for research opportunities in these selected areas.

(14) Reassessing the gaps identified after each funding cycle to measure progress toward the strategic goals defined in the plan.

c. **VA-VHA Strategic Advisory Group**

(1) The VA-VHA Strategic Advisory Group will be chartered by the Deputy Under Secretary for Health for Policy and Services, and will be provided with information concerning national goals and priorities, including, but not limited to the:

- (a) VA and VHA strategic plans;
 - (b) Guidance and priorities communicated by the Secretary through the Under Secretary for Health along with inclusion of a variety of other mechanisms;
 - (c) Budget Guidance issued by the Office of Management and Budget;
 - (d) Annual Science and Technology Priorities memorandum issued conjointly by the Office of Management and Budget and the Office of Science and Technology Policy;
 - (e) Statutory requirements; and
 - (f) Congressional Report language.
- (2) The VA/VHA Strategic Advisory Group is responsible for:
- (a) Reviewing the ORD strategic plan;
 - (b) Reviewing the reports from other VHA research oversight committees; and
 - (c) Providing recommendations to the Under Secretary for Health on the goals and priorities detailed in the strategic plan.
- (3) The review by the Strategic Advisory Group will, at a minimum, include evaluating:
- (a) The environmental scan findings as stated in subparagraph 4a of this Directive;
 - (b) The quantitative measures employed in the strategic alignment model;
 - (c) Statistical data regarding funding decisions for each program area; and
 - (d) The reports of DoD-VA Joint Program reviews.
- (4) The VA-VHA Strategic Advisory Group membership consists of only VA employees including but not limited to:
- (a) A VISN Director;
 - (b) A VISN Chief Medical Officer;
 - (c) The Chief Consultant for Mental Health in the Office of Patient Care Services;
 - (d) The Chief Consultant for Rehabilitation Services in the Office of Patient Care Services;
 - (e) The Director of Patient Centered Care;
 - (f) The Assistant Deputy Under Secretary for Health for Informatics and Analytics;

- (g) The Assistant Deputy Under Secretary for Health for Patient Care Services;
 - (h) The Chief Officer for Public Health; and
 - (i) Representatives from the:
 - 1. Office of the Secretary of Veterans Affairs;
 - 2. VA Office of Policy and Planning;
 - 3. Veterans Benefit Administration;
 - 4. National Cemetery Administration; and
 - 5. Office of Information and Technology.
- (4) Meetings are convened by the CRADO at least quarterly and ad hoc, as necessary.

5. REFERENCES

VHA Directive 1200, Veterans Health Administration Research and Development Program, at: http://www1.va.gov/vhapublications/ViewPublication.asp?pub_ID=2043.