THE SECRETARY OF VETERANS AFFAIRS  
WASHINGTON  
June 21, 2012

Jordan J. Cohen, M.D.  
Chair, VA National Academic Affiliations Council  
President Emeritus, Association of  
American Medical Colleges  
2450 N Street, NW  
Washington, DC  20037

Dear Dr. Cohen:

This is in response to your letter regarding the formal proceedings and recommendations you submitted following the February 8-9, 2012, meeting of the Department of Veterans Affairs (VA) Advisory Committee on National Academic Affiliations Council.

I appreciate your leadership as Chair and the Committee’s thorough deliberation and input on issues related to sustaining and enhancing our academic affiliations for the benefit of the care and treatment of our Nation’s Veterans. Enclosed are the recommendations from your report and VA’s response to those recommendations.

I look forward to the Committee’s continued partnership as we work together to serve Veterans. Thank you for your continuing support of our mission.

Sincerely,

[Signature]

Eric K. Shinseki

Enclosure
Department of Veterans Affairs (VA)
Response to the Advisory Committee
National Academic Affiliations Council (NAAC)
February 8-9, 2012, Recommendations

Recommendation 1: VA and the academic community should examine the feasibility and potential mutual advantages of entering into novel partnerships – such as new sharing agreements, strategic alliances and joint ventures – in order to strengthen their joint commitment to delivering high quality, evidence-based, and efficient care to individuals and populations. Recognizing the complexity of developing relationships beyond traditional academic affiliations, the NAAC further recommends that a NAAC subcommittee be chartered to explore this issue in more detail.

VA Response: Concur

VA will explore the feasibility of joint ventures with academic affiliates by initiating a time-limited subcommittee under the authority of the NAAC to explore authorities and opportunities for joint ventures and report back to the NAAC.

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<tr>
<th>VA Action Plan</th>
<th>Steps to Implement</th>
<th>Lead Office</th>
<th>Other Offices</th>
<th>Tasks</th>
<th>Due Date</th>
<th>Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create NAAC subcommittee</td>
<td>Office of Academic Affiliations (OAA)</td>
<td>Veterans Health Administration (VHA), Office of Policy and Planning, Assistant Deputy Under Secretary for Health (USH) for Clinical Operations</td>
<td>Draft charter and propose membership</td>
<td>8/1/12</td>
<td>New</td>
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<tr>
<td>Obtain Under Secretary for Health (USH) and Secretary of VA approval</td>
<td>OAA</td>
<td></td>
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<td>10/1/12</td>
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<tr>
<td>Hold first meeting of subcommittee</td>
<td>OAA</td>
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<td>1/30/13</td>
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<tr>
<td>Forward subcommittee report to NAAC</td>
<td>OAA</td>
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<td>12/31/13</td>
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Recommendation 2: VA should continue to support modes of clinical education that foster the clinical skills, professional attitudes and systems awareness needed for patient-centered care and continue to promote the adoption of such educational modes by its academic affiliates. VA should:

(a) Emphasize longitudinal learning experiences in order to promote sustained, supportive and trustworthy relationships among team members and between teams and their patients;
(b) Expand interprofessional learning experiences that emphasize effective communication, shared decision making, and systems-based practice and improvement in order to promote high-functioning team-based practice;
(c) Continue to support the demonstration projects currently underway that examine the effectiveness of innovative models of health professions education (i.e., the Centers of Excellence in Primary Care and Specialty Care Education) and develop additional demonstration projects to expand the evidence base needed for rational redesign of learner experiences; and
(d) Explore options for re-balancing VA's educational portfolio and resources around models of learning that promote the development of proficiency in the clinical and system skills needed for patient-centered and interprofessional, team-based care.

VA Response: Concur

VA will continue to support innovative models of clinical education through the advice and consultation of an OAA Strategic Planning Advisory Committee for Health Professions Education. The Committee will explore innovative educational methods and recommend strategic directions for the VA educational portfolio. The Committee will be advisory to the Chief Academic Affiliations Officer and Under Secretary for Health and will have broad field, program office, and VHA Central Office leadership representation.

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<tbody>
<tr>
<td>Establish a VHA Strategic Planning Advisory Committee for Health Professions Education</td>
<td>OAA</td>
<td>Office of Nursing Services (ONS), Workforce Mgmt and Consulting Office, Deputy USH for Policy and Services, Assistant Deputy USH for Clinical Operations, field leaders</td>
<td>Draft charter and propose membership</td>
<td>8/1/12</td>
<td>New</td>
</tr>
<tr>
<td>Hold first meeting of OAA Strategic Planning Advisory Committee</td>
<td>OAA</td>
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<td>12/31/12</td>
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**Recommendation 3:** VA should continue to enhance nursing school partnerships, initiated under the VA Nursing Academy pilot program, by expanding this foundational academic partnership program.
VA Response: Concur

VHA has recently approved a 1-year extension of the VA Nursing Academy (VANA) at 12 presently active sites. Plans to deploy VA Nursing Academic Partnerships (VANAP) are currently under consideration by VHA leadership.

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<tbody>
<tr>
<td>1-year extension of VANA</td>
<td>OAA</td>
<td>ONS</td>
<td></td>
<td></td>
<td>Approved by USH on 5/17/12</td>
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<tr>
<td>VANAP approval</td>
<td>OAA</td>
<td>ONS, Assistant Deputy USH for Clinical Operations</td>
<td></td>
<td>10/1/12</td>
<td>Pending review by National Leadership Council (NLC) and approval by USH</td>
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<tr>
<td>VANAP deployment</td>
<td>OAA</td>
<td>ONS, Assistant Deputy USH for Clinical Operations</td>
<td></td>
<td>7/1/13 – 6/30/22</td>
<td>Pending program approval</td>
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**Recommendation 4:** VA should re-examine the structure and function of medical center Academic Partnership Councils to ensure they are broadly representative of all local academic affiliates and provide effective oversight of all programs jointly administered by VA and its academic partners. VA should consider policy changes, if necessary, and should mount demonstration projects to examine the effectiveness of new models of local affiliation governance.

VA Response: Concur

VHA will re-examine and enhance the structure and function of medical center Academic Partnership Councils by establishing a new NLC subcommittee. The subcommittee will report to the Health Care Delivery Subcommittee and be co-chaired by senior OAA and field executives. The Chief Academic Affiliations Officer and ADUSH for Clinical Operations will have joint responsibility for implementing approved recommendations.

VA Action Plan: See recommendation 5. Recommendations 4 and 5 will be overseen by the same subcommittee.

**Recommendation 5:** VA should re-examine the roles of medical center and VISN leadership in the oversight and management of its statutory educational mission. VA should consider:
(a) Strengthening the role and function of the Designated Education Officer (DEO);
(b) Better defining the resources necessary for the DEO to manage health professions training and academic affiliations effectively;
(c) Clarifying the roles of the medical center Chief of Staff, Chief Nursing Executive, and Veterans Integrated Service Network (VISN) Academic Affiliations Officer in the oversight and management of health professions training and academic affiliations;
(d) Developing performance metrics for medical center and VISN leaders with responsibilities for health professions training and academic affiliations; and
(e) Designing professional development programs for medical center and VISN leaders with responsibilities for health professions training and academic affiliations.

VA Response: Concur

VHA will develop policy and implementation procedures for academic affiliations oversight by establishing a new NLC subcommittee. The subcommittee will report to the Health Care Delivery Subcommittee and be co-chaired by senior OAA and field executives. The Chief Academic Affiliations Officer and ADUSH for Clinical Operations will have joint responsibility for implementing approved recommendations.

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<tr>
<td>Propose a charter and recommend membership for a new subcommittee of the NLC Health Care Delivery Committee</td>
<td>OAA</td>
<td>Principal Deputy USH, Assistant Deputy USH for Clinical Operations, Deputy USH for Policy and Services</td>
<td>Draft charter and nominate membership</td>
<td>10/1/12</td>
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Obtain NLC and USH approval 1/1/13
Hold first meeting 3/30/13