DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration Office of Academic Affiliations
Washington, DC

PROGRAM ANNOUNCEMENT
Pharmacy Pain Management and Opioid Reduction Educational Enhancement: Residency Programs for Academic Year 2020 (Summer/Fall 2019 - Summer/Fall 2020)

1. REQUEST FOR PROPOSALS (RFP)

This announcement solicits applications for enhancements to the Department of Veterans Affairs (VA) pharmacy residency program with a focus on pain management, palliative care, and opioid reduction for Academic Year (AY) 2020 and provides information and procedures for those applications. This is an expansion of the current pharmacy residency programs and is seeking up to an additional eight to ten residency positions across three to five new residency programs. Ideally, proposals will add a PharmD Specialty resident (PGY-2) positions to an existing interprofessional pain management, palliative care, and/or opioid reduction training program so that these residents learn in an interprofessional program and that other trainees benefit from exposure to specialist PharmDs functioning in this setting.

Any of the following types of applications will be considered only for facilities requesting new Pharmacy residency programs:

a. New facilities requesting pharmacy residency training programs
b. Facilities with existing pharmacy residency programs that are requesting a residency program in a new specialty area
c. Pain management and/or palliative care, with a focus on opioid reduction is the only specialty area that will be considered.

Continuation of the programs beyond three years will be dependent on demonstrated success of the programs such as percent of graduates who are employed within VA and working in the pain management/opioid reduction specialty and achievement of accreditation for the program. Funding for these positions will be provided by OAA during the pilot program and is expected to recur in subsequent years, assuming the program demonstrates evidence of productivity and educational quality.

While this pilot RFP focuses on one specific profession, proposed programs should include an interprofessional focus, to the maximum extent possible. This can be achieved by embedding pharmacy residents into existing interprofessional training programs, collaborating with other professions’ training directors to incorporate joint rotations, and ensuring that there are discipline-specific and interprofessional training objectives, curriculum, didactics (led by faculty from a range of disciplines), and competencies. The acculturation of learners to practice in patient-centered, team-based models of care is a central feature of this initiative. For a discussion regarding the development of interprofessional competencies, please see Core Competencies for Interprofessional Collaborative Practice, developed by the Interprofessional Education.
Collaborative. Normally, trainees in such a program will achieve competencies common for all trainees as well as profession-specific competencies.

The residency site must:

a. Ensure the nature of the pharmacy residency program, populations served, training experiences provided, and qualifications and skills of faculty and staff must be appropriate to the VA mission. Clinical settings must provide a range of experiences in the application of pharmacy principles, provide exposure to patients of varying backgrounds and cultures, and foster substantial responsibility in carrying out professional functions.

b. Provide evidence of committed leadership, appropriate clinical and educational programming, and sufficient workload to support a culture of excellence in pharmacy training. The site must demonstrate:
   1) VISN, facility, and clinical leadership commitment to build and sustain an outstanding learning environment.
   2) Strong leadership by the facility’s Designated Education Officer (DEO).
   3) Evidence-based clinical activities and workload to support proposed training programs.
   4) Experience providing overall excellence in health professions education.
   5) Experience with or commitment to interprofessional training and care models.
   6) Administrative infrastructure to support the proposed Pharmacy residency program.
   7) Evidence of sound strategies for programmatic and learner evaluation.
   8) An identified Pharmacy leader to serve as the Pharmacy RPD.
   9) An identified Pharmacy residency program director (RPD) who has sufficient release time to manage training program-related activities. Support for this administrative time should come from the identified Pharmacy leader, from the RPD’s service line supervisor (if applicable), and from the medical center director. Pharmacy RPDs generally spend 30% or more of their time in training-related activities, depending on the size and complexity of the training program. Proposals that do not specify a release time of 30% or greater will not be considered.
   10) A minimum of two licensed Pharmacy VA employees hired in the Pharmacy occupational series and a) boarded in Mental Health or Ambulatory Care or Pharmacotherapy or Oncology, and b) either a Certified Pain Educator or a Diplomate of the American Academy of Pain Management, and c) have an approved Pain Scope of Practice.
   11) Release time for the Pharmacy staff who will supervise trainee(s) so they may engage in training-related and mentoring activities. Support for this administrative time must come from the identified Pharmacy leader, from the Pharmacy staff’s service line supervisor (if applicable), and from facility top management.
   12) Funded facilities will be required to submit an annual report of activities and outcomes for the resident program to OAA through the Office of Pharmacy Benefits Management. This should include at a minimum, number of individuals that applied, lessons learned, changes proposed for the next year,
analysis of feedback from residents, analysis of feedback from academic or other partners (if any), overall satisfaction with the program by resident and faculty, and job placement for graduating residents.

