

## **Program Announcement**

### **VA Interprofessional Advanced Fellowship in Clinical Simulation**

#### **1. FELLOWSHIP PURPOSE**

##### **A. Program Announcement**

This program announcement provides information, policies, and application procedures for Department of Veterans Affairs (VA) facilities/systems regarding the VA Interprofessional Advanced Fellowship in Clinical Simulation (FCS) that will be supported by the Office of Academic Affiliations (OAA) and the Simulation Learning, Education, and Research Network (SimLEARN). The expected result of this announcement is the recompetition and designation of up to 6 sites for the FCS. Sites not currently participating but seeking to participate are encouraged to apply. Existing sites seeking to continue to participate must apply and the application must include the progress report described in Attachment A, section 2d. Approved sites will be authorized to recruit up to two fellows each year for a one-year education experience, with potential extension, upon approval by OAA. VA facilities/systems that have a commitment to interprofessional simulation training for the improvement of clinical care, education, and scholarship are encouraged to apply for this program. Each approved site will be authorized to recruit a maximum of one physician and one associated health (see section 4.b) fellow per application cycle:

The purpose of the FCS is to develop leaders with vision, knowledge, and commitment to implement, teach, evaluate, and advance simulation-based training strategies to improve healthcare for Veterans and the Nation. OAA and SimLEARN have collaborated to establish the FCS in recognition of the following factors:

- Clinical simulation is an essential strategy for improving quality and safety of health services and health professions education
- VA is dedicated to training healthcare professionals to be future VA and national leaders in clinical simulation. SimLEARN and the National Simulation Center (NSC) were created in 2009 as the operational Coordinating Center of national VA clinical simulation activities and to support simulation programming throughout the VA.
- SimLEARN in Orlando, Florida will act as the Coordinating Center for the fellowship sites. In conjunction with OAA, the Coordinating Center will:
  - Implement and coordinate the overall strategy;
  - Oversee the activities of fellowship sites;
  - Oversee the development of an overall program curriculum with participation of the sites. The curriculum will include: 1) learning objectives; 2) instruction and trainee assessment provided by SimLearn to

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- all sites; and 3) instruction and trainee assessment provided by local sites; and
- Facilitate other learning experiences for Fellows and Fellowship Co-Directors as budget and VA policies allow.

A notable change in the FCS program for the current program announcement is the commitment by each selected site to annual funding and other required support for Co-Directors attendance at national meetings including the SimLEARN on-site meetings and the International Meeting on Simulation in Healthcare (IMSH) or an equivalent simulation meeting. Fellows will be expected to attend meetings and trainings at the Coordinating Center as allowed by VA travel and conference policies. Attachment B summarizes these commitments.

### 2. BACKGROUND

The Veterans Health Administration (VHA) is a national leader in clinical simulation. In 2009, the Under Secretary for Health established the SimLEARN to promote excellence in healthcare provided to America's Veterans through the use of simulation technologies for process modeling, training, education, and research. Based on a 2015 VHA survey co-sponsored by the Healthcare Analysis and Information Group and SimLEARN, the number of VA medical facilities using simulation has increased from 30% in 2009 to 76% in 2012 to 97% in 2015. However, in 2012, 77% of VA facilities did not believe their current simulation capability was able to meet their site's educational objectives primarily due to a lack of trained simulation experts. In order to address this difficulty, OAA and SimLEARN developed a fellowship to develop future leaders in the field of clinical simulation. The original fellowship was piloted at 2 sites in 2012 and expanded to 6 sites in 2013. Simultaneously, the use of simulation in healthcare has grown dramatically in areas including trainee education, procedural competency for staff, initial and maintenance of board certification and licensure, hospital privileging, systems testing and redesign, patient throughput, human factors design and training, patient safety, and quality improvement.

However, the 2015 follow-up study demonstrated a majority (52%) of sites still did not believe their simulation capability was able to meet their need, similarly identifying the need for more trained simulation faculty. There remains a shortage of professionals trained to manage and operate healthcare simulation programs and few training pathways to develop such professionals. Simulation-focused organizations, such as the International Nursing Association for Clinical Simulation and Learning and the Society for Simulation in Healthcare, have developed efforts to

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bridge this gap, but they do not offer sufficient educational resources by themselves to create experts in the field. Simulation certificate programs and graduate programs have emerged to address this need but are few in number and variable in scope. Since its creation, the VA FCS program has sought to address this need within the VA and has been on the forefront of national discussions to standardize these expectations for all fellowships. For example, VA FCS was one of the first healthcare simulation programs to develop unifying domains for its fellows and is leading efforts in developing core curricular objectives.

Given the scale and unique features of VA's healthcare delivery, education, and research missions, VA must continue to be proactive in assuring an appropriate workforce is developed to meet the present and future needs for VA and the nation. Evaluating and balancing the continued growth and needs of the VHA, the FCS program has reached a natural inflection point for recompetition.

### 3. PROGRAM DESCRIPTION

#### A. Program Structure

Sites approved for the VA Advanced Fellowship Program in Clinical Simulation shall have robust instruction, an appropriate infrastructure, and qualified faculty who are experts in simulation practice, education, and research. Overall, programs are expected to have facility, personnel, curriculum, collaboration and scholarship characteristics approximating that of an intermediate or advanced SimLEARN Simulation Facility Certification (Attachment C).

**Curriculum.** Sites approved for the Interprofessional Fellowship Program in Clinical Simulation shall provide local instruction, experiential learning, and mentorship achieving the overall program's learning objectives and complementing the resources provided by the Coordinating Center.

The Coordinating Center shall, with collaboration of the participating sites, develop learning objectives, common instruction to be provided to fellows at all approved sites, and strategies to assess participant's accomplishment of the learning objectives over a twelve-month period. Curriculum components will follow the 7 Fellowship Domains (Attachment D). The instructional design shall foster high degrees of interaction between trainees and faculty across participating sites and will include training for Fellows to be held at the Coordinating Center. Fellows and Co-Directors

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will be expected to be actively engaged in the development, delivery and evaluation of the program curriculum.

