**VA Educational Infrastructure/Innovation Grant for Graduate Medical Education (GME) Enhancement under the Veterans Access, Choice, and Accountability Act (VACAA) of 2014 [PL 113-146]**

**Request for Proposals**

1. **PURPOSE**

The Office of Academic Affiliations (OAA) announces a Request for Proposals (RFP) for FY18 – 20 VACAA Infrastructure funding. The funding will begin in the 1st Quarter of fiscal year (FY) 2018 and extend for two additional fiscal years (2019 and 2020). The award is intended to enhance the infrastructure capability/capacity of certain sites with approved VACAA Graduate Medical Education (GME) positions and encourage the development of innovative healthcare delivery methods. This RFP provides information, policies, and application procedures for approved sites to submit proposals to request funding to support the infrastructure needs related to placement of physician residents in new training sites (e.g., CBOCs) or sites that have limited GME programs.

Facilities should demonstrate one or more of the following:
- Veteran users >50% rural
- Planned CBOC rotations
- New sites of GME training
- Innovation in healthcare delivery
- Affiliation to a new medical school or sponsoring institution

**Eligible Sites:** All GME sites that have received VACAA primary care or mental health positions during the first three years of the initiative, and also have one or more of the above listed criteria may apply for infrastructure funds. Funds will be competitively awarded to facilities that demonstrate promise and commitment to building primary care and mental health programs utilizing these criteria. Below are the eligible sites:

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<tr>
<th>Albany VAMC</th>
<th>Detroit VAMC</th>
<th>Minneapolis VAMC</th>
<th>Seattle VAMC</th>
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<tr>
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<td>New Orleans VAMC</td>
<td>Spokane VAMC</td>
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<td>Fayetteville VAMC (AR)</td>
<td>Northern California VA HCS</td>
<td>St. Cloud VAMC</td>
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<td>Baltimore VAMC</td>
<td>Fayetteville VAMC (NC)</td>
<td>Northport VAMC</td>
<td>St. Louis VAMC</td>
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<td>Reno VAMC</td>
<td>West Los Angeles VA</td>
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<td>Charleston VAMC</td>
<td>Indianapolis VAMC</td>
<td>Roseburg VAMC</td>
<td>White City Domiciliary</td>
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<td>Chicago (Westside) VAMC</td>
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<td>Saginaw VAMC</td>
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<td>San Antonio VAMC</td>
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<td>Dayton VAMC</td>
<td>Milwaukee VAMC</td>
<td>San Juan VAMC</td>
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2. BACKGROUND

The VACAA legislation of 2014 provides VHA with an opportunity to expand GME into non-traditional training sites and places a premium on new affiliations. Priority is also attached to expansion in rural areas, areas that are medically underserved, and VA facilities that had no GME at the time of passage of the legislation.

Establishing new GME programs can require significant infrastructure support, especially during the “startup” phase of the implementation. Some of the challenges include ensuring that there are appropriately qualified clinicians to supervise the residents, excellent educational leadership, adequate administrative staff to onboard trainees and monitor programs from policy, logistic, and financial perspectives, and sufficient space to accommodate trainees (including exam rooms, breakout/work rooms, conference rooms, and if appropriate, on-call rooms).

Similar grants were awarded in FY16 and FY17 to support selected VACAA Phase I and II GME expansion sites.

3. FOCUS AND SCOPE

The goal of this RFP is to provide infrastructure support for a sub-set of facilities awarded VACAA GME Expansion positions. Awarded funds are intended to provide assistance to these sites for the cost of establishing or expanding the clinical and/or administrative environments necessary to fully realize the best educational experience possible for trainees.

These awards are to be used solely for support of VACAA GME Expansion and must be justified for this purpose. Additional guidance on the details of tracking and reporting this funding will be issued by OAA to sites who receive this award. Use of these funds must be only for the purposes specified in this RFP, as these awards are subject to Congressional oversight and reporting requirements. VACAA funding from this RFP is should be budgeted for FY18 (10/1/2017 – 9/30/2018) and FY19 (10/1/2018 – 9/30/2019); an additional “option” (FY20) may be included; if VACAA funds are still available in FY20 they will be provided without contest.

Notes:
- Funding is distributed over 2-3 years (as described above).
- Facilities are expected to sustain the programs using VERA educational allotments once the funding period has expired.
- OAA reserves the right to withdraw funding if it deems funding not to be used in accordance with this RFP.

