VA POST-BACCALAUREATE NURSE RESIDENCY

1. PURPOSE
The Office of Academic Affiliations (OAA), in collaboration with the Office of Nursing Services (ONS), solicits proposals for the VA Post-Baccalaureate Nurse Residency (PBNR) program. Sites selected will develop and implement a Veteran-centric residency program and program evaluation consistent with OAA requirements and Commission on Collegiate Education (CCNE) accreditation standards. Accreditation by CCNE is required within three years of the start of the residency for continuance of program. Each residency is funded for up to six residents per site. In addition, a 0.5 full-time equivalent employee (FTEE) program director is funded for legacy VANAP sites from implementation through FY 2020.

Proposal approval decisions are based primarily on the quality of the applications submitted. Initial funding is awarded depending upon availability of funding and demonstrated VA Nursing Academic Partnerships (VANAP) program success. Selected sites will be provided funding and trainee positions to start July 1, 2017. This program announcement provides information, policies and application procedures for VA facilities and Schools of Nursing (SON) regarding the VA Post-Baccalaureate Nurse Residency program.

Eligibility to Apply: All VANAP-Undergraduate and legacy sites are eligible to apply. The VA SON partner shall be accredited by either the CCNE or the Accreditation Commission for Education in Nursing (ACEN). A current academic affiliations agreement is required.

Successful applicants will demonstrate a history of strong executive and programmatic leadership support and a documented record of innovation in education and clinical practice. Demonstrated leadership in strategic and program planning, implementation and evaluation is essential. VA facilities and nursing school affiliates must be strongly committed to the goals and objectives defined in the program announcement and must provide evidence of an existing academic collaboration.

A letter of Intent (LOI) to submit a proposal must be submitted by February 28, 2017, and a full proposal submitted by March 28, 2017. The LOI must demonstrate an ongoing institutional commitment and support for VANAP and the PBNR.

2. BACKGROUND
VHA’s statutory health professions education mission enables VA to enhance the clinical learning and practice environment, recruit and retain high quality professional staff, and provide excellent care to Veterans. Residency programs ensure a supervised transition to autonomous and competent clinical practice. Historically, accredited residencies have been funded for Medicine, Dentistry, Psychology, Pharmacy and other clinical professions, but not for Nursing. Since 2009, accreditation for post-baccalaureate nurse residency programs (enrolling baccalaureate-prepared or master’s level entry to practice-prepared nurses) has been available through the Commission on Collegiate Nursing Education (CCNE). There are currently 14 OAA-funded PBNR
programs, 10 are CCNE accredited while the remaining four are scheduled to undergo accreditation visits in 2017.


3. PARTNERSHIP EXPECTATIONS

Overall Commitment: The partnership’s collective and individual commitment to meet the following strategic and operational expectations of the national VANAP/PBNR program must be clearly addressed in the core narrative and letters of support.

a) The VA Facility and SON:

(1) Demonstrate executive leadership support to promote a culture of excellence in nursing education and clinical practice.

(2) Work collaboratively to develop, implement, and evaluate Innovative approaches to education and nursing practice at the VA. Jointly guide development and implementation of Veteran-centric educational and practice initiatives as part of resident evidence-based practice projects.

(3) Demonstrate the ability to provide quality residency training. The PBNR Program must be accredited by CCNE or become accredited by CCNE within 3 years of its start. The application for approval as a VA training site must include a realistic plan and timetable to obtain CCNE accreditation.

(4) Work collaboratively to develop, implement, and evaluate the PBNR curriculum organizational structure per CCNE standards. The residency curriculum must reflect the OAA national curriculum including complexity of behavioral health problems (e.g., Post-Traumatic Stress Disorder, Traumatic Brain Injury, Homelessness, Suicide, etc.) and complex post-deployment needs of Veterans.

(5) Jointly organize and implement a residency accreditation application that will result in a successful residency approval. The partnership is responsible for obtaining residency program accreditation by CCNE within 3 years of initiation of the residency program.

(6) Jointly develop a sustainability plan, inclusive of faculty resources and operating funding, for the future years of the program.
b) The VA Facility will:

(1) Provide release time for VA faculty to participate in PBNR activities.

(2) Provide a minimum of 0.5 FTEE release time for the PD to manage and coordinate the PBNR.

(3) Develop and implement a robust recruitment program for PBNR graduates and establish priority in hiring for graduates.

