

GME ENHANCEMENT: NEW AFFILIATIONS AND NEW VA SITES OF CARE

1. PURPOSE

a. Request for Proposals, GME Enhancement New Affiliations/New Sites of VA Care

This is a Request for Proposals (RFP) for GME Enhancement: New Affiliations and New VA Sites of Care. Information, policies, and application procedures are provided to Department of Veterans Affairs (VA) facilities and Veterans Integrated Service Networks (VISNs) that wish to submit applications to the Office of Academic Affiliations (OAA) for additional physician resident positions for Academic Year 2011-2012 which begins July 1, 2011. The New Affiliations/New Sites of Care RFP is part of VA's implementation of the recommendations of the Federally Chartered Advisory Committee on Resident Education; it will allow facilities with limited or no participation in Graduate Medical Education (GME) to begin or strengthen their participation and for facilities with developed GME programs to expand resident education to new sites of VA care. For the purpose of this RFP, "new sites of VA care" are defined as either: (1) newly-constructed and activated inpatient VA facilities, or (2) VA community-based outpatient clinics (CBOCs) or free-standing outpatient clinics (OPCs), which have not previously been used or have had limited use as sites of resident education.

b. Applications may be submitted by:

- (1) VA facilities with **fewer than 45 resident positions** that wish to expand training opportunities or that have limited current involvement in GME, including sites where a new inpatient facility is being built and/or activated as a result of the CARES initiative; and
- (2) VA facilities with **any number of resident positions** that wish to include community-based outpatient clinics (CBOCs) or free-standing VA Outpatient Clinics (OPCs) as training sites *or* to expand training positions in those sites (e.g., an OPC that has undergone a mission change as a result of the CARES process with expansion of the scope of care offered). Specific eligibility criteria are discussed in section 3.b.
- (3) VA facilities located in rural or highly rural areas are strongly encouraged to apply for positions under this RFP. A list of VA classification of rural/highly-rural and urban facilities (hospitals, CBOCs, and IOCs) may be found on the Planning Systems Support Group (PSSG) website at http://vaww.pssg.med.va.gov/PSSG/pssg_urhr_service_cboc_summary.htm. This listing is updated quarterly.]

2. BACKGROUND

a. Federally Chartered Advisory Committee on Resident Education Committee.

This external Advisory Committee of national GME leaders met in late 2004 to look critically at VA resident education. The Advisory Committee was charged with examining the philosophy and deployment of VA's residency training positions (including the total number of positions, the specialty mix of resident physician training positions, and the geographic distribution of positions) and undertook a broad assessment of graduate medical education in relationship to Veterans' future healthcare needs. The Advisory Committee's recommendations call for increasing resident numbers in geographic areas and at sites of care where there are increased capacities to train; expansion of training in areas of high relevance to VA; expansion of training in areas of new and emerging specialties; and expansion of training to new and expanding affiliations and new VA sites of care.

b. GME Enhancement, Phases 1 through 4:

In 2006 through 2009 OAA used a competitive process to award 213.3 new, permanent or base positions to 32 facilities who responded to an RFP similar to the present one. Proposals were evaluated by a panel of educational leaders familiar with GME. Each approved facility received at least one position, according to the facility's priority listing, and additional positions were allocated based upon the recommendations of the review panel.

d. GME Enhancement, Phase 4, and Future Initiatives:

The current RFP, the related RFP for Critical Needs and Emerging Specialties, and the Educational Innovations RFP are part of the fifth phase of implementation of the Advisory Committee's recommendations and will include allocation of about 250 permanent, base positions nationwide in AY 2011-2012 for all RFPs. In addition to the current RFP, facilities may have the opportunity to apply for additional, new positions over the following one to two years. Funding for an estimated total of 250 new positions per year will be requested for the next several years. Allocation of these future positions will depend upon Congressional funding for VA and budgetary approval within the Department of Veterans Affairs.

