



VA Research Overview: Office of Research and Development Investigators, Scientific Review and Management

*Investigators, Scientific Review and Management (ISRM)
Office of Research and Development (ORD)
Veterans Health Administration
Updated May 19, 2026*

VHA Office of Research and Development (ORD)

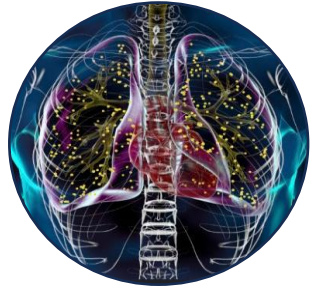
ORD leads a large research enterprise that serves Veterans by:

- Executing the Medical and Prosthetics Research appropriation;
- Providing central policies for the safe and ethical conduct of research;
- Supporting over 100 VA medical centers doing a range of scientific work;
- Fulfilling a mission aimed at enhancing the care and well-being of Veterans through rigorous evidence-based approaches.

For over 100 years, VA Research has been improving the lives of Veterans and all Americans through biomedical discovery and translation.



VA Research: 100 Years of Achievement*



1946

First Clinical Trial
for Tuberculosis



1967

First Successful
Liver Transplant



1990

Discovery of a
Hormone That Led to
GLP-1 Diabetes Drugs



1960

First Permanent
Cardiac Pacemaker
Implantation



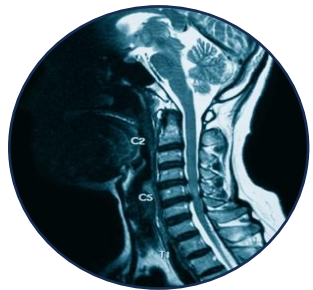
1983

Aspirin Showed to
Reduce Heart
Attacks



2011

Demonstrated
Effectiveness of
Shingles Vaccine



1966

Developed the CT
Scan



1984

Development of
the Nicotine Patch



2023

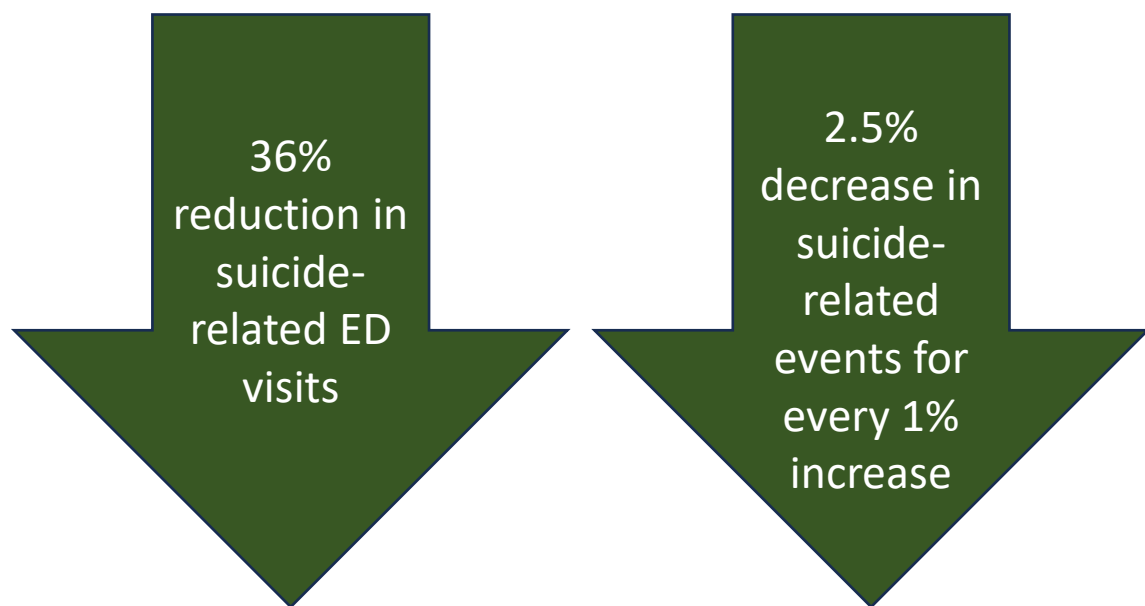
One Millionth Veteran
Enrolled in Million
Veteran Program

