HSR&D’s mission is to develop, evaluate, and rapidly implement evidence-based strategies that advance the health and care of Veterans. HSR&D pursues research encompassing all aspects of VA healthcare, including: delivery, quality, safety, access, equity, patient satisfaction, and coordination of care—both inside and outside VA.

HSR&D 2021 Key Highlights

- $118 million FY2021
- 72 newly-funded projects
- 347 ongoing projects
- 41 clinical office partnerships
- 2419 journal publications
- 893 active investigators

72 New Studies Launched

In 2021, HSR&D began 72 projects in priority areas for VA. Among these are 15 on equity and social determinants of health; 11 on care of complex chronic conditions; 9 on mental and behavioral health; 6 on long term care and aging; 6 on COVID-19; and 5 on antibiotic use and hospital-acquired infections.

COVID-19 Efforts

Effects of the Pandemic on Non-COVID Health Outcomes

An HSR&D solicitation in August 2021 called for proposals on VA care that was deferred or disrupted due to the COVID-19 pandemic. Preliminary research has shown that there has been a decrease in cancer diagnoses within the VA health system during the pandemic. Funded proposals will examine non-COVID outcomes related to mental health or acute and chronic diseases.

In summer 2021, HSR&D initiated funding for a Disrupted Care National Project (DCNP), based at the White River Junction VA Medical Center. This project has two parts: a research collaboration to map and analyze the causes of excess mortality within the VA health system during the pandemic and the creation of a Disrupted Care National Coordinating Center. This Center is establishing a communication network and community of VA investigators working on Disrupted Care to facilitate the sharing of research methods and results. The goal is to better understand the disruptions in care during the pandemic so that VA can learn what could have been done differently and to prevent similar disruptions in the future.

Post-COVID Conditions (“Long COVID”)

Launched in 2021, the COVID-19 Observational Research Collaboratory (CORC) is conducting a VHA-wide observational study focused on long-term recovery from COVID-19. In addition, this group runs a coordinating center that is providing methodological guidance to the field regarding best practices for the conduct of observational COVID-19 research and works with VINCI to develop tools to meet the data needs of investigators carrying out observational COVID-19 research.

In August 2021, HSR&D hosted an External Stakeholder meeting that brought together leaders from current ongoing VA projects with clinical partners and representatives from other government agencies to share knowledge about current efforts and establish direction on certain priorities surrounding Post-COVID Conditions or “long COVID.” As a result of this, ORD released a cross-service Post-COVID Conditions Collaborative Merit Award. The selected studies will start in Fall 2022. We hope this new funding mechanism will allow fruitful new collaborations to accelerate our understanding of Post-COVID conditions by allowing investigators with different expertise to examine different aspects of a single, high priority problem. Just as important, this effort may serve as a prototype for encouraging cross-ORD research collaborations on other important problems facing Veterans.

(cont’d)
HSR&D Documents: Quality of VA Care

HSR&D contributed information for a planned 2022 Senate Committee hearing on quality of VA care. Supporting documents included a June 2021 Evidence Inventory conducted by HSR&D’s Evidence Synthesis Program. Selected research findings from the past five years that were included in the inventory showed that VA care was equivalent to or better than non-VA care in multiple areas, including inpatient safety (2018), surgical quality (2020), end of life care (2018), dialysis initiation among patients with kidney failure (2018), kidney transplant (2020), and medication evaluation and management for a number of mental health conditions (e.g., schizophrenia, PTSD, major depression) [2016]. Additional HSR&D research impacts related to quality of VA care that were submitted for the hearing included implementation of a “surgical pause” to screen frail Veterans before surgery that was implemented nationally in September 2021, fever threshold guidance for nursing home patients screened for COVID-19 that resulted in the CDC updating their guidance nationally, support for the use of prophylactic anticoagulation in hospitalized patients with COVID-19, and development of a referral coordination team model for specialty care that is now being used in 81% of VAMCs in at least four specialties.

Promoting Diversity, Equity, and Inclusion in the Research Workforce

As COVID again highlighted health disparities, and in alignment with the White House Executive Order advancing diversity, equity, inclusion, and accessibility (DEI), several noteworthy changes will promote DEI activities within the Office of Research and Development (ORD) and HSR&D. A formal ORD-wide DEI Workgroup was launched with a clear mission, charter, and a Stakeholder Engagement Board. Its recommendations will enhance DEI research and promote recruiting and retaining a more diverse workforce. ORD has also funded 10 research supplements and four were awarded to HSR&D early career investigators from under-represented groups and their mentors. HSR&D launched a DEI workgroup to increase representation of under-represented groups and is conducting interviews to identify barriers and facilitators to retention in research. HSR&D has begun a training and career development program in Boston for medical students. It has also developed two new field awards that recognize the excellent DEI research conducted by early career investigators and the “unsung heroes” who work to enhance DEI research and diversity in our research workforce. QUERI has six fellows leading DEI-related projects as part of its initiative to Advance Diversity in Implementation Leadership.