3. PROGRAM DESCRIPTION

a. GME Enhancement: New Affiliations and New VA Sites of Care

Unique training opportunities that enhance resident education while addressing specific healthcare needs of Veterans are best determined at local and VISN levels. Moreover, increased emphasis on access to care in rural areas and facilities make expansion of training opportunities in CBOCs attractive. The CARES initiative was completed in 2003 and approved in large part by May 2004. Expansion or new construction may impact the size and mission of selected facilities.

In addition, several existing facilities that have historically been unaffiliated or have limited affiliations are in the process of developing or expanding their affiliations. *Nevertheless, caution must be exercised in promoting the development of affiliations and*

training rotations in situations where the affiliate is so distant that an appropriate educational environment and infrastructure may be lacking.

Existing CBOCs and VA OPCs or IOCs (Independent Outpatient Clinics) have been underutilized as sites of residency training not only due to a number of logistic barriers, but also because of lack of sufficient numbers of residents to undertake rotations to these sites. Despite the rapid expansion of sites of ambulatory care in the VA, from 139 CBOCs in 1998 to over 800 in 2007, CBOCs have only rarely been used for training residents. One of the CARES Commission's recommendations, supported by the external Advisory Committee, was to expand residency training in VA's CBOCs. In phases 1 and 2 of the GME Enhancement initiative, 33.6 positions were approved for CBOC or OPC training sites.

The current RFP will continue to address this situation by providing a mechanism for identifying and funding resident training positions in areas of greatest need. Facilities requesting positions must work with the affiliated sponsoring institution to determine if the educational infrastructure is adequate to meet the needs of the proposed training experience. Facilities and the affiliated sponsors should jointly consider the adequacy of patient volume, space, and appropriate faculty to provide teaching and supervision.

There should be a reasonable expectation that the requested positions will be filled in July of 2011. However, 'phased-in' positions may be requested for multi-year capacity building.¹ In such situations, the positions requested may be approved, but only filled as the positions are phased-in. Positions may be in any specialty appropriate to the clinical site. Nevertheless, **we especially encourage and will give priority to applications that include positions requests in primary care specialties (Internal Medicine & Family Medicine) as well as rehabilitation, mental health. Programs that incorporate teaching of principles of patient-centered medical home (PCMH) and integration of residents into PCMH models of care delivery will be given priority.**

Wherever appropriate, innovative interdisciplinary or inter-professional training opportunities are strongly encouraged. In the case of new or replacement facilities, if positions would be premature in AY 2011-2012, applications should be deferred until a reasonable start date is known. Early identification of appropriate affiliated program sponsors should also be undertaken. OAA will be pleased to work with you in developing these estimates and developing appropriate affiliations.

Prioritization of requests must be provided. Collaboration with local affiliated sponsors of residency training programs and accreditation or provisional accreditation of all involved programs is essential. VISN support of facility requests is also required.

b. Eligibility to Apply

- (1) **Criteria.** Facilities with fewer than 45 resident positions may request positions for new affiliations or new sites of care. Facilities with any number of positions may request

¹ E.g., an Internal Medicine rotation for 3 residents in each year (3-3-3) may be phased-in over 3 years. Similarly, a psychiatry resident rotation of 2 residents (2-2-2-2) may be phased in over 4 years.

positions for the purpose of CBOC or OPC rotations. Prioritization of requests must be provided. Collaboration with local or regional affiliated sponsors of residency training programs and accreditation or provisional accreditation of all involved programs is required. Proposals submitted in response to this RFP must address applicable American Osteopathic Association (AOA) or Accreditation Council for Graduate Medical Education (ACGME) and program-specific Residency Review Committee (RRC) requirements, including (but not limited to) approval by the affiliate GME Committee, and approval by any local VA bodies that supervise GME. No new residency programs sponsored in the name of a VA facility may be initiated. Non-accredited programs or non-accredited training years will not be funded.

(2) Applications may be submitted by:

- (a) **VA facilities with fewer than 45 resident positions that currently participate in graduate medical education** and wish to augment local training opportunities may apply under this RFP to expand positions through new or expanding affiliations or new sites of care.
- (b) **VA facilities with any number of resident positions** that wish to include or to expand use of CBOCs or OPCs as residency training sites, (e.g., when an OPC has undergone a mission change to expand specialty care as the result of the CARES process).
- (c) **Rural and highly rural facilities:** with programs of any size. Position requests from rural and highly rural sites will be given priority under this RFP.

