

## Program Announcement VA Advanced Fellowship in Health Services Research and Development

### 1. PROGRAM ANNOUNCEMENT

This program announcement provides information, policies, and application procedures to Veterans Health Administration (VHA) facilities and healthcare systems regarding the VA Advanced Fellowship Program in Health Services Research and Development (HSR&D). This fellowship provides two years of post-residency, post-doctoral research, education, and clinical learning opportunities to eligible physician, dentist, nursing, and associated health professionals. Fellows spend approximately 80 percent of their time in research and education and 20 percent in clinical care (or healthcare system improvement activities for non-clinicians) at competitively selected VHA sites. This program leverages the expertise, mentorship, and educational infrastructure at selected HSR&D Center of Innovation (COIN) sites to provide advanced interprofessional training opportunities in health services research, implementation science, and healthcare system improvement.

Graduates are expected to apply rigorous health services research and implementation science skills towards improvement of healthcare systems and thereby enhance the health and wellbeing of Veterans and the Nation. In addition to strengthening their individual technical and analytic expertise through their participation in this program, fellows will develop management, team-building, communications, consensus-building, systems thinking, and engagement skills consistent with the Learning Health System (LHS) Core Competencies adapted from the Agency for Healthcare Research and Quality (AHRQ; <https://www.ahrq.gov/funding/training-grants/summary.html>).

This program announcement aims to solicit strong applications with a goal of selecting up to 14 sites authorized to recruit up to 2 fellows per year for this 2-year educational experience. *Existing HSR&D fellowship sites MUST reapply* and those that are approved through this announcement will be authorized to continue training and recruitment without interruption. New sites are expected to onboard fellows for Academic Year (AY) 2022-2023 but will be authorized by the Office of Academic Affiliations (OAA) to recruit and onboard fellows for AY 2021-2022 if they have the capacity to do so.

### 2. BACKGROUND

For three decades, VA's HSR&D Advanced Fellowship Program has provided collaborative training and mentoring opportunities for clinicians, researchers, clinician-investigators, and operational partners. The program was launched in 1991 by OAA at a time when a broad array

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of concerns was challenging health care delivery in VA and the nation. These concerns ranged from issues related to shared decision making to quality, cost, and measurement issues. Few professionals had the training in health services research needed to address these critical issues, and VA's need for such experts was increasing dramatically. In response, OAA created the HSR&D Advanced Fellowship Program to develop a cadre of clinicians and scientists with health services expertise to support the expansion of high-quality health services research and development at local and national levels.

In 2014, OAA competitively selected 14 sites for the VA Advanced Fellowship in HSR&D among the 19 newly identified COIN sites. The launch of the COIN sites represented a significant transformation in the mission and objectives of the HSR&D program towards a LHS (LHS) approach, which in turn influenced the Advanced Fellowship experiences.

More recently, HSR&D has funded Centers of Excellence (CoEs) in key VA national priority areas, such as the Elizabeth Dole Center of Excellence in Veteran and Caregiver Research. In addition, HSR&D's Quality Enhancement Research Initiative (QUERI) program has established [training programs](#) focused on key core competencies of LHSs, notably design, evaluation, and deployment of implementation science-focused strategies to improve the uptake of evidence-based practices in real-world care settings.

Building on VA's proud history of leading the nation in the integration of research in support of improved health system performance, VA is seeking to become an LHS. The journey towards becoming a LHS has its foundation in the COINs' activities linking research to the needs of operational partners throughout VA. The Advanced Fellowship program is an essential strategy to foster system transformation and develop the LHS workforce needed in the future.

The Office of Research and Development (ORD) has contracted with AcademyHealth to serve as the Coordinating Center (CC) for the fellowship program. The CC is expected to work collaboratively with fellowship sites to establish the nationally standardized components of the fellowship as described below. Sites will be required to submit annual reports to the CC which document fellow recruitment efforts and outcomes, local training experiences, fellow progress and outcomes, and the overall impact of the fellowship program on the VA mission.

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Specific tasks for the CC include:

- i. The development and implementation of a model curriculum for the LHS core competencies and assessment of fellows based on measurable learning objectives for each domain of the LHS core competencies;
- ii. Development and implementation of overall program evaluation to monitor the extent to which the program is accomplishing its mission;
- iii. Supporting Academic Year 2021-2022 re-competition of the HSR&D fellowship sites;
- iv. Administration and leadership of the program, including routine program operations, site coordination and oversight, and stakeholder communication (ORD, OAA, and the fellowship sites);
- v. Orientation for new sites and for new Program Directors at existing sites;
- vi. Submitting a summary report to the OAA Advanced Fellowship section based on provided criteria; and
- vii. Continuous program improvement of the CC and overall fellowship program.