<table>
<thead>
<tr>
<th>Required Elements</th>
<th>New PGY 2 Pharmacy Residency Programs</th>
<th>Additional PGY 2 Pharmacy Resident Positions</th>
</tr>
</thead>
<tbody>
<tr>
<td>The focus of the residency must be Pain and/or Palliative Care and the assigned pharmacy preceptors must be a) boarded in Mental Health or Ambulatory Care or Pharmacotherapy or Oncology, and b) either a Certified Pain Educator or a Diplomate of the American Academy of Pain Management, and c) have an approved Pain Scope of Practice.</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Maximum of two position requests</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Residency program must obtain accreditation within 24 months of beginning first trainee.</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Existing PGY 2 residency program must be accredited</td>
<td>No</td>
<td>Yes</td>
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<tr>
<td>Programs are expected to maintain accreditation to maintain OAA funding for residency positions.</td>
<td>Yes</td>
<td>Yes</td>
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<td>If any of the residency positions are not filled in subsequent years, OAA has the authority to reallocate the stipend(s) to another pharmacy residency/specialty, profession or facility</td>
<td>Yes</td>
<td>Yes</td>
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The RFP protocol will require the following application process.

1) Letter of Intent (LOI) to the Veterans Health Administration (VHA) Office of Academic Affiliations (OAA) is due no later than June 29, 2018.
2) Formal application due to OAA no later than August 17, 2018.
   Note: Sites will be notified of the award decision on or before October 15, 2018.

Additional information: Each facility is limited to one comprehensive proposal (details of length requirements adjusted relative to the number of specialties requested are included in Section 5 application instructions). Although we recognize that a health care system may have multiple divisions, proposals must be coordinated through the facility Designated Education Officer (DEO), who liaises with VHA's OAA. Health care systems with multiple divisions that have different DEOs at each campus may submit no more
than one application per DEO. Funding decisions will be based primarily on the quality of the proposals submitted and on their congruence with VA strategic initiatives. Selected sites will be provided with funding and positions effective AY 20: (Summer/Fall 2019 through Summer/Fall 2020).

Because there are only up to 10 residency positions to be allocated, we anticipate intense competition; only those programs that demonstrate the ability to offer high quality and innovative clinical education are encouraged to apply.

2. BACKGROUND

OAA leads VHA’s statutory education mission to train clinicians for VA and the nation enabling VA to enhance the learning environment, provide excellent care to Veterans, and develop, recruit, and retain high quality professional staff. OAA in collaboration with Pharmacy Benefits Management Services, National Pain Management within the Office of Specialty Care, Mental Health and Suicide Prevention, Primary Care Operations and Internal Medicine Office support this initiative to expand opportunities for clinical pharmacy training programs in pain and/or palliative care within VA. The expansion is intended to increase the availability and recruitment pipeline of well-trained, highly qualified clinical pharmacy healthcare providers in pain and associated areas such as palliative care and substance abuse. This area has been identified as a critical area of need as most VA facilities are under-resourced in pain management.