Each of the participating sites will be unique and possess its own areas of expertise. The local instruction shall be developed to address both the participating site's areas of interest and the trainees' personal learning goals. Topics could include health professions education, staff practitioner skills development and reinforcement, patient safety, quality improvement, technology development and design, competencies and privileging, systems testing and redesign, team training, research methods, leadership skills, and project management. Local instruction must include substantial mentored hands-on experiences, and could also include participation in local seminars, faculty directed self-study, formal courses at an affiliate, and any other modalities appropriate for the site and its trainees. Local augmentation to the national curriculum should clearly define learning objectives and outcome measurements. Learning outcomes should be documented in accordance with the domains (Attachment D) and consist of an e-learning portfolio shared with SimLEARN.

**Infrastructure.** The site application should demonstrate the track record of the facility and partners in the areas of clinical simulation practice (e.g., demonstrated experience developing and implementing clinical outcome-focused simulation programs), education (e.g., development and implementation of health professional trainee curriculum), scholarship (development or evaluation of evidenced-based clinical simulation projects) and in recruiting and developing prior trainees and fellows (if applicable). The application must include discussion of how education (including workplace learning, formal instruction, and reflection), mentoring, clinical infrastructure at the site, activity documentation, and commitment to scholarship shall foster a high quality learning environment and fellowship experience. Additionally, documentation shall address the availability of clinical simulation resources to include space, simulation equipment, faculty and staff time, technical support, and computer support at the facility that will be used to comply with the national curriculum and enhance fellowship experience. Commitment from the site will be required to ensure fellows and associated program faculty have resources and support for travel to attend national meetings as VA policies permit. Required travel includes Fellows' trainings and/or meetings organized by the Coordinating Center (funded by the Coordinating Center), semi-annual Fellowship-wide meetings and the annual International Meeting of Simulation in Healthcare or equivalent simulation

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conference (Co-Directors to be funded by the facility). Simulation sites should also describe how they plan to create and enact individualized learning plans and professional development for Fellows from various clinical and non-clinical backgrounds with disparate career goals. The proposed process for individualized learning plans shall address fellow, mentor, and Program Director responsibilities. Sites shall also describe their strategy for assisting graduating fellows in finding suitable jobs, emphasizing efforts for placement in VHA positions. Such strategies should integrate with the Coordinating Center's efforts to involve the Fellow in national projects and meetings -- including introductions to national program offices, facility and VISN leadership as well as publicizing Fellows' accomplishments in the annual Commencement Meeting. Regular and timely communication with the Coordinating Center regarding changes in leadership, staffing, resources and Fellow status is expected. Over the course of the program, proposed changes in local program director or co-director shall be endorsed by the local Designated Education Officer, and approved by the Coordinating Center, prior to being considered by OAA.

**Fellow Recruitment.** Each FCS site may begin recruitment of two fellows upon notification of approval. Fellows must meet the criteria described below in section 4b. Approved fellowship programs can begin recruiting in Academic Year (AY) 2021-2022. Current sites that either choose not to pursue this application or that are not selected, can continue if they have active fellows or have had fellows accept position offers during the review period for AY 2020-2021. Such sites may not retain fellows past AY 2021-2022. SimLEARN and OAA will be integrated into the recruitment process with open lines of communication during all phases. Fellows are expected to be on-boarded on or around July 1<sup>st</sup> but no later than August 18<sup>th</sup>. Any exceptions must be reviewed by the Coordinating Center.

**Program Co-Directors.** Each site should have Fellowship Co-Directors – one physician and one associated health professional. Co-Directors should equally share program development and overall program responsibilities to ensure a high level of interprofessional engagement. The Program Co-Directors must have: demonstrated expertise in clinical simulation; experience in program management and application of simulation in clinical, scholarship, or educational settings; a demonstrated ability to effectively teach and mentor; and demonstrated relationship to a current academic program. Site Co-Directors are expected to enhance curriculum through attendance in a one-time SimLEARN faculty training course, collaboration on SimLEARN

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projects, and involvement in weekly conferences (attendance in at least 75% of sessions with at least one presentation annually), as well as participation in developing and delivering the national instruction. Site Co-Directors are also responsible for maintaining fellow and programmatic assessment for their local fellowship site in accordance with standards from the Coordinating Center. Attendance annually at the International Meeting for Simulation in Healthcare (IMSH) of at least one Co-Director (preferably both) is required. Co-Directors should describe or demonstrate an ability to openly communicate with the Coordinating Center i.e. regarding changes in staffing, resources, fellow status and recruitment.

**Affiliate Relationship.** Affiliates should appropriately recognize VA faculty/mentors participating in the program. See Section 5 below for more details about affiliations.

**Coordinating Center Role.** SimLEARN will act as the Coordinating Center for the fellowship. The Coordinating Center will:

- be responsible, with participation from sites, for developing the overall program curriculum and developing and delivering a national instruction to the other sites as described above
- create opportunities for fellows to participate in national simulation projects
- foster collaboration among the fellowship sites by coordinating issues such as program goals, curriculum development, program implementation and assessment, recruitment strategies, communication, and program administrative issues between program sites and OAA
- reserve spaces in existing instructor courses as well as semi-annual simulation meeting to which (VA travel policies permitting) Fellows and Program Co-Directors are expected to attend, and will coordinate additional opportunities for Fellows and site faculty to participate in efforts in research, education, and multi-site improvement projects sponsored by other VA Offices
- conduct annual surveys of the fellows, faculty and sites to inform change and continual improvement of the fellowship. Site Co-Directors are required to assist in compliance with annual surveys.
- maintain an alumni database with the assistance of local sites.