VA National PTSD Brain Bank and VA National Center for PTSD

- The first single-cell analysis of postmortem brain tissue from military Veterans diagnosed with post-traumatic stress disorder (PTSD)
- Comparing brain tissue from Veterans with PTSD to tissue from brains without PTSD, the West Haven VA National Center for PTSD Clinical Neuroscience Division investigators identified differences across neurons, microglia, blood vessels and more in the prefrontal cortex.
- Molecular map to see how PTSD reshapes the cellular landscape, altering signaling pathways, inflammatory responses and cellular function.
- generosity of the families of the decedents who donated the brain tissue used in these studies. We thank the National Center for PTSD Brain Bank, the University of Pittsburgh Brain Tissue Donation Program and the NIH NeuroBioBank whose efforts led to the donation of the post-mortem tissue used in these studies; the Keck Microarray Shared Resource (KMSR) and YCGA at Yale university for their assistance with snRNA-seq, snATAC-seq and snMultiome-seq; and the assistance of the Molecular Genomics Core at Duke University School of Medicine for the generation of the spatial transcriptomic data for the paper. The research reported here was supported by the Department of Veterans Affairs, Veteran Health Administration, VISN1 Career Development Award, a Brain and Behavior Research Foundation Young Investigator Award, an American Foundation for Suicide Prevention Young Investigator Award and NIH grants R01AA031017 and DP1DA060811 to M.J.G. and R01NS128523 and R01HG012572 to J.Z. This work was supported with resources and the use of facilities at the VA Connecticut Health Care System, the Durham VA Healthcare System, the Central Texas Veterans Health Care System, the VA Boston Healthcare System and the National Center for PTSD, US Department of Veterans Affairs. This work was funded in part by the State of Connecticut, Department of Mental Health and Addiction Services.

VA Research: Impacts on Veteran Behavioral Health

Virtual Access to Mental Health Services



Veteran Access to Pain & Opioid Use Disorder (OUD) Treatments

Consortium to Disseminate and Understand Implementation of Opioid Use Disorder Treatment (CONDUIT)

 **>1900**
Providers trained

>60 VAMCs
6 EBPs for Pain

Clinical Impacts

- ❖ **Increased Veteran access to evidence-based pain treatments**
- ❖ **267% increase** in # of Veterans receiving OUD treatment

VA Research – Focused on Veteran Needs

Building on a tradition of innovation, VA Research is charting the future for Veteran care addressing VA priorities, and Veteran's most pressing health needs - such as:

Research Focus

- Precision Oncology
- Suicide Prevention
- Military Exposures
- Traumatic Brain Injury
- Posttraumatic Stress Disorder
- Pain and Opioid Abuse
- Women Veteran Health
- Homelessness

Cutting Edge Approaches

- Genomics & Precision Medicine
- Diagnostic Technologies
- Data Science
- Artificial Intelligence

ORD Investigators, Scientific Review & Management (ISRM)