4. FACILITY AND PROGRAM EXPECTATIONS

a. Facility Education Leadership and Program Structure. Facilities approved for GME Enhancement: Critical Needs and Emerging Specialties positions shall have an active affiliation with an accredited sponsoring institution(s) in good standing, a suitable curriculum, and an appropriate educational infrastructure. The required educational infrastructure must include well-qualified residency program and VA GME leaders, including a VA facility Designated Education Officer (DEO) such as an Associate Chief of Staff for Education (ACOS/E) or equivalent. The facility must demonstrate that the existing affiliated, medical school or sponsoring institution can support an expanded number of positions in the programs requested (i.e., through letters of support from the program director and the affiliated institution's Designated Institutional Official or DIO).

b. Program Implementation. Facilities may apply for positions to expand training opportunities through new affiliations or new sites of care according to the requirements listed in this RFP. Sites approved for GME Enhancement positions should begin their training programs in AY 2011-2012 (July 2010).

c. **Post award follow-up and tracking.** Positions allocated under this RFP will be monitored and local assessments of impacts reported. Information about program implementation, recruitment of residents, and impact on VHA patient care will be reported to OAA according to the instructions that will be issued by OAA. These reports will be considered in evaluation of participating sites at the time of future allocation cycle decisions.

5. PROGRAM APPLICATIONS

Formal applications are due July 9, 2010 using an online submission process (see Attachment A for specific instructions).

6. POLICIES

a. **Governance.** The Office of Academic Affiliations (OAA) maintains overall responsibility for the administration of VA's GME Enhancement Program. All programs receiving positions through this RFP will comply with the Program Requirements for Residency Education as published in the current Graduate Medical Education Directory² and with VA provisions for the training of physician residents.

b. **GME Program Sponsorship.** All positions requested through this RFP must be in GME residency programs sponsored in the name of an affiliate. No new residency programs sponsored in the name of a VA facility may be initiated. Likewise, no expansion of existing VA-sponsored programs may be requested under this RFP.

c. **Appointment and Compensation of Residents.**

(1) **Appointment authority.** Appointments will be made under 38 U.S.C. 7406.

(2) **Stipend determination.** The stipends of individual resident positions or fractions of positions will be based on their PGY levels (or equivalent per OAA policy) and on VA stipend rates based on the local indexed hospital. Resident positions can be paid directly or reimbursed under a disbursement agreement **only for the time spent in educational activities at the VA facility** with excused absences as defined by VA policy (e.g., didactic sessions).

d. **VACO Support.** OAA will provide funds to VA facilities for residents' stipends and fringe benefits. Funding of residents' stipends and benefits through a disbursement agreement is recommended. Disbursement agreements cannot fund administrative costs of residency training programs. In terms of support for indirect costs of health professions education, VISNs receive on behalf of facilities with residents approximately \$71,000 per year in VERA funds as indirect educational support for each physician resident position allocated. Facilities may use VERA-allocated funds in support of education (e.g., protected time for existing faculty, or hiring additional faculty or administrative staff,).

² Graduate Medical Education Directory 2007-2008 Including Programs Accredited by the Accreditation Council for Graduate Medical Education. (Updated annually). American Medical Association. Chicago, IL 2007. Alternatively, see <http://www.acgme.org>.

e. Liability. Residents will be protected from personal liability while providing professional services as a trainee at a VA facility under the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679(b)-(d).

f. Expenses. Except as specified above, expenses connected to the residents' recruitment, educational activities, or research are not funded under this program. Transportation to the VA facility and housing arrangements are the sole responsibility of the selected residents.

