VA National & VISN Researchers & Evaluators in Residence (REiR)
Program Opportunities – April/May 2020 Cycle
Application Deadline Extended to May 15, 2020

HSR&D will fund VA researchers and evaluators to spend time in clinical program or VISN offices to help with analysis and to bring research knowledge to policy and program planning. HSR&D solicited interest from VA program and VISN offices to host embedded researchers or evaluators. These offices will benefit from advanced analytic expertise and access to a network of research knowledge, while HSR&D researchers and evaluators will benefit by increasing their understanding of important policy and operations questions and the operational data available to answer them.

The timing and details of the arrangement are negotiable, but hosts have identified their preferred arrangement (timing, duration, percentage effort, and need for the person to be on site vs. virtual). Funding commitment for this cycle (April/May 2020) varies by VA program or VISN office (see positions below) and may exceed the standard $35,000 budget cap with sufficient justification. Duration and support will be based on the success of the relationship and continued need of the program or VISN office.

Program and VISN offices underwent a competitive process for selection into this program. The following positions were reviewed and approved by HSR&D, and additional information on these positions can be found on subsequent pages as listed below:

1. National Emergency Medicine Program: Analytic operations support for COVID-19 activities (page 3)

2. Office of Health Equity and Innovation Ecosystem: Evaluation of temperature monitoring devices (TMD) to prevent diabetic foot ulcers (page 4)

3. Office of Systems Redesign & Improvement and Office of Quality & Safety: Evaluation of Truman VAMC (Columbia, MO) as a High Reliability Organization (HRO) (page 5)

4. Office of Academic Affiliations (OAA): Evaluation of VHA OAA Nurse Residency Program (pages 6-7)

Hosting offices are expected to provide a desk and computer when the resident is working at the host office. The host must also provide data access for the resident.

To help us monitor the success of the program and identify ways to improve it, both the hosting offices and the researchers/evaluators in residence will be required to complete a brief mid-year assessment and final report which should include any products arising from this program.
**Researcher/Evaluator in Residence Eligibility**

The VA National & VISN Researchers & Evaluators in Residence (REiR) Program is an intramural program conducted by VA-salaried investigators at VA medical centers or VA-approved sites. To be eligible to submit an application to the REiR Program, the researcher or evaluator should hold a MD, PhD, or equivalent advanced degree in a relevant field to the proposed topic area. In addition, the researcher or evaluator must have at least a 5/8ths time VA appointment **or** if less than 5/8ths, they must have a letter of endorsement from their local HSR&D Center of Innovation (COIN) Director or in absence of a COIN, their local Associate Chief of Staff for Research and Development (ACOS/R&D) indicating that they will serve as the REiR Program Sponsor at the station to be responsible for funds sent for the REiR Program.

To receive funding, an investigator profile, including the Commons ID, must be completed in ePromise for the researcher, COIN Director, or ACOS/R&D (as appropriate).

**Application Requirements**

1. Indicate Program or VISN Office posting for application
2. Resume/Curriculum vitae (CV)
3. Confirmation of 5/8ths time VA appointment or Letter of endorsement from local COIN Director or ACOS/R as appropriate.
4. One-page essay describing:
   a) Prior experience working in the selected area, including any skills specifically mentioned in the posting
   b) Long-term research interests
   c) Applicant’s objectives for the residency

Once selections are made, the researcher/evaluator and program office will develop a work plan and budget to cover their time in residence and will submit to HSR&D for review and funding.

**Key Dates for this REiR Program Posting**

- **April 20, 2020:** REiR Program opportunities announced
- **May 15, 2020:** Applications due to REiR Program mailbox (vhacohsrdrir@va.gov).
- **May 15-22, 2020:** Program offices review applications and make selections.
- **May 27, 2020:** Notifications sent to applicants from HSR&D.
- **June 2020:** Program office and Researcher/Evaluator develop work plan and budget and submit to HSR&D REiR mailbox (vhacohsrdrir@va.gov).