The Clinical Pharmacy Specialist (CPS) is a core team member that improves access through the provision of medication management services to patients being treated for chronic pain through identification of goals of care, treatment options and the risks of opioids in complex patients. The goal is to promote increased opportunities and integration of the CPS into Patient Aligned Care Teams (PACTs) and specialty care areas with concentrated focus in pain management and substance abuse to manage the entire pain population with a variety of treatment modalities including medications and behavioral options. Successful proposals will result in the allocation of additional funded trainee positions to the facility. Positions for pharmacy residents may be requested if the site has the experience and preceptors to train residents in pain consistent with the American Society of Health-Systems Pharmacists (ASHP) requirements for PGY2 Residency Program Directors (RPDs) and preceptors. The RPD will be required to hold a board certification in Mental Health or Ambulatory Care or Pharmacotherapy or Oncology, Certified Pain Educator and an approved Pain or Global Management Scope of Practice. Sites receiving funding may develop one-year pharmacy pain residencies to identify students pursuing pain as a desired specialty.

3. POLICY

a. OAA’s Associated Health Education (AHE) Section (OAA/10A2D) maintains overall responsibility for administration of VA’s Pharmacy residency programs.
b. All positions requested must be for one-year full-time appointments. Residents are expected to complete training within the one-year training program (2080 hours). Start times may be negotiated between July 2019 and October 2019 (early start dates may be considered on a case-by-case basis). Future start times must be consistent at the agreed upon time in subsequent years to remain budget neutral.

c. **Residents are expected to complete the full one-year training program.** While the intent of the program is to prepare residents for roles as staff Clinical Pharmacy Specialists in pain management, the strong preference is for these trainees to complete the full program and receive their certificate of completion prior to transferring to a staff position. Hiring authorities exist that enable the selection the resident for an available position, but commencing the staff position after completing the program is strongly recommended. **Programs that fail to have the resident complete the 12-month program, even when residents shift to staff positions, may not be renewed.**

e. Facilities requesting new residency programs must demonstrate the ability to provide quality training consistent with [VHA Handbook 1108.09(2) Pharmacy Education And Training](#).

f. It is expected that Pharmacy residents will begin the program on or about July 1, 2019.

g. Pharmacy residents recruited by VA facilities must:
   1) Be citizens of the United States.
   2) Have registered for the draft by age 26 (male applicants born after 12/31/1959) to be eligible for any US government employment, including selection as a paid VA trainee.
   3) Document that vaccinations are up to date and that screening for active tuberculosis is complete prior to starting the residency.

h. OAA will provide approved VA facilities with stipends, VA’s share of Federal Insurance Contribution Act (FICA) contributions, and VA’s share of health and life insurance premiums. Continuation of funding will depend on availability of funds as well as successful implementation and accreditation of the proposed program.

k. Facilities collaborating with another academic institution must follow the guidelines in VA Handbook 1400.03, VHA Educational Relationships.

4. **CRITERIA FOR VA FACILITY ELIGIBILITY**

   a. The nature of the Pharmacy residency program, populations served, training experiences provided, and qualifications and skills of faculty and staff must be appropriate to the VA mission.

   b. Clinical settings must provide a range of experiences in the application of Pharmacy principles, provide exposure to patients of varying backgrounds and cultures, and foster substantial responsibility in carrying out professional functions.
c. Refer to Section 1 (pages 1 – 2) for additional facility requirements.

5. APPLICATION INSTRUCTIONS

a. DEADLINES. There are two key deadlines for this RFP:
   1) June 29, 2018. A non-binding Letter of Intent (LOI) is due to OAA no later than 11:59 pm Eastern Daylight Time (EDT) Friday, June 29, 2018. These letters are to allow OAA to project the demand for expansion positions and to allow us to plan for the review panels that will be needed to review these proposals.
   2) August 17, 2018. The full proposal is due to OAA no later than 11:59 pm EDT on Friday, August 17, 2018.

b. LETTER OF INTENT (LOI) INSTRUCTIONS. LOIs, not to exceed two pages including the completed cover page template (copy Appendix B), must be submitted by the medical center or health care system’s DEO rather than by individual Pharmacy service line within the medical center. Each DEO is limited to one LOI submission for each facility or health care system. LOIs are non-binding, meaning that submitting an LOI does not compel the facility to submit a complete proposal.