7. EVALUATION CRITERIA FOR SELECTION OF SITES & PROGRAMS

Applications will be evaluated by a panel of peer reviewers who have expertise in GME. The following criteria will be used to evaluate proposals.

a. Affiliations. The VA facility must be affiliated with an accredited medical school or sponsoring institution providing accredited residency training in the specialties requested in this proposal. If new affiliation relationships are begun, a formal affiliation agreement must be executed. [Contact Office of Academic Affiliations (141) for assistance.] For new and existing programs, there must be a program letter of agreement in addition to the affiliation agreement (per ACGME Common Program Requirements; see: http://www.acgme.org/acWebsite/dutyHours/dh_dutyHoursCommonPR.pdf).

b. Site Characteristics. The facility must provide evidence of committed leadership, appropriate clinical and educational activities, and sufficient workload to support a culture of excellence in graduate medical education. The site must demonstrate the following:

- (1) VISN, facility, and clinical leadership commitment to build and sustain an outstanding learning environment.
- (2) Strong leadership by the VA facility's Designated Education Officer (DEO) – i.e., ACOS/E or equivalent with appropriate qualifications and experience.
- (3) Appropriate clinical activities and workload to support expanded training programs.
- (4) An existing or potentially strong partnership between the VA facility and its academic affiliate(s), with a record of committed leadership by the academic program director.
- (5) Past experience providing or a commitment to excellence in graduate medical education, including existing or potentially outstanding GME training programs and advanced learning opportunities at the site. [*Note: OAA recognizes that, in affiliations with relatively new medical schools, the track record of accomplishments will not be present and will rely more upon a demonstrated commitment to excellence.*]
- (6) Past experience with or commitment to interdisciplinary and inter-professional training and care models.
- (7) Administrative infrastructure to support an expanded GME program.
- (8) Evidence of sound strategies for programmatic and learner evaluation.
- (9) VISN-level support expressed for the proposed GME expansion.

c. **Justifications for each specialty requested.** See Attachment A for a description of the online application process and instructions.

8. REVIEW PROCESS

a. **Review committee.** An ad hoc, interdisciplinary review committee designated by the Chief Academic Affiliations Officer will assess the merits of the applications. The reviewers will have demonstrated expertise and leadership in graduate medical education, clinical care, and research.

b. **Scoring of Applications.** Applications will be scored according to the selection criteria for sites and the justification(s) provided for each specialty requested.

9. SCHEDULE

March 10, 2010	OAA sends request for applications to eligible facilities, VISNs, and appropriate Central Office officials. RFPs published on OAA website.
July 9, 2010	Applications are due in OAA via an ONLINE process.
August 2010	Review committee reviews applications and makes recommendations for approval of allocations to the Chief Academic Affiliations Officer.
Late September-early October 2010	OAA notifies facilities about the approval or disapproval of their applications.
October – November 2010	Facility and VISN planning for AY 2011-2012
December 2010	OAA makes final allocations for AY 2011-2012.
July 1, 2011	Resident training begins.
October 1, 2012	First annual progress reports due to OAA.

10. OAA CONTACT PERSONS

General information Please contact **Barbara K. Chang, MD** at (505) 256-6425 or by e-mail to barbara.chang@va.gov, or Joanne Pelekakis at (202) 461-9593 or by email to joanne.pelekakis@va.gov .

Technical information regarding the online submission process: Email OAA Help Desk (oaahelp@va.gov) or contact David Bernett at (803) 695-7935, (314) 277-6476 or by e-mail to david.bernett@va.gov.

11. SUBMISSION INSTRUCTIONS

a. Preparation of applications. OAA recommends that considerable thought and dialogue with affiliates precede the actual drafting of an application. VA and affiliate needs should be reconciled and questions of institutional support for programs, positions, and educational infrastructure addressed candidly. Affiliate program directors, the sponsoring institution's Designated Institutional Official (**DIO**), the VA Designated Educational Officer (**DEO**), and appropriate clinical leadership (VA program site directors and/or service chiefs, and in some cases the VA Chief of Staff) should be involved in these discussions. **The VA DEO should be the focal point for coordination of the application and collation of information from various programs seeking additional positions and for preparation of the application.** Questions of accreditation status and Residency Review Committee (RRC) approval of training positions to accommodate any additional positions must be addressed.