### 3. PROGRAM DESCRIPTION

#### A. Facility Resources and Leadership Commitment

Program sites must be located at VHA facilities with COINs, other HSR&D Centers of Excellence, or QUERI centers that demonstrate clear facility leadership commitment to provide adequate support for a successful program. Should there be more than one eligible entity at a facility, the entities must collaborate, as only one submission per healthcare system is permitted. Should a COIN involve multiple facilities, they are eligible to apply for a single Advanced Fellowship award. Each sponsoring facility must submit documentation supporting the application. Specific facility support requirements are listed in the proposal scoring criteria in section 5C and in the application instructions in Attachment B, which outline the minimum commitment for support that must be made by the Medical Center Director (MCD).

#### B. Learning Environment and Educational Resources

In order to ensure successful implementation, programs must be in facilities with robust interprofessional learning environments and sufficient educational resources and expertise to support fellow development as leaders in research and LHS. Applications

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should describe facility characteristics that indicate the presence of a strong learning environment including:

- i. The overall facility training infrastructure (e.g., relevant research projects and training programs, continuing education for existing faculty, and facility sponsored educational experiences, conferences, or award opportunities).
- ii. Specific research and educational programs, opportunities, and collaborations. This may include:
  - Facility involvement and support of projects or initiatives at the local, VISN or national level.
  - Facility collaboration with professional organizations or VHA entities (e.g., national program offices, centers of excellence) that can enhance the fellowship experience.
  - Any focused areas of expertise related to LHS implementation and/or research within the facility.
- iii. The quality of the established clinical learning environment at the facility, as evidenced by factors such as:
  - The quality of care in clinical settings in which the facility's healthcare research is embedded; standard national VA metrics or locally defined metrics can be provided as evidence.
  - Any participation of health professions trainees in implementation or performance improvement activities.
  - Description of how HSR&D advanced fellows will be meaningfully engaged with the local clinical learning environment (e.g., co-location, attendance at team meetings, teaching, evaluation, or other strategies).
- iv. Affiliation with an academic institution:
  - In addition to strong affiliation with schools of medicine, fellowship sites are encouraged to have affiliations with appropriate programs for associated health and/or nursing professions recruited as fellows (including schools of nursing, pharmacy, psychology and others, as well as Clinical and Translational Science Awards- CTSA's).
  - Applications should describe any partnerships with research programs at the affiliate and outline the type of resources and opportunities provided through these affiliations.

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- Opportunities for fellows to obtain advanced degrees from the affiliate should be highlighted, if applicable. If such opportunities are included, the proposal should articulate a plan for avoiding excessive detracting from the fellowship experiential learning activities due to this participation in academic coursework.
- The educational environment and resources should be described, using the criteria in row 2 of the scoring criteria in section 5C as a guide.

**C. Interprofessional Program Directors and Faculty**

Interprofessional, highly qualified leadership and faculty mentorship are essential to developing and maintaining a strong fellowship program. The program is required to have a designated Director with at least 20% paid and protected VHA time (through a staff position, Intergovernmental Personnel Act agreement, or contract) to administer the program. Sites may propose to share the Director role between Co-Directors. Co-Directors shall not have less than 10% dedicated time and the combined VHA paid effort must equal at least 20%. Directors/Co-Directors shall possess expertise in LHS research, implementation science, and competencies and serve as a liaison with key participants (i.e., stakeholder engagement). The Directors/Co-Directors must also be able to identify additional preceptors, mentors, and other resource faculty at each site.

i. The Program Directors must ensure:

- That the fellow will be exposed to a mentoring team that addresses the multifaceted training needs for this fellowship experience.
- Diverse and interprofessional faculty are identified.
- Faculty meet regularly with the fellows to assess their progress, serve as role models, and provide constructive feedback and assistance in meeting educational goals.
- Faculty participate in formative and summative evaluation of fellows and the fellowship program.
- Faculty undergo ongoing faculty development programming.
- Assistance with projects, research methodology and content, and guidance in personal and professional development are available to fellows through an individualized combination of Director and mentor support.

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- A commitment to active, collaborative engagement with the fellowship CC, the other HSR&D sites, and OAA in support of the overall fellowship, including curricular and evaluation development and implementation.

Programs should provide details about Program Directors/Co-Directors and faculty as instructed in Attachment B and with regard to the criteria in the scoring table in section 5C (row 3).

### D. Curriculum and Instruction

Curriculum refers to the triad of learning objectives, instruction, and the assessment of learning, while instruction refers to specific instructional content and design. While the CC is responsible for coordinating the national LHS curriculum, each site has responsibilities for formal instruction, project-based experiential learning, mentorship, and fellow assessment to accomplish the national curriculum goals. In addition, applicant sites may have local curriculum based on each center's mission and resources. This local curriculum shall address learning objectives, instructional strategies, and fellow assessment that are unique to the site. Applicants shall describe their local curriculum in the context of a cited educational framework or theoretical model. Applicant sites should propose their own local curriculum with the understanding that selected sites will also partner with the CC in the development and finalization of national level competencies. The goal is a local education plan that integrates national curriculum with local instruction to create an outstanding fellowship experience.