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### B. Program Implementation

Program implementation expectations include the following:

**Fellows shall spend approximately 70 percent of their time in training, development, and implementation of projects related to the practice of clinical simulation.** This includes, but is not limited to, classroom learning, simulator programming, curriculum development, involvement in hospital committees related to identifying gaps and outcomes for simulation training programs (patient safety, Root Cause Analysis (RCA), code committee, etc.), site-visits, clinical simulation instruction, and national SimLEARN projects. No more than 30 percent time should be spent in direct clinical care or equivalent, but all fellows are expected to maintain some standard clinical activity. Fellows are expected to develop and implement a significant clinical simulation project that will result in presentation at a regional or national venue, publication, or both. Fellows and Co-Directors must also participate in weekly Coordinating Center designated education (at least 75% attendance), with the expectation to present at least once annually. Fellows will attend training at the Coordinating Center. Clinician fellows must conduct the majority of their clinical care responsibilities at a VA facility. Should a site wish to have fellows conduct clinical activities at non-VA sites, prior written approval from the Office of Academic Affiliations must be obtained. Fellows are expected to carry out a significant portion of their research and educational activities at a VA facility.

**Preceptors or mentors.** Mentorship is an essential component of an outstanding advanced fellowship experience. Fellows are to develop individualized learning plans in collaboration with their preceptors, mentors and SimLEARN staff. Preceptors and/or mentors should provide assistance with project(s), research methodology and content, as well as guidance in personal and professional development. For these reasons, several preceptors or mentors are often needed. These individuals are expected to meet regularly with the fellows to assess their progress, serve as role models, and provide constructive feedback and assistance in meeting the fellows' goals. Preceptors and/or mentors are expected to participate in formative and summative evaluation of fellows and the fellowship program

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**Fellow Recruitment and Fellow Credentials.** Each selected site will be authorized to recruit two fellows each, to participate in a one-year fellowship. Fellows should be onboarded and ready to begin with their cohort on or around July 1<sup>st</sup> but no later than August 18<sup>th</sup>. Requests for an adjustment in schedule or additional fellow positions will be considered by SimLEARN and OAA, with approval in part contingent on availability of funding. Fellows must meet the criteria described below in section 4b.

**Project.** All fellows should participate in a variety of simulation-based educational initiatives locally (Facility) and nationally (SimLEARN). It is expected at least one of these efforts will be a clinical simulation project to which they make a substantive, independent, and identifiable contribution. The topic of the project should be of direct relevance to VHA's mission. Successful completion of the project includes written description of the project and its results (preferably including submission for publication) and presentation of the project at a regional or national venue (including the monthly Simulation Community of Practice Calls and the SimLEARN newsletter).

**Fellowship Program Meetings.** Two annual onsite meetings will be hosted by the Coordinating Center as permitted by VA policy. The goals of the annual meetings are to speed dissemination of advances in the field; to promote an interprofessional fellowship learning community; to introduce fellows and faculty to VA and Non-VA leaders in the field of medical simulation, application, and education; to discuss fellowship program issues; and to provide graduates and fellows an opportunity to present and discuss their work. SimLEARN will also ensure spots in the basic and faculty level instructor courses which fellows are required to attend. Additionally, the Coordinating Center will facilitate teleconference sessions designed to enrich the fellows' simulation experience and provide additional opportunities of learning engagement between the fellows, Co-Directors, Coordinating Center, and national simulation experts from the field. The Coordinating Center will support the travel to any onsite meetings. Attendance at the annual meetings and participation in Coordinating Center facilitated teleconferences is required (at least 75% attendance and one annual presentation) for fellows and Co-Directors.

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**In-Fellowship and Post-fellowship follow-up and tracking.** Fellowship sites will coordinate with SimLEARN on the assessment of fellows both during fellowship and beyond. An e-portfolio consisting of projects and demonstrating how fellows are meeting the domains will be kept and shared with SimLEARN. Exit surveys and alumni tracking will be coordinated via SimLEARN with sites ensuring their fellows and alumni are in compliance.

The Coordinating Center will report to OAA the results of an assessment of fellows' satisfaction with the program, their subsequent employment, recruitment to VA, success in obtaining research funding, publication in peer-reviewed journals, awards, and other achievements in the field of clinical simulation. Such tracking information will be considered in evaluation of participating sites at the time of future program re-competition.

#### **4. POLICIES**

##### **A. Governance**

The Office of Academic Affiliations maintains overall responsibility for the administration of the VA Advanced Fellowship Program in Clinical Simulation.

The fellowship program is governed by VHA Handbook 1400.07, "Education of Advanced Fellows."

The Coordinating Center and OAA must approve significant changes to the fellowship site, including issues such as change in leadership, fellow resignation or termination, insufficient funding, change in preceptor/mentors, or any other reason why the approved proposal is not being properly fulfilled. The Coordinating Center will make recommendations to OAA about ongoing operations and future direction(s) of the program.

##### **B. Recruitment and Fellow Credentials**

Applicants will be eligible to participate in this program provided they have completed all requirements needed to be a fully credentialed independent practitioner in their field at a VA facility (with the exception of certain associated health disciplines that require fellowship training prior to licensure). Applicants from clinical disciplines requiring Doctoral level education to qualify as an independent practitioner must possess the required degree (e.g., DDS, DPM, PhD, etc.). Clinical fields that recognize independent practitioners possessing

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degree levels below that of Master's degree (e.g., Registered Nurse or Registered Dietitian) must have completed a Master's degree to be eligible for participation in this program. Social workers and health care administrators must possess at least a Master's degree. Applicants who are in non-clinical associated health professions must possess at least a Master's degree (e.g., MHA, MPH, etc.).

**Physician Fellows.** Prior to beginning the fellowship, physician fellows must meet the following criteria:

- 1) Completed a residency program that is accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Bureau of Professional Education (BPE) of the American Osteopathic Association.
- 2) Fellows may not be enrolled simultaneously in any accredited physician residency/fellowship program.
- 3) Have active, full and unrestricted license(s) to practice in the U.S. and any of its territories.
- 4) Be board certified or eligible with demonstration of active pursuit of board certification.
- 5) Be appropriately credentialed and privileged for clinical practice at the local VA facility.
- 6) Appointment Authority. Appointments will be made under the authority of 38 U.S.C 7406.
- 7) Stipend Rate. The stipend rate will be based on years of previously completed ACGME or AOA accredited residency training and equivalent experiences as determined by OAA and index rates approved at the affiliated university and the respective VA facility. OAA reserves the right to use a different mechanism to establish fellow pay rates in the future. Fellows shall be paid directly by the VA facility unless OAA provides written approval for another payment mechanism.
- 8) Stipend Supplementation. Fellows shall not receive additional revenue from any source in compensation for their duties in this program.
- 9) Full-time fellows (100% engagement) are expected to spend a significant amount of their time, typically 30 percent of total fellowship time, in VA clinical care, in order to maintain clinical skills as well as to maintain close clinical relationship to areas of research or systems improvement interest. Fellows whose learning plan includes clinical skills development or as otherwise appropriate may spend considerably more time in direct care but not to exceed 70% of the overall fellowship training experiences.