b. Online submission instructions. Applicant sites will submit proposals through the office of the DEO using an OAA Support Center password protected web portal, similar to the submission of other OAA reports. A special application entry point has been set up for submission of applications in response to this RFP. The same password used to access the

OAA Support Center may be used. If you have new DEO office staff that requires a password, go to <http://vaww.oaa.med.va.gov/Login.aspx>, then select "I need to register." The requested numbers of positions by specialty and other specialty-specific information will be entered directly into the database; other portions of the application will be entered (uploaded) as files. See ATTACHMENT A for full instructions.

c. Faxed or mailed applications will NOT be accepted.

ATTACHMENT A

APPLICATION INSTRUCTIONS

1. GENERAL INSTRUCTIONS

a. **General.** See **Checklist** for submission of items in ATTACHMENT B. Word or pdf files formats may be used. Letters must include a signature (i.e., they must be a scanned copy of an original, signed document).

b. **Font and margin sizes.** Font size must be 10-point or larger, with 12 point preferred for narrative portions. Margins must be at least one inch all around (excluding headers and footers).

c. **Online submission.**

Submit **each required element** of the application **in an electronic version** by logging onto <http://vaww.oaa.med.va.gov/Login.aspx> and going to the “GME Enhancement Application” data entry section. Deadline for submission is **July 9, 2010**. **Incomplete applications** (i.e., those lacking in one or more elements) **will not be considered** by the review panel. The GME Enhancement database will be **opened** and ready to accept applications **from May 1, 2010**. Applications may be changed or modified up to the closing date for applications. We encourage you to begin to collect the necessary files as early as possible. Only authorized individuals from the DEO’s office may upload files into the application database.

2. FACILITY APPLICATION PACKAGE INSTRUCTIONS

Each facility may apply under any or all of the GME Enhancement initiatives (i.e., “Critical Needs/Emerging Specialties,” “New Affiliations/New Sites of Care,” or “Educational Innovation” provided the facility meets the eligibility requirements. Regardless of the number of RFPs under which a facility is applying, only one “core narrative” and only one set of institution-level support letters need to be submitted. The following elements and information must be submitted in the appropriate location in the GME Enhancement Application database online submission site:

a. **CORE UPLOAD SECTION– Core narrative: Page limits & format. *Enter (upload) only once per site (regardless of the number of programs or the number of RFP applications)***

The core institutional proposal narrative or “core narrative” **must not exceed 5 pages in a pdf or Word document file**. The core narrative is intended to give the reviewers an overview of the educational environment at the facility level. Program-specific information should be included in the specialty program requests. The core narrative should follow the outline provided below:

- i. An overview of the facility and the population served
- ii. A brief history of the local facility affiliations

- iii. Describe the extent of participation and support from affiliated academic institutions; include information on the institutional accreditation status of the sponsoring affiliated institution(s)
- iv. A general description of the educational environment
- v. Describe the scope and the degree of integration of the training programs offered at the VA (include the number and type of programs and number of resident positions represented at the VA)
- vi. Clinical resources available to support training objectives
- vii. Highlights of any unique educational or clinical strengths or opportunities in the facility's environment. For example, describe any experience with interdisciplinary or inter-professional care models and indicate the extent to which trainees, especially physician residents, are included as members of interdisciplinary or interprofessional teams.
- viii. Delineate the methods that you will use to evaluate the success of the GME Enhancement positions *from an institutional perspective* (as contrasted to a program-specific perspective).

b. SPECIALTY REQUEST SECTION: Specialty Program Request

For EACH specialty program in which positions are requested, complete a Specialty Program Request according to the following outline.

NOTE: each item must be entered separately as an online request. Entries marked with an arrow on the right indicate that there will be a pull-down list or menu of options from which to choose. You should have the requested information available at the time EACH specialty request is entered. However, if you are missing some information, the system will save your answers and you can edit or enter additional information up to the closing date for the application.

Please add a new Specialty Program Request below.