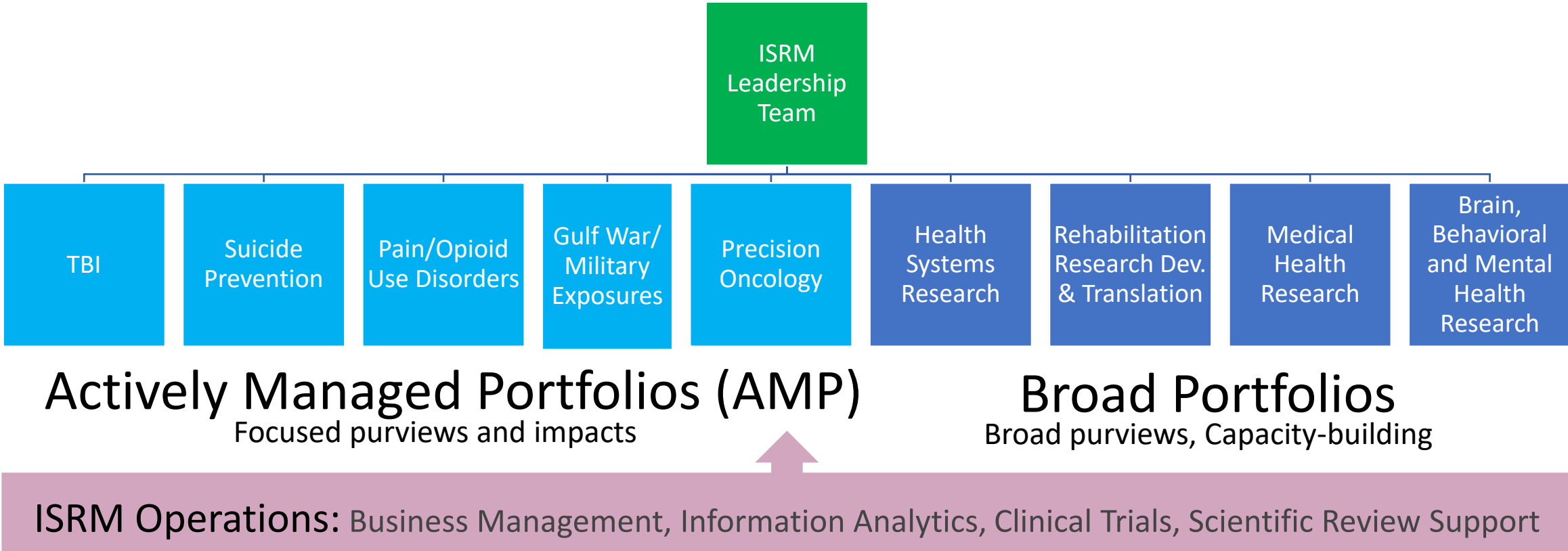
ISRM funds VA-employed investigators to conduct preclinical, clinical, rehabilitation and health systems research projects that address Veteran priorities and needs.

For over 80 years, VA has supported investigator-initiated research through formal affiliations between VA Medical Centers and Universities (e.g., Medical Schools), ensuring Veteran access to highly-trained clinician-scientists focused on research addressing their needs (VA Policy Memorandum 2, January 30, 1946)

ISRM Overview

- ISRM shared services, cross-portfolio RFAs, single funding source
 - More visible alignment of VA Research goals with VA priorities
 - Streamlined investigator application process
 - Greater ACOS agency over funding
- Current status: >2000 applications per year, funding ~350-400
 - ~40% projects involve pre-clinical/animal models
 - ~20% funding rate across portfolios
 - ~25% triage rate (NIH current triage rate ~70%)
- Looking ahead:
 - ISRM-wide priorities: AI, Veteran economic security, Chronic disease
 - Innovations in methods, technology, and partnerships
 - Building capacity for cross-disciplinary, Veteran-focused research

ORD Investigators, Scientific Review and Management (ISRM)



ISRM funds VA-employed investigators to conduct research projects across the translation spectrum that address VA and Veteran priorities and needs. VA investigators can apply to different portfolios using the same RFA mechanisms.

ISRM receives >2000 applications per year, funding rate ~20%

ORD ISRM Research Priorities

Improve Veteran health through embedded translational research in real-world settings focused on....

Statutory mandates (e.g., [38 U.S. Code 7303](#), Cleland Dole Act- [Public Law No. 117-328](#)), Legislative mandates (below), ORD current [strategic priorities](#), SecVA [strategic drivers](#):

1. Legislative mandates

- Hannon Act (e.g., TBI, Suicide Prevention)
- PACT Act (including Gulf War and Military Exposures programs)
- CARA Act (Pain/Opioid)
- Cleland Dole Act (Precision Oncology)
- MISSION Act (Community Care, Rural health)
- Elizabeth Dole Act (Caregiving, Value-based care models)

