HEALTH SERVICES RESEARCH AND DEVELOPMENT (HSR&D) CENTERS

1. REASON FOR ISSUE. This Veterans Health Administration (VHA) Handbook provides procedures that establish and govern Health Services Research and Development Service (HSR&D) Centers.

2. SUMMARY OF MAJOR CHANGES. The principal changes in this Handbook clarify and incorporate additional information on Centers and conferences within HSR&D. Specific new information includes:

a. The rationale for possible termination of funding after annual administrative review of performance measures.

b. The deletion of requirements and guidelines for the Targeted Research Enhancement Program (TREP), due to the termination of this program.

c. HSR&D titles for Center leadership are changed to Center Principal Investigator or Center Co-Investigator.

d. The expected percent effort for Research Enhancement Award Program (REAP) Leadership is clarified at 30 percent Full-time Equivalent (FTE) employee.

e. Reporting relationships between the Associate Chief of Staff for Research and Development and Centers are clarified.

3. RELATED DIRECTIVES. VHA Directive 1204.

4. RESPONSIBLE OFFICE. The Health Services Research and Development Service (124) is responsible for the contents of this VHA Handbook. Questions may be referred to (202) 461-1500, or by facsimile to (202) 254-0461.

5. RESCISSION. VHA Handbook 1204.3 dated April 15, 2002, is rescinded.

6. RECERTIFICATION. This VHA Handbook is scheduled for recertification on or before the last working day of November 2013.

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HEALTH SERVICES RESEARCH AND DEVELOPMENT (HSR&D) CENTERS

1. PURPOSE

This Veterans Health Administration (VHA) Handbook defines Health Services Research and Development Service's (HSR&D) procedures that establish and govern HSR&D Centers and conference support.

2. BACKGROUND

a. HSR&D Centers are designed to strengthen health services research by enhancing opportunities for intellectual exchange and collaboration, mentoring inexperienced investigators, and providing administrative infrastructure, technical expertise, and Information Technology support. While individual centers and conferences have specific and varied objectives, all contribute to the Office of Research and Development (ORD) goal of sustaining a strong program of health services research.

b. HSR&D supports several types of research centers: Centers of Excellence (CoEs), Research Enhancement Award Programs (REAPs), Resource Centers, and Quality Enhancement Research Initiative (QUERI) Coordinating Centers.

3. SCOPE

HSR&D may announce the opportunity for Department of Veterans Affairs (VA) investigators to submit proposals to establish new HSR&D centers of an existing or new type. Each center award is to a specified core group of investigators, with a unified, long-term strategic plan that meets HSR&D objectives. Most centers have a strong academic affiliation and may collaborate with one or more VA facility(s) in other locations. Centers are initially awarded through, and their continuation is contingent upon, competitive merit review. Initial funding is for a specified period (usually 5 years), with the possibility of termination if the annual administrative review of performance measures indicates a decline in productivity, eligibility for funding, continued promise, resourcefulness, or if funds become unavailable.

4. CENTERS OF EXCELLENCE (COE)

HSR&D's CoE program enables multidisciplinary teams of investigators to assemble the intellectual resources and practical tools to pursue long-term agendas in health services research and to nurture young investigators. Each of the individual CoEs has a particular research focus and unique strengths. HSR&D provides Centers with core funding, enabling a critical mass of investigators to leverage that support and develop long-term programs of research.

a. Each CoE is selected competitively, based on merit review and the specific criteria and procedures outlined in the solicitation for proposals.

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b. Funding is provided for a specified period with renewal contingent upon annual assessment, competitive review, and the availability of funds.

c. CoE leadership (either the Center Principal Investigator or Center Co-Principal Investigator) is a physician whose salary support is contributed by the VA medical facility. All CoE leaders are expected to devote at least 50 percent effort (0.5 Full-time Equivalent (FTE) employee) to CoE activities.

d. Center leaders and most investigators are expected to meet eligibility criteria for VA research support.

e. The CoE staff of clinician and non-clinician researchers are expected to be available both as potential collaborators or consultants to other researchers in VA and throughout the health services research community, and as advisers to HSR&D and VA Central Office.

f. Center leaders and investigators are required to report to the Associate Chief of Staff for Research and Development (ACOS for R&D) at their facility all research activities including research program initiatives, infrastructure development, resource and recruitment issues, and any potential problems. The ACOS for R&D must be notified immediately if a research project encounters a problem that threatens adherence to the approved research plan or completion within the approved-funding period and budget.