Examples of appropriate funding requests:
- Facility support for faculty development (e.g., preceptor training for existing clinical staff);
- Partial salary support for Site Program Director or for existing or newly-hired supervising practitioners and clinical staff to allow protected academic, teaching time;
- Education or training resources (supplies or non-IT equipment; simulation equipment);
- Administrative support to assist with trainee appointments and onboarding;
• Renovation of space to accommodate trainees, with additional exam rooms, conference space, or on-call rooms (minor construction, not to exceed $100,000 across all budgeted fiscal years.);  
• Create or expand telehealth capacities to rural areas for mental health or primary care.

*Note: IT equipment, such as laptops, computers, iPads, and printers may not be purchased with funds from this RFP.  
**Note: All personnel costs will need to be subsumed by the medical center at the end of the award period.

The facility must provide a description of the types of funds needed (see below), and the amounts requested by Fiscal Year, for each funding category, and a detailed justification of how their proposed use of the funds will specifically support the expansion of VACAA GME at each facility. Refer to section 6 for detailed application instructions, to include a summary table of funding requests.

VACAA Infrastructure support is available to selected, eligible VHA facilities in the following funding categories:

• **Medical Services (0160)** – these funds are primarily intended to support the salary of VA staff who are instructors for or supervise residents and trainees. They may also be used to fund staff salaries within a VA facility education office.

We *strongly* encourage facilities to identify qualified educational leadership such as a doctorally prepared DEO or ACOS-E if not already in place. The DEO is the key individual in creating, building, and enhancing educational relationships with new and/or current affiliated institutions. In order to cultivate these important relationships, the DEO requires time protected from clinical duties to build trust with affiliates, to innovate and collaborate inter-professionally, and to work to establish and/or enhance educational culture in the VA facility.

• **Medical Support and Compliance (0152)** – these funds are intended to be used to support overhead costs associated with maintaining a GME program, including administrative support (clerical) costs. They may also be used to fund needed training equipment or supplies necessary for the VACAA GME expansion, as well as for VACAA related staff travel and salaries within a VA facility education office.

• **Facility Funds (0162)** – these funds are intended to be used to fund minor construction (up to $100,000 per fiscal year) projects, or augment major construction projects, that will allow for necessary expansions of space to accommodate increased VACAA physician resident training capacity. Such construction might include expansion or renovation of exam rooms, call rooms, team work space, team meeting space, and/or didactic educational space. Proposals should be coordinated with Facilities Management and support clinical space that serves as the learning environment to:
  o Assure patient privacy and confidentiality,
  o Provide trainees full access to authentic learning activities, and
  o Support efficient care delivery. Examples may include situations where:
    ▪ Co-location of health professionals for patient care strains available clinical space
    ▪ Learning in the workplace to care for patients, as a team requires sufficient space for huddles that include multiple trainees and staff members
Learning in the workplace requires sufficient exam rooms to accommodate patient flow simultaneous with time for learning because:
- Exam room turnover time is longer
- Exam room size must accommodate multiple individuals: patient (and family members), trainee(s), team member(s), and a faculty supervisor
- Learning in the workplace is enhanced when trainees are co-located for between visit care (e.g., a team work room) where team members and trainees learn from each other and about each other’s patients in unplanned, spontaneous, and opportunistic ways
- Co-location of health professionals for formal instruction requires conference room space with appropriate technical capabilities for simulation and instruction
- Most sites use shared space or proximal space for meetings of the clinical leadership team. Shared space provides for more spontaneous reflection, problem solving, and shared leadership decision-making

In your narrative, please provide an estimate from Facilities Management/Engineering that outlines the constructions costs and thus justifies your request.

4. REVIEW PROCESS

OAA will assess the merits of each application. Reviewers will have expertise and leadership in GME as well as experience in educational program development and oversight.

- Justifications will be assessed for the degree to which the requested resource:
  - Supports a detailed educational needs assessment that includes creating and/or expanding partnerships with new and/or current academic affiliates
  - Provides administrative support of planned program development
  - Supports hiring of educational leaders, such as a DEO or ACOS/E
  - Provides a credible proposed plan for expanding GME under VACAA
  - Helps create a robust educational milieu

- Funding must be requested by fiscal year and by funding category. The funding must realistically support the plan to execute the VACAA GME Expansion by the end of the funding period for which support is requested.