2. Timely Access –Any Door (Supports Direct Care, Community Care, **Digital Health-AI**)

3. Well-Being of the Veterans at the Center of the Enterprise through:

- Health= Mental/Physical/Spiritual Approaches across the enterprise to ensure veterans get choice (e.g., **chronic disease-** prevention, treatment, and management)
- **Housing** and Social Aspects (Homelessness)
- Economic/Vocational/Educational

4. Relevant SecVA Topics: Suicide Prevention, Homelessness

Examples of Impacts on Veteran Health from ISRM-funded Research

Bench to Veteran:

- >85 prosthetic and rehabilitation technologies transitioned into clinical use
- Bone-Anchored prosthetic for lower-limb amputees

Informing treatment and program development for Veterans:

- Deep-dive data: Total Brain Diagnostics, VA-SHIELD
- AI models to predict Veteran housing instability, suicide risk, etc.

Veteran access and health care value:

- >200,000 Veterans virtual care access → 36% reduction in suicide-related ED visit
- >680,000 lung cancer screenings for >350,000 Veterans since 2021

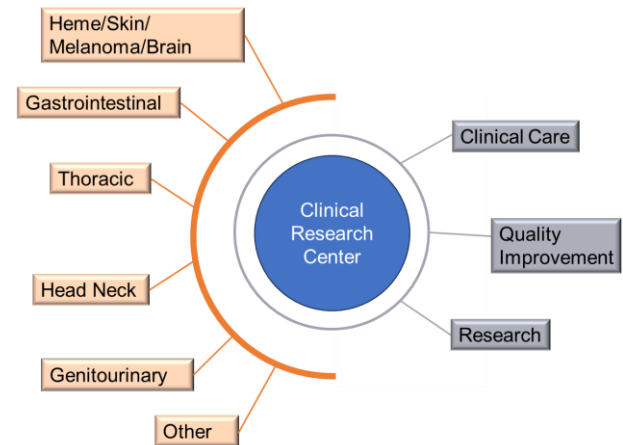
Policy change:

- Cost Implications of Veterans' VHA-Medicare Advantage Dual Enrollment—Legislation fix
- Formal establishment of ICD-10 code for Gulf War Illness

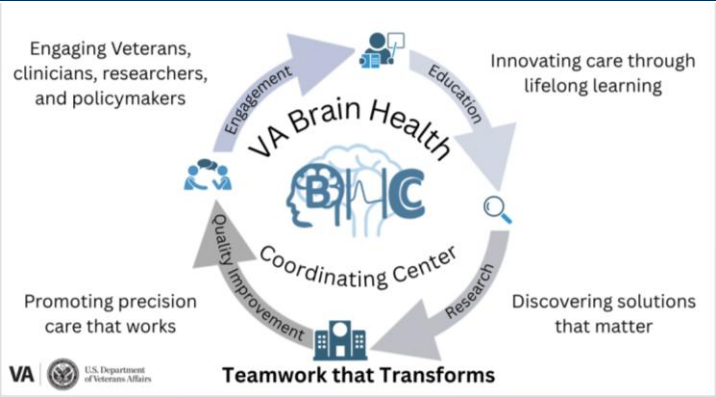
ISRM Research Infrastructure: Centers

- Rehabilitation Research and Development Centers (mission-driven research for Veterans)
- Health Systems Research Centers of Innovation (embedded research, capacity-building)
- Consortia of Research (VA knowledge management, data curation, impact measures)
 - [Access and Community Care](#)
 - [Nursing Data and Research](#)
 - [Pain/Opioid CORE](#)
 - [Suicide Prevention](#)
 - [Virtual Care](#)
 - [Veteran Employment and Economic Security](#)
 - Coming soon: AI-CORE
- **NEW**: Cross-portfolio Center RFA: MERP/GWI, Suicide Prevention, BBMH

