Department of Veterans Affairs
National Research Advisory Council (NRAC) Meeting
Room 104, 1100 First Street, NE Washington, DC
September 4, 2019

Minutes

Members Present
David G. Young, Chair
Carrie Farmer
Andrew Guccione
Jerry Lee (by teleconference)
James Lillard
Maria Lima
Boris Lushniak
Geoffrey Ling
Yvonne Maddox
Ross McKinney
Catherine Wicklund

Members Absent
Lee Bitsoi

VA Staff Present
Grant Huang, Alternate DFO
Rashelle Robinson, Alternate DFO
Rachel Ramoni
Vicky Davey
Molly Klote
Maria Souden
David Atkins
Wendy Tenhula
Karen Block
Scott Duvall
Patricia Dorn
Amy Kilbourne

CALL TO ORDER/OPENING REMARKS
Grant Huang, DFO; Rashelle Robinson, Alternate DFO; Brig. Gen. David G. Young, Chair;
Rachel Ramoni, DMD, ScD, Chief Research and Development Officer

Dr. Young, NRAC Chair, called the meeting to order at 9:05 am. Dr. Huang introduced himself
as DFO for the meeting in place of Avery Rock who was unable to attend the meeting. Rashelle
Robinson served as the alternate DFO. Dr. Huang gave opening statements regarding the
committee, its purpose and the process for public comments. Dr. Young then called for
introductions from committee members.

Dr. Young turned things over to Dr. Ramoni for her opening remarks and ORD updates. She
thanked committee members for their service, outlined the purpose of the meeting and reviewed

NRAC Sept. 4, 2019 Meeting Minutes – Pg. 1
discussions from the prior NRAC meeting. She also highlighted budget priorities and VA Data Commons activities and plans. Other Office of Research and Development (ORD) activities included the PREVENT Executive Order on preventing Veteran suicide, field listening tours to learn about the challenges faced by research offices and investigators in doing research, and field engagement activities involving larger meetings with research administrative officers and Institutional Review Board and Research and Development Committee managers. She further discussed how NRAC could help in the current meeting by going in depth with ideas previously generated to determine if and how to move forward on them. Specifically, some areas to discuss as noted in the agenda included: Electronic Health Record modernization; National Research Action Plan in relation to traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD); military exposures; and considering how children of Veterans may possibly be future investigators. In this context, Dr. Ramoni indicated the importance of NRAC in providing advice to the Secretary and research matters. A reminder was also given regarding NRAC member terms expiring and the need for nominations.

Dr. Ramoni focused on reviewing activities from the three ORD strategic priorities, including 1) increase Veteran access to high-quality trials, 2) increase real-world impact of VA research and 3) putting VA data to work for Veterans. She had ORD staff leading the efforts to provide updates.

**Access to high-quality trials:** Dr. Huang described how efforts were focusing on the workflow to help industry partners understand how to work with VA. Specifically, Standard Operating Procedures (SOPs) were being drafted by a workgroup. A recent accomplishment was approval for centralizing non-disclosure agreements as an alternative to doing them at individual VAMCs. Additional activities include gathering input from outside federal and VA entities as part of subcommittee efforts.

**Real-world impact:** Dr. Kilbourne described a focus on reducing three major barriers to real-world impact that include 1) alignment of research with VA national priorities, 2) creating and promoting incentives for researchers to validate their discoveries and 3) investigator incentives to conduct implementation research to ease translation. The presence of ORD/QUERI along with VHA Finance, the Office of Policy and Planning, and the Office of Strategic Integration were noted in efforts to operationalize the Evidence-based Policy Making Act. Also, mention was given on a Request for Applications (RFAs) for validation of preclinical discoveries and mechanisms and the development of SOPs for a national resource center(s) to facilitate implementation activities with the Cooperative Studies Program. HSR&D also is taking lead on multiple RFAs related to implementation science, including a recent initiative that enables investigators to work with existing providers toward adoption and testing of interventions.

**Putting VA data to work for Veterans:** Dr. Duvall described three areas of activity that include 1) building infrastructure, including final signatures on data comments, imminent IT approvals and an upcoming meeting that will look at next 3 to 5 years of internal infrastructure; 2) Presidential Innovations Fellow program, which allowed VA to help write and embed VA goals into National Artificial Intelligence Plan and other national policy initiatives; and 3) potential data partnership initiatives for predictive modeling to test and determine capabilities across different health care institutions.

Dr. Young asked that these points on the ORD strategic priorities be summarized in the minutes and codified for the annual report.
NRAC Discussion

Discussions in response focused on the importance of behavioral and mental health issues and suicide prevention in particular. The limited availability of psychiatrists, psychologists and other mental health professionals was noted. While access has been studied, a greater need was getting people to high quality providers who use evidence-based treatments. Comments were raised on the importance of investing in these areas. In addition to suggesting that NRAC help with efforts in this area through its recommendations, a proposal was made to develop a subcommittee on suicide prevention research. Dr. Farmer, Ms. Wicklund and Dr. Young offered to help. A separate more focused briefing for interested individuals was suggested. Dr. Maddox also mentioned a DOD strategic plan in this area and an upcoming meeting in October in which NRAC members were invited to participate. Satellite sessions on suicide and suicide prevention were to occur.

Regarding NRAC membership, it was noted that NRAC stands out on diversity, representing women, minorities, underserved and Veterans. To help align membership with priorities, it was requested that ORD be specific with the types of expertise needed to allow NRAC to be helpful with potential nominees.