- i. The description of the local curriculum should include:
  - Brief description of learning objectives.
  - Brief description of proposed instructional strategies, including:
    - a. formal instruction
    - b. experiential learning
    - c. learning through reflection
    - d. mentorship.
  - Description of interprofessional opportunities for fellows to be exposed to topics relevant to their individual learning goals.

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- A specific process for developing an Individualized Learning Plan (IDP) in collaboration with their Director(s)/Co-Directors and mentoring team, as soon as practical on entering the program. This plan will include:
  - a. the fellow's long-term goals
  - b. the local resources to be used
  - c. process for periodic plan review to allow for alterations in educational programming as needed to optimize outcomes.
- ii. A plan for evaluation of fellows' achievement of curricular goals and learning objectives, including specific outcomes. This should include assessment during the fellowship and at completion.
- iii. Fellows are expected to develop and implement a portfolio of research projects with at least one significant activity or project that will result in a documented impact on VHA priorities, operations, or clinical care. This significant research or evaluation project should (a) be focused on a local, VISN, or national initiative related to LHS implementation and (b) result in presentation at a regional or national venue, scholarly publication, development and dissemination of practical products, or all three.

Programs should provide detail about the plans for curriculum and instruction as outlined in the scoring table in section 5C (row 4).

#### **E. Program Administration, Evaluation, and Improvement Plan**

- i. Program Administration  
Programs must have procedures and resources for successful ongoing administration of the program. Applications should specify and describe the administrative home of the fellowship and the processes by which the site will monitor and ensure successful program administration. Specific requirements for facility-level administration are listed in the instructions for the Medical Center Director's (MCD) letter of support in Attachment B. Policies for program administration are listed in Attachment A.
- ii. Program Evaluation and Improvement
  - Applicant programs must have systematic processes for evaluating effectiveness in meeting educational goals. Programs should also have

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systematic processes for utilizing evaluation data to drive continual program improvement.

- Programs must agree to partner with the CC in the development and implementation of both local and national program evaluation and improvement processes. Applications should describe a plan to monitor processes and outcomes of the program that includes:
  - a. Assessing fellow outcomes and achievement during training (e.g., learning goals, competencies, scholarly activities, and products).
  - b. Conducting programmatic evaluation of the fellowship including processes, outcomes, and fellow and faculty satisfaction.
  - c. Assessing post-fellowship outcomes (e.g., employment, retention in VHA, continued work in healthcare research, impact on LHS implementation, scholarly activities and products, impact on VA national program or policy implementation or impacts on Veteran quality of care).
  - d. Applying assessment and evaluation results to modify and improve the local fellowship program.
  - e. Submitting annual reports to the CC to be aggregated across sites to identify overall program improvement needs.
- Applicant programs shall outline their strategies for recruitment of fellows (see Attachment A for fellow eligibility). This shall include likely professions targeted, the methods for recruitment, and strategies to develop a diverse and inclusive training program.

The scoring table in section 5C (row 5) should be used as a guide for this section.



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### F. Potential for Impact on VHA and Veterans Health

Programs shall describe anticipated beneficial impacts of their fellowship program on the VHA missions of patient care, health professions education, research, and emergency public health support. Programs should also describe how they prepare fellows to conduct cutting-edge, highly impactful health services and LHS research that is aligned with the HSR&D strategic plan and VA national health care priorities and in partnership with VA health care leaders. Potential impacts may include contribution to a diverse workforce of leaders in LHS development, implementation of evidence-based clinical initiatives, research leading to healthcare improvement, advancing VHA workforce diversity and inclusion, reducing racial and ethnic disparities in health outcomes, among many other possibilities. The scoring criteria for this section are articulated in the scoring table in section 5C (row 6).

### 4. FELLOW CREDENTIALS, APPOINTMENT, PAY, AND OTHER PROGRAM POLICIES

Selected programs will be governed by the policies outlined in Attachment A regarding pay, appointments, program oversight, and all other policies specified in the attachment.

### 5. REVIEW PROCESS

- A. Proposals will be reviewed for the presence of minimum eligibility criteria related to facility support of the program as documented in the MCD's Letter of Support. The specific criteria and details of how to document them in the MCD's Letter can be found in Attachment B.
- B. Applications that meet basic eligibility requirements will be evaluated by a formal review process. An interprofessional ad hoc review committee consisting of reviewers with demonstrated expertise and leadership in their respective medical and health professions content area, and/or clinical education will be designated by the Chief Academic Affiliations Officer. The review committee will advise the Chief Academic Affiliations Officer about the merits of the applications. Decision to approve sites rests with the Chief Academic Affiliations Officer.
- C. **Training site applications will be scored** using the following criteria and weights:

**\*\* IMPORTANT NOTICE FOR CURRENTLY APPROVED SITES REAPPLYING\*\***

Scoring for currently operating program sites will be based, in part, on past performance. Please see Attachment B for instructions for documenting this.