(4) Fund the VA program director and selected VA faculty to attend an implantation and evaluation meetings organized by national VANAP leadership throughout the program.

c) The School of Nursing will:

(1) Provide release time for SON faculty to participate in partnership activities at both the SON and the VA and the development of PBNR curriculum per current Memorandum of Understanding (MOU) or the governing VANAP RFP.

(2) Collaborate with the VA on incorporation of Veteran-centric concepts into the PBNR curriculum to ensure that nurses are prepared to address the health needs of military service members, Veterans, and their families.

(3) Assume primary responsibility of the PBNR curriculum development, participating in the preparation of documents needed to prepare VA site for accreditation, and ensuring a successful CCNE accreditation visit. It is an expectation that VA and SON work collaboratively to develop PBNR and CCNE accreditation.

(4) Fund selected faculty to attend implementation and evaluation meetings organized by national VANAP leadership throughout the program.

4. GENERAL ATTRIBUTES

In developing the proposal, applicants should pay particular attention to the following attributes of successful VANAP partnerships.

a) Transformative Potential: Innovative models of nursing education are the building blocks of the future nursing workforce. Address the role of the existing VANAP partnership within the broader context of transforming nursing education and the nursing workforce, and make a convincing case for how the partnership will generate changes that will foster and sustain the major goals and objectives of this initiative.
b) **Institutional Collaboration and Shared Decision-Making:** The sponsoring VA facility and academic affiliate(s) are expected to collaborate throughout the development of the proposal and in its subsequent implementation and evaluation. Provide clear evidence that the proposal was developed by the partners as a joint enterprise, and describe the process for shared decision-making moving forward.

**PBNR Governance:** Successful VANAP/PBNR partnerships require strong internal and external support. Provide a plan that describes program management, oversight, strategic planning, communication within and external to VANAP/PBNR stakeholders, conflict management, joint decision-making, and recruitment and retention plans, consistent with VANAP legacy sites current MOU or governing VANAP RFP for currently funded sites. All plans will be aligned with the program objectives. Explain how VA and SON leadership will provide executive and operational oversight of the initiative. Also address the charter and composition of the current VANAP program advisory committee, explaining how it will advance the major goals and objectives of this additional initiative.

c) **Local Support:** VA and SON leadership must have a demonstrated commitment to VANAP/PBNR, endorse the proposal and specifically guarantee: (1) sufficient clinical, education, and administrative space to support the program; (2) that program directors and faculty will have at least 50% release time to participate in VANAP/PBNR activities; and (3) the availability of human resource and fiscal support services to facilitate resident on-boarding, manage funds and develop quarterly reports for the program.

d) **Program Sustainability:** This initiative is part of an ambitious plan to expand the PBNR component of the VA nursing academic partnerships enterprise-wide. The VISN director, VA facility director, and SON dean must acknowledge that a jointly negotiated plan (in the form of a memorandum of understanding [MOU]) will be developed to maintain the program beyond the initial period of central funding.

5. **POLICY**

a) The Office of Academic Affiliations (OAA) maintains overall responsibility for administration of VA's health professions clinical training programs and oversees the VA Post-Baccalaureate Nursing Residency in collaboration with VA's Office of Nursing (ONS).

b) All positions requested must be for one year full-time appointments and solely for residency training. Residents are expected to complete training within one year.

c) Facilities must demonstrate the ability to provide quality residency training consistent with OAA national curriculum including weekly experiential and didactic education. The national curriculum will be available as a resource to
each site submitting a Letter of Intent (LOI). The residency program must agree to seek CNNE accreditation within 3 years of funding implementation. The application for approval as a VA training site must include a realistic plan and timetable to obtain CNNE accreditation. Sites that fail to obtain CCNE accreditation within 3 years of the start of the training program will not be funded for subsequent years.

d) Residents must be:

(1) Graduates of baccalaureate or master’s level entry to practice programs accredited by Commission on Collegiate Nursing Education or the Accreditation Commission for Education in Nursing.

(2) Current, full, active, and unrestricted licensure as a graduate professional nurse in a State, Territory or Commonwealth (i.e., Puerto Rico) of the United States, or the District of Columbia.

(3) Citizens of the United States.