Additional general discussion followed related to the following issues:

- Inability to recruit qualified individuals from the various health professions and other issues that hinder recruitment
- The state of ORD research vis a vis what types of new processes, infrastructure, support
- Communicating research
- Implementation science
- Incentives for doing research that solves problems faced by frontline clinicians

MILITARY AND TOXIC EXPOSURES RESEARCH
Dr. Vicky Davey, Associate CRADO for Epidemiology and Public Health

Dr. Davey presented on military exposures research related to: challenges; present state; ORD funding mechanisms; and potential future directions. Points raised included the serious limitations to studying exposures, including limited or nonexistent measurement, combination exposure, diluted identification of exposed cohorts, lack of understanding of toxic effects of substances under military conditions, the overlap of health effects of toxic exposure and diseases of aging, and constituents who believe they already have answers to toxic exposures. Dr. Davey also noted distrust of VA research among Veterans, especially during and post-Vietnam era. Partnerships and resources, including data sets were covered, to help the committee with considering opportunities.

NRAC Discussion

NRAC questions and discussions centered on the nature of distrust and whether it was related to eligibility or exposure and eligibility for benefits. Others described their personal and professional experiences, including a schism between benefits and medicine, misperception among dual beneficiaries (DOD and VA) related to distribution of money, and perceived institutional rivalry between DOD and VA. Perspectives were raised on occupational health issues and where responsibility resides—i.e. DOD, VA, OSHA, Dept of Labor, HHS, NIOSH—in
addition to how issues can be politicized and needed to deal with cultural shifts in research. Other questions addressed how much of efforts were focused on suicide prevention and the challenges associated with the ability to know locations of Veterans and working with other partners. Discussions closed with questions on the type of expertise who can help with NRAC efforts in this area. Some ideas included individuals who could help with identifying high-priority diseases and conditions, oncology, understanding of PFAs (perfluoroalkoxy alkanes) and partnerships with NIEHS. Dr. Ramoni asked the group to think about and submit suggestions for new members to NRAC group and toxic exposures group.

VA/DOD/OTHER COLLABORATIONS
Dr. Molly Klote, Director, Office of Research Protections, Policy & Education

Dr. Klote briefed the committee on efforts to update the VA/DOD research guide book, a project that has included bringing together multiple stakeholders. Among the challenges revealed during meeting among stakeholders: unacceptable delays in IRB approvals; unacceptable delays in establishing agreements; variability regarding policy limitations; limited or non-existent preplanning, and no repository/examples of successful collaborations. Dr. Klote presented to NRAC a draft document describing 10 myths of collaboration. This document will be published electronically and discussed at an upcoming cyber seminar.

It was suggested that a similar briefing be considered for the National Academic Affiliation Council. Questions on budget requirements were also raised in which the reply was that it was part of next steps to determine.

A core/central authority was identified as a critical factor to success. Furthermore, Dr. Ramoni would be VA stakeholder, but that someone from DOD would need to be identified. Dr. Huang reminded NRAC that key recommendations to the Secretary would need to be generated soon and this point would be noted in the minutes.

ELECTRONIC HEALTH RECORD MODERNIZATION
Dr. Maria Souden, Dr. David Atkins – Office of Research and Development/Health Services Research and Development Service

Dr. Atkins gave updates from last NRAC meeting on Cerner transition, including the following goals to ensure that the unique needs of research are considered: understanding risks; identifying solutions; building awareness about impact. Dr. Souden also highlighted work that remains in: migrating and mapping data into Cerner; sustaining availability of EHR data for reuse; data governance and data access; impact on research administration and support; and ORD Strategic Initiative for Research/EHR Synergy.

NRAC Discussion

This topic raised several questions and concerns regarding not only the activities of the migration but the impact on quality research for VA. Specific issues were related to data flow/operations, access to the data, resources for handling the transition for research, the need to focus on the validity of research that would arise from use of Cerner, whether any strategies were in place regarding unstructured data, how clinicians/investigators were going to be informed of how data could be obtained/used and the need for efforts for focus on quality comparisons. Members indicated their experiences and noted limitations of Cerner/EHRs...
particularly for research purposes. NRAC suggested that VA needs to work on a central strategy for use of the EHR as it relates to research and the research community who would be reliant on its data. The need for resources to properly handle it was also noted as an area NRAC should include in its recommendations.

ENGAGING/RECRUITING NEW INVESTIGATORS

Committee

Dr. Huang reviewed the prior NRAC meeting discussion related to engaging dependents of children of Veterans to be future VA researchers because of their potential vested interest.

Questions were raised about whether good data points existed. Specifically, what are influencers and drivers of children entering into science? Do data exist that suggest that this approach would work? No data were known by ORD staff.

A comment suggested that focusing on the children of Veterans would be an interesting idea compared to other diverse groups, and it may be a powerful idea; however, we may need to go after diversity more. The remaining discussion revealed multiple suggestions and concerns, among them:

- Student debt and loan forgiveness as recruitment tools—student debt is repelling potential talent
- How to attract among the economically disadvantaged students
- Current VA loan repayment initiatives are not open to research positions
- Cost of education and its impact specific to diversity in the sciences
- Lack of funding opportunities that make science careers unattractive and not sustainable
- VA research funding opportunities that are more consistently available
- ORD career development funding, and funding for unfunded projects
- Loss of administrative staff (regulatory et al.) who are recruited into university/academic environments where there is more money
- Potential to use career VA scientists as volunteer mentors for those doing unfunded research
- How to increase more interest in STEM careers, generally

Some suggestions for ORD actions included considering a summit of investigators who have shown impact and presenting to others on how to do work with VA, especially in clinical research where treatments are a focus.

PUBLIC COMMENT, FUTURE NRAC ACTIVITIES

Dr. Huang noted that there were no public comments. The next NRAC committee meeting would be held December 4 and that members should think about concrete recommendations for annual report.
The meeting was adjourned at 3:15 p.m.

Submitted,

David G. Young III, M.D., FACP, Brig. Gen. USAF (Ret.)
Chair, National Research Advisory Council