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Scoring Criteria for Submitted Proposals	Maximum points awarded
<p><b>1. Facility Resources and Leadership Commitment beyond minimum eligibility requirements</b></p> <p>Once the qualifying criteria outlined in the Facility Letter of Support instructions are met, an additional 5 points can be awarded for resources and commitment <u>above</u> the minimum for eligibility. For example:</p> <ul style="list-style-type: none"> <li>• Enhanced support of fellowship faculty (e.g., faculty development opportunities, additional faculty resources, protected time beyond the minimum required)</li> <li>• Additional resources for fellows (e.g., facility sponsored education, travel, or project funds)</li> </ul>	5
<p><b>2. Learning Environment and Educational Resources</b></p> <p>Quality of the interprofessional educational learning environment, including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Facility infrastructure and training programs that support health professions education for fellows and faculty</li> <li>• Collaboration with other VHA facilities and/or professional organizations in health services research</li> <li>• A high-quality, established clinical care environment in which fellows will train, and a plan to meaningfully connect fellows to the local clinical setting</li> <li>• Facility involvement in projects or initiatives related to research and implementation related to LHSs at the local, VISN or national level</li> <li>• Collaborations with VHA national program offices or centers that can enhance the fellowship experience</li> <li>• Academic affiliation(s) that support the program, including the health profession(s) covered</li> </ul>	20

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<p><b>3. Interprofessional Directors and Faculty</b>          Evaluation of Fellowship Program Directors, Co-Directors, and Faculty qualifications should include:</p> <ul style="list-style-type: none"> <li>• Training, expertise, and scholarship in healthcare research, including team-based, multi-site studies, and stakeholder engagement</li> <li>• Demonstrated ability to teach across disciplines and promote an interprofessional and collaborative culture</li> <li>• Commitment to mentorship through regular meetings with fellows to support scholarly and professional development</li> </ul>	20
<p><b>4. Curriculum and Instruction</b>          Quality of local educational program’s proposed local curriculum plan that is guided by an educational framework or theoretical model, includes LHSs, and maximizes interprofessional learning in local areas of expertise. This plan shall include descriptions of:</p> <ul style="list-style-type: none"> <li>• Commitment and plan to develop individualized learning programs with fellows</li> <li>• Didactic and mentored experiential learning opportunities including scholarship/research skills, communication/engagement/leadership skills, and professional development</li> <li>• Mentored scholarly opportunities leading to dissemination through peer-reviewed publications and presentations in national venues</li> <li>• Plans for collaboration with academic affiliates on specific projects</li> <li>• Assessment of individual fellows’ achievement of curricular goals, including LHS domain learning objectives, using specific outcome metrics</li> </ul>	25
<p><b>4. Program Administration, Evaluation, and Improvement</b>          Processes for administration, evaluation, and improvement of the fellowship program. Including the program’s ability to:</p> <ul style="list-style-type: none"> <li>• Successfully administer the fellowship program</li> <li>• Describe specific strategies for recruiting fellows, including efforts to recruit for diversity and inclusion</li> <li>• Develop and implement effective and meaningful local evaluation processes</li> <li>• Use assessment data for continual improvement</li> </ul>	20

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<ul style="list-style-type: none"> <li>Partner with the Coordinating Center in completing the national evaluation and reporting requirements</li> </ul>	
<p><b>5. Potential for Impact on VHA and Veterans Health</b></p> <p>The anticipated impacts of the fellowship program on the VHA mission, based on:</p> <ul style="list-style-type: none"> <li>Specific strategies for producing a workforce able to           <ul style="list-style-type: none"> <li>Engage with stakeholders and lead in LHS development</li> <li>Implement evidence-based clinical initiatives addressing VA national health care priorities</li> <li>Produce research leading to healthcare improvement</li> </ul> </li> <li>Specific strategies for promoting workforce diversity and for reducing racial &amp; ethnic disparities in health outcomes</li> <li>Ability to positively contribute to Veterans’ health</li> <li>Unique opportunities for positive impact on VA, especially as a national health in health services and LHS research</li> </ul>	10
<b>6. Total</b>	100

**5. SCHEDULE**

May 27, 2021	OAA releases program announcement to eligible sites
June 24, 2021 1:00-2:30 Eastern	<p>Informational Session</p> <p>Topic: HSRD RFP Information Session          Time: Jun 24, 2021 01:00 PM Eastern Time (US and Canada)</p> <p>Join ZoomGov Meeting  <a href="https://www.zoomgov.com/j/1606193531?pwd=SWx0SGtsZGRVbDZUTFJnb0habmV6UT09">https://www.zoomgov.com/j/1606193531?pwd=SWx0SGtsZGRVbDZUTFJnb0habmV6UT09</a></p> <p>Meeting ID: 160 619 3531          Passcode: 283903</p>