Timing and distribution of funds will depend on work plan and budget developed by Program/VISN office and Researcher/Evaluator.
PROPOSAL: Analytic operations support for COVID-19 activities

PROGRAM OFFICE: VA National Emergency Medicine Program

PROGRAM LEAD: Chad Kessler, MD

| Summary of expected program/policy to benefit from additional analytical support: |
| The VA National Emergency Medicine Program is seeking researchers to collaborate on COVID-related analytic operations work focusing on a range of acute care topics central to emergency triage and stabilization, continuing care, and critical care. Given the evolving nature of the pandemic and information needs of decision makers, the VA National Emergency Medicine Program is seeking to support a range of analytic activities that address critical, time-sensitive clinical and care delivery priorities. |

| Associated VA National Priority: |
| Ensuring high quality and reliable care for all Veterans in the context of the COVID-19 pandemic. |

| Objectives and associated deliverables: |
| The researcher would support the work of the VA National Emergency Program in reviewing literature, developing protocols, and analyzing data to address key information needs related to treatment and delivery of care in the context of COVID-19 pandemic. Although the nature of the work may evolve in response to the information needs of decision-makers, the researcher is expected to make substantive contributions to these efforts. |

| Type of analysis and/or data requested: |
| • Quantitative analyses, including use of data in the CDW |
| • Qualitative (e.g., interviews) analyses with emergency department (ED) staff & clinical providers |

| Requested Researcher Qualifications |
| • Robust quantitative research skills |
|   o Deep knowledge of the CDW |
|   o SAS and SQL skills will be helpful |
| • Qualitative research skills |
| • Familiarity with critical care, hospital medicine, and emergency care medicine will be helpful |
| • Strong critical thinking and communication skills, including the ability to respond quickly and thoughtfully in a rapidly changing environment |

| Preferred duration, effort, and in-person time |
| The VA National Emergency Medicine Program is seeking researchers able to commit 25-50% effort over 12 months, although the distribution and location (remote vs. in-person) of the work is flexible. |

| Additional support or benefits available to the researcher/evaluator in residence: |
| The researcher will benefit from support from and collaborations with a data analytics team through the Office of Systems Redesign and Improvement; the VHA Support Service Center (VSSC) and Office of Reporting, Analytics, Performance, Improvement, and Deployment (RAPID); and senior VA policy leaders across the system. |
**PROPOSAL:** Evaluation of temperature monitoring devices (TMD) to prevent diabetic foot ulcers  
**PROGRAM OFFICE:** Office of Health Equity and Innovations Ecosystem  
**PROGRAM LEAD:** Ernest Moy, MD, MPH

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<td>Diabetic foot ulcers are a common complication of diabetes mellitus and can lead to lower extremity amputation. Disparities in diabetic foot ulcers and amputation are also prevalent. Racial minorities, rural residents, and low-income individuals typically have higher rates of these diabetic complications. Diabetic foot ulcers are preventable with detection of inflammation before ulcers occur. With the support of the VHA Innovation Ecosystem and Office of Health Equity, VHA has over 1000 Temperature Monitoring Devices (TMD) in use to prevent diabetic foot ulcers, with high concentrations in the Cincinnati, Detroit, Hines, and Richmond VAMCs. However, assessment of the outcomes of these TMDs varies across VAMCs. We seek an evaluator to create and implement a standardized assessment of TMD outcomes at major VAMCs, including variation in the use and outcomes of TMDs in high risk populations. Such an assessment would support more efficient future deployment of remote temperature monitoring to Veterans in greatest need.</td>
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<th>Associated VA National Priority:</th>
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<td>Understanding and addressing disparities experienced by Veterans and ensuring that no fallen comrades are left behind is at the heart of Customer Service and enabling Veterans to choose VA for high quality and reliable care.</td>
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| (1) Review current data collection of temperature mat outcomes, including rates of diabetic foot ulcers and amputations  
(2) Create a standardized assessment protocol that could be used at the four VAMCs with large TMD use  
(3) Provide technical assistance to VAMCs as they implement this assessment protocol  
(4) Analyze collected data |
| **Deliverables** |
| (1) Standardized assessment protocol  
(2) Toolkit to assist with implementation of the protocol |

It is anticipated that analysis of data will yield academic products, but this is likely to occur after the end of the funded residency.