Key 2021 Research Findings

Strains on VA critical care capacity due to peak COVID ICU caseload were associated with increased COVID-19 mortality. (Bravata, et al., JAMA Network Open)

Early initiation of prophylactic anticoagulation for Veterans hospitalized with COVID-19 reduces mortality. (Rentisch, et al., BMJ)

Routine use of remdesivir for COVID-19 may increase length of hospital stay without improving survival. (Ohl, et al., JAMA Network Open)

Receipt of COVID-19 vaccine is higher among racial/ethnic minorities than whites within the VA healthcare system. (Haderlein, et al., American Journal of Preventive Medicine)

Temporary financial assistance improves homeless Veterans’ odds of becoming stably housed. (Nelson, et al., JAMA Network Open)

Veterans receiving VA-only post-kidney transplant care had lower five-year mortality compared to non-VA transplant care. (Cashion, et al., Clinical Journal of the American Society of Nephrology)

Total knee arthroplasties have significantly lower complication rates when performed in VA vs. community care facilities. (Harris, et al., Health Affairs)

VA surgeries across eight specialties result in lower mortality among Veterans than comparable private sector surgeries. (George, et al., JAMA Surgery)

Low-value prostate cancer screenings are common in VA, while low-value breast, cervical, and colorectal screening are rare. (Schuttner, et al., JAMA Network Open)

Expanded provider options via community care are associated with increased healthcare utilization among Veterans. (Rose, et al, JAMA Network Open)

Veterans do not always receive appropriate continuation of opioid use disorder medications during surgical hospitalizations. (Wyse, et al., Journal of General Internal Medicine)

VA women’s health primary care providers were more likely to experience burnout than general primary care providers. (Apaydin, et al., Journal of General Internal Medicine)
Achievements in Research

Donna L. Washington, MD, MPH, FACP, earned the 2020 Under Secretary's Award for Outstanding Achievement in Health Services Research—the highest honor for a VA health services researcher. A general internist and investigator with HSR&D’s Center for the Study of Healthcare Innovation, Implementation, and Policy, Dr. Washington has devoted her career to addressing the healthcare needs of vulnerable and underserved populations, particularly racial/ethnic minority and women Veterans. She also leads the Health Equity QUERI Center, which partners with VA’s Office of Health Equity in using a population health approach to examine health, healthcare quality, experiences, and outcomes of vulnerable Veteran populations across the VA healthcare system.

Utibe R. Essien, MD, MPH, an investigator with HSR&D’s Center for Health Equity Research and Promotion, received the Association of American Medical College's Herbert W. Nickens Faculty Fellowship Award. The award recognizes an outstanding junior medical college faculty member who demonstrates leadership potential in addressing inequity in medical education and health care; demonstrates efforts in addressing educational, societal, and healthcare needs of racial and ethnic minorities in the United States; and is committed to a career in academic medicine.

HSR&D Awards

2020 Daniel Deykin Award for Outstanding Mentor

Matthew Chinman, PhD, is an investigator and Director of the Implementation Core at HSR&D’s Center for Health Equity Research & Promotion, a core investigator at the VISN 4 Mental Illness Research, Education, and Clinical Center, and a clinical/community psychologist. In addition to his outstanding work as a researcher, Dr. Chinman has fostered the careers of dozens of Peer Specialists (who are Veterans themselves) through training, supervision, and career mentoring, which in turn, has facilitated their ability to support thousands of Veterans with mental health and substance abuse disorders. Currently, Dr. Chinman serves as a mentor to 41 mentees.

2020 Best Paper Award

William Yancy, MD, MHS, and colleagues authored the article, “Comparison of group medical visits combined with intensive weight management vs group medical visits alone for glycemia in patients with type 2 diabetes/a non-inferiority randomized clinical trial,” which was published in JAMA Internal Medicine in November 2019. This paper reports results from the HSR&D-funded study, “Jump Starting Shared Medical Appointments for Diabetes with Weight Management.” To date, this is the only published study to compare an intensive weight management program to an intensive diabetes medication management program for improving key diabetes outcomes.

2020 Health System Impact Award

Adam Gordon, MD, MPH, earned the Impact Award for his overall excellence as a clinical investigator, educator, and mentor, and, in particular, his examination of the efficacy, effectiveness, and treatment of persons who have addiction or are vulnerable due to social determinants of health.

Hildi Hagedorn, PhD, LP, earned the Impact Award for her work to increase the implementation of evidence-based treatments for Veterans with substance use disorder, especially as it relates to increasing opioid agonist therapy (OAT) throughout the VA healthcare system. OAT has been proven to reduce the morbidity and mortality associated with OUD; yet its implementation within VA has been limited.

Ruth Klap, PhD, received the Impact Award for research to help end harassment of women Veterans in the VA healthcare system. Women Veterans are a rapidly increasing subset of VA’s patient population, but the dominant presence of male patients in VA healthcare settings poses unique considerations for providing care in a setting or manner that makes women feel welcome. Dr. Klap’s research on the prevalence, drivers, and consequences of harassment of women Veterans on VA grounds has had a direct and widespread impact on VA policy, as well as the spread of evidence-based changes in how women Veterans are treated in VA healthcare settings nationally.

https://www.hsrd.research.va.gov