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	Dial by your location +1 669 254 5252 US (San Jose) +1 646 828 7666 US (New York) +1 669 216 1590 US (San Jose) +1 551 285 1373 US
June 25, 2021	Facilities upload to OAA database non-binding intent to submit (ITS) a full proposal including contact person and station:  The ITS form is located on the database upon site log-in for this RFP
July 27, 2021	Site applications due to OAA (upload to OAA database: <a href="#">HSRD RFP Upload Utility</a> )
August 31 and September 1, 2021	Review committee reviews applications and makes recommendations for approval of fellowship sites to the Chief (or Acting Chief) Academic Affiliations Officer
September 24, 2021	OAA notifies facilities about the approval/disapproval of their applications
October 1, 2021	All sites begin collaboration with Coordinating Center focused on faculty development, piloting national instruction, and refining fellowship evaluation processes; selected sites are expected to start recruiting fellows
July 1, 2022	All sites are expected to onboard fellows. National and local instruction is fully implemented.

**6. OAA CONTACT PERSONS**

For information or questions related to this fellowship program, please contact Ms. Deborah Ludke by email at [deborah.ludke@va.gov](mailto:deborah.ludke@va.gov) or Dr. Joel Schmidt at [joel.schmidt@va.gov](mailto:joel.schmidt@va.gov).

**7. APPLICATION INSTRUCTIONS**

Please see Attachment B for specific application instructions

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**ATTACHMENT A  
FELLOW ELIGIBILITY, APPOINTMENT, PAY, AND OTHER PROGRAM POLICIES**

**1. GOVERNANCE**

The Office of Academic Affiliations maintains overall responsibility for the administration of the VHA Advanced Fellowship Program in Health Services Research. The fellowship program is governed by VHA Handbook 1400.07, "Education of Advanced Fellows."

The Coordinating Center and OAA must approve significant changes to the fellowship site, including issues such as change in leadership, fellow resignation or termination, insufficient funding, change in preceptor/mentors, or any other reason why the approved proposal is not being fulfilled as proposed. The Coordinating Center will make recommendations to OAA about ongoing operations and future directions of the program.

**2. FELLOW ELIGIBILITY CRITERIA**

Fellows can be clinicians or non-clinical scientists. Sites will be authorized to appoint one physician and one associated health fellow.

Clinical applicants will be eligible to participate in this program provided they have completed all requirements needed to be a fully credentialed independent practitioner in their field at a VHA facility (with the exception of certain associated health disciplines that require fellowship training prior to licensure). Applicants must be US citizens and have completed doctoral-level training (e.g., MD, DDS, DPM, PhD). Applicants who were doctorally prepared as a clinician but who have relinquished licensure and are not currently or planning to be clinically active in the future will be considered as post-doctoral non-clinician scientists. All applicants should demonstrate interest in pursuing a VHA career with healthcare research as a significant focus. Fellows are appointed for two years.

**A. Physician Fellows**

Prior to beginning the fellowship, physician fellows must meet the following criteria:

- i. Completed a residency program that is accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Bureau of Professional Education (BPE) of the American Osteopathic Association.

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- ii. Fellows may not be enrolled simultaneously in any accredited physician residency/fellowship program without a specific waiver provided by OAA.
- iii. Have active, full and unrestricted license(s) to practice in the U.S. and any of its territories.
- iv. Be board certified or eligible with demonstration of active pursuit of board certification.
- v. Be appropriately credentialed and privileged for clinical practice at the local VHA facility.

#### B. Nurse Fellows

Prior to beginning the fellowship, nurse fellows must meet the following criteria:

- i. Have completed an accredited PhD or Doctorate of Nursing Practice Program.
- ii. Have a Nursing license (e.g., RN, NP) and either credentialed or boarded with a scope of practice consistent with their licensure and prior training. The license must be maintained throughout the fellowship to maintain eligibility for participation.

#### C. Psychology Fellows

- i. Prior to beginning the fellowship, psychology fellows must meet the following criteria:
  - Possess a doctoral degree from an accredited doctoral program that would make them eligible for VHA hire. Fellows can begin if the degree is not yet formally conferred if they have met all requirements (including dissertation defense) and it is in writing from the fellow's graduate program. Doctoral programs must be American Psychological Association (APA), Canadian Psychological Association (CPA) or Psychological Clinical Science Accreditation System (PCSAS) accredited. The applicant's degree must be in a specific specialty area recognized by one of these accreditation bodies and meet VHA hiring eligibility requirements. **Note:** an applicant with a degree from a program accredited for a school psychology specialty is not eligible for the fellowship because this specialty is ineligible for VHA hire.
  - Have completed all requirements to become a staff psychologist at a VHA facility, either as a licensed independent practitioner or as a graduate psychologist subject to supervision.