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- 10) Demonstrate interest in pursuing VA careers with Clinical Simulation as a significant focus.

**Associated Health Fellows.** Prior to beginning the fellowship, associated health fellows must meet the following criteria:

- 1) Completed all requirements needed to become a fully credentialed independent practitioner in their field at a VA facility, or possess a Doctoral degree in a field relevant to clinical simulation. Specific requirements include one of the following, as applicable:
- 2) Graduated from or have completed the degree requirements in an accredited program in the requisite Doctoral degree program to qualify as an independent practitioner in disciplines requiring a Doctoral degree (e.g., DPM, OD, PhD, etc.). Psychology fellows must have completed an accredited Doctoral program, including an American Psychological Association (APA) accredited internship program.
- 3) Have at least an earned graduate degree from an accredited educational institution in fields that do not involve clinical certification or licensure but that can be applicable to health systems (e.g., education, anthropology, sociology, computer science/medical informatics, engineering, etc.).
- 4) Have at least a Master's degree from an accredited educational institution in disciplines requiring a Master's degree (e.g., nursing, social work, physical therapy, or other associated health profession, etc.).
- 5) Clinical fields that recognize independent practitioners possessing degree levels below that of Master's degree (e.g., Registered Nurse or Registered Dietitian) must have completed a Master's degree to be eligible for participation in this program. Nurses and health care administrators must possess at least a Master's degree.
- 6) Be U.S. citizens.
- 7) Have an active, full, and unrestricted license to practice in the U.S. and any of its territories, if such licenses are required for initial VA employment.
- 8) Demonstrate interest in pursuing VA careers with clinical simulation as a significant focus.

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#### C. Appointment and Compensation

##### Physician Fellows

- 1) Appointments will be made under 38 U.S.C. 7406 for one year. Accepted candidates are identified for the personnel management data systems and for cost accounting purposes by specific assignment codes. Fellows are eligible for health and life insurance benefits.
- 2) The Office of Academic Affiliations will consider requests to appoint fellows through a disbursement agreement executed in collaboration with a VA/OAA approved academic affiliate

##### Associated Health Fellows

- 1) Appointments will be made under 38 U.S.C. 7405 (a)(1)(D).
- 2) Stipend rates will be determined by OAA, depending on the discipline and previous education of the trainee. Current rates are listed <http://vaww.oaa.med.va.gov/DBReports/LocBasedStipends.aspx> as of the time of publication of this document. Approved sites with potential fellows from disciplines not on the table should contact OAA for salary rates.

Full time appointments are preferred, but sites may request an exception to full time appointments by making a formal request to OAA and the Coordinating Center stipulating the part time appointment is not less than half-time and that such an appointment is appropriate for the program mission and the fellow's learning plan. All part time appointments must be completed during the one-year fellowship period.

#### D. Educational Details

Fellows directly paid by VA may be detailed to other educational institutions without loss of pay, but under no circumstances may the total time spent in non-VA institutions exceed one-sixth of the total hours a fellow is in a pay and training status with VA. Guidance on educational details for fellows is available in the VHA Handbook 1400.07 Education of Advanced Fellows. **Should a program wish to have fellows conduct clinical activities at non-VA sites, prior written approval from the Office of Academic Affiliations must be obtained.**

OAA recognizes that not all simulation facilities used by VA may be on VA property. This can complicate the typical determinations about VA timekeeping for fellow's activities in this

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program. OAA encourages sites intending to have fellow activities occur at non-VA or shared sites to contact OAA for guidance about appointment and timekeeping strategies. Advanced Fellows paid via disbursement cannot receive VA pay for educational details away from Federal locations.

#### **E. Liability Protection**

Fellows will be protected from personal liability while providing professional services as a trainee at a VA facility and at non-VA facilities under the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679(b)-(d). Training at non-VA facilities can only take place under the terms of an approved affiliation agreement (VA Form 10-0094H).

#### **F. Expenses**

Except as specified above, expenses connected to the fellows' 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 fellows.

#### **G. Service Obligation**

There is no service obligation after completion of the fellowship program. However, fellows are encouraged to seek VA employment. Program faculty mentorship is expected to include career counseling, including assistance in obtaining VA employment.

#### **H. Identification of Fellowship Status**

Fellows shall notify VA locally and nationally as required prior to any publication or presentation.

Fellows shall also identify their VA support in all reports and presentations during the fellowship program and after the fellowship program if the report or presentation is related to activities conducted during the fellowship program. Failure to do so while in the fellowship program may result in termination of the fellowship. Institutional Review Board (IRB) approval protocols must be accomplished prior to collection of research data.

#### **I. Clinical Privileges/ Scope of Practice**

##### **Physicians**

- 1) Subject to the policies and procedures of the appointing institution's medical staff bylaws, Advanced Fellows are to be privileged as licensed independent practitioners (LIPs) in the primary medical specialty in which

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they completed approved training. Exceptions to this requirement for LIP privileging are rare and require written OAA approval. The assigned privileges as an independent practitioner shall be within the scope of practice for which the Advanced Fellow has been previously trained.

- 2) A physician Advanced Fellow may NOT provide independent clinical services or clinical training for clinical skills that are part of the fellow's learning plan. Such physicians are considered to be under supervision (or dependent practitioners) for those skills.