5. RESEARCH ENHANCEMENT AWARD PROGRAM (REAP) CENTERS

The REAP is designed to increase HSR&D capacity by providing support to VA sites that demonstrate a history of HSR&D peer-reviewed research and career development funding and do not have a co-located HSR&D CoE. HSR&D funding provides administrative infrastructure and research staff to support continued growth of health services research at the facility, facilitates the development of new HSR&D research projects, and trains and mentors new HSR&D investigators. Research programs that have three or more HSR&D-funded investigators are eligible for consideration under this program.

a. Each REAP is selected competitively, based on merit review and the specific criteria and procedures outlined in the solicitation for proposals.

b. Funding is provided for a specified period with renewal contingent upon annual assessment, competitive review, and the availability of funds.

c. REAP leadership (the Center Principal Investigator) is expected to devote at least 30 percent effort (0.30 FTE employee) to REAP activities.

d. REAP leaders and most investigators are expected to meet eligibility criteria for VA research support.

e. The REAP staff of clinician and non-clinician researchers are expected to be available both as potential collaborators or consultants to other researchers in VA and throughout the health services research community, and as advisers to HSR&D and VA Central Office.

f. Center leaders and investigators are required to report to the ACOS for R&D at their facility all research activities including research program initiatives, infrastructure development, resource and recruitment issues, and any potential problems. The ACOS for R&D must be notified immediately if a research project encounters a problem that threatens adherence to the approved research plan or completion within the approved-funding period and budget.

6. RESOURCE CENTERS

HSR&D Resource Centers support health services research by providing technical assistance and consultation services to VA researchers and VA Central Office. Each Center provides unique expertise; for example, Resource Centers may provide expertise in the use of VA databases in research, dissemination and education activities, or economic analysis.

a. Resource Centers are selected competitively, based on merit review and the specific criteria and procedures outlined in the solicitation for proposals.

b. Funding is provided for a specified period with renewal contingent upon productivity, competitive review, and availability of funds.

c. Resource Center leadership (Center Principal Investigator) is expected to devote at least 50 percent effort (0.5 FTE employee) to resource Center activities.

d. Center leaders and most participants in Center activities are expected to meet eligibility criteria for VA employment.

e. Resource Center staff are expected to be available both as potential collaborators or consultants to other researchers in VA and throughout the health services research community, and as advisers to HSR&D and VA Central Office.

f. Center leaders and investigators are required to report to the ACOS for R&D at their facility all research activities including research program initiatives, infrastructure development, resource and recruitment issues, and any potential problems. The ACOS for R&D must be notified immediately if a research project encounters a problem that threatens adherence to the approved research plan or completion within the approved-funding period and budget.

7. QUERI COORDINATING CENTERS

QUERI is a national initiative designed to translate research findings, in collaboration with clinical leadership, into optimal patient outcomes and system-wide improvements. Organized around a set of major problems in VA, QUERI Coordinating Centers use a six-step process to link research and quality improvement. The QUERI steps provide the structure for identifying best practices, promoting their use, measuring the impact of translation activities on patient

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outcomes, and providing feedback to promote continuous quality improvement to the organization as a whole.

a. A Research Coordinator and a Clinical Coordinator co-manage the daily activities at a QUERI Coordinating Center.

b. An Executive Committee composed of clinicians and researchers provides scientific oversight and guidance.

c. Each Center is provided with core funding to carry out activities that meet the goals described in the Center's annual strategic and translation plans.

d. Center leaders and investigators are required to report to the ACOS for R&D at their facility all activities including program initiatives, infrastructure development, resource and recruitment issues, and any potential problems. The ACOS for R&D must be notified immediately if a problem is encountered that threatens adherence to the approved research plan or completion within the approved funding period and budget.

8. RESPONSIBILITIES OF THE ACOS FOR R&D

The ACOS for R&D is responsible for:

a. All research activities. The ACOS for R&D has oversight responsibility for Center leadership, staff, and all scientific, budgetary, and ethical issues.

b. Communicating to medical center leadership the Center needs and management concerns.

c. Notifying VA Central Office of any problems (real or potential) and assisting investigators and Center staff in resolving the issue(s).