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- Graduate psychologists subject to supervision must meet the following additional requirements:
  - a. Completed an APA or CPA-accredited internship (or a new OAA funded, VHA-based internship that is not yet accredited).
  - b. All components of doctoral training must be completed before starting the fellowship. If an applicant applies before all requirements are completed, the Director of Clinical Training at the applicant's graduate school and the Director of Training at the internship must submit statements indicating that completion of all degree requirements is expected before the proposed start date of the fellowship.
  - c. The local program must develop a written supervision plan, starting on the first day of training. This plan must include at least 4 hours of supervision weekly, of which 2 hours must be individual, face-to-face supervision by a licensed and privileged psychologist. In addition, the written supervision agreement should meet jurisdictional requirements for licensure in any state.

#### **D. Associated Health Fellows (other than Psychology)**

Prior to beginning the fellowship, associated health fellows must meet the following criteria:

- i. Possess a doctoral degree from an accredited program in their respective profession and meet the qualification standards that would make them eligible for VHA hire.
  - ii. Have completed all requirements to become a fully credentialed independent practitioner (or the equivalent for that profession) at a VHA facility.
  - iii. Have an active, unrestricted license to practice in the U.S. if such licenses are required for entry-level VHA employment in the candidate's profession.
  - iv. Be a U.S. Citizen.
  - v. Not be simultaneously enrolled in any other accredited clinical training program.
- E. Applicants who are in non-clinical associated health professions must possess a doctorate degree (e.g., Ph.D., DPH, ScD) and have training relevant to health services research. These applicants would be appointed as non-clinical scientists.

### **3. APPOINTMENT AND COMPENSATION**



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**A. Physician Fellows**

- i. Appointments will be made under 38 U.S.C. 7406.
- ii. Accepted candidates are identified for the personnel management data systems and for cost accounting purposes by specific assignment codes. Fellows are eligible for health and life insurance benefits.
- iii. The Office of Academic Affiliations will consider requests to appoint fellows through a disbursement agreement executed in collaboration with a VHA/OAA approved academic affiliate.
- iv. Stipend Rate. The stipend rate will be based on years of previously completed ACGME or AOA accredited residency training and equivalent experiences as determined by OAA and index rates approved at the affiliated university and the respective VHA facility. The appointment level cannot exceed PGY-8. OAA reserves the right to use a different mechanism to establish fellow pay rates in the future. Fellows shall be paid directly by the VHA facility unless OAA provides written approval for another payment mechanism.
- v. Stipend Supplementation. Fellows shall not receive additional revenue from any source in compensation for their duties in this program. This prohibition does not include possible supplemental funding for travel or research, if available.

**B. Nursing and Associated Health Fellows**

- i. Appointments will be made under 38 U.S.C. 7405 (a)(1)(D).
- ii. Stipend rates will be determined by OAA, depending on the discipline and previous education of the fellow. Current rates are listed [Advanced Fellowships Associated Health and Nursing Stipends](#) as of the time of publication of this document. Approved sites with potential fellows from disciplines not on the table should contact OAA for salary rates.

- C. Full time appointments are preferred, but sites may request an exception to full time appointments by making a formal request to OAA and the Coordinating Center stipulating the part time appointment is not less than half-time and that such an appointment is appropriate for the program mission and the fellow's learning plan. All part time appointments must be completed during the fellowship appointment period.

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- D. Full-time fellows from clinical professions are expected to spend at least 80 percent of their time in training, development, and implementation of projects related to the practice and advancement of healthcare education. No more than 20 percent time should be spent in direct clinical care unless there is specific educational justification. Fellows may spend less than 20 percent in clinical activities, but such decisions must take into account each fellow's career plans including requirements for licensure (when applicable).
- E. **Educational Details.** Fellows directly paid by VHA may be detailed to other educational institutions without loss of pay, but under no circumstances may the total time spent in non-VHA institutions exceed one-sixth of the total hours a fellow is in a pay and training status with VHA. Guidance on educational details for fellows is available in the VHA Handbook 1400.07 Education of Advanced Fellows. Advanced Fellows paid via disbursement cannot receive VHA pay for educational details away from Federal locations. Should a program wish to have fellows conduct activities at non-VHA sites, prior written approval from the Office of Academic Affiliations must be obtained.
- F. OAA recognizes that not all facilities used for educational purposes may be on VHA property. This can complicate the typical determinations about VHA timekeeping for fellow's activities in this program. Sites intending to have activities occur at non-VHA or shared sites should contact OAA for guidance about appointment and timekeeping strategies.

**4. LIABILITY PROTECTION**

Fellows will be protected from personal liability while providing professional services as a trainee at a VHA facility and at non-VHA facilities under the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679(b)-(d). Training at non-VHA facilities can only take place under the terms of an approved affiliation agreement (please consult with OAA Advanced Fellowship section).

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**5. EXPENSES**

Except as specified elsewhere in this program announcement, expenses connected to the fellows' recruitment, educational activities, or research are not funded under this program.

Transportation to the VHA facility and housing arrangements are the sole responsibility of the selected fellows.