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<td>Evaluator would have operational access to CDW data related to candidates for and recipients of TMDs.</td>
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<th>Requested Researcher Qualifications:</th>
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| • Experience creating and implementing evaluations at multiple clinical sites, including assessing variation across high risk populations.  
• Experience working with the VA’s CDW (including extraction of data and creation of analytic files) is preferred |

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<td>The Office of Health Equity is seeking an evaluator able to commit 25% effort for one year, distributed as one week per month. The evaluator would be anticipated to spend most of the time in Washington, DC with potential travel to the implementation sites in VA Cincinnati, Detroit, Hines, and Richmond. Note: The Office of Health Equity is willing to consider more flexible arrangements (e.g., the evaluator splitting time across DC, implementation sites, and their home institution).</td>
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<td>In addition to a workstation in DC and operational access to CDW data, the Office of Health Equity would welcome disseminating the evaluator's work through our newsletters, information briefs, cyberseminars, and other venues. Our partner in this activity, the Innovations Ecosystem, would similarly welcome dissemination of the evaluator's work through various innovation channels.</td>
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**PROPOSAL:** Evaluation of Truman VAMC (Columbia, MO) as a High Reliability Organization (HRO)

**PROGRAM OFFICE:** Office of Systems Redesign and Improvement and Office of Quality and Safety

**PROGRAM LEAD:** Bradley Watts, MD, MPH

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**Summary of expected program/policy to benefit from additional analytical support:**
In support of VHA's effort to become a high reliability organization (HRO), VHA has invested substantially in various activities, including education, coaching, and support over the last 18 months. The Truman VAMC in Columbia, MO embarked on its own journey to become an HRO nearly 10 years ago and is now seen as an exemplar and success case for other HRO efforts in VHA. However, efforts to learn from the Truman VAMC's journey has been challenging for a variety of reasons, including a profound recency bias and lack of organized effort to reconstruct this important journey.

The goal of this researcher in residence opportunity is to reconstruct a more accurate description of the processes and steps that have been involved in the Truman VAMC's journey to becoming an HRO by applying state-of-the-art qualitative methods to examine the narratives of current and former Truman VAMC staff and leaders as well as artifacts of this process, including meeting minutes and projects reviews.

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**Associated VA National Priority:**
This project is directly related to Dr. Richard Stone's priority for the VHA to become an HRO and seek zero harm to patients; it has been launched at the request of Dr. Joel Roos, Assistant Deputy Undersecretary for Quality, Safety, and Value (QSV).

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**Objectives and associated deliverables:**

1. Using narrative accounts and reviewing artifacts of past activities, reconstruct a map of the process that Truman engaged in for their HRO journey including key steps and milestones. **Deliverable:** A map of the sequence of steps and timeline for Truman’s HRO journey and a partnered scientific manuscript describing this journey.

2. Collect and catalogue important tools and materials that Truman VAMC developed and/or used in their HRO journey. **Deliverable:** A collection of HRO tools.

3. Begin to describe the culture of Truman VAMC as it relates to HRO. **Deliverable:** A brief white paper describing the culture and suggested next steps to evaluate the culture.

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**Type of analysis and/or data requested:**
The currently available data include the artifacts of this journey (e.g., meeting minutes, policies, plans, and improvement projects), which need to be evaluated and analyzed using qualitative methods. Additional data collection, including interviews of key leaders and other staff with knowledge of this process, is also needed.