A special application entry point has been established for submission of both LOIs and full applications in response to this Program Announcement. All LOIs must be submitted through the following OAA portal: http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=63

LOIs are due no later than 11:59 pm EDT on Friday, June 29, 2018, and must be uploaded to the OAA password protected web portal. Letters should be addressed to the Acting Chief Academic Affiliations Officer, (10A2D), Dr. Kathleen Klink, and must include a completed cover page template (see Appendix B).

The individual from the facility education office, or a designee assigned by the DEO, submitting the LOI must register upon the first use of this portal. As the full proposal will be posted on the same portal, “LOI” should be identified in the document title to distinguish between the LOI and proposal submissions. After the LOI is submitted and <complete> is selected on the left navigation tab, an automatically-generated confirmation e-mail will be forwarded both to the submitter and to OAA staff. Faxed, mailed, or e-mailed LOI’s will NOT be accepted.

LOIs should be from the DEO (or designee) and should contain the following information (OAA recognizes that some of this information may evolve or change with the development of a full proposal therefore, changes between the LOI and the actual proposal will not be considered detrimental to the award):
• Name, credentials, and contact information for the person responsible for the proposed Pharmacy Pain Management and Opioid Reduction residency program (Cover page template in Appendix B must be included in LOI). Each facility or health care system’s DEO is limited to submitting one proposal. Each residency program being proposed must identify a RPD.
• Identify the health setting(s) for each proposed residency program, and list the content areas/rotations of submission anticipated (included in Cover Page Template).
• Identify whether each proposed program is a new site proposing a Pharmacy residency or if the site has an existing accredited Pharmacy proposing a new residency in a different specialty area (included in Cover Page Template).
• Indicate number of residents (maximum of two) being requested (included in Cover Page Template).

Please note that you must complete the <notify list> (see details in Section 5.C. below) in order for your LOI submission to be complete.

c. NOTIFICATION OF DECISIONS (NEW REQUIREMENT)
After the DEO or designee registers to the portal, it is important that they select the <Award Notify List> tab (in red) on the left side of the portal menu. This allows the submitter to enter the email addresses of all individuals who should be notified of the proposal review result. The email entry screen is linked to the VA Global Address List. This allows you to enter the name of a VA employee to be notified in the search box, and the individual’s email will be displayed. Select the correct name and then click the blue button <add to list below> to move an e-mail to the notification list at the bottom of the screen. You may add non-VA e-mail addresses directly at the bottom of the page, and only one address must be included per line. Only those e-mail addresses listed in the portal will be notified when award results are released.
You must include the following individuals in your list:
• Medical Center Director
• Designated Education Officer
• Program’s proposed RPD
• Facility Chief of Pharmacy
• VISN Pharmacy Lead

d. PROPOSAL INSTRUCTIONS
Proposals must be submitted by the medical center or health care system’s DEO (or designee) rather than by the individual service line within the medical center. Each DEO is limited to one narrative submission single spaced, with 12 point Arial or Calibri font.

The core narrative page limit may not exceed 8 pages. Proposals are due no later than 11:59 pm EDT on Friday, August 17, 2018, and must be uploaded
through the aforementioned OAA Portal at 
http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=63 with three separate documents:
  - Document 1 - Core Narrative
  - Document 2 - Letters of Support (all letters combined)
  - Document 3 - Supplemental Materials (optional)

The submission portal will only allow four documents to be uploaded, including the letter of intent (which includes Cover Page Template). All final application materials must not exceed 35 pages total. Any pages in excess of 35 will not be read or reviewed. The three final documents must be submitted through the aforementioned OAA Portal where LOIs were initially uploaded. Only facilities that submitted a non-blinding LOI may complete a full application.