AMPs: Learning Health Systems



Precision Oncology



Traumatic Brain Injury

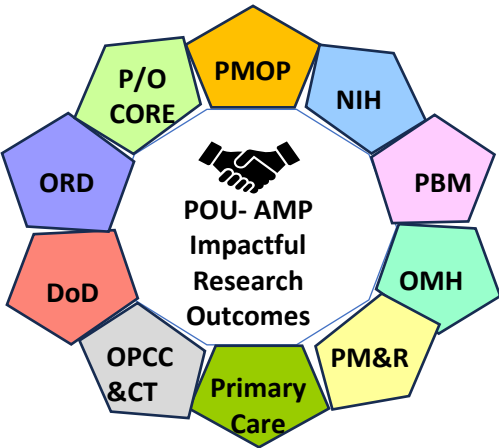
Suicide Prevention – Precision Health Research Resource (VESPPHRR)

Center for developing precision health approaches for suicide prevention

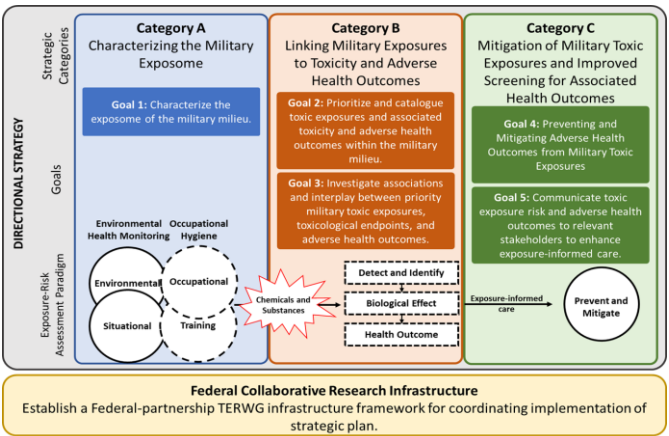
1. Develop suicide risk phenotypes that interact with treatment
2. Use VA data to conduct emulated clinical trials investigating person by intervention interaction
3. Use randomized clinical trial methods to validate precision treatment rules derived from center studies
4. Make recommendations for decision rules to direct clinical tools to select interventions based on phenotype

Individualized treatment approaches for suicide prevention

Suicide Prevention



Pain / Opioid Use



Military Exposures/Gulf War

QUERI VA Quality Enhancement Research Initiative
EVIDENCE INTO PRACTICE

MVP MILLION VETERAN PROGRAM

ESP Evidence Synthesis Program

ISRM Scientific Peer Review Process At a Glance

Policies based on VHA Guidance, NIH eRA, and related Executive Orders (e.g., 14303)



ISRM Publishes NOSIs (specify subject areas) and RFAs (specify mechanism)



>2,000 applications are submitted from researchers embedded in the field



ISRM assigns applications to peer review committees (VA and non-VA SMEs)



Second level review by ISRM Directors and Program Staff



15-20% of projects selected for funding based on score and program priorities

Central Tenets:

- Reproducible
- Transparent
- Conveys errors and uncertainty
- Collaborative and interdisciplinary
- Skeptical of findings and assumptions
- Structured for falsifiability
- Unbiased peer review
- Negative results as positive outcomes
- No conflicts of interest

How to Apply for VA Research Funding

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Research & Development

1 Start Here

Talk to Your Local VA Research Office

Connect with your ACOS/R and admin staff to understand local requirements.

2 Review

Review the NOSIs

Look for Notices of Special Interest that match your research focus.

3 Follow

Follow the RFA

Understand what's required in your application. Start with a pre-application if applicable.

4 Select Group

Select appropriate scientific review group

Review groups generally meet twice a year on Winter/Summer or Spring/Fall cycle.

5 Submit

Submit Through Your Local Office

Work with your site's research staff to finalize and submit your documents.

6 Admin Review

Administrative Review of Your application

Your pre-application is reviewed by ISRM staff.

7 Peer Review

Scientific Review of Your application

Your application is reviewed by a Peer Review Group under ISRM.

8 Portfolio Review

Portfolio Review

ISRM leadership and the Portfolio Director makes the final funding decision based on scores and priorities.

Need Help

VHAISRM@va.gov

Go to your local SPM for hands-on support.