Specialty Program Request Form	
Priority:	<input type="text" value="1"/>
Accrediting Body:	ACGME - Residency Review Committee (RRC)
Specialty/Subspecialty:	Abdominal radiology - Radiology-diagnostic
Type of program application:	Critical Needs/Emerging Specialties
# of positions requested:	<input type="text" value="1"/> (i.e. 1 or 1.5)
Affiliated sponsoring institution:	A.T. Still University, Kirksville College of Osteopathic Medicine
Institutional Accreditation Status:	Accreditation
Institutional accreditation cycle length:	<input type="text"/> whole number only
Is there more than one institutional sponsor for this specialty program at your VAMC?:	<input checked="" type="radio"/> Yes <input type="radio"/> No
Program (specialty) Accreditation Status:	Accreditation
Program accreditation cycle length:	<input type="text"/> (# years)
Date of last accreditation letter:	<input type="text"/> (mm/dd/yyyy)
ACGME/AOA Approved total # of positions in the specialty in which positions are requested:	<input type="text"/> (maximum # allowed)
AY 2010-11 total # of filled positions at all sites for the program in which positions are requested:	<input type="text"/> (includes VA and non-VA positions)
If the requested position(s) is(are) approved, what would the program total # of positions be?:	<input type="text"/> (includes VA and non-VA positions)
Would the program require an increase in the # of approved positions from the ACGME/AOA RRC?:	<input checked="" type="radio"/> Yes <input type="radio"/> No
AY 2010-11 total # of base allocation of VA positions in the program in which positions are requested:	<input type="text"/>
AY 2010-11 total # of temporary VA positions allocated in the program in which positions are requested:	<input type="text"/>
AY 2010-11 total # of filled VA positions in the program in which positions are requested:	<input type="text"/> (sum of the 2 numbers above)
Program Director:	<input type="text"/> (sponsoring institution)
Please indicate if the program director is also the VA Site Director?:	<input checked="" type="radio"/> Yes <input type="radio"/> No
VA Site Director:	<input type="text"/>

c. SPECIALTY UPLOADS SECTION – enter (upload) 3 documents per specialty program request. All Letters must be signed and in Adobe pdf, image, or Word document file formats.

- i. **Program Narrative Description** (note: must follow the outline provided): [file upload, **pdf** or **Word – not to exceed 3 pages**]
 - (a) Present as concisely as possible your educational rationale and objectives
 - (b) Describe the planned educational activities (clinical, didactic, research) for the requested position(s)
 - (c) Elucidate how the additional position(s) will enhance the educational experience for all residents in this residency training program or other programs or will otherwise impact other trainees or training programs
 - (d) For new/expanding affiliations: describe your educational infrastructure (e.g., supervisors, library, conference rooms)
 - (e) For New Sites of Care: describe how the new site (e.g., CBOC) will provide the necessary educational infrastructure in remote locations
 - (f) Describe how you will evaluate the success of the GME Enhancement positions on a programmatic basis
- ii. **Program Director’s Letter of Support** [file upload – 1 for each program in which positions are requested].
 - (a) State your current ACGME (or AOA) accreditation status, citations, and their resolution
 - (b) Attest to your current accreditation cycle length
 - (c) Provide evidence of Departmental support for the additional VA positions
 - (d) Comment on the quality and availability of VA-based faculty to supervise additional residents
- iii. **VA Site Director’s Letter of Support** [file upload – 1 for each program in which positions are requested]
 - (a) Describe the Service or Section support available for the requested positions
 - (b) Provide a list of VA-based attendings who can supervise residents in the specific training program; indicate whether or not they have faculty appointments with the affiliated sponsoring institution
 - (c) Describe any unique aspects of your program (e.g., inter-disciplinary or inter-professional venues) incorporated into your VA-based training for the specialty requested

d. SUPPORT UPLOADS: Support letters – enter (upload) only once per site (regardless of the number of programs or the number of GME Enhancement RFP applications)

Support letters in the following categories may be entered (**uploaded**) as **pdf, image files, or Word files**. At a minimum, the support letters should contain the specific information outlined below for each support letter. Limit each letter to two pages. The letter should be addressed to “Malcolm Cox, MD, Chief Academic Affiliations Officer (14).”