**DOCUMENT 1: CORE NARRATIVE** must not exceed eight pages and must include the following elements. **Please follow this outline explicitly.**

1) Introdutctory Information
   (a) Location and Name of Facility
   (b) Type of Proposal (New or Expanded Residency)
   (c) Number of residency positions requested (maximum of two for each specialty)
   (d) Academic collaborator (if any) and nature of the partnership (e.g., grand rounds, off-site rotation, affiliate faculty appointed in VA, etc.)

2) Background Statement
   (a) Describe any existing Pharmacy pre-degree and/or residency programs at your facility. Describe staffing, number and type of current pharmacy staff practicing in Pain Management and Opioid Reduction, recruitment and retention of staff, ongoing training of staff, and desirability of the VA facility as a training site. Relevant statistics related to emphasis areas of the proposed program should be presented, including number of patient beds, average daily census, length of stay, number of patients seen in inpatient and outpatient settings during FY 2017, types of clinical programs, and approximate case mix of patients served relative to the specialty being requested.
   (b) Describe current and previous Pharmacy training programs, including formalized education presented to academic institutions, the number of institutions with which your facility currently has existing affiliation agreements, and available outcome data related to retention of trainees in VA.
   (c) Describe the relationship and past collaboration with the academic institution (if you are collaborating).
   (d) Describe outcomes of your training program, the measures you use and how you use those outcomes to improve your program. If applicable, include feedback you receive from your academic partner.

3) Pharmacy Pain Management and Opioid Reduction Residency Program Description
(a) **Residency Program Mission Statement.** State the emphasis areas, purpose of the program, including philosophy, goals, and objectives.

(b) **Methods.** Describe specific skills to be developed by residents, with an emphasis on how evidence-based care will be taught. In addition, address other skills and activities that will be part of the program, including assessment, modalities of treatment, staff consultation, inter-professional treatment team participation, and opportunities for teaching and research. Pharmacy RPDs at existing programs may be made available for mentoring and consultation upon request. Please contact the program office for assistance with this proposal/curriculum development process – Lori Golterman, PharmD, National Director of Pharmacy Residency Programs, (202) 641-4059, Lori.Golterman@VA.gov.

(c) Describe a minimum of three facility programs where Pharmacy services are provided to patients and which will be available for clinical training in each proposed specialty. Describe opportunities for interprofessional education and interaction between the resident and staff in rehabilitation and other health professions.

(d) Describe other areas of training that may take place outside VA in order to fulfill the needed requirements of the residency. Describe the partnerships that are available and the agreements that have been developed.

(e) If partnering with an academic Pharmacy program, describe the support from the partner and the delineation of responsibilities for each. **If a resident will be rotating to a non-VA facility, this may not exceed one-sixth of their time in the program unless there is an even exchange with a without-compensation (WOC) resident from another accredited Pharmacy residency program.** An affiliation agreement (form 10-0094h) must be established for any non-VA rotations. A memorandum of understanding alone is not sufficient in this instance.

(f) Given the resident will have a VA appointment, describe the mechanism to ensure that hours, supervision, and administrative oversight will be managed by VA.

(g) Describe facilities and staff available to support the program, including office space, computer availability, library support, academic instructor availability and access to other unique training opportunities or equipment.

(h) **Program Evaluation.** Specify how the training program’s effectiveness for meeting its training goals and objectives will be evaluated. These measures must include formal written evaluation of the program by the residents and job outcomes of the graduates, including

i. Number of individuals that applied,

ii. Lessons learned,

iii. Changes proposed for the next year,

iv. Analysis of feedback from residents,

v. Analysis of feedback from academic or other partners (if any),

vi. External markers of program quality,

vii. Overall satisfaction with the program by resident and faculty, and

viii. Job placement for graduating residents (overall and within VHA).
4) Recruitment of Residents. Describe how residents will be recruited and selected. Note: It is strongly recommended that HR be contacted to ensure efficient processing of selected candidates. However, residents are trainees, not employees, and special trainee recruitment procedures rather than the conventional HR employee selection processes must be utilized.