**6. SERVICE OBLIGATION**

There is no service obligation after completion of the fellowship program. However, fellows are encouraged to seek VHA employment. Program faculty mentorship is expected to include career counseling, including assistance in obtaining VHA employment.

**7. IDENTIFICATION OF FELLOWSHIP STATUS**

Fellows shall notify VHA locally and nationally as required prior to any publication or presentation. Fellows shall also identify their VHA support in all reports and presentations during the fellowship program and after the fellowship program if the report or presentation is related to activities conducted during the fellowship program. Failure to do so while in the fellowship program may result in termination of the fellowship. Fellow activities determined to be research per VA Program Guide 1200.21 must comply with local and national VA research policies and procedures.

**8. CLINICAL PRIVILEGES/ SCOPE OF PRACTICE**

**A. Physicians**

- i. Subject to the policies and procedures of the appointing institution's medical staff bylaws, physician Advanced Fellows are to be privileged as licensed independent practitioners (LIPs) in the primary medical specialty in which they completed approved training. Exceptions to this requirement for LIP privileging are rare and require written OAA approval. The assigned privileges as an independent practitioner shall be within the scope of practice for which the Advanced Fellow has been previously trained.

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- ii. A physician Advanced Fellow may NOT provide independent clinical services or clinical training for clinical skills that are part of the fellow's learning plan. Such physicians are under supervision (or dependent practitioners) for those skills.

**B. Nursing and Associated Health Professionals**

- i. Shall either be:
  - a. privileged as licensed independent practitioners or
  - b. boarded with scope of practice consistent with their licensure and prior training or
  - c. (for associated health disciplines that require fellowship training prior to licensure) appointed as a Health Professions Trainee and subject to supervision per VHA Handbook 1400.04
- ii. Shall NOT provide independent clinical services or clinical training for clinical skills that are part of the fellow's learning plan. Such trainees are under supervision (or dependent practitioners) for those skills.

**9. FINANCIAL SUPPORT**

- A.** OAA will provide funds to VHA facilities for fellows' stipends and fringe benefits.
- B.** Host facility. The host facility is required to provide protected time for Program Directors and faculty, local administrative support for program needs, learning resources, funding, and infrastructure as outlined in other sections of this announcement.

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**ATTACHMENT B  
APPLICATION INSTRUCTIONS**

**1. GENERAL INSTRUCTIONS**

- A. Only one application per site can be submitted. Applications must be coordinated with all interested parties within a facility.
- B. Font size must be 11-point or larger. Margins must be one inch all around.
- C. For the full application, the total number of pages must not exceed 30. The core narrative should not exceed 20 pages.
- D. Be sure to carefully review the program announcement and particularly the table with scoring criteria in section 5C. Those criteria will be the basis for scoring the proposal.

**2. LETTER OF INTENT**

- A. By Wednesday, June 25, 2021 interested sites are required to upload a Letter of Intent stating their non-binding intent to submit a full proposal. The letter needs to be uploaded to the OAA Support Center at: [HSRD RFP Upload Utility \(va.gov\)](#) Please click on the “Register” button to enter your information. Upon registering, you will be able to log in and start to upload the required document.
- B. The non-binding Letter of Intent should be addressed to the Advanced Fellowship Program Director, Office of Academic Affiliations and must include the following information:
  1. Facility name
  2. Single sentence indicating the intention to apply for the program
  3. Name and email addresses of proposed Program Director(s) and others who should be contacted regarding the proposal status

No additional information is needed in this letter and the letter is not scored as part of the proposal. The letter must be signed by the facility Designated Education Officer (DEO). For VACO (non-facility) applications, the appropriate VACO Chief Program Officer should sign the letter.

**3. FULL APPLICATION SUBMISSION INSTRUCTIONS**

- A. Applications shall be uploaded to the OAA Support Center at: [HSRD RFP Upload Utility \(va.gov\)](#) Please click on the “Register” button to enter your information. Upon registering, you will be able to log in and upload the required documents. There are up to six (6) documents

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required for a complete application. You can upload one document at a time. Each of these required documents is described in Section C below.

Please use the following document titles and file names when uploading files:

Document A: **Medical Center Director (MCD) Letter of Support**

Document B: **Core Narrative**

Document C: **Program Director and Faculty**

Document D: **Additional Letters of Support**

Document E: **Additional Appendices** (if desired)

Document F: **Progress Report** of Fellowship Program to date (for established programs only; see instructions below)

B. After all files have been uploaded, please select “Notify us Complete.”

#### 4. REQUIREMENTS FOR SUBMITTED DOCUMENTS

##### A. Medical Center Director’s Letter of Support

- i. To meet minimum eligibility requirements, the letter must specify how the facility will support all of the following items:
  1. A total of at least 20% dedicated time the Program Director (or the time can be split between Co-Directors. Please edit the text to reflect the Program Director(s) and list them by name).
  2. Dedicated time as needed for the faculty members listed in this proposal based on their level of engagement in the program, including supervising/precepting/mentorship, didactic presentations, or program administrative activities such as fellow selection or orientation, or program management and improvement.
  3. Access to space for clinical, research/quality improvement, and educational activities, information technology, and administrative assistance to facilitate program functioning.
  4. Administrative support for program administration, including managing Fiscal, Human Resources, travel, and other needs related to onboarding, enrollment, and termination of fellows. This includes developing a specific process for submitting and verifying documents required for the appointment of Advanced Fellows.