(4) Must be serving in his or her first nursing role. No longer than one year shall elapse from the time of graduation from the prelicensure nursing program to admission into the residency program.

e) OAA will provide central funding for a 0.5 FTEE program director for legacy VANAP sites.

f) OAA will provide approved VA facilities with trainee stipends and the employer’s portion of Federal Insurance Contribution Act (FICA) contributions and health and life insurance contributions.

g) Continuation of funding will depend on availability of funds as well as successful implantation of the proposed programs.

h) Collaboration with an affiliated School/College of Nursing is required. Facilities collaborating with another academic institution must follow the guidelines in VHA Handbook 1400.08: Education of Associated Health Professions, or successor policies.

i) Annual Reports. Funded facilities are expected to submit an annual report of residency activities and outcomes. The minimum requirements are outlined in Section 6.

6. APPOINTMENT AND PAY

a) Appointments will be made under 38 U.S.C. 7405(b)(1) for a period not to exceed one year and one day.
b) The per annum stipend for nurse residents is $48,200 plus locality pay. OAA will provide approved facilities with stipends, VA’s share (7.65%) of Federal Insurance Contribution Act (FICA) contributions, and VA’s share of health and life insurance premiums.

c) Other expenses connected with trainee recruitment, educational activities, or travel must be funded from other sources. Facilities are encouraged to consider utilizing local funds received through the VERA Education Supplement.

e) General Schedule annual and sick leave policy applies to residents in this program (Reference: VHA Handbook 1400.08, Section 8).

f) Residents will be protected from personal liability while providing professional services at a VA health care facility under the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679 (b)-(d).

g) Residents report directly to Residency Director.

7. EVALUATION AND OUTCOMES
Evaluation is a critical component of any pilot program. The primary responsibility for evaluation belongs with the local facility, with support from OAA. National evaluation methods to assess residents’ performance and program objectives have been determined by OAA. The VA National PBNR program evaluation is multidimensional and includes the following components: (1) residents’ demographics and characteristics data; (2) residents’ competency self-assessment; (3) faculty-rated competency assessment of residents’ performance; (4) residents’ comfort and confidence in performance of core clinical skills and abilities; (5) residents’ overall satisfaction with the PBNR program; (6) overall program outcomes (e.g., data on recruitment, job placement, retention and turnover of PBNR residents hired by the VHA). Completion of all established national evaluation components is mandatory. The specific instruments required for the pilot evaluation will be discussed with the selected sites prior to initiation of the residency. Additional evaluation instruments may be employed at the discretion of individual programs.

8. BUDGET
The resident receives a stipend and benefits while in training status. The annual stipend is based on current post-graduate rates. The facility is responsible for administrative expenses, CCNE fees, residency director (post central funding) and faculty salaries, and evaluation expenses.

9. APPLICATION INSTRUCTIONS
a) A non-binding Letter of Intent (LOI) to submit a proposal must be submitted to the Office of Academic Affiliations by 5:00 pm Eastern Daylight Time on 2/28/2017. The LOI must be no more than two pages in length. It must provide the name and contact number of the proposed residency director, describe the program’s current accreditation or application status, whether a teaching partnership with a
School/College of Nursing is planned, and briefly address the key items listed in Section 1. The letter should be emailed in Word or PDF format via OAA’s web-based proposal application system; http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=48.

b) The LOI will be used by OAA for planning purposes and for establishing a database of proposal information. LOIs will not be scored and programs will not be prioritized on the basis of the information in the LOI.

c) The full proposal should be submitted electronically via OAA’s web-based proposal application system; http://vaww.oaa.med.va.gov/rfp/default.aspx?PID=48. The full proposal must be received in OAA by 5:00pm Eastern Daylight Time on March 28, 2017. The core narrative of the application may not exceed 15 single-spaced pages, excluding the transmittal letter and appendices. Longer applications will not be reviewed. Pages must have at least one-inch margins all around and the font size must be no smaller than 11 point.

d) The core document of the full proposal (15 pages or less) must include the following elements. Please follow this outline explicitly.

(1) Introductory Information

i. Location and Name of Facility

ii. Accreditation status (facility has a fully accredited program, facility is in process of applying for accreditation, or facility has not started accreditation process as yet).

iii. Statement of agreement is required to enroll at least 6 residents each year over the duration of the pilot.

iv. Names and email addresses of individuals to be notified of proposal review outcome.