Additionally, the facility must demonstrate a commitment to expanding its GME complement and have documentation of affiliation partners who intend to collaborate with the VA through clinical training opportunities.

**Note:** Based on the number and quality of applications submitted as well as the availability of funding, approved projects may not receive all of the funding requested in their proposals.

- Only request funds that can realistically be spent in each fiscal year.
• Include funding for each fiscal year (FY2018, FY2019 & FY2020) as part of projected budget requests

5. SCHEDULE

• February 24, 2017
  o OAA sends request for applications to eligible VA facilities and appropriate Central Office officials.

• April 15, 2017
  o Applications are due in OAA (see instructions below)

• May 1 – May 31, 2017
  o OAA reviews applications and makes recommendations for approval of allocations to the Chief Academic Affiliations Officer

• June 16, 2017
  o OAA notification to facilities regarding approval or disapproval

• October 1, 2017
  o FY 2018 funds distributed for 1st quarter

• March 30, 2018
  o Interim facility report on use of funds [in addition to quarterly reports]
  o Annual reports due by the end of October in 2018 and 2019

6. OAA CONTACT PERSONS

VACAA: Yolanda Seward, Management Analyst, at Yolanda.Swarded@va.gov or Dr. Anthony Albanese, MD, OAA Academic Affiliations Officer, at Anthony.Albanese@va.gov.
APPLICATION INSTRUCTIONS

A. GENERAL INSTRUCTIONS

1. **Font and margin sizes:** Font size must be 11-point or larger, with 12 point preferred for narrative portions. Margins must be at least one inch all around (excluding headers and footers).

2. **Online submission:**
   Submit each required element of the application in an electronic version by clicking on 2017 VACAA GME Round 3 Infrastructure-Innovation RFP. Select “register”; once you have set up an account, you will be able to upload your application.

   Deadline for submission is **April 15, 2017**. Incomplete applications (i.e., those lacking in one or more elements) will not be considered by the review panel. The database will be open on February 24, 2017, to accept applications, which may be changed or modified up to the closing date for applications. Only authorized individuals from the VA facility DEO’s office may upload files into the application database.

B. FACILITY APPLICATION PACKAGE INSTRUCTIONS

The following elements and information must be submitted in the appropriate manner to OAA:

1. **CORE NARRATIVE:**
   a. The core narrative must not exceed 5 pages in a pdf or Word file.
   b. Please use the outline provided below.

   (1) Describe the existing educational environment at your facility or the planned new teaching venue, e.g., a CBOC that is new to GME – including:

      (a) The current number of physician residents on site at any one time (or planned to be on-site) and the accredited program in which they are (or will be) training;

      (b) What is your 3-year plan to increase the number of residents in a given specialty or specialties? Even if you did not apply for residents in that specialty in the current round of VACAA GME positions applications, list all specialties in which you plan to apply for residents at this site.

      (c) The availability of appropriately qualified staff on-site to supervise the residents and their experience in teaching and supervising residents as well as any scholarly activities in which they participate.

      (d) Is there sufficient space to accommodate additional trainees in the clinic or inpatient areas? If not, what types of space needs have been identified?

   (2) Describe who will be the educational or clinical leader at your facility responsible for spearheading the development and implementation of a new GME educational program. Include the individual’s CV and qualifications to be an educational/academic leader. [Note: if you do not currently have such an
individual, you may wish to apply for salary support for such an individual. In such instances, we would suggest that the Chief of Staff or the AO to the Chief of Staff should serve in this interim role, until a suitable education leader can be hired. In any case, the local Chief of Staff needs to be highly engaged in the application for these infrastructure funds.]

(3) Describe your relationship with the affiliate that sponsors or will sponsor the physician residents, including
   
   (a) A description of your plans for regular communication with the affiliate and program leadership
   
   (b) How clinic or hospital staff will participate as faculty with respect to the sponsoring institution.
   
   (c) If new staff will be recruited, is there a plan for joint recruitment with the sponsor of the GME program?

(4) Summarize any identified infrastructure deficits and how you plan to address them, including a brief rationale for your application of these VACAA infrastructure funds.

(5) Describe your educational and clinical objectives or purpose in applying for these funds.

2. PROPOSED EXPENDITURES:
   
a. Refer to Attachment A for format. Additional rows may be added to the table as needed.

   b. By category, provide a description of how funding will be utilized and a justification. The definition of each category is identified on Appendix B. Additional rows may be added as indicated.

   c. Save in the same file as the Core Narrative. This table does not count against the page limitations.