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5. Travel and registration funds for the Program Co-Directors, selected faculty, and all fellows to annually attend at least one national meeting identified as a core activity by the Coordinating Center. Funding for travel to additional meetings is highly desirable and should be addressed.
  - ii. In addition to the mandated section listed above, the MCD's letter may include additional text to provide additional examples of the facility's level of support for the program. Section 1 of the scoring table in section 5C has criteria used to evaluate facility's enhanced support for the proposal.
  - iii. The MCD's letter should also include the name, title, telephone number, and e-mail address for any facility contacts who should receive notification about the award decision.
- B. The **Core Narrative** should be organized into the following sections, in the following order:
1. Brief Summary of Proposal
  2. Faculty Resources and Leadership Commitment
  3. Learning Environment and Educational Resources
  4. Curriculum and Instruction
  5. Qualifications of the Program Director(s) and Faculty (see instructions below)
  6. Program Administration, Evaluation, and Improvement Plan
  7. Potential for Impact on VHA and Veterans Health

Applications should address the scoring criteria in each of the sections of the scoring table in section 5C, as these will guide the application review process.

- C. **The Program Director and Faculty** document includes several items, which should be merged into one pdf and labeled as Program Director and Faculty for upload. To address the **Program Director(s)** qualifications, include a Program Director Qualifications Summary using the template at the end of this attachment (page 24). Address the program **Faculty** qualifications by completing the required Program Faculty table below. Add rows and change cell sizes as needed.

Use section 5 of the Core Narrative to provide any additional details and context regarding the faculty qualifications. The Program Director and Faculty document can be referred to in

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the narrative description to avoid the need for redundancy regarding Program Director or faculty qualifications.

Program Faculty			
Name and title	Terminal degree(s), university, year, licensure (if applicable)	Relevant clinical and/or research specialties, representative publications, grant funding. Precepting, teaching, mentorship experience	Program activities and time devoted

**D. Additional Required Letters of Support.** The letters outlined below should be merged into one pdf document, titled Additional Letters of Support. There are no specific content requirements for these letters, but each should outline clear support for the program based on the writer’s specific organizational role.

- i. Facility Designated Education Officer (DEO).
- ii. VISN Director and/or Service Line Director. In addition to an overall statement of support, include a description of any unique contributions the VISN can make to the fellowship program (such as helping fund travel to required meetings or funding for fellows’ projects).
- iii. Chiefs of Services or equivalent individuals managing the services from which most of the faculty members will come. This might include the Chief of Research Service. These letters should describe support for the educational objectives of the program and a willingness to allow faculty member to participate.



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iv. Affiliates associated with disciplines for which fellows are anticipated. Support or in-kind match, if any, such as tuition waivers for courses, course credits, equipment, library use, space, etc. should be noted.

E. **Additional Appendices** (if desired) to provide any additional details relevant to the facility and the proposed training program)

F. **Progress Report** of Fellowship Program to date (for existing sites only).

- i. Provide a concise narrative description of the history of the program, including:
  - Success and/or difficulties with recruitment of fellows
  - Any changes in goals and performance of the program over time
  - Assessment of strengths and weaknesses of the program and plans to strengthen the program if major weaknesses are identified
  - Other outcomes of note such as particular fellow alumni achievement, other benefits to VHA, academic affiliates, and community that relate to the program.
  - List of publications, presentations, or other achievements of your site’s fellows

ii. Provide a table of all previous fellow participants using the format below:

Name	Profession	Start date	End date	Position immediately after fellowship (including VHA status)	Current Position

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**Program Director Qualifications Summary**

*Complete this template (2 page maximum) for each Program Director and Co-Director (if applicable).  
Please delete the instructive notes in italics before submitting.*

**NAME**

**Current and Past Positions**

*Describe your current position and relevant past positions. Be sure to emphasize experiences related to health professions education and relevant clinical, scholarship, and/or administrative/leadership positions.*

**Education**

*List institutions, degrees, and dates awarded*

**Awards and Honors**

*List the awards (grants and fellowships) and honors you have received*

**Selected Publications**

*Include citations for books, articles, and book chapters*

**Selected Presentations**

*Include citations for professional presentations*

**Other Relevant Professional Activities and Accomplishments**

Department of Veterans Affairs  
Veterans Health Administration  
Washington, DC

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Office of Academic Affiliations  
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*Provide any other information (relevant to the proposal) about your professional activities and accomplishments.*