(2) Background Statement

Identify how the VA facility would benefit from a Graduate Nurse Residency. Describe the existing relationship and state of partnership between the facility and the College of Nursing, as applicable. Describe staffing, recruitment and retention of staff, ongoing training/education of staff, and desirability of the VA facility as a training site.

(3) Training Program Description

i. Training Program Mission Statement. State the purpose of the program, including philosophy, goals, and objectives. Relate the
proposed curriculum to the CCNE requirements, making sure that all necessary elements are covered.

ii. **Methodology.** Describe the clinical competencies that will be emphasized in the curriculum.

iii. **Program Evaluation.** Specify how the training program's effectiveness for meeting its training goals and objectives will be evaluated.

iv. **Sustainability.** Describe the strategies that will be put into place to assure the program will continue to thrive beyond the pilot.

(4) **Appendices**

(20 pages or less, not included in the 15 page limit) should include:

i. **Transmittal letter** from the facility Director, to include:
   a. Support for the program including release time for the Residency Director and program faculty.
   b. Current accreditation status, or accreditation plan and specific timeline for receiving accreditation from CCNE.
   c. Facility's agreement to pay CCNE accreditation fees (new applicant fee, $7500; site visit fee, $5250; and annual fee, $5,000).

ii. Letters of support from the facility Nurse Executive, Designated Education Officer (DEO), Veterans Integrated Service Network (VISN) Leadership, and School/College of Nursing Dean, as applicable.

iii. List of key staff who will be involved in the program, including names of Residency Director, key faculty, and consultants.

iv. Abbreviated Curriculum Vitae of the Residency Director.

10. **REVIEW PROCESS**

The merit of applications will be assessed by an Ad Hoc Review Committee appointed by the Chief Academic Affiliations Officer in collaboration with the OAA Director, Nursing Education. Applications will be reviewed within the context of CCNE Accreditation criteria and relevant VA standards. **Facilities must demonstrate readiness for obtaining residency accreditation.**
The committee will evaluate specific items in the application that reflect:

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<th>Description</th>
<th>Points</th>
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<tr>
<td>a)</td>
<td>Evidence supports existence of innovative models of nursing education within the broader context of transforming nursing implemented and maintained by the existing VANAP partnership.</td>
<td>15</td>
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<td>b)</td>
<td>The sponsoring VA facility and academic affiliate(s) documented collaboration throughout the development of the proposal. Clear evidence supports the development of the proposal by the partners as a joint enterprise and describes the process for shared decision-making moving forward.</td>
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<td>c)</td>
<td>A plan is in evidence describing program management, oversight, strategic planning, communication within and external to VANAP/PBNR stakeholders, conflict management, joint decision-making, and recruitment and retention plans. The plan is aligned with the program objectives.</td>
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<td>d)</td>
<td>The proposal reflects collaboration between the VA and SON on incorporation of Veteran-centric concepts into the PBNR curriculum to ensure that nurses are prepared to address the health needs of military service members, Veterans, and their families</td>
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<td>e)</td>
<td>Evidence supports acknowledgement of the SON assumption of the primary responsibility of the PBNR curriculum development, participation in the preparation of documents needed to prepare VA site for accreditation, and ensuring a successful CCNE accreditation visit.</td>
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<td>f)</td>
<td>Letters of support from VA and SON leadership demonstrate commitment to VANAP/PBNR,</td>
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<td>g)</td>
<td>Plans for sustaining the VANAP/PBNR program and obtaining CCNE accreditation within 3 years of implementation.</td>
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11. SCHEDULE

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<tr>
<td>February 6, 2017</td>
<td>Program Announcement Released</td>
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<td>February 28, 2017</td>
<td>LOI due in OAA</td>
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<td>March 28, 2017</td>
<td>Full Application due to OAA</td>
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<td>April 21, 2017</td>
<td>Notification of Selected Sites</td>
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<tr>
<td>July 1, 2017</td>
<td>Initiation of Residency</td>
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12. CONTACT PERSON
For information concerning this program announcement, contact Mary Dougherty PhD, MBA, Director, Veterans Affairs Nursing Academy (10A2D), at 202.461.9498 or Mary.Dougherty@va.gov or Johnnie Guttery, MSN, Clinical Director, at 202.461.1482 or Johnnie.Guttery@va.gov.

13. NATIONAL PROGRAM REVIEW
Since this is a centrally funded program, its continuation is not guaranteed, but is dependent upon availability of funding and measurable outcomes.