Department of Veterans Affairs

Memorandum

Date: DEC 20 2017

From: Executive in Charge, Office of the Under Secretary for Health (10)

Subj: National Academic Affiliations Council VHA Action Plan Response (VAIQ)

To: Secretary (00)

1. The National Academic Affiliations Council (NAAC) Federal Advisory Committee held their face-to-face meeting on July 12-13, 2017. The Council provided a variety of recommendations to advise you on matters affecting partnerships between the Department of Veterans Affairs (VA) and its academic affiliates.

2. Attached are the Council’s recommendations, as well as VA’s responses to those recommendations, pending your approval.

3. Should you have any questions, please contact the NAAC Designated Federal Official, Mr. Stephen K. Trynosky, Staff Assistant in the Office of Academic Affiliations, at (202) 461-6723 or by email at steve.trynosky@va.gov.

Carolyn M. Clancy, M.D.

Attachment

Concur/Non-Concur

[Signature]

David J. Shulkin, M.D.

[Signature]  1/28/18  Date
Recommendation 1: As one of VA's four statutory missions, the Council emphasizes that VA's educational mission must be more strongly embraced by the Under Secretary for Health and VHA executive leadership. Accordingly, the NAAC recommends that the Office of Academic Affiliations be realigned within the VHA organizational structure to report directly to the Under Secretary for Health.

VA Response: Concur. VA recognizes the importance of aligning program offices responsible for key statutory missions at the highest levels of the Veterans Health Administration (VHA). Secretary Shulkin is steadfast in his support of VA's clinical education mission and has made consistent efforts to strengthen important relationships between VA and its academic affiliates. The Secretary's March 24, 2017, letter to each of VA’s medical school affiliates is one demonstration of his commitment. VA is currently implementing an extensive modernization of the VHA Central Office structure. This presents an excellent opportunity to appropriately align the Office of Academic Affiliations (OAA) within VHA.

Recommendation 2: Given the central role of academic affiliates and trainees in the VA clinical workforce in maintaining and enhancing quality Veteran-centric care, the NAAC endorses Secretary Shulkin’s request for an internal VA Academic Advisory Committee to work hand in hand with the National Academic Affiliations Council. The Council requested that OAA report on efforts to establish such a committee at the December NAAC meeting.

VA Response: Concur. OAA is in the process of constituting the Strategic Academic Advisory Committee, a new VA field advisory committee. The committee will be comprised of VA employees engaged in the Department's clinical education mission who are nominated by academic affiliates, as well as additional invitees with unique experiences and skills. The committee’s charter is nearing completion and will be signed by the VHA Executive in Charge. OAA will provide the Council with a progress update at its December 2017 meeting, and the committee’s inaugural meeting will be held in the first quarter of calendar year 2018.
Recommendation 3: Clinical workforce diversity, cultural sensitivity and inclusiveness are vital components of Veteran-centric care. Accordingly, the NAAC recommends that VA identify strategies that will enhance its collaboration with health professional training programs at Historically Black and Hispanic Serving colleges and universities and Hispanic Serving Institutions. Such strategies should go beyond mere consultation; they must also include measurable actions that provide these affiliates with opportunities to expand faculty supervisory positions and training positions at VA medical centers and clinics.

VA Response: Concur-in-Principle. VA actively engages its Historically Black Colleges and Universities (HBCU) and Hispanic Serving Institutions affiliates to identify opportunities for greater collaboration. VA’s Chief of Staff personally convened a series of meetings with HBCU academic affiliates and the respective VA medical centers they partner with. Under the guidance of VA’s Chief of Staff, VHA continues to explore opportunities for expanded training positions for HBCU affiliates and strategies to increase faculty supervisory positions for their clinical faculty. The most recent meeting with VA’s Chief of Staff occurred in October 2017, and a follow up meeting is anticipated during the first quarter of calendar year 2018.

Recommendation 4: To strengthen its physician pipeline, the NAAC recommends that VA: (1) secure indefinite Health Professions Scholarship Program (HPSP) authority; (2) expand the number and funding level of medical student scholarships; and (3) enable the proposed partnership with the Uniformed Services University Health Sciences (USUHS) for collaboration in medical student education.

VA Response: Concur. With over 30,000 current clinical vacancies, VHA is eager to pilot programs that will strengthen its ability to recruit health care professionals. The Department of Defense’s multi-decade experience of using HPSP and USUHS as its primary accessions pathways for physicians shows the efficacy of a robust health professions scholarship program with permanent statutory authority; however, adequate appropriated funds must accompany enhanced VA HPSP scholarship authorities in order for the program to reach its full potential. VA continues to pursue authority to partner with USUHS in a limited medical student education effort, but this will likely require minor statutory changes in order to comply with the Economy Act of 1932 (31 U.S.C. § 1535).

Recommendation 5: To build on the success of VACAA and other recent educational initiatives in nursing and mental health training, the NAAC recommends further expansion of VA’s health professional training programs through interagency collaboration by partnering with the Health Resource and Services Administration, the Department of Defense, and the Indian Health Service. Partnerships would be most effective if they included a broad spectrum of professions and emphasized inter-professional training and practice opportunities.

VA Response: Concur-in-Principle. VA continues to make tremendous investments of staff time and effort to optimize its interagency collaboration in health professional training. Until very recently, these partnership efforts have only realized modest success. A number of very promising developments throughout 2017 suggest that VA’s steady investment of time and energy to build interagency training opportunities are finally bearing fruit. Specific examples of interagency progress include the signing of an
MOU between VA and HRSA; VA meetings with the Army Office of the Surgeon General to explore joint clinical training efforts; the sponsorship of a panel at the 2017 AMSUS meeting to discuss potential innovative VA and DOD training partnerships; and a series of consultative meetings with the Indian Health Service as that agency explores the adoption of VA’s successful academic affiliations model.

**Actions to Implement:**

<table>
<thead>
<tr>
<th>VA Action Plan Recommendation</th>
<th>Lead Office</th>
<th>Other Offices</th>
<th>Tasks</th>
<th>Due Dates</th>
<th>Current Status</th>
<th>Contact Person</th>
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<td>10A2D</td>
<td>10B</td>
<td>Establish the Strategic Academic Advisory Committee and secure approval of its charter.</td>
<td>2nd QTR FY 2018</td>
<td>In Progress</td>
<td>Kathleen Klink</td>
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These actions are largely dependent on parties external to VA such as Congress and partner agencies.