- i. **Medical Center Director’s Letter**
 - (a) Indicate support for requested additional positions

- (b) Describe any resource support that would be provided to enhance the educational infrastructure in general
 - (c) Provide an assessment of the relationship with affiliate(s)
 - (d) Indicate whether the GME Enhancement proposal for requested positions was approved by the Affiliation Partnership Council (formerly, Deans' Committee)
- ii. Chief of Staff's Letter**
- (a) Comment on the clinical & educational environment
 - (b) Comment on the relationship with the affiliate(s)
 - (c) Assess the 'value' of additional residents to the facility
- iii. Designated Education Officer (DEO) Letter**
- (a) Provide a personal statement of commitment to the proposal and to graduate medical education programs in general
 - (b) Detail your vision for educational enhancement at the VA
 - (c) Briefly describe your individual achievements and initiatives at the facility and/or VISN levels in the field of education
 - (d) Describe your specific roles and responsibilities at the affiliate (e.g., faculty status, member of the GME Committee, member of the Affiliations Partnership Council)
 - (e) Provide your contact information: title, business address, telephone and fax numbers, and e-mail address
- iv. Network Support Letter** (FROM the Network Director, THROUGH the VISN Chief Medical Officer AND the Network Academic Affiliations Officer– only 1 letter from the VISN for each applicant facility is required)
- (a) Describe the relevance of the facility proposal to the VISN's educational and clinical missions.
 - (b) Specify your rationale for wanting additional positions (VISN perspective)
 - (c) Assess the specific facility's ability to train additional residents
 - (d) Indicate the VISN-level support for additional positions (if any)
 - (e) Describe the unique contributions the facility and VISN can make to the GME Enhancement Program
 - (f) Elucidate the perceived merits of the facility proposal from the VISN and national perspective, if applicable.
 - (g) Identify the Network POC, the Network Academic Affiliations Officer
- v. Designated Institutional Official (DIO), sponsoring affiliated institution, letter**
- (a) Indicate your institutional affiliation support for the VA application
 - (b) Discuss any accreditation issues involving the institution or the programs in which positions are requested
 - (c) Provide assurance of institutional approval of requested additional positions, including GME Committee approval if applicable
 - (d) Describe any matching of institutional support (e.g., additional positions in the same specialty program to ensure appropriately balanced training opportunities)

ATTACHMENT B

APPLICATION SUBMISSION CHECK LIST

INSTRUCTIONS: Incomplete applications will not be considered by the review committee. The following list is to assist your planning and represents the required sections for this application. See ATTACHMENT A for detailed instructions and outlines.

- Core narrative (**not to exceed 5 pages**) – need to submit only once: CORE UPLOAD
- Specialty Program Request information: SPECIALTY REQUEST (must complete for each specialty program requested) – includes:
 - Facility priority
 - Program application type (Critical Needs/Emerging Specialties vs. New Affiliations/New Sites vs. Educational Innovation)
 - Other basic program information
- Specialty Program Request: SPECIALTY UPLOADS (must submit one for each specialty program requested) – includes:
 - Program Narrative Description (**not to exceed 3 pages** for Critical Needs/ES or New Affiliations/New Sites; **5 pages allowed for Educational Innovation applications only**)
 - Program Director’s letter (one for each specialty program requested; limit 2 pages)
 - VA Site Program Director letter (one for each specialty program requested; limit 2 pages)
- Letters of Support: SUPPORT UPDLOADS (facility/VISN/DIO letters: need to submit only once; limit 2 pages; address to Malcolm Cox, MD, Chief Academic Affiliations Officer):
 - Medical Center Director
 - Chief of Staff
 - VA Designated Education Officer (DEO)
 - Network Director (through VISN Chief Medical Officer and Network Academic Affiliations Officer)
 - Academic Affiliate (sponsoring institution) Designated Institutional Official (DIO)