3. SUBMISSION CHECKLIST: This checklist is provided for your convenience and should not be included in the submission.

4. SUPPORT LETTERS:
   
   Support letters in the following categories may be entered as electronically-signed or scanned pdf or image files. Outlines for each support letter provide specific information that reviewers would like to see in these letters in order to evaluate the proposals more objectively. Limit each letter to 2 pages.

   The letter should be addressed to “Robert L. Jesse, MD, PhD, Chief Academic Affiliations Officer (10A2D).”

   (1) Joint facility Leadership Letter of Support including signature by Medical Center Director and Chief of Staff
• Indicate support for the use of requested VACAA funding. Describe the expected benefits of this funding to the facility in general and to the educational and clinical educational infrastructure in particular.
• Describe how the infrastructure will also enhance access of Veterans to health care at your facility.
• Describe any resource support from local facility funds that would be provided to enhance the educational infrastructure in general. Specifically, if a construction project is proposed that will cost more than the $100,000 limit, will the facility provide additional funds to cover this project?
• Provide an assessment of the relationship with affiliate(s).
• Indicate a commitment to sustainment of infrastructure support for expanded GME training at your facility [Note: although the funding from this grant mechanism is time-limited, any staff hired should be given a permanent appointment. By the end of the 3-year grant period, your facility should be eligible for VERA Education Indirect funding, which will offset some, if not all, of these costs. Moreover, if the residency programs increase access to care for Veterans, you should realize an increase in VERA unique patient funding.]
• Letter supporting the utilization of funding to the medical center to facilitate GME position expansion under the VACAA initiative, including improvement in education processes, educational leadership, systems improvement, and improved care for Veterans.
• Provide your contact information for Chief of Staff: title, business address, telephone and fax numbers, and e-mail address.
• Identify the contact person for this RFP (i.e., DEO or ACOS/Education).

(2) Network Director's Letter of Support
• Indicate support for the requested VACAA infrastructure funding.
• Describe your commitment to developing the educational programs at the applicant VA facility and, if applicable, its CBOC(s).
• Provide an estimate of any matching funds or additional funding that will be supplied by the VISN to support the development of the VACAA-supported educational programs at the applicant facility. [Note: experience in other VISNs has led to the recognition that development of new or expanded GME sites requires a commitment from the VISN not only philosophically, but also in terms of resource support. New sites of training will need to have freedom from any hiring restrictions in order to use this funding. Nevertheless, experience has also shown that residency training programs improve one’s ability to recruit and retain high quality physician staff.]

(3) VA Site Director or Program Director’s Letter of Support
• Describe how the requested infrastructure support would enhance your program and the implementation of your project.
• Describe how you will evaluate the success of the funding on a programmatic basis.
• Describe your current accreditation status, any citations, and their resolution.
(4) **Affiliate**

- Letter authored by affiliate Designated Institutional Official (DIO) or Program Director(s) in the specialty of the planned resident physicians
- Letter should be written on affiliate letterhead
- Describe plans to partner with VA with description of resident commitment by specialty, trainee number, and total resident rotations to VA over the academic year
## Proposed Expenditures

**Appendix A: VACAA GME Round 3 Infrastructure - Innovation RFP Feb 2017**

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<th>VAMC:</th>
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*Add additional rows as necessary in Excel spreadsheet available in the RFP portal.*
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 CORE NARRATIVE for detailed instructions and outlines.

☐ CORE NARRATIVE: Proposal (not to exceed 5 pages) – use outline provided

☐ PROPOSED EXPENDITURES (Attachment A)
  □ Save in the same file as the core narrative (does not count in the page limitation)
  □ Add extra lines as necessary in the table
  □ Include a separate page for each FY in which you are requesting funding

☐ LETTERS OF SUPPORT: Letters of Support (facility/VISN letters: need to submit only once regardless of how many GME programs are involved; use outlines provided):
  □ Medical Center Director and Chief of Staff (combined letter, limit 2 pages)
  □ Network Director (1-2 pages)
  □ VA Site Director or Program Director (1-2 pages)
  □ Any interested affiliate with potential partnership or future GME positions (limit 2 pages); letter should demonstrate interest in partnering with the VA.
  □ Save all letters of support in one file for upload to the portal