### Associated Health Professionals

- 1) Associated health professionals shall either be privileged as licensed independent practitioners or boarded with scope of practice consistent with their licensure and prior training.
- 2) Nurses will either be privileged as licensed independent practitioners or boarded with scope of practice consistent with their licensure and prior training
- 3) Associated health Advanced Fellow may NOT provide independent clinical services or clinical training for clinical skills that are part of the fellow's learning plan. Such trainees are considered to be under supervision (or dependent practitioners) for those skills.

### J. Financial Support

**OAA support.** OAA will provide funds to VA facilities for fellows' stipends and fringe benefits.

**SimLEARN support.** SimLEARN shall fund the Coordinating Center functions including travel to the National Simulation Center for required courses and national project work as needed. SimLEARN will also sponsor semi-annual VA Advanced Fellowship Program in Clinical Simulation meetings in accordance with VA policy support travel for fellows to attend. Additional SimLEARN funding may be available to host facilities to support temporary duty travel, project costs, and non-IT equipment, to be determined each year and based upon available resources. Funding for Fellows' travel to the IMSH will be provided.

**Host facility.** The host facility shall provide support for Program Co-Directors to attend the SimLEARN semi-annual clinical simulation meetings. Funding for Co-Directors' travel to the IMSH (or in some instances an equivalent simulation

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conference) each year is also required. Other support of Co-Directors and preceptor/mentors' travel is encouraged.

**Any other expenses**, including expenses connected to the fellow's recruitment, educational activities, or research, are not funded by OAA or SimLEARN. Transportation to the VA facility and housing arrangements are the sole responsibility of the selected fellows.

#### 5. ELIGIBILITY AND SELECTION CRITERIA FOR A FELLOWSHIP SITE

##### A. The Fellowship Site

Must be affiliated with a Liaison Committee on Medical Education (LCME) or American Osteopathic Association (AOA)-accredited medical school with an accredited medical school with a current Affiliation Agreement with the host VA facility. Additional formal affiliations with schools with accredited associated health disciplines are strongly encouraged (e.g., School of Nursing, Pharmacy, social work program at a university affiliate, etc.). Other affiliations in associated health disciplines are encouraged if they support the goals of the program and/or have active simulation-based training program(s) (e.g., public health, healthcare administration, business, engineering, etc.). All affiliations should occur with institutions with experience and leadership support of clinical simulation. If new affiliations are made to develop this relationship, a formal affiliation agreement must be executed. (contact Office of Academic Affiliations for assistance). A site must provide evidence of committed leadership, time, personnel, and equipment to support a culture of excellence in clinical simulation, education, clinical care, and administration. The facility must demonstrate the following:

- 1) VISN and facility commitment to build and sustain an outstanding learning environment and support of simulation. VISN and facility commitment to the program co-directors in terms of dedicated and protected time to run the fellowship are highly encouraged. The application proposal should detail specific time commitments to the fellowship.
- 2) Evidence of a strong partnership between the VHA facility and its academic affiliate(s).
- 3) Strong interprofessional leadership by team members involved in the provision of clinical simulation efforts at the site.
- 4) Outstanding interprofessional educational opportunities and advanced clinical learning opportunities at the site.

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- 5) Experience in conducting clinical simulation and related training.
  - 6) Commitment to develop individualized learning programs with trainees.
  - 7) Evidence of a strong administrative infrastructure to support a training program.
  - 8) Commitment to a process of disseminating educational material and promoting clinical simulation beyond the training site.
  - 9) Evidence of sound evaluation strategies for programmatic and individual evaluation.
  - 10) Willingness to fund travel and registration for the Program Co-Directors to attend one national meeting related to clinical simulation during the year.
  - 11) Provision of equipment, space, and technical expertise to conduct regular two-way interactive video conferences and other appropriate technologically mediated instruction as part of the curriculum.
- Must submit the information requested in Attachment A.

#### **6. REVIEW PROCESS**

**A.** An interprofessional ad hoc review committee designated by the Chief Academic Affiliations Officer, in collaboration with the SimLEARN Director or designee, will advise the Chief Academic Affiliations Officer about the merits of the applications. The reviewers will have demonstrated expertise and leadership in their respective medical and health professions, clinical simulation, and/or clinical education. Decision to approve sites rests with the Chief Academic Affiliations Officer.

**B. Training site applications will be scored** per the following criteria and weights:

**\*\* IMPORTANT NOTICE FOR CURRENTLY APPROVED FCS SITES REAPPLYING\*\***

Scoring for currently approved FCS program sites will be based, in part, on past performance. As such, reapplying sites must document the history of their program within each scoring element below. For example, reapplying sites must clarify the prior and expected support from the VISN and facility, prior and proposed leadership, curriculum and quality improvement history, and evaluation data from fellows and their program (e.g. recruitment, retention, and impact).

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<p><b>I. Facility</b></p> <p>Commitment of resources to build and sustain an outstanding learning environment:</p> <ul style="list-style-type: none"> <li>• support of fellows’ participation in facility-wide patient care quality and safety initiatives</li> <li>• support for Co-Directors’ and Fellows’ activities with SimLEARN including but not limited to annual attendance at the International Meeting on Simulation in Healthcare (IMSH) and the annual Fellows’ and Co-Directors’ meetings held at SimLEARN</li> <li>• funding for Co-Directors’ attendance at the IMSH</li> <li>• identified space and IT resources for fellows and co-directors; adequate simulation equipment</li> <li>• Human Resources support for onboarding fellows in the specified timeframes</li> </ul>	<p><b>Required</b></p>
<p><b>II. <u>Quality of local simulation program’s resources</u></b> which demonstrates the commitment to the sustained use of simulation for system impact and ability to provide resources to the fellow; Factors for consideration include:</p> <ul style="list-style-type: none"> <li>• established, constructive partnership with-affiliates</li> <li>• strength of available mentorship for trainees</li> <li>• ability to develop an individualized learning program for each fellow</li> <li>• track record in the development, implementation, and evaluation of simulation-based training in focused areas such as graduate medical education (GME), associated undergraduate health professions, nursing education, patient safety, quality improvement, technology development and design, competencies and privileging, systems testing, and/or redesign, team training</li> <li>• integration of simulation into the local healthcare system, including dedicated space for simulation-based activities, adequate simulation equipment, and leadership support of the use of simulation within local facility to provide trainees with simulation-based learning opportunities in multiple clinical</li> </ul>	<p><b>40 points</b></p>

