

GME ENHANCEMENT: CRITICAL NEEDS AND EMERGING SPECIALTIES

1. PURPOSE

a. Request for Proposals for GME Enhancement. This is a Request for Proposals (RFP) on GME Enhancement: Critical Needs and Emerging Specialties. It provides information, policies, and application procedures 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 Critical Needs/Emerging Specialties RFP is a part of VHA's implementation of the recommendations of the Federally Chartered Advisory Committee on Resident Education; it will allow facilities to request new physician resident positions to enhance their ability to care for Veteran patients and begin or strengthen residency training in new and emerging specialties and in areas of strategic importance for VA.

b. Eligibility to Apply.

(1) Applications may be submitted by VA facilities that currently participate in graduate medical education and that wish to expand training opportunities to areas of critical need for VHA, or wish to offer training in new and emerging specialties.

(2) Applications may be submitted by facilities that currently have a total of **45 or more physician resident positions** allocated by the Office of Academic Affiliations for all specialties. Facilities with current allocation of fewer than 45 positions can apply under the RFP for New Affiliations and New VA Sites of Care.

(3) The application requires collaboration with affiliated sponsors of accredited residency training programs. Applicable requirements of the American Osteopathic Association (AOA) or Accreditation Council for Graduate Medical Education (ACGME), and program specific Residency Review Committee (RRC) must be addressed in the proposals. Programs must be in good standing with the appropriate accrediting body (i.e., no adverse actions or significant citations; actions taken to resolve minor citations should be described).

(4) The application requires support from the local VA bodies that supervise GME and the sponsoring institution's Designated Institutional Official (DIO) and the Graduate Medical Education Committee (GMEC).

(5) Requested positions should be in areas where the facility is able to fill the positions requested for AY 2011-2012 through an affiliated training program.

(6) Requested positions should be in areas where the facility has sufficient clinical workload to support the resident positions requested.

(7) Requested positions should be in areas where the facility has sufficient faculty or supervising practitioners in the specialty to provide quality education and adequate resident supervision.

2. BACKGROUND

a. **Federally Chartered Advisory Committee on Resident Education.**

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 1,221 new, permanent or base positions to facilities who responded to previous versions of this RFP. 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 5, and Future Initiatives:**

The current RFP, the related RFP for New Affiliations and New VA Sites of Care, and the Educational Innovation RFP are part of the fourth phase of implementation of the Advisory Committee's recommendations and will include allocation of up to 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 next few years. Funding for an estimated total of about 250 new positions per year will be requested. 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: Critical Needs and Emerging Specialties.**

Unique training opportunities that enhance resident education while addressing specific healthcare needs of Veterans are best determined at local and VISN levels. GME Enhancement: Critical Needs and Emerging Specialties positions will be used to encourage VA sites to offer new or expanded residency programs in specialties critically needed for Veteran care, either in existing or in new and emerging specialties. Interdisciplinary or inter-professional training opportunities are strongly encouraged.

Facilities may request positions in any combination of Critical Needs or Emerging Specialties. Requests may include fractions of positions, and be made in multiple specialties or in a single specialty, provided the facility has sufficient clinical workload and VA faculty for each specialty requested to support the training objectives. Requests may be partially funded depending upon the resources available. Facility prioritization of requests must be provided and will be considered in the funding decision.

Collaboration with local affiliated sponsors of residency training programs and accreditation or provisional accreditation of all involved programs is required. Only programs accredited by the AOA or ACGME will be considered for additional resident positions. Programs on probation or with warnings will not be considered.

b. Critical Needs.

In 2000 and again in 2004, OAA conducted a “Crystal Ball Survey” of facility educational leaders about their perceptions of future critical GME training needs. Respondents projected a need for an average of 21% increased resident positions, with particular emphasis in medical and surgical sub-specialties, as well as continued growth in primary care and mental health specialties. VA facilities may request positions in specialties where local utilization is known to be high and is projected to remain high. VHA’s support for Veterans returning from current conflicts has generated increased demand for many specialties including mental health care and rehabilitation services. **Applications for positions in primary care (internal medicine and family medicine), mental health and rehabilitation specialties are particularly encouraged under this RFP.** Specialties are encouraged to incorporate the principles of the patient-centered medical home (PCMH) into their training programs.

Requested positions should be in areas where the facility is able to fill the positions requested in AY 2011-2012 through an affiliated training program, where facility-level clinical workload is sufficient to support the resident positions requested, and where the facility has access to sufficient faculty or supervising practitioners in the specialty to provide quality education and adequate resident supervision.

c. Emerging Specialties.

New specialties and subspecialties have been emerging at a rate of about 2 new, ACGME-accredited programs per year over the past 5 years. The trend for expanding program choices reflects increasing sub-specialization and new practice niches. Many of these emerging disciplines are directly relevant to Veterans’ health care. GME Enhancement positions will be used to encourage VA facilities to offer training in these ACGME-accredited residency programs. **Provisional or full ACGME accreditation is necessary for approval of VHA funded positions in emerging specialties.** Providing they are relevant to Veterans’ health care, new specialties, such as Hospice and Palliative Care Medicine, will be added to funding options as they become approved by ACGME. Applicants must have either provisional program accreditation or be in the process of applying for accreditation. While applications may be submitted under GME Enhancement

while applying for accreditation, positions may NOT be filled until at least accreditation has been obtained.

4. FACILITY AND PROGRAM EXPECTATIONS

a. **Program Structure and Educational Leadership.** 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.

b. **Program Implementation.** Facilities may apply for positions to expand training opportunities in areas of critical need to VA, to offer training in new and emerging specialties according to the requirements listed in this RFP, or both, in any combination. Sites approved for GME Enhancement positions must 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 impact reported. Information about program implementation, recruitment of residents, and impact on VA patient care will be reported 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.** The facility must submit the information requested to include: (See Attachment A for details and instructions).

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 Directory¹ 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 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 or visit the ACGME website; <http://www.acgme.org> .

(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 resident education, VISNs currently receive on behalf of their facilities that engage in resident training approximately \$71,000 per year in VERA education funds for each resident position allocated as a surrogate for all trainees. Facilities may use VERA-allocated funds in support of education (e.g., protected time for existing faculty, hiring additional faculty or administrative staff).

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 AND PROGRAMS

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 both new and existing programs, there must be a program letter of agreement in place 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) A 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 excellence in graduate medical education, including outstanding GME training programs and advanced learning opportunities at the site.
- (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.

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.

d. **Capacity to Train.** Nationally-available facility-specific data and specialty grouping data as analyzed by OAA will be used to support expansion of positions throughout the VA system in a manner that reflects the workload and resources available to support training activities.

9. SCHEDULE

March 10, 2010	OAA sends request for applications to eligible facilities, VISNs, and appropriate Central Office officials. RFPs published on OAA website.
May 5, 2010	Facility letter of intent <u>for EDUCATIONAL INNOVATION only</u> is due in OAA. [see RFP: “Educational Innovation”]
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.
Mid/late September 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 (502) 287-4722 or by e-mail to barbara.chang@va.gov, or **Joanne Pelekakis, MLS** at (202) 461-9593 or by e-mail to joanne.pelekakis@va.gov.

Technical information regarding the online submission process: Email the OAA Help Desk (oaahelp@va.gov) or contact David Bernett at (803) 695-7935, (314) 277-6476, or (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. Applicants will submit proposals 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 staff that require 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 or e-mailed applications will NOT be accepted.

ATTACHMENT A

APPLICATION INSTRUCTIONS

1. GENERAL INSTRUCTIONS

a. **General.** See **Checklist** for submission 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 format** 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 ON-LINE 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 into the online request. Entries arrows to the right have a pull-down list of options from which you may 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) <input type="button" value="v"/>
Specialty/Subspecialty:	Abdominal radiology - Radiology-diagnostic <input type="button" value="v"/>
Type of program application:	Critical Needs/Emerging Specialties <input type="button" value="v"/>
# 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 <input type="button" value="v"/>
Institutional Accreditation Status:	Accreditation <input type="button" value="v"/>
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 <input type="button" value="v"/>
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) 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 at the VA
- 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 SECTION: Support letters – enter (upload) only once per site (regardless of the number of programs or the number of 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 (e.g., use of VERA educational funds)
 - (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.g., allowing facilities to have the full use of all VERA educational funds)
- (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), Letter: sponsoring affiliated institution

- (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 UPLOADS (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)