**DOCUMENT 2: LETTERS OF SUPPORT** must provide assurance of local facility and VISN support. Medical Center and VISN leadership must have a demonstrated commitment to health professions education, rehabilitation healthcare, and patient-centered practice models. **There must be a letter of support from each of the individuals listed below. Submissions missing any letter of support will be considered incomplete and will not be reviewed.**

1. Facility Director. The director’s letter must address the facility’s commitment to the educational process, including sufficient release time for the Pharmacy RPDs, mentors, and supervisors to be fully engaged in the educational mission and process. Note: At minimum, 30% of the Pharmacy RPD’s time will need to be devoted to this program and initial development may take substantially more time (up to 50%). **Facility directors must identify the percentage of release time authorized for each proposed RPD.** As noted above, if release time is not indicated or specified below 30%, the proposal will not be considered. The facility director is also asked to support the recruitment initiative to ensure that candidates are processed efficiently through Human Resources. Adequate resources, acquisition and financial, as well as time for planning and procurement is expected to assist the Pharmacy residency program to fulfill their critical mission to Veterans and Service members.

2. Facility Designated Education Officer (DEO) or Associate Chief of Staff for Education.

3. VA Pharmacy Pain Management and Opioid Reduction RPD.

4. VISN Director. **The letter of support must be from the VISN Director or Acting/Interim VISN Director.** Please note that a letter from the VISN Pharmacy lead may not replace a letter from the VISN Director.

5. Program Director for any affiliated Pharmacy programs or non-VA facility that may be involved in curriculum development or rotations (if applicable) indicating accreditation status (academic institutions or non-VA residency programs) and interest in affiliating with a VA Pharmacy residency program.

**DOCUMENT 3: OPTIONAL SUPPLEMENTAL MATERIALS**, such as brief biographical sketches for the program RPDs, curricula rotational schedule, and/or calendar of
didactic seminars may be added as desired, so long as the total number of pages for the full proposal does not exceed 35. Additional information may include the following:

a. List of staff who will be involved in the program, including training program director, supervisors, faculty, and consultants. List the number of Pharmacy Pain Management and Opioid Reduction faculty who will participate in the program. You may include the following information for each: name; degree; date of degree; university from which degree was received; clinical specialty; the number of hours that will be devoted to the program; university appointments (if applicable).

b. Abbreviated Curricula Vitae of the Pharmacy Leader and Pharmacy RPD.

*Please contact the Pharmacy program office for assistance with this proposal/curriculum development process – Lori Golterman, PharmD, National Director of Pharmacy Residency Programs, (202) 641-4059, Lori.Golterman@VA.gov.

6. REVIEW PROCESS

An ad hoc, interprofessional peer review committee designated by the Acting Chief Academic Affiliations Officer (CAAO) will assess the merits of applications. Reviewers will have demonstrated expertise and leadership in clinical health professions education and patient care. The Acting CAAO may, at her discretion, create subsets of applications for special review according to considerations such as rurality, site complexity, and other needs consistent with VA goals and missions. Applications will be reviewed within the context of VA standards and support of VA’s strategic plans. The committee will evaluate specific items in the application that reflect the following criteria:

<table>
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<tr>
<th>Criteria</th>
<th>Points</th>
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<tr>
<td>a. Demonstrated commitment from the local VA facility and VISN, including executive and program management levels to establish a Pharmacy residency program focused on pain management and opioid reduction, including previous Pharmacy training provided and availability of infrastructure and resources such as support staff, office space, library support, and computer access. A facility should demonstrate readiness for establishing a Pharmacy residency program. Protected time for Pharmacy RPD and faculty is also required.</td>
<td>20 points</td>
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<tr>
<td>b. Strength of the proposed faculty and curriculum including potential to achieve the primary objective of training the Pharmacy resident with the specific advanced skills in the specialty and obtain accreditation for the program.</td>
<td>20 points</td>
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<tr>
<td>c. Strength of the interprofessional team functioning in the programs for which interprofessional programs are requested, including evidence of high-functioning care teams and evidence of thoughtful strategies to integrate trainees in these interprofessional endeavors.</td>
<td>25 points</td>
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<tr>
<td>d. Evidence of a clear understanding of the program’s purpose, philosophy, goals and objectives, including dedication to training in evidence-based practice in Pharmacy pain management and opioid reduction.</td>
<td>15 points</td>
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<tr>
<td>Criteria</td>
<td>Points</td>
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<tr>
<td>e. Quality of training to be offered, including quality and diversity of specific training settings and qualifications of supervisory staff. Clear understanding of proposed clinical, didactic, research and teaching opportunities.</td>
<td>20 points</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>100 points</td>
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7. **APPOINTMENT AND PAY**

   a. **Governance.** OAA maintains overall responsibility for the administration of VA’s health professions education. All “associated health” trainees (defined here as clinical trainees not in dentistry, medicine, or nursing) included in these teams shall comply with the Program Requirements of the respective discipline’s educational accreditation bodies and with VA provisions for training in those disciplines.

   b. **Program Sponsorship.** Currently allocated facility associated health trainee positions may be included in activities undertaken as a part of this Program Announcement.

   c. **OAA Support for Trainees.** OAA will provide funds to VA facilities for trainee stipends and fringe benefits.

   d. **Appointment and Compensation of Trainees.**
      1. **Appointment authority.** Appointments will be made under 38 U.S.C. 7405.
      2. **Stipend determination.** The per annum training for Pharmacy residency positions is locality based on the Pharmacy resident rate identified by facility at [http://vaww.oaa.med.va.gov/DBReports/LocBasedStipends.aspx](http://vaww.oaa.med.va.gov/DBReports/LocBasedStipends.aspx)

   e. **Liability.** Trainees 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. **Trainee expenses.** Except as specified above, expenses connected to trainee 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 trainee.

8. **POINTS OF CONTACT**
   For information concerning this program announcement, contact David Latini, PhD, Associate Director, Associated Health Education, Office of Academic Affiliations, at David.Latini@va.gov or at 832-377-9927 or Lori Golterman, PharmD, National Director of Pharmacy Residency Programs, (202) 641-4059, Lori.Golterman@VA.gov.

9. **SCHEDULE**
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
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<tbody>
<tr>
<td>May 11, 2018</td>
<td>Request for Proposal announcement released</td>
</tr>
<tr>
<td>October 15, 2018</td>
<td>Notification of selected sites from OAA</td>
</tr>
<tr>
<td>December 2018 - June 2019</td>
<td>Recruitment of Pharmacy Residents</td>
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<tr>
<td>July 1, 2019 or thereabouts</td>
<td>Resident begins program</td>
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APPENDIX A

CHECKLIST FOR FINAL PROPOSAL SUBMISSION

This is a checklist to assist you in submitting a complete proposal. You need not submit this checklist with the proposal, as it is for your use only.

Notification of Decisions: At the time of LOI submission (June 29th deadline), DEO must select the <Award Notify> link on the left side of the OAA portal menu to enter the email addresses of individuals who should be notified of the proposal review result. Only those e-mail addresses listed in the portal will be notified when award results are released. You must include the following individuals in your list:

- Medical Center Director
- Designated Education Officer
- Program’s proposed RPD
- VISN Pharmacy Lead

Proposals are due no later than 11:59 pm EDT on Friday, August 17, 2018, and must be uploaded through the aforementioned OAA Portal at http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=63 with three separate documents:

- Document 1 - Core Narrative
- Document 2 - Letters of Support (all letters combined)
- Document 3 - Supplemental Materials (optional)

Core Narrative: not to exceed page limit specified in Sections 1 and 5 (eight pages). Narrative description of the proposed clinical education programs, including a description of the interprofessional curriculum. The proposal should emphasize the "description of specialty practice" elements that will be used to establish the new curriculum and mechanisms to evaluate the effectiveness of the education on an ongoing basis throughout the residency program.

Proposals must include these elements:

- Background statement: Describing existing training programming
- Pharmacy Pain Management and Opioid Reduction Residency Program Description
- Residency program mission statement
- Methods for development of curriculum
- Plan for implementation of teaching curriculum
- Describe how training venues will have appropriate on-site supervision and role models of residents
- Describe multiple areas where programming will be implemented to bring the specialty to those patient populations
- Describe training outside the VA if applicable – scope, purpose and oversight
- Describe other faculty/instructors who will be involved in the program
- Describe the role of the academic partner if applicable
• Describe administrative oversight of the resident to ensure the appointment is controlled by the VA
• Facility support for the program
• Program evaluation
• Recruitment of residents

Letters of Support: Letters of Support must provide assurance of local facility and VISN support. Medical Center and VISN leadership must have a demonstrated commitment to health professions education, and patient-centered practice models. There must be a letter of support from each of the individuals listed below:

• Facility Director. The director’s letter must address the facility’s commitment to the educational process, including sufficient release time for the program RPDs, mentors, and supervisors to be fully engaged in the educational mission and process. The percentage of release time (minimum of 30%) must be identified supporting educational and administrative activities, including curriculum development or the proposal will not be considered. The director must indicate HR support for appointment efforts for residency candidates. The director must indicate intent to pay accreditation and annual fees for accreditation of the program.

• Facility Designated Education Officer (DEO) or Associate Chief of Staff for Education (ACOS/Education)

• VISN Director

• Facility Emergency Services or Mental Health lead

• Pharmacy RPD

• Program Director for any affiliated Pharmacy programs or non-VA facility that may be involved in curriculum development or rotations (if applicable) indicating accreditation status (academic institutions or non-VA residency programs) and interest in affiliating with a VA Pharmacy residency program.

Optional Supplemental Materials: Brief biographical sketches for the program RPDs and/or calendar of didactic seminars, may be added as desired, so long as the total number of pages in the proposal does not exceed 35.

Submission of Proposals
• Full proposals are submitted by VA DEO, ACOS/Education, or designee.

• Acceptable formats for submitted proposals are Word, Excel, or PDF, formats

• Letters of support must include a signature (i.e., they must be a scanned copy of an original, signed document).
• Three documents, **Core Narrative, Letters of Support (all letters combined), and Optional Supplemental Materials**, are uploaded. These must be uploaded as three separate files following the requirements outlined for each document above. **The portal will not allow you to submit more than four documents (including LOI).**

• **Documents will not be accepted** as one single file.

• Font size must be 12-point Arial or Calibri for narrative portions. Margins must be at least one inch all around (excluding headers and footers).

APPENDIX B

Pharmacy Pain Management and Opioid Reduction Residency Programs for Academic Year 2020 (Summer/Fall 2019- through Summer/Fall 2020)

Facility Name: ______________________ Facility Number: ______ VISN Number ______

Address ___________________________ City, State, Zip _______________________

Does this facility/healthcare system have multiple campuses  □ Yes  □ No

If yes, name the individual campuses that will be applying for residency programs: ________

Check one:
□ New Pharmacy residency site
□ New Pharmacy residency program at existing Pharmacy residency site

Primary Points of Contact if additional questions arise during the review process

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Name</th>
<th>E-Mail Address</th>
<th>Phone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designated Education Officer (DEO)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposed Residency Program Director (include credentials)</td>
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