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**Requested Researcher Qualifications:**
Qualitative data design and analysis, including collecting and analyzing data from key informant interviews and/or focus groups and experience with ethnographic observations.

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**Preferred duration, effort, and in-person time**
The Office of Systems Redesign and Improvement is seeking a researcher able to commit 50% effort over 9-12 months. Apart from visits to the Truman VAMC (Columbia, MO) for data collection and interviews, much of the work could be completed from the researcher’s home institution (with some interviews conducted by phone). It is anticipated that the researcher will need to make 2 to 3 visits (one week) duration to Columbia, MO.

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**Additional support or benefits available to the researcher/evaluator in residence:**
Travel to Washington, DC is not anticipated. Our office would make space and other resources available at the Truman VAMC in Columbia, MO and provide travel support. The Office of Systems Redesign and Improvement will coordinate with QSV.
Summary of expected program/policy to benefit from additional analytical support:

Nurse Practitioners (NPs) and Registered Nurses (RNs) are among the top Veterans Health Administration (VHA) Mission Critical Occupations identified as a priority for recruitment and retention initiatives. Due to the current national shortage of an experienced nursing workforce, VHA has resorted to filling nursing vacancies with new graduate nurses. Practice and research demonstrate that newly graduated nurses benefit from additional experiential training to master their clinical skills. Residency programs can also help to alleviate challenges associated with high turnover of new graduate nurses during their first year of employment.

Since 2011, the VA OAA has implemented 46 academic-based, post-graduate NP Residency programs within VHA with a focus on primary care and mental health training and 35 RN Residency programs. These programs are designed to ensure the supervised transition of newly graduated NPs and RNs to safe and competent clinical practice in the Veteran-centric setting of care.

The VA OAA has developed and implemented an extensive, multidimensional, program-specific national evaluation plan for its RN and NP residency programs. Several program-specific instruments were designed and used to collect data regarding the particular requirements of each program. Analyses of these data are needed to (1) determine the effectiveness of the VHA OAA Nurse Residency Programs; (2) identify areas for improvement; and (3) determine the organizational impact of these programs on VHA nursing workforce recruitment and retention goals.

Associated VA National Priority:
1. VHA Workforce Recruitment Priority. NPs and RNs are among the top VHA Mission Critical Occupations identified as a priority for recruitment and retention initiatives.
2. Institute of Medicine (IOM) Recommendation: In 2010, the IOM (now the National Academy of Medicine) recommended the implementation and evaluation of post-graduate residency programs for nursing.

Objectives and associated deliverables:
- **Objective 1:** Determine the effectiveness of the VHA OAA Nurse Residency Programs.
  - Associated deliverables: evaluation report and/or peer-reviewed manuscript(s)
- **Objective 2:** Identify areas of improvement.
  - Associated deliverables: evaluation report
- **Objective 3:** Determine the organizational impact of these programs on VHA nursing workforce recruitment and retention goals.
  - Associated deliverables: evaluation report and/or peer-reviewed manuscript(s)

Type of analysis and/or data requested:
OAA has large qualitative and quantitative nursing education datasets requiring a mixed-methods approach to design and analysis.
### Requested Researcher Qualifications
- Knowledge and skills in mixed-methods research (analyzing and integrating quantitative and qualitative methods)
- Experience and expertise in utilizing qualitative analysis software
- Experience and expertise in using quantitative analysis software
- Strong written communication skills

### Preferred duration, effort, and in-person time
OAA strongly prefers a researcher able to commit 50% effort for 12 months or 100% effort for 6 months. The researcher is expected to attend weekly virtual meetings and travel to DC as needed (no more than 1 week every two months).

### Additional support or benefits available to the researcher/evaluator in residence:
The OAA will cover the cost of travel to VACO DC. The researcher will collaborate with OAA evaluation subject matter expert(s) on developing a data analysis plan, executing analysis, and producing reports/manuscripts. The researcher will be listed as a co-author on publications.