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<p>areas including but not limited to inpatient, outpatient, and community care settings.</p> <ul style="list-style-type: none"> <li>• history of collaboration or support for regional or national level simulation-based initiatives, clinical innovations, and High Reliability practices</li> <li>• For reference, relevant suggested criteria from the VHA Simulation Center/Program Application Checklist (Attachment C) are included. The expectation would be a site could document approximation of an intermediate or advanced level of resources</li> </ul>	
<p><b>III. Qualifications of Interprofessional Fellowship Program Co-Directors and Faculty:</b> professional experience that demonstrates expertise in</p> <ul style="list-style-type: none"> <li>• utilization of simulation in healthcare settings;</li> <li>• interprofessional health professions education;</li> <li>• use of formal and informal tools for feedback, assessment, and evaluation;</li> <li>• mentorship and/or coaching;</li> <li>• administrative experience for program management;</li> <li>• scholarly activities;</li> <li>• experience with simulation and/or education at regional or national level.</li> <li>• commitment to protected time of the Program Co-Directors (please detail specific time set aside for the fellowship)</li> </ul>	<b>30 points</b>
<p><b>IV. Program Potential for impact</b> on VA and Veterans health.</p> <p>Examples of impact include improved or expanded educational efforts within VA, systems/process evaluation, increased clinical or educational alignment with the academic affiliate, direct impact of clinical simulation projects, academic advances in clinical simulation, and alignment with local, regional or national stakeholders. Alignment and opportunities for collaboration with facility, VISN, or national partners must be explicitly listed in the application and through letters of support. Specific details regarding a track record and/or plan for job</p>	<b>15 points</b>

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placement, with a specific focus on retention of Fellowship graduates within the VA, is highly encouraged.	
<b>V. <u>Scholarly project opportunities</u></b>  Resource support for each fellow to design, develop and co-lead a capstone simulation projects with a qualified mentor leading to submission for journal publication, and or presentation of the projects at a regional or national venue	<b>15 points</b>
<b>TOTAL</b>	<b>100 points</b>

**7. SCHEDULE**

July 15, 2020	OAA sends program announcement to VISNs, facilities, and appropriate headquarters officials.
August 5, 2020 2pm EST	Informational Call for Applying Sites Join ZoomGov Meeting <a href="https://www.zoomgov.com/j/1601227124?pwd=ajZpQnlaaFRWa2tmR2dYTzZzTzN0UT09">https://www.zoomgov.com/j/1601227124?pwd=ajZpQnlaaFRWa2tmR2dYTzZzTzN0UT09</a>  Meeting ID: 160 122 7124 Password: 828839
August 26, 2020	Letter of Intent deadline. Interested sites are required to upload Letter of Intent (stating their non-binding intent to submit a full proposal to OAA Support Center at: <a href="http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=79">http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=79</a> . Please click on the “Register” button to enter your information. Upon registering, you will be able to log in and start to upload the required document. The Letter of Intent must include contact information for the application's Program Co-Directors and any administrative contacts at the site.
October 21, 2020	Full applications are due in OAA (to OAA Support Center as described in Section 9 (page 20) at: <a href="http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=79">http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=79</a>
Early-Mid November, 2020	Panel review of Site Applications
Mid-Late November, 2020	OAA notifies facilities of selection/non-selection as a training site.

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Summer 2021	Fellows begin at new sites if site is capable of supporting a fellow for AY 2021-2022. Existing re-approved sites to continue with fellows without pause.
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**8. OAA CONTACT PERSONS**

For information or questions related to this fellowship program, please contact Ms. Deborah Ludke by email at [deborah.ludke@va.gov](mailto:deborah.ludke@va.gov)

**9. APPLICATION INSTRUCTIONS**

Applications shall be uploaded to the OAA Support Center at: <http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=79>

Please click on the “Register” button to enter your information. Upon registering, you will be able to log in and start to upload the required documents. There are six (6) documents required to be uploaded for a complete application. You can upload one document at a time. Please use the following naming conventions when saving/uploading files:

Document A: Facility Director’s Transmittal Letter

Document B: Core Narrative

Document C: Faculty Members’ CVs

Document D: VISN Director Letter of Support

Document E: Chief(s) of Services Letters of Support

Document F: Academic Affiliates Letters of Support

After all files have been uploaded, please select “Submit for Approval.” You will be taken to a screen that lists all documents that have been uploaded for your application. Please select “Submit Final Application to OAA” in order to submit your application. Please remember, we will only be able to accept one application per site, so please coordinate with others from your site prior to submission.

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**ATTACHMENT A**

**FELLOWSHIP APPLICATION INSTRUCTIONS**

1. GENERAL INSTRUCTIONS

- a. Font size and margins. Font size must be 11-point or larger. Margins must be one inch all around.
- b. Page limit. Total number of pages must not exceed 50. The core narrative should not exceed 20 pages, and supplemental materials must be limited to 30 pages.

2. APPLICATION PACKAGE INSTRUCTIONS

- a. The transmittal letter from the facility/system Director must:

Document support for the program by

- (1) Authorizing release or protected time for the Program Co-Directors and preceptor/mentors who will supervise the trainees.
- (2) Funding travel and registration for the Program Co-Directors, selected faculty, and all fellows to annually attend at least one national meeting identified as a core activity by the Coordinating Center. Funding for travel to additional meetings is highly desirable and should be addressed.
- (3) Providing access to interactive videoconferencing equipment and staff assistance related to effective use of equipment.

Describe the unique contributions the facility can make to the training program.

Identify the name, title, telephone and fax numbers, and e-mail address of the fellowship Program Co-Directors.

Identify the name, title, telephone and fax numbers, and e-mail address of the facility contact person, if different from the fellowship Program Co-Directors.

- b. The core narrative of the application must not exceed 20 single-spaced pages. **Applications exceeding the page limitations will not be reviewed.**

The pages must have at least 1-inch margins all around and the font size must be no smaller than 11 point. The core document should include:

**Background Information:**

- 1) Describe the applicant site's clinical simulation program and related education components.
- 2) Describe the nature of the interprofessional team involved in clinical simulation activities—who are the core team members; how often does the team meet; how does the team function to integrate assessment information, develop, implement, and evaluate clinical simulation activities? Describe evidence of prior participation in national clinical simulation activities, particularly with SimLEARN.

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- 3) Describe the site's goals for the program, including focus on particular aspects of clinical simulation practice and specific health professions, if any, that will be emphasized by the proposed program.
- 4) Articulate the specific clinical simulation skills and knowledge to be learned/developed by the fellows. Describe measurable competencies to be achieved by trainees. Address the interprofessional components of the curriculum, as well as the discipline/specialty components. Include strategies for mentorship in this discussion. Describe teaching methods to be used, including how the learning activities may be customized to meet fellows' needs.
- 5) Describe the venues/sites where educational activities and clinical activities are proposed to take place. Describe what the fellows' roles will be within the interprofessional teams functioning in these venues/sites of care.
- 6) Describe activities that will foster fellows' development as leaders and change agents in clinical simulation and the VA. Training in educational techniques, system analysis, quality management, or administration might be included. Please include strategies for retention of fellows within VA.
- 7) Describe opportunities for the fellows to participate in research. While not required as a component of the curriculum, teaching research methodologies and providing research opportunities during the fellowship is strongly encouraged. Priority will be given to programs able to demonstrate their ability to provide both a practical and scholarly approach to clinical simulation.
- 8) Describe the facilities (e.g., office space, clinical areas, clerical support, educational materials, library, computers, etc.) available to support the program.
- 9) For reference, relevant suggested criteria from the VHA Simulation Center/Program Application Checklist (Attachment C) are included. The expectation would be a site could document approximation of an intermediate or advanced level of resources.

#### **Program Co-Directors and Faculty Preceptor/Mentors.**

Provide relevant information concerning the staff that will be involved in the program, including the Program Co-Directors, preceptor/mentors, and consultants. Include the following information about each individual who will be involved in the fellowship program: name; discipline/specialty; degree; date of degree; university from which degree was received; preceptor certification, clinical simulation education and experience; primary clinical/research interests; recent publications; and the number of hours/percentage of time that will be devoted to the fellowship program. Please provide further detail in how the number of hours/percentage of time will be utilized for the fellowship program.

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**NOTE:** CVs are not counted in the 20-page core narrative page limit, but are included in the 50-page total application size. A complete CV for the proposed Program Co-Directors can be included. However, a VA Research Biosketch (VA Form 10-1313-5/6) can be used. In order to minimize size of the total application, a VA Research Biosketch or equivalent is strongly encouraged for all other proposed faculty or others identified in the application.

**Program Evaluation.** Specify how the fellow's and the fellowship program's effectiveness for meeting its training goals and objectives will be evaluated. This plan should include attention to all aspects of the program: discipline-specific competencies, competencies in interprofessional team functioning, and competencies in dissemination of information about clinical simulation.

**Recruitment of Fellows.** Describe how fellows will be recruited and selected.

- c. **Appendices.** Must not exceed 30 pages and should include letters of support from the following: Other letters of support such as VISN Director and/or Service Line Director. Include a description of the unique contributions the VISN can make to the fellowship program; the commitment to assist, if needed, in the funding of annual travel for the Program Co-Directors, selected faculty, and fellows to attend one national clinical simulation meeting per year; travel support for the Program Co-Directors to attend an annual planning meeting that may be held in conjunction with the clinical simulation meeting; and additional support that would be provided to the fellowship site related to the educational project.

Chiefs of Services or equivalent individuals for the disciplines in which trainees are anticipated and/or preceptors/mentors are provided. These letters should describe a need for clinical simulation education and how it will improve the care of patients.

Affiliates associated with disciplines for which trainees are anticipated. Support or in-kind match, if any, such as tuition waivers for courses, course credits, equipment, library use, space, etc. should be noted.

**d. Progress Report of Fellowship Program to date (CURRENTLY APPROVED SITES ONLY)**

- 1) Concise narrative description of the history of the program, including success and/or difficulties with recruitment of fellows and how goals and performance of program have

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changed over time. Also include assessment of strengths and weaknesses of the program and plans to strengthen the program if major weaknesses are identified. Please describe other outcomes of note such as particular fellow alumni achievement, other benefits to VA, academic affiliates, and community that relate to the program. Include a list of publications, presentations, or other achievements of your site's fellows.

2) List all fellow participants by a) name, b) specialty, c) start date, d) end date, e) position immediately after fellowship (including VA status), f) current position if known (including VA status). OAA can provide a list of the participants known to us, but we ask that you correct any errant information and add any missing information (the current database only knows participant name, start date, end date).

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**ATTACHMENT B**

**FUNDING AND COMMITMENTS NEW TO RECOMPETITION**

Training/Meeting	Location	No. of Days	Party Responsible for Funding	
			Co-Directors	Fellows
Introduction to Clinical Simulation	SimLEARN	4-5	Not required	SimLEARN
Co-Directors Meeting	SimLEARN	2-3	SimLEARN	Not required
SimLEARN Faculty Instructor Course	SimLEARN	4	SimLEARN (one-time requirement)	SimLEARN
International Meeting on Simulation in Healthcare (or equivalent Simulation Conference)	Variable	5	Facility	SimLEARN
Commencement Meeting	SimLEARN	4	SimLEARN	SimLEARN

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**ATTACHMENT C**

**VHA SIMULATION CENTER/PROGRAM APPLICATION CHECKLIST**

Selected and modified criteria from the original VHA Simulation Center/Program Application Checklist to reflect expectations of sites applying to the VA Interprofessional Advanced Fellowship in Clinical Simulation to have qualifications approximating that of an Intermediate or Advanced Center in the areas of Equipment, Staff, Curriculum, Collaboration and Scholarship.

<b>Application by Section</b>	<b>Basic</b>	<b>Intermediate</b>	<b>Advanced</b>
<b>Equipment</b>	Basic task trainers	<ul style="list-style-type: none"> <li>• Video debriefing capabilities</li> <li>• High fidelity manikins</li> <li>• Basic/intermediate task trainers</li> </ul>	<ul style="list-style-type: none"> <li>• Video debriefing capabilities</li> <li>• High fidelity manikins</li> <li>• Standardized patients</li> <li>• Basic/intermediate/advanced task trainers</li> </ul>
<b>Simulation Personnel</b>	0.5 FTE dedicated	1 FTEE dedicated	2 FTEE dedicated
<b>Simulation Faculty and Instructors</b>	Minimum of 5 <ul style="list-style-type: none"> <li>• 1 MD</li> <li>• 1 RN</li> </ul>	Minimum of 10 <ul style="list-style-type: none"> <li>• 1 MD</li> <li>• 1 RN</li> <li>• 1 Associated Health</li> </ul>	Minimum of 15 <ul style="list-style-type: none"> <li>• 1 MD</li> <li>• 1 RN</li> <li>• 2 Associated Health</li> </ul>
<b>Simulation Curriculum</b>	2 courses	4 courses	6 courses
<b>Curricular (course) Outcomes</b>	Kirkpatrick Level of Evaluation <ul style="list-style-type: none"> <li>• Level 1</li> <li>• Level 2</li> </ul>	Kirkpatrick Level of Evaluation <ul style="list-style-type: none"> <li>• Level 1</li> <li>• Level 2</li> <li>• Level 3</li> </ul>	Kirkpatrick Level of Evaluation <ul style="list-style-type: none"> <li>• Level 1</li> <li>• Level 2</li> <li>• Level 3</li> </ul>

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Application by Section	Basic	Intermediate	Advanced
<b>Simulation Based Collaborations</b>	Simulation-based collaborations <ul style="list-style-type: none"> <li>• Internal Facility</li> </ul>	Simulation-based collaborations <ul style="list-style-type: none"> <li>• Internal Facility</li> <li>• VISN</li> <li>• Academic Affiliates</li> </ul>	Simulation-based collaborations elements to consider <ul style="list-style-type: none"> <li>• Internal Facility</li> <li>• VISN</li> <li>• Academic Affiliates</li> <li>• Lead/co-chair simulation or support</li> <li>• Community: DOD or MOU with local healthcare facilities</li> </ul>
<b>Scholarship</b>	<ul style="list-style-type: none"> <li>• Poster presentation</li> <li>• Orientation to simulation equipment</li> <li>• Participate in simulation community practice calls</li> <li>• Provide simulation in-services</li> </ul>	<ul style="list-style-type: none"> <li>• Simulation staff certification</li> <li>• Podium presentation</li> <li>• Workshop presentation</li> <li>• Presenter in simulation community practice calls</li> <li>• Provide 2 simulation in-services</li> <li>• Write simulation article –</li> </ul>	<ul style="list-style-type: none"> <li>• Simulation staff certification</li> <li>• Podium presentation</li> <li>• Workshop presentation</li> <li>• Presenter in simulation community practice calls</li> <li>• Provide 3 simulation in-services</li> <li>• Write simulation article –</li> </ul>

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Application by Section	Basic	Intermediate	Advanced
		newsletter or journal <ul style="list-style-type: none"> <li>• Contribute to case banks/repositories</li> </ul>	newsletter or journal <ul style="list-style-type: none"> <li>• Contribute to case banks/repositories</li> <li>• Participate in research studies</li> <li>• Peer review activists</li> </ul>

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**ATTACHMENT D**

**VA INTERPROFESSIONAL ADVANCED FELLOWSHIP IN CLINICAL SIMULATION  
DOMAINS**

**Domain 1: Simulation Educator**

- a) Learning theories (Kolb, Knowles, Adult Learning Theory, etc.)
- b) Interprofessional Education Collaborative (IPEC)
- c) Simulation modalities
- d) Curriculum development
- e) Facilitation (prebrief and debrief)
- f) Safe learning environment (physical and psychological)
- g) Assessments/evaluations (formative/summative, ADDIE, Kirkpatrick, etc.).

**Domain 2: Administration**

- a) Simulation center management/operations (consumables, people, policies, data management, etc.)
- b) Organizational structure (interdepartmental collaboration, external stakeholders)
- c) Budget Resource Allocation (time, money, people)
- d) Logistics and Acquisitions (dealing with vendors)
- e) Strategic planning (communication of value, reports: inventory, learner hours, accreditation)
- f) Return on investment (ROI, patient outcomes)
- g) Committee involvement (integration into RCAs, QA committee, critical care committee, etc.).

**Domain 3: Health Professions Experience/Exposure**

- a) Immersion by observing, participating, and networking with departments and professionals within and outside of his/her clinical area of expertise.

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### **Domain 4: Simulation Modalities and Applications**

- a) Modalities, to include low and high fidelity, virtual, standardized patients, gaming and hybrid
- b) Applications, to include scenarios, skills, group, and individual.

### **Domain 5: Research**

- a) Evidence/Analysis (literature review, critical appraisal)
- b) Research design (methodology, POEM, controls, power analysis, etc.)
- c) Proposal (IRB process, funding)
- d) Data gathering/Statistical analysis
- e) Presentations/publications (posters, abstracts, public presentations, peer reviewed publications)

### **Domain 6: Professional Development**

- a) Leadership (vision/planning, leadership styles, people skills)
- b) Professional Integration (systems thinking, interdisciplinary, team building)
- c) Network & Collaboration (global participation, institution, community)
- d) Opportunity Identification (market analysis, innovation, employment, and advisement)
- e) Veteran Centric Care

### **Domain 7: QA/Patient Safety**

- a) Systems Process Analysis (RCA, health care failure and effects modes)
- b) Simulation Integration (curricular development, identification of learners)
- c) Metrics and Outcomes (pretest performance, simulation intervention, posttest